UNIVERSITY OF MARY WASHINGTON -- NEW COURSE PROPOSAL

COLLEGE (check one):	Arts and Sciences	X	Business	Education
Proposal Submitted By:		Dat	e Prepared:	
Richard Finkelstein (CAS Dea	n) & Pam McCullough (Nursing)		October 28,	, 2016
Course Title:	Advanced-Practice Family Num	rsinį	g: Practicum II	
Dept/Discipline and Course No:	NURS 750			
Prerequisites:	NURS 520, 530, 540, 550, 560, 5	80, 5	590, 610, 620, 630, 640, 650)
Co-Requisites:	NURS 710, 740			

*Course number must be approved by the Office of the Registrar before the proposal is submitted.

Number of credits:	Number of credits: 3 Will this course meet for at least 700 contact minutes for each credit				
	hour proposed? If no, provide a credit hour justification.				
Will this be a <i>new</i> , <i>repeatable</i> "special topics" course?			X	YES	
(Do you want students to be able to take this new course more than once if the topic changes?)					

Date of first offering of this <i>new</i> course:	Fall 202	20		
Proposed frequency of offering of the course:	Annual	ly		
List the faculty who will likely teach the course:	Nursing	<mark>g Adju</mark> n	ict	
Are ANY new resources required?	NO	X	YES	Document in attached impact statement

This new course will be (check all that apply):						
Required in the major	Required in the minor	General Elective				
Elective in the major Elective in the minor **General Education						
**A ETEP the new course is approved a separate proposal must be sent to the General Education Committee						

*AFTER the new course is approved, a separate proposal <u>must be</u> sent to the General Education Committee.

Catalog Description (50 words or less, if possible):

This course provides the nurse practitioner student with continuing clinical experiences for adult, women's health and/or pediatric patients as seen in primary care. The focus of the course is to continue to develop and apply critical thinking skills to formulated differential diagnoses, diagnoses, treatments and evaluation plans. The course provides 180 patient contact hours. In the MSN program, only one of the three clinical practicum courses may be repeated.

COL	JRSE HISTORY:	Was this course taught previously as a topics or experimental course? YES NO X				
Οοι	irse Number and	Title of Previous Course	Semester Offered	Enrollment		
CHECK HERE if the proposed course is to be equated with the earlier topics or experimental offerings. If equated, students						
who took the earlier "topics" course will only be able to take the new course as a repeat (C- grade or lower).						
NOTE: If the proposed course has not been previously offered as a topics or experimental course, explain in the attached rationale						
statement why the course should be adopted even though it has not been tried out.						

REQUIRED ATTACHMENTS:

- 1. Rationale Statement: Explain what purposes it will serve.
- 2. Credit Hour Justification (if required): Explain how this course will comply with the UMW Credit Hours Policy (D.5.1)
- 3. Impact Statement: Provide details about the library, space, staffing, budget and technology impacts created by adding this new course. Include supporting statements from the Library, IT Department, etc. Any change that impacts another department must have a written statement (such as a copy of an email) from the Chair(s) agreeing to the change.
- 4. Sample Syllabus

Department Chair Appr	roval: D. Admili Some Chillog	Date:	10/28/16
CCC Chair Approval: _	on papet	Date:	11/19/16
UCC Chair Approval: _	Patricia Reynolds	Date:	12/12/2016

REQUIRED ATTACHMENTS

Rationale

With changes in healthcare payments to hospitals and other providers generated by passage of the Affordable Care Act (ACA), and with recognized best practices in mind, there is a strong need for educational opportunities that will help nurses gain a Master's of Science in Nursing (Family Nurse Practitioner track) to improve access to healthcare. Reimbursements of hospitals and clinics for patient care now provide significant incentives and penalties that promote decreased admissions and readmissions. To conform to this new environment, hospitals recognize that they need to increase primary care services, to include health promotion and disease prevention in the community. These goals require an increase in the presence of primary care providers locally, state-wide and nationwide. However, there is currently a recognized shortage of primary care providers because primary care practices receive lower reimbursement rates than specialty practices. Within the Fredericksburg area alone, Mary Washington Healthcare (MWHC) estimates that at least 90 additional family practice providers are needed to manage care in the community.

In the spring of 2016 MWHC approached UMW seeking collaboration in building an MSN program for Advanced-Practice Family Nurse Practitioners. UMW and MWHC created a planning group which has met regularly for five months. The planning committee developed a request for funding from the Mary Washington Hospital Foundation, which included startup costs and guaranteed tuition costs for MWHC's qualified, BSN-prepared registered nurses (RNs). In total, the UMW MSN-FNP Program will be supported with \$1.4 million of funds from the MWH Foundation.

CCNE, the accreditation body of the UMW BSN Completion Program, requires the educational component of the MSN-FNP track be developed by a nationally-certified Family Nurse Practitioner. The MWH Foundation provided funding for the consultation services of Dr. Micah Alderman Scott to develop this course proposal. She is a PhD, FNP-BC, Assistant Professor, and Interim FNP Program Coordinator at the University of North Carolina's School of Nursing. Dr. Scott's previous position was the FNP Program Coordinator at Old Dominion University.

This course has been created at the request of the Dean of the Colleges of Arts and Sciences and the Provost as part of the proposed MSN-FNP program. The MSN-FNP curriculum will include 18 courses (one existing course and 17 new courses). The seven-semester curriculum will consist of 46 credits. This course is **#14** of 17 newly proposed courses for the program. Combined, the 18 MSN-FNP courses meet the requirements of:

- The Essentials of Master's Education in Nursing (American Association of Colleges of Nursing [AACN], 2011);
- Criteria for Evaluation of Nurse Practitioner Programs, 5th Ed.(National Task Force on Quality NP Education (2016); and
- Family/Across the Lifespan Population-Focused Nurse Practitioner Competencies (AACN, Population–Focused Competencies Task Force, 2013).

Credit Hour Justification

This course will be offered during the **fall** semester and has a minimum of **180 patient contact** hours over 14 weeks. Students are expected to have a minimum of two hours of outside-of-class responsibility (homework, assigned projects, class preparation, writing assignments, etc.) for each credit hour (60 patient contact hours).

Impact Statement

The proposed MSN program will enroll 15 students each January. The students will progress in a cohort manner, through a 46-credit curriculum over 27 months. The program will generate significant additional tuition revenue, which will cover the cost of an adjunct nursing faculty member. The President and the Provost have stated a commitment to cover costs necessary to bring the new degree program to UMW. Additional space is not needed for this online course. Additional library resources are estimated to be \$40,000 for the MSN-FNP program as a whole. This specific course does not add to that cost. The Executive Director of the Division of Teaching and Learning Technologies (Jesse Stommel) has met with the BSN-C Program Director and proposed additional online learning resources for faculty and students. At the date of this proposal, both Rosemary Arneson and Jesse Stommel are completing an impact assessment to determine the additional funding required by their departments.

Sample Syllabus (See Attached)



COURSE SYLLABUS

Course Nº:	NURS 750*
Course Title:	Advanced-Practice Family Nursing: Practicum II*
Dates:	ТВА
Semester:	Fall 2020
Course Format:	Online
Total Credits:	3
Clinical Hours	180*
Prerequisites:	NURS 520, 530, 540, 550, 560, 580, 590, 610, 620, 630, 640, 650
Co-Requisites:	NURS 710, 740
Instructor:	ТВА
Preferred Communication:	ТВА
Virtual Office Hours:	ТВА

*In the MSN-FNP Program, a student may repeat only one of the three clinical practicum courses, and may do so only once.

TABLE OF CONTENTS

Topic	Page
TopicTable of contents will be filled out by instructor.	

STUDENT LEARNING OBJECTIVES

Each student learning outcome corresponds to an AACN NP Competency. This course is designed to result in the following student learning outcomes (SLOs):

Student Learning Outcome	Method of Measurement	Corresponding AACN NP Competency
Student Learning Outcome # 1 Apply knowledge from health, psychological, and social sciences in the advanced nursing management of adults and women with common illnesses in the primary care setting.	This SLO will be measure via the SOAP assignments, site visit evaluation, and preceptor evaluation.	This SLO corresponds to AACN NP Competency # 1.2.
Student Learning Outcome # 2 Accurately assess adult and pediatric patients with common health problems.	This SLO will be measured via the SOAP assignments, site visit evaluation, and preceptor evaluation.	This SLO corresponds to AACN NP Competency # 4.3, 9, and 9.3b-c,e.
Student Learning Outcome #3 Develop differential diagnoses basic on health assessment including medical and social history, presenting symptoms, physical findings, and diagnostic information.	This SLO will be measured via the SOAP assignments, site visit evaluation, and preceptor evaluation.	This SLO corresponds to AACN NP Competency l # 4.3, 9, and 9.3b-c,e.
Student Learning Outcome #4 Identify of health promotion strategies for each patient.	This SLO will be measured via the SOAP assignments, site visit evaluation, and preceptor evaluation.	This SLO corresponds to AACN NP Competency # 5.2b, 4.3 and 9.3.
Student Learning Outcome #5 Address cultural issues with the patient.	This SLO will be measured via the SOAP assignments, site visit evaluation, and preceptor evaluation.	This SLO corresponds to AACN NP Competency #9, 9.4, and 9.4a-d.
Student Outcome #6 Demonstrate effective professional oral and written communication skills.	This SLO will be measured via the SOAP assignments, site visit evaluation, and preceptor evaluation.	This SLO corresponds to AACN NP Competency #9.2.
Student Learning Outcome #7 Apply family and nursing theories to enhance the patient's health.	This SLO will be measured via the SOAP assignments, site visit evaluation, and preceptor evaluation.	This SLO corresponds to AACN NP Competency #1 and 1.4.

WELCOME TO THE COURSE

Course Description

This course provides the nurse practitioner student with continuing clinical experiences for adult, women's health and/or pediatric patients as seen in primary care. The focus of the course is to continue develop and apply critical thinking skills to formulated differential diagnoses, diagnoses, treatments and evaluation plans. The course provides 180 hours of patient contact hours and is not repeatable.

Teaching/Learning Methods

Attendance and participation in patient care for 16 hours each week with an advanced practitioner in a primary care setting is the primary learning method for this practicum. Students will also attend a standardized patient scenario and teaching session for patient simulation interaction. Additional learning methods include three SOAP notes (two general SOAP notes and one Super SOAP), verbal case presentation, and faculty site visit to evaluate the student's progress in the primary care setting.

Required Textbooks

Although there is no required text for this course, there are numerous resources available to students. You may want to review assorted websites for these resources or ask your preceptor. We will also discuss this information in class.

Recommended Textbook

• *Publication Manual of the American Psychological Association (Sixth Edition)* by the American Psychological Association

Evaluation Of Student Performance and Grading

Activities that will be used to evaluate student performance in the course include: SOAP notes, Standardized Patient Sessions, Final Preceptor Evaluation, Faculty Site Visit, and Verbal Case Presentation. Also, the completion of 224 required practicum hours, as entered into the NPST system AND Preceptor Signed Logs, at the end of the semester.

Evaluation Methods

The student will be evaluated/graded on: SOAP notes & logs, case study, faculty site visit, preceptor evaluations.

SOAP Note #1	5% of grade
SOAP Note #2	10% of grade
SUPER SOAP Note	20% of grade
EVMS session	5% of grade
Site Visit & Case Presentation	30% of grade
Final Preceptor Evaluation	<u>30%</u> of grade
Total	100%

Any assignment submitted beyond the published due date without prior approval for an extension is graded at the discretion of the faculty, and if graded, can receive a score no higher than 83%.

Incomplete Grades:

Under certain circumstances, a student can request a grade of incomplete for the semester. These hours must be completed at the end of the following semester or a failure for the course will be given. Please notify your clinical mentor ASAP of the your need to receive an incomplete for the semester.

Professional Liability Insurance

Currently, students are covered by the University's clinical liability/malpractice insurance for those courses in which they are enrolled that has a required clinical component. Hours covered by this insurance are limited to 224 hours. **If additional hours are arranged, no insurance coverage is provided. Clinical hours must be completed by** <u>XXX</u>.

Practicum Performance And Evaluation Requirements

- 1. Submission of all required forms: preceptor agreements updated PE, CPR and RN license, if applicable, by the end of the first week of clinical. If these documents are not submitted within the first week, the student will be removed from the clinical site.
- 2. Satisfactory NPST content including accurate patient information regarding the patients seen by the student including the date the patient was seen and all accurate diagnosis and pertinent clinical activities.
- **3.** NPST data should be current and available for the faculty to review on SOAP note due dates. Faculty will review NPST hours and hours documented on the SOAP grade sheet. These hours should be current and progressive during the semester to meet the practicum hour requirements.
- 4. Time Logs must be signed by the preceptor every clinical day. Time log dates and time will be verified with NPST data. This log is to be scanned and submitted to the link on Canvas. The due dates are the same for the NPST data. Late time log submission will be given a 0 grade.

Signed Time Logs and Spreadsheet Due Dates:

- Clinical dates from XXX through XXX are due by XXX.
- Clinical dates from XXX through XXX are due by XXX.
- Clinical dates from XXX through XXX are due by XXX.
- Clinical dates from XXX through XXX are due by XXX.
- 5. **<u>NPST ORIGINAL "NPST Daily/Weekly Spreadsheet"</u>** NPST data must be entered within 72 hours of seeing the patient. NPST spreadsheets will be verified four times during the semester.
- 6. Satisfactory clinical activity for the level of a second semester clinical NP student.
- 7. Each student must provide their clinical faculty with a timeframe indicating the time they will be with each preceptor. **This information is due by XXX**.
- **8.** Half of the 224 clinical hours must be completed by **XXX**. A clinical probation committee will review the student's progression if they have not completed 112 practicum hours by the end of the week **X**. Upon review, the student may be placed on clinical probation.
- 9. Completion of 224 hours of clinical practice at a site approved by the course coordinator. All clinical hours must be completed by midnight by **XXX**.
- 10. Satisfactory Final Preceptor evaluations and site visit.
- 11. Submission of completed **site and preceptor evaluation forms** (completed by students) and **student evaluation forms and Agency Survey of the MSN Program** (completed by preceptors) due with the final SOAP Note 3.
- 12. Satisfactory participation in scheduled practicum meetings as arranged.

13. Satisfactory SOAP notes submitted on time and with appropriate content (see SOAP Grade Sheet). A total of three SOAP notes are required for the course. Additional SOAP notes may be required if those submitted are unsatisfactory. The current SOAP grade sheet <u>must be</u> submitted with the SOAP note. Five points may be deducted from the SOAP if the grade sheet is not provided or completed with the student's name and NPST hours.

For example: SOAP notes on patients seen in May will not be accepted in July or similar circumstances.

- 14. Faculty will make at least one site visit with the student and preceptor to evaluate the student's progress in the setting. A student receiving an 83% or less on a Site Visit will be evaluated for placement on clinical probation. NPST data and SOAP note will be verified during the visit.
- 15. **Site visits must be completed by XXX**. Students must contact their faculty to arrange the site visit during this timeframe.
- 16. The Final Preceptor Evaluation is due by **XXX**. Evaluations won't be accepted after the due date. The students will receive a zero score for a late evaluation.
- 17. Each student must complete a preceptor evaluation and a clinical site evaluation form.

Submission Of Assignments

You are expected to complete assignments on time. All assignments must be turned in by the date and time established by the course coordinator as published in the syllabus and/or posted on the Canvas course site. If you should have difficulties or questions when completing the assignment, *contact the course coordinator/faculty to see guidance before the assignment is due*. Extensions may be requested, and will be considered and granted on a case-by-case basis at the discretion of the course faculty. Any assignment submitted beyond the published due date without prior approval for an extension is graded at the discretion of the faculty, and if graded, can receive a score no higher than an 83%.

Each assignment should be typed in a font, preferably Times Roman, no smaller than 12 point (see APA 6th ed. regarding fonts and typefaces). The assignments should be formatted in APA style, and presented professionally with an appropriate cover page, reference list, and appendixes as needed. Errors in spelling, grammar, sentence structure, punctuation, and format will result in a significant point deduction from the total point score for the assignment. **Please be sure that you title the electronic files you will be submitting to include your last name and the name of the assignment (i.e. Smith-Critique1.doc)**

Proofread your papers before turning them in. If you have difficulty proofreading, then have someone else proof your paper. It is expected that all assignments will meet the standard for graduate level work. The course coordinator reserves the right to refuse to grade any assignment that does not meet the expected standard for professional preparation and appearance. This may result in a zero for the assignment and a failure for the course.

Grading criteria will be provided for course assignments. Use them to ensure that you have addressed all required components for an assignment. A completed scoring will be returned with each assignment that will show you how your work was evaluated. If you have questions or comments about a grade please contact the course coordinator.

Note: Draft papers will not be reviewed unless otherwise indicated. This maintains a sense of fairness for all students. If you have any questions related to draft papers, contact the course coordinator or section professor.

Writing Requirements

Nurses, of all levels of education, must be able to convey information in an articulate, succinct, and confident manner in a variety of clinical and academic settings. Discipline-specific writing promotes critical thinking, which develops the skills of analysis and organization. Whether concerned with accurate documentation of patient information; providing a succinct yet complete shift report; writing term papers for future classes; or composing grant proposals or professional journal articles, good writing skills are *critical* to your success as a future nurse.

Students with difficulty in technical writing may be referred to the Writing Center for support and guidance. Specific resources are available to students for whom English is a second language. If you are referred to these resources by course faculty it is your responsibility as a student to utilize these resources.

Students are expected to do their own, original work on each assignment. A plagiarized assignment will result in a zero (0) for the assignment. The student will be referred to the Honor Counsel.

Patient Confidentiality

MSN Faculty takes patient confidentiality seriously in all aspects of the program. Students are expected to follow HIPPA guidelines when caring for patients including classroom discussions and written assignments. <u>Any documentation which is submitted with *SOAP notes* or any other assignment that compromises patient confidentiality or contains patient identifying information will be severely penalized. The first offense will result in a decrease in the student's final grade of five points. Additional offenses will decrease the final grade of the student by 10 points for each offense. This includes patient names which have been 'blacked out' but are still legible once mailed, e-mailed or faxed to the instructor. Depending on the circumstances of the confidentiality breach, a student may be dismissed from the MSN Program.</u>

Attendance and Participation

This is a practicum course. There are no broadcast classes for this course. You are required to provide your clinical schedule for the semester to your mentor at the beginning of the semester. If a student must miss clinical due to illness or emergency, each clinical hour missed must be made up over the course of the semester. **PLEASE NOTIFY PRACTICUM FACULTY AND PRECEPTOR IF ABSENCES ARE NECESSARY.**

Attendance to any practicum group meetings arranged by the practicum faculty is mandatory. Meetings will be announced with advanced notice. It is expected that students will carefully review the course syllabus to be familiar with all requirements and expectations for your participation and successful completion of the course.

<u>Equipment</u>

You will need a stethoscope with a reversible bell and diaphragm. If you will be purchasing a new one at this time, be sure and check to see that the earpieces are **comfortable** for your individual ear shape. Prices range from approximately \$30.00 to as much as \$150.00 for a good quality model. You may want to purchase an oto-opthalmascope or addition equipment at your discretion. Please check with your preceptor regarding the use of clinical equipment in your assigned site.

Professional Appearance and Behavior

Students should wear a white lab coat with a name tag unless otherwise advised by their preceptor. Please review the Student Handbook for specifics on student professional appearance. Students will maintain a neat, clean appearance and may be sent from the clinical site for failure to do so. Students are expected to demonstrate a professional behavior in the clinical setting.

Name Tags

Each student should purchase a nametag with the following information:

Jane Doe, RN, BSN Old Dominion University Graduate Student

Laboratory Experience:

Students in consultation with the faculty coordinator/mentor and clinical preceptor will be placed in a clinical experience for a minimum of 16-17.2 hours per week for 13 weeks - a total of 224 hours. The focus of this experience will be to further enhance the use of the nursing process in incorporating newly acquired health assessment skills into advanced nursing practice.

<u>CPR</u>

All students must be currently certified in Basic Life Support. In the fall of each year students are responsible for submitting CPR cards. If a CPR card is renewed during the course of the year, it is the student's responsibility to provide a copy of the new certification to the FNP faculty.

<u>Licensure</u>

All graduate students are required to have a current, valid Virginia nursing license. **You must immediately notify** XXX of any change in your licensure status.

Physical Examination

All students must have an annual physical examination (see graduate handbook for additional requirements). All students must submit evidence of an annual PE, current CPR and a copy of your RN license. **If you did not complete these requirements in the fall, you cannot participate in clinical until these requirements are met.**

Risks Inherent in Clinical Practice

All students should read the risk material provided in the School of Nursing Graduate Student Handbook (to include, but not limited to, Appendix l – Infectious Disease Policy). Each student must sign the Acknowledgement of Risks Associated with Clinical Practice in the Laboratory/Clinical Setting. **If you have not signed this risk form, it is your responsibility to provide the FNP Faculty with the signed form prior to the first clinical day.**

Preceptor Agreements

Preceptor Agreements are due on or before XXX. As students move to other sites, they must submit the preceptor evaluation form within the first week of the clinical site. If a student spends more than four hours with a preceptor, an agreement must be signed.

Practicum Expectations

The student is to devote 16-17.2 hours on-site in an assigned; faculty-approved primary care or specialties care setting. It is expected that each student capable of eliciting a complete health history and performing a physical examination prior to entering this clinical nursing course. Students are responsible for charting in the office on each person they see.

Maintaining communication with the clinical faculty or mentor will be of the utmost importance. In addition, the students should assume that the clinical preceptor may not clearly understand the student's role and should discuss their role and expectations with their clinical preceptor before starting (see attached <u>Preceptor FAQs</u>). If a student is experiencing difficulty in meeting his/her clinical goals, please advise the clinical preceptor and the clinical faculty as soon as possible.

You are required to provide your clinical schedule for the semester to your mentor at the beginning of the semester. If a student must miss clinical due to illness or emergency, each clinical hour missed must be made up over the course of the semester. **PLEASE NOTIFY CLINICAL FACULTY AND PRECEPTOR IF ABSENCES ARE NECESSARY OR IF YOU ARE GOING TO BE LATE FOR YOUR CLINICAL DAY.**

Home visits may be made if considered necessary to the planned care of a patient and/or family, or to some other clinical objective. Patient and family approval should be obtained prior to home visits. The clinical faculty will be notified prior to home visits if any are planned.

Preceptor Evaluations

The final preceptor evaluation will be completed and at the end of the semester. Preceptor Evaluation must be submitted one week prior to or on the due date as designated. No preceptor evaluations will be accepted after the due date.

Students are responsible for sending the preceptor agreement to the MSN Program office. It is not the responsibility of the preceptor to mail the evaluation. Preceptor evaluations must be submitted via US Postal service, campus/distance mail, or email. Preceptor evaluations cannot be faxed. Preceptor evaluations will not to be accepted after the due date. The evaluation must have a post mark or distance learning site date stamp on or before the due date to be accepted for a grade.

Communication with the Faculty

It is your responsibility to keep the course coordinator up-to-date on progress, problems, and concerns you may have. Some of the issues that are important are computer/email problems, questions about assignments guidelines, or late submission of assignments. You may contact me by e-mail or by office phone (voice mail, leave a reliable phone number and time that is good for me to contact you. If you have left a message and I have not returned your call or email within 72 hours, then contact the MSN Program's administrative assistant.

Physical Examination

All students must have an annual physical examination. **Please note**: All students must submit evidence of an annual PE, current CPR and a copy of their RN license. **These requirements are due each fall semester and students cannot participate in clinical until these requirements are met.**

Risks Inherent in Clinical Practice

All students should read the risk material provided in the School of Nursing Graduate Student Handbook. Each student must sign the *Acknowledgement of Risks Associated with Clinical Practice in the Laboratory/Clinical Setting* form. **If you have not signed this form, it is your responsibility to provide the faculty with the signed form prior to the first clinical day.**

University Course Evaluations

The University uses an online course evaluation system. Approximately three weeks before the end of the semester students will receive an email notice containing directions for accessing the online course evaluation system to complete evaluations on courses in which they have been enrolled that semester. Submission of a course evaluation is anonymous, and every effort should be made to provide feedback on the quality of the instruction received and the effectiveness of the faculty. Student feedback is important and appreciated.

Course Summaries

Student course summary forms are utilized by faculty in the School of Nursing to obtain feedback from students on the components of the course and its delivery; it is not an evaluation of the faculty. The student course summary form is located on the Canvas course site, where instructions for completion and submission of the form are provided.

Course Schedule

The course schedule is established between the preceptor and the FNP student. Practicum hours should occur each week over the 14-week semester for a total of 180 practicum hours.

Date		Assignment(s) Due
	Semester Begins	
		Last day to drop/add course
		Mandatory In Class Presence Orientation.
		Last day to receive a W for withdrawing from a class.
		All preceptor agreements are due to faculty
		SOAP 1 is due to clinical faculty via CANVAS link by midnight.
		Signed Time Logs for clinical dates xx-xx with preceptor signature due by midnight via CANVAS link.
		Last day to return 3-F form from SOAP #1
		SOAP 2 note must be submitted via the CANVAS link by midnight.
		Signed Time Logs for clinical dates 6-6 to 6-26 with preceptor signature due by midnight via CANVAS link.
		90(approximately half) clinical hours must be completed
		Last day to return 3-F form from SOAP #2
		Site Visit must be completed
		Signed Time Logs for clinical dates xx-xx with preceptor signature due by midnight via CANVAS link.
		Research Article Posted for SUPER SOAP
	EVMS	Sign-up sheets will be sent out from EVMS prior to the event
		Final Preceptor Evals, Student Evals of preceptor and site are due via the CANVAS link by midnight. The originals must be mailed to Dr. xxx
		SUPER SOAP note must be submitted via the CANVAS link by midnight.
	Semester Ends	ALL 180 CLINICAL HOURS MUST BE COMPLETED BY MIDNIGHT
		Signed Time Logs for clinical dates xx-xx due by midnight via CANVAS link.

Guidelines for NPST

Each NP student is to maintain a hardcopy of all patient encounters; this can be done with the use of the NPST software.

The main purpose of this is to document clinical time to satisfy course and certification board requirements, and to summarize types of patient therapeutic interventions implemented, and summarize the patients seen with the therapeutic interventions. The NP student will be responsible for safekeeping a hardcopy of patient encounters in the event evidence of documentation is required. Keep a hard copy and a computer file copy of the HIPPA compliant NPST data.

Additional guidelines for students to utilize for NPST data:

- 1. First and foremost, you will only account for the patients that you actually see face to face. Taking credit for a patient not seen face to face is considered to be fabrication. Remember, it's **NOT** the number of patient at student sees in the program, but the number of practicum hours that the student completes that counts.
- 2. Dinner Meetings, NP conferences, or CEU conferences don't count towards the clinical hours. If a facility requires a student to attend an in-service on office practices, then a student may count this as consult time in the system.
- 3. That the Shift/On-Call Time must total "Total Logged Time".
- 4. Patient Time is the time the student spends with the patient from the minute the student reviews the patient's chart and enters the exam room until the time the student signs the chart.
- 5. Consult Time is the time the student spent discussing any and all patients they have seen with the preceptor. Consult time is time the student spends researching medical topics during the student's time at the practice, but not at home. This may also include the time the student spend with the preceptor discussing labs, clinical

topics, treatments, diagnostics, etc. **Consult hours must not exceed patient care hours. If this situation occurs, the student will be given a clinical warning.**

- 6. Conference Time is a time that NPST has in the system that can't be removed. <u>Don't record anytime in this category.</u>
- 7. Hospital Rounds are just as stated. If a student's preceptor makes rounds, then the student counts this time towards practicum hours. Students must submit data on each patient seen with the preceptor as well.
- 8. Nursing Home Rounds: Same as #7.
- 9. Travel time to the practice, to EVMS sessions or to hospital doesn't count towards practicum hours.
- 10. Disregard Conference Time and #3. Don't use these fields to enter data.
- 11. Keep this information to refer for NPST data entry. Remember: **Consult time cannot exceed patient time on the spreadsheet.**
- 12. If you have questions about your data check with faculty.
- 13. Keep data entry current!

Any fabrication of patient information entered into NPST will be considered an Honor Code violation and will be treated as such. Students who fabricate NPST or SOAP content will also be placed on Clinical Probation while the student is awaiting for the completion of the Honor Council proceedings.

SOAP Note Content

SOAP notes are to be submitted on patients seen in clinical practice or at EVMS. Fabrication of patient information is considered a violation of the Honor Code and will be handled as a violation. Furthermore, the student will be place on clinical probation while the student is awaiting for the completion of the Honor Council proceedings.

A student receiving an 83 or less on a SOAP note will be evaluated for placement on clinical probation.

In order to assure variety in clinical documentation, each SOAP note will be unique and without repetition of diagnosis and treatment. For example, only **one** note can address a patient dx'd and tx'd for a UTI. Please ask if your mentor if you have any questions about this content.

<u>APA Format</u>

APA 6th Edition guidelines are to be used correctly for SOAP note content. In particular, all content should be cited and referenced appropriately including direct quotes, paraphrasing, or any other content that requires the use of APA style. SOAP notes should appear similar to those you review and write in clinical practice. APA formatting isn't required in clinical practice; therefore; students may utilize a similar format. However, SOAP assignment content including nursing theory, family life stage, cultural diversity and evaluation of care must be in APA format. Citations and references must have appropriate formatting. Please refer to your APA 6th Edition Manual for direction. If you are still unsure as to appropriate citation, please contact your clinical faculty.

- A **complete SUBJECTIVE** note to include chief complaint, history of present illness, any other acute illnesses, PMH, FH, SH, Meds, allergies, **LMP** and ROS. All presenting illnesses will be described thoroughly.
- A complete and organized OBJECTIVE portion of the patient visit.
- All relevant dx under ASSESSMENT in addition to any differential dx which might apply. Rationale with sources are required for the assessment and differential dx.
- PLAN:
- Prescriptions with dosage, route, duration, amount prescribed and if refills provide
- Diagnostic testing
- Problem oriented teaching
- Health Promotion
- Follow-up plans

- Nursing Theory & Application
- Select a Nursing Theory and apply this to your patient's plan and evaluation.
- Family Life Stage
- The format discussed in Nurs XXX or Nurs XXX should be used. Students should identify the stage and describe evidence that the family is meetings it's developmental goals. Cursory descriptions will be returned for additional information.
- Cultural Diversity Considered for the Patient
- List 2 culturally diverse considerations you gave or would give to this patient. Explain why you gave the selected consideration for the patient. Discuss **one** of the considerations your chose. Cultural Diversity is a general term that can include gender, religious beliefs, culture, race, economic status, age, and many others. You can consult your text from previous courses or other resources for ideas and information.
- **Evaluation of Care** Your interpretation of the visit in considering the standard of care that was given to the patient. <u>This includes comparing the standard of care with sources you used</u>. <u>Therefore, a citation is expected with your documentation of the evaluation</u>. Example of acceptable sources from the literature would be JNC-7, ADA, Sanford Guide, and other standard of care sources. It can also include your thoughts about the visit, patient, or interaction with your preceptor, or what you learned from the encounter. This is a good place to document what you should have done differently or on the next interaction with the patient.
- Each SOAP note must have a reference list of the sources used. The reference list must be in APA format. All sources must be within five years of publication date. Please see SOAP Grade Sheet in this syllabus for additional grading information.

<u>SOAP notes must be typed. Handwritten SOAP notes will not be accepted. The student, must document the number of hours on the SOAP grade sheet.</u> Faculty Feedback Forms

The purpose of this assignment is for the student to improve writing skills, critical thinking skills and clinical practice by addressing feedback provided in student SOAP 1 and 2 assignments.

Guidelines

After receiving SOAP 1 and 2:

- 1. Review all faculty feedback and comments including APA and clinical content.
- 2. Review the APA, grammar, and writing style comments
- 3. On the Faculty Feedback Form, note the faculty comment and what you did to address the issue. Include address the issue.
- 4. Submit the Faculty Feedback Form through Canvas within two weeks of receiving your graded SOAP note.
- **5.** The student will receive 1 or .5 points to the SOAP score per the Faculty Feedback Form provided on the Canvas site.

Super SOAP

The super SOAP will be the final SOAP due toward the end of the semester (see assignment schedule). It will include a SOAP note similar to the **two** previously completed for the course and an evaluation of a research article. This SOAP note is completed on one of the EVMS patients. The purpose of this assignment is to better prepare students for the Comprehensive Final Examination due during at the end of the NP program. There is a page limit on this assignment. Please see the SUPER SOAP grading rubric for specific information including the page limits. Points will be deducted for exceeding the page limit. Questions should be directed to your clinical faculty who will be grading this assignment. The research article will be posted one week prior to the SOAP due date.

<u>CRITERIA FOR EVALUATION OF CASE PRESENTATIONS (This assignment is done with the site visit. No</u> written assignment is required for the presentation):

**This should be a different patient than your SOAP patient you have already presented as an assignment. **

This assignment assists in refining case presentation skills and clinical problem solving strategies.

- 1. Subjective Data: Chief complaint, HPI (highlighting relevant positives and significant negatives), other active illness, medications, allergies, relevant family history, and LMP.
- 2. Objective Data: Note what you examined and what your positive findings were. Lab studies completed during visit should be included here.
- 3. Assessment: Highlight what your differential diagnoses were and how you ruled each one in or out.
- 4. Plan: Medications, Teaching, Labs/diagnostics ordered, Health promotion done, plan for follow-up.
- 5. Evaluation: What would you do differently next time? What did you learn from this patient?
- 6. Cultural diversity: Identify one cultural diversity issue to consider in the patient's care.

See Case Study Grade Sheet in this syllabus.

A student receiving an 83% or less on a on the case presentation will be evaluated for placement on clinical probation.

Standardized Patient Scenarios

One session will occur during the summer semester. Students will see two patients during the session. An **average** of the scenarios will be calculated for the course grade. Additionally, SOAP notes documenting the scenarios will be due at a designated date to the student's clinical faculty. Sessions are videotaped for learning purposes and if necessary to verify student documentation of the scenario in the Super SOAP.

Course Grading Policy

The following grading scale is used to determine a letter grade for the course associated with a point value. <u>Students</u> working toward an MSN must complete each MSN course with a grade of 83.00 (B) or higher, and grades are not rounded up. This is a clinical course. Clinical courses are not repeatable.

Score Range	Letter Grade	Quality Points	Description
93.0 - 100	A	4.00	Excellent
90.0 - 92.9	A -	3.67	
87.0 - 89.9	B+	3.33	
<mark>83.0 – 86.9</mark>	B	<mark>3.00</mark>	<mark>Good</mark>
80.0 - 82.9	B -	2.67	
77.0 – 79.9	C +	2.33	
73.0 - 76.9	С	2.00	Average
70.0 – 72.9	С-	1.67	
67.0 - 69.9	D +	1.33	Poor
60.0 - 66.9	D	1.00	Very Poor
Below 60.0	F	0.00	Fail
Incomplete	Ι	0.00	Incomplete
Withdrawal	W	0.00	Withdrawal

Student Deliverables for this Course

Your final course grade will be comprised of the following components:

DUE	DELIVERABLE	MAX . SCORE
	SOAP #1	5%

DUE	DELIVERABLE	MAX . SCORE
	SOAP #2	10%
	Standardized Patient (SP)	5%
	Super SOAP	20%
	Site Visit and Case Study	30%
	Preceptor Evaluation	30%
		100.00%

Course Grading Policy

The following grading scale is used to determine a letter grade for the course associated with a point value. <u>Students</u> working toward an MSN must complete each MSN course with a grade of 83.00 (B) or higher, and grades are not rounded up. This is a clinical course. Clinical courses are not repeatable.

Score Range	Letter Grade	Quality Points	Description
93.0 - 100	А	4.00	Excellent
90.0 - 92.9	A -	3.67	
87.0 - 89.9	B+	3.33	
83.0 - 86.9	В	3.00	Good
80.0 - 82.9	B -	2.67	
77.0 – 79.9	C +	2.33	
73.0 - 76.9	С	2.00	Average
70.0 - 72.9	С-	1.67	
67.0 - 69.9	D +	1.33	Poor
60.0 - 66.9	D	1.00	Very Poor
Below 60.0	F	0.00	Fail
Incomplete	Ι	0.00	Incomplete
Withdrawal	W	0.00	Withdrawal

ONLINE EDUCATION AND LIBERAL ARTS VALUES AT UMW

One of the hallmarks of online courses at UMW is that they embody the values of a quality liberal arts curriculum. These values are *community*, *interactivity*, *active learning*, *reflection and self-directed learning*.

Value 1: Community

Within a liberal arts institution, we believe that learning needs to occur as a social activity and that students should develop a strong sense of belonging to a networked learning community. Learning communities serve many important purposes: They support and sustain the work of individual learners, help to frame the work of individuals within larger intellectual conversations, and offer a possibility of building something greater through collaboration.

Value 2: Interactivity

One of the signal characteristics of the quality learning experience is small class size and what it enables: a high degree of interaction between student and instructor, as well as between the student and other students. Sometimes characterized as "high-touch," this interaction leads to highly personalized instruction in which students are treated as individuals rather than part of a collective who sink or swim largely on their own efforts.

Value 3: Active Learning

Another characteristic of quality education is an emphasis on active (rather than passive) learning, including intensive use of writing and speech, as both tools of analysis and communication. Active learning leads to a focus on critical thinking rather than merely memorization. Another example is activities that engender genuine inquiry by students in real issues/problems, problems that matter to people outside the classroom, as well as exploring and being challenged by diverse perspectives.

Value 4: Reflection

Part of the justification for the study of humanities in liberal education is that such study addresses the human yearning for meaning. However, such reflection is not limited to humanities. The question, "What does it mean?" is an important means of transforming learning from passive to active, from memorization to a deeper understanding.

Value 5: Self-Directed Learning

The successful learner is expected to take ownership of his or her learning experiences. While faculty play a critical role in framing, guiding and, sometimes, directing the path of these experiences, ultimately the learner must be able to rely on his or her own self to make intellectual choices. These skills lay the foundation for lifelong, adaptive learning as well as cultivating intellectual curiosity, creativity, flexibility and self-discipline.

UMW STUDENT RESOURCES

<u>Libraries</u>

Students are encouraged to use the library resources throughout the course of their study. The Stafford campus includes the Stafford Library in building 121. In addition, the Fredericksburg campus offers the Simpson Library. Both libraries have open conversation areas and comfortable seating which provide a welcoming environment for individual and group study, and networked computers with access to the internet, the University network and Microsoft Office software. The library staff are available to provide assistance to groups and individuals.

Writing Center

Students are encouraged to use the Writing Center, located within the Hurley Convergence Center (HCC) on the Fredericksburg campus. Operating within the Honor Code, the Center offers free tutorial assistance to students regardless of major or concentration, both for course assignments and for personal writing needs.

The Writing Center personnel work with student writers at every skill level to improve writing performance. Staffed by faculty directors, assistants and well-trained student tutors, the Center provides advice in getting started on papers, developing ideas, achieving unity and coherence, reviewing troublesome parts of papers, learning writing styles such as APA, understanding and correcting recurring grammatical and punctuation errors, and overcoming writer's block. They also provide access to various writing guides.

Speaking Center

The Speaking Center is located on the Fredericksburg campus, and supports the speaking-intensive program by providing free consultations to students interested in developing oral communication skills. The Center houses a collection of instructional resources (books, handouts, videotapes, equipment) which address a variety of topics ranging from public speaking anxiety to constructing effective visual aids. Consultants are available to videotape practice presentations and to provide feedback.

The Center strictly adheres to the Honor Code: Consultants will not compose any portion of a presentation for a student, nor will they do research for a student's presentation. Consultants are also prepared to offer advice on special types of oral communication activities such as speeches, group presentations, debates and interviews.

<u>IT Support</u>

In addition to resources available at its website (<u>http://technology.umw.edu/about-us/</u>), the IT office provides help through the Help Desk. The Help Desk serves as the clearinghouse for all tech-related issues. (Please do not ask the MSN instructors or staff for technical assistance...we're not IT experts.) For any type of technology-related issues, students must contact the Help Desk by telephone at (540) 654-2255 or by email at <u>helpdesk@umw.edu</u> or via their webpage (<u>http://technology.umw.edu/helpdesk/getting_help/</u>).

COMPUTER SPECIFICATIONS

For technical assistance, incoming students should visit the Help Desk's webpage for new students at http://technology.umw.edu/new/students/. The below hardware and software specifications are recommended for online courses:

Processor	1.2 GHz or greater
RAM	250 MB or greater (512 MB suggested)
Display	Color video display card
	Color monitor with 1280x1024 resolution or greater
Sound	Sound card, speakers & microphone (or a microphone/speaker headset)
Operating System	Windows 98, ME, 2000, XP or Vista
	(Mac OS 9.2 or higher for all Macintosh computers)

For online courses, the student must have:

- Speaker and microphone on the computer (or a microphone/speaker headset)
- Broadband internet connection (check with your service provider for what speeds are available in your area (examples: Cable, DSL, fiber optic, satellite, etc.)
- Internet Explorer 6.0 or later (later versions of Netscape also work) or Firefox
- General software: MS Office or Open Office, Adobe Acrobat Reader, and Windows Media Player
- APA software: Perla or ReferencePoint
- Exam software: Respondus

ONLINE ETIQUETTE

The following guidance is paraphrased from one found on the Kent State University website (<u>http://www.kent.edu/dl/technology/etiquette.cfm</u>): Taking an online course and corresponding via the WWW presents one with the task of overcoming the lack of non-verbals in communication. When taking a course online, it's important to remember some etiquette that will smooth communication between the students and instructors.

- 1. Avoid language that may come across as strong or offensive. Language can be easily misinterpreted in written communication. If a point must be stressed, review the statement to ensure that an outsider reading it would not be offended, and then post the statement. Humor and sarcasm may easily be misinterpreted as well, so try to be as matter-of-fact and professional as possible.
- 2. Keep writing to a point and stay on-topic. Online courses require a lot of reading. When writing, keep sentences poignant and brief so readers do not get lost in wordy paragraphs and miss the point of the statement. Also, don't introduce new topics; it may just confuse the readers.
- 3. Read first, write later. To prevent repeating commentary that has already been stated, or asking questions that have already been answered, it is important to read all posts and comments within the course discussion before commenting yourself.
- 4. Review, review, review...and then send. There's no taking back a comment once it has been sent, so it's important to double-check all writing to ensure it clearly conveys the exact intended message.
- 5. An online classroom is still a classroom. Though the course may be online, appropriate classroom behavior is still necessary. Respect for fellow students and instructors is as important as ever.
- 6. The language of the internet: Though still a fairly young type of communication, certain aspects of online communication are becoming conventional. For example, do not write using all capital letters, because it appears as shouting. Also, the use of emoticons can be helpful when used to convey nonverbal feelings, but overuse should be avoided. Examples of emoticons: ⓒ, ♥
- 7. Consider the privacy of others. Ask permission before giving out a classmate's email address or other information.
- 8. If possible, keep attachments small. If it's necessary to send photos, change the size to 100k or smaller.
- 9. No inappropriate material is permitted. Do not forward virus warnings, chain letters, jokes, etc., to classmates or instructors. The sharing of pornographic material is forbidden."

USING THE BIG BLUE BUTTON IN CANVAS FOR CONFERENCING IN AN ONLINE COURSE

What are Conferences in Canvas?

The *Conferences* feature is primarily used for virtual lectures, virtual office hours and student groups. It can also be used to demonstrate technologies or troubleshoot technology issues online. Conferences can accommodate up to 50 people.

Pages
Files
Syllabus
Outcomes
Quizzes
Conferences
Collaborations

The *Conferences* feature makes it easy to conduct synchronous (real-time) lectures for all of the students in the course. It also allows the instructor to broadcast real-time audio and video. Additionally, it allows the instructor to demo on applications on the computer desktop, to share presentation slides, or demo any online resources. Currently, Canvas integrates via the **Big Blue Button**.

NOTE: The **Big Blue Button** can accommodate up to 50 users in a conference at any given moment. A conference will remain active on the **Big Blue Button** as long as at least one person is logged into the conference room. When the last person exits, the conference will automatically conclude and all files and chats will be removed.

Quick Meeting	I'll show you some exa In Progress	End Join 🍄 🔹
Group Project Discussion	This is an open discussion f	Start 🔅 -
Course Conference	We will be discussing all m	Start 🌣
Concluded Conferences		
	Come ask any questions that co 01/15/2016	

When would I use Conferences?

The instructor can use *Conferences* to:

• Connect with course students for online office hours, live presentations or special study sessions

- Practice presenting online (students can set up practice presentations in their student groups)
- Broadcast a live event or lecture to students who can't be on-site
- Record the conferences so students can view them at a later date (Note: recordings are automatically deleted 14 days after the conference ends)

How do I use the *Conferences* Index Page (see graphic below)?

Conferences are grouped in two parts: New Conferences [1] and Concluded Conferences [2]. Both always display the name [3] and description [4] of the conference. Note: Students can only view conferences to which they have been invited.

Quick Meeting	I'll show you some exa In Progress	End Join 🌣 👻
Group Project Discussion	This is an open discussion f	Start 🔅 👻
Course Conference	We will be discussing all m	Start 🔅 👻
Concluded Conferences	2	

New Conferences (see graphic below)

New Conferences are either ready to start [1] or in progress [2] where invited participants can join. Note: Students cannot join a conference until the instructor has started it.

		2
uick Meeting	I'll show you some exa In Progress	End Join 🌣 👻
roup Project Discussion	This is an open discussion f	Start 🔅 -
ourse Conference	We will be discussing all m	Start 🔅 👻

Concluded Conferences (see graphic below)

Once a conference has ended, it will be displayed in Concluded Conferences and show the date of the conference [1].

For recorded conferences, Canvas will display the length of the conference [2], which is indicated in hours:minutes (e.g., 0:10 is 10 minutes).

When a conference is rendered for playback, the conference displays the **View** button [3]. Depending on the length of the conference, this process may take several hours. Note: Recordings are automatically deleted 14 days after the conference ends.

	•			
Group Project Discussion	Let's discuss a few ideas 01/15/2016	1 Recording	¢	•
Ľ ¹		0:10	View	e
Quick Meeting	I'll show you some examples for the assi 01/15/2016		٥	•
Weekly Question	Come ask any questions that come up fr 01/15/2016		ò	*

UNIVERSITY NOTICES

University Closures

If the University is closed on a regularly scheduled day, MSN courses *will continue as scheduled* online.

Disability Directive

The Office of Disability Services has been designated by the University as the primary office to guide, counsel and assist students with disabilities. If you already receive services through the disability office and require accommodations for this class, make an appointment with me (the instructor) as soon as possible to discuss your approved accommodation needs. Please bring your accommodation letter to our appointment. Any information you share will be held in the strictest confidence unless you have granted me permission to do otherwise.

If you have not contacted the Office of Disability Services and need accommodations, such as note-taking assistance, extended time for tests, and so on, a referral can be made. The disability office will require appropriate documentation of disability. For details, please contact them at (540) 654-1266.

To protect student privacy and confidentiality, students do not have to inform their instructor directly of the nature of a disability. Once the student has been approved by the disability office for accommodations, the student will receive a letter detailing the exact nature of the accommodations. Copies of the letter should be given by the student to each instructor. The instructor is not told the nature of the disability; we are informed only of the needed classroom accommodation.

Sexual Assault Prevention

Sexual harassment in education includes any unwanted and unwelcomed sexual behavior which significantly interferes with an individual's access to educational opportunities. The University of Mary Washington is committed to preventing and addressing harassment, regardless of whether the harassment is perpetrated by peers, teachers or other school officials. Confidential support services are provided by:

Avina Ross Sexual Assault Prevention Specialist <u>aross@umw.edu</u> (540) 654-1166

Honor Code

Students are required to read the Honor Constitution and sign the Honor Code statement (attached at end of syllabus). The Honor Code and the Honor Pledge embody the trust placed in UMW students and the reciprocal responsibility students have to behave ethically in their academic pursuits. Additionally, students are responsible for adhering to the policies outlined in the Code of Student Conduct and the Graduate Student Handbook. Violations of the Code of Student Conduct will not be tolerated. Violations of this code include (but are not limited to) cheating on tests/assignments. For complete details on our expectations of you as a UMW student, please visit the following websites and carefully review the guidelines/policies:

- Honor Constitution: <u>http://students.umw.edu/staffordhonorcouncil/</u>
- Code of Student Conduct: <u>http://students.umw.edu/judicialaffairs/the-judicial-system/code-of-conduct/</u>
- Graduate Student Handbook: link needed

Some examples of Honor Code violations are:

- Lying, cheating*, plagiarism
- Team collaboration on a project, except when specifically authorized by the instructor (you are expected to do your own work, unaided by anyone else)

- Use of commercial sources or other students for "ready-made papers" (your work must clearly be of your own original effort) don't believe that by changing a few words you can disguise the source…you can't if you use someone else's work you will be found out because the difference in tone, style and comprehensiveness of the writing will be readily apparent to the instructors
- Failing to cite reference materials used within your paper/work (this includes not only printed material but also materials taken in part or in whole from internet sources)
- Use of "crib sheets," etc., during an examination although some instructors allow the use of reference materials during exams, such use will always be clearly specified in the course syllabus (if such permission is not clearly set out in the syllabus, then you are not authorized to use reference materials during exams; also, if you exceed the clearly specified scope of authorization, then you are guilty of cheating)
- *Examples of cheating: Taking an exam for someone else; reproducing/copying or discussing exam content; faking an illness to avoid an exam; copying from another student's exam or assignment; giving another student answers during an exam; reviewing previous copies of an exam without the permission of the instructor; purchasing term papers; copying materials without footnoting or citing; padding items on a bibliography; turning in a dry lab report; failing to report grade errors; collaborating on or discussing homework and/or taking home exams/papers; plagiarism; altering or forging an official university document; swapping of computer programming disks/USBs.

Course Evaluations

This course requires that the student complete a course evaluation. Approximately three weeks before the semester ends, students will receive an email notice containing directions for accessing and completing the online evaluation. Submission of the evaluation is anonymous, and every effort should be made to provide feedback on the quality of the instruction received and the effectiveness of the faculty. Student feedback is critical to the ongoing health of the MSN program, and is greatly appreciated.

Course Summaries

A student course summary form will be used by faculty to obtain feedback from you on the components of the course and its delivery; it is an evaluation not of the *faculty*, but of the *course*. A link to complete this anonymous online summary will be posted in the Canvas course site, where instructions for completion/submission will be provided.

ACADEMIC CALENDAR

Insert academic calendar here



STUDENT HONOR CODE

I, as a student of the University of Mary Washington, do hereby accept the Honor System. I have read and understand the Honor Constitution and agree to abide by its provisions. Accordingly, I resolve to refrain from giving or receiving academic material in a manner not authorized by the instructor, from illegally appropriating the property of others, and from deliberately falsifying facts. I acknowledge that in support of the Honor System, it is my responsibility to report any violation of the Honor Code of which I am aware. I realize that in the event of a violation of the Honor Code, a plea of ignorance will not be acceptable and that such a violation could result in my permanent dismissal from the University of Mary Washington. I further pledge that I shall endeavor at all times to create a spirit of honor, both by upholding the Honor System myself and helping others to do so.

Student's Name:

Student's Signature: _____

Date: _____



BLOODBORNE PATHOGEN RISK ACKNOLWEDGEMENT

All MSN students are required to access and read all materials listed on the Occupational Safety and Health Administration (OSHA) website under "Blood Borne Pathogens" (http://www.osha.gov/SLTC/bloodbornepathogens/). These materials include information regarding:

- 1. Needlestick injuries and legislation
- 2. Occupational exposure and prevention
- 3. Information for healthcare workers about blood borne pathogens
- 4. Procedures following exposure to blood borne pathogens
- 5. Exposure control in home care
- 6. Precautions for emergency responders
- 7. Post-exposure evaluation and follow-up

After reviewing these publications, please read and sign the following statement:

By my signature below, I acknowledge that I have read the OSHA publications regarding the risk to healthcare workers associated with exposure to bloodborne pathogens. I further acknowledge that I have been informed of this risk through these publications and affirm my understanding of the materials. I have also been informed of procedures for post-exposure management. I will report any exposure to body fluids during a course-related experience to MSN faculty. I understand that I may ask faculty for additional information if I have any questions.

Printed Name: _____

Signature: _____ Date: _____



PRACTICUM SITE VISIT CHECKLIST (NURS 750 Course)

Student Name:		Date:
		(please print)
Preceptor Name:		
I		(please print)
Arrival Time:		Departure Time:
Practicum Activities:		Student presents case/assessment/plan to preceptor
	□Yes □No	Preceptor and student check patient together
	🗆 Yes 🛛 No	Student is allowed to explain plan to patient
	🗆 Yes 🗆 No	Student writes prescriptions
	🗆 Yes 🛛 No	Student spends of time with primary preceptor
	🗆 Yes 🛛 No	Student is performing hospital rounds at:
	□Yes □No	Student is satisfied with clinical setting

Student Clinical Performance: Student was observed with patient in the following activities:

Focused History/Complete History	Points	Comments
All pertinent information elicited	10 points	
Minimal omission of pertinent information	8 points	
Unable to elicit pertinent information	6 points	
Focused Physical/Complete Physical		
Included all systems associated with history	10 pts	
Omitted 1-2 systems associated with history	8 pts	
Unable to identify and organize the physical exam associated with the history	6 pts	
Assessment		
Able to elicit assessment and all pertinent differential diagnoses	10 pts	
Able to elicit assessment and some pertinent differential diagnoses	8 pts	
Unable to elicit assessment and/or pertinent differential diagnoses	6 pts	
Plan	Points	Comments
Develops appropriate plans for the patient	10 pts	
Incomplete development of plans for the patient	8 pts	
Unable to develop a plan for the patient	6 pts	

PRACTICUM SITE VISIT CHECKLIST, CONTINUED (NURS 750 Course)

Student Name: _____

(please print)

Preceptor Name: _____

(please print)

Patient Education	
Content is pertinent and at an appropriate level of understanding for the patient	10 pts
Content is omitted that is pertinent for the patient	8 pts
No patient education completed during the visit	6 pts
Case Presentation to the Preceptor	
Pertinent and organized	15 pts
Omits pertinent data, but organized in presentation	10 pts
Presentation is unorganized and omits pertinent data	6 pts
Practicum Activities	Circle One
Student initially sees patients alone (4-10/day)	Yes No
Professional interpersonal skills with patients, preceptor, and staff	Yes No
Professional demeanor	Yes No
Able to satisfactorily perform procedures	Yes No
Points (65 possible points)	

Faculty Perception of Student's Clinical Performance (please circle one):

0	1	2	3	4	5	6	7	8	9	10	Scoring:	0 = Unsatisfactory 5 = Meets expectations
										_	10 = Exceeds Expectations	
ТОТА	L SITI	E VISIT	Γ ΡΟΙΝ	NTS: _				PR	ЕСЕРТ	'OR:	□Yes □No	Preceptor is satisfied with student's performance
											□Yes □No	Preceptor is reminded to complete final evaluation



NPST DATA AND PATIENT RECORD (NURS 750 Course)

St	ude	nt Name:		
г.	14	- Name		
га	cun	cy Name:		_
		data was congruent with patient medical record: \Box Yes \Box No		
				<u>Circle One</u>
	1.	Subjective Data	Excellent	5 Points
		Included: CC, HPI (pertinent to positive and negative), PMH, medications,	Satisfactory	3 Points
		allergies, FH, LMP, ROS	Unsatisfactory	0 Points
	2.	Objective Data	Excellent	5 Points
		What was examined and pos fdgs, lab done	Satisfactory	3 Points
			Unsatisfactory	0 Points
	3.	Assessment	Excellent	5 Points
		Includes different diagnoses and how each was ruled in/out	Satisfactory	3 Points
			Unsatisfactory	0 Points
	4.	Plan	Excellent	5 Points
		Includes medications, teaching, labs/diagnostics, health promotion,	Satisfactory	3 Points
		follow-up	Unsatisfactory	0 Points
	5.	Family Life Stage and Cultural Diversity	Excellent	5 Points
			Satisfactory	3 Points
			Unsatisfactory	0 Points
Co	mn	nents/Actions Taken:		
Тс		Score:		
St	ude	nt Signature: Da	te:	
Fa	cult	zy Signature: Da	te:	



Please submit a new log for each calendar month.

Student Name: _____

Date	Arrival	Departure	Total Time*	FP/IM	Peds	WH	Preceptor Signature

*Round to nearest 15-minute increment

Running Total of Clinical Hours (number of total hours completed to this point):



STUDENT'S EVALUATION OF PRECEPTOR (NURS 750 Course)

Preceptor Name: _____

Student Name: _____

Student, please answer each question below regarding your preceptor. This will provide summative feedback to the preceptor. Space is provided at bottom for written comments (optional).

1.	Preceptor available to student	□ Yes	🗆 No	□N/A
2.	Preceptor demonstrates understanding of FNP role	□ Yes	□ No	□ N/A
3.	Utilizes student's strengths and knowledge	🗆 Yes	🗆 No	□ N/A
4.	Serves as a good role model	□ Yes	□ No	□ N/A
5.	Demonstrates effective rapport with patients	□ Yes	🗆 No	□ N/A
6.	Assists student in identifying goals and needs for experience	□ Yes	□ No	□ N/A
7.	Provides immediate and adequate feedback with questions and presentations	□ Yes	🗆 No	□ N/A
8.	Considers student's limits according to level of training	□ Yes	□ No	□ N/A
9.	Offers constructive comments about chart notes	□ Yes	🗆 No	□ N/A
10.	Leads students through decision making rather than giving own impressions	□ Yes	□ No	□N/A
11.	Reviews and signs each clinic note	🗆 Yes	🗆 No	□ N/A
12.	Encourages questions	□ Yes	□ No	□N/A
13.	Discusses alternative management	🗆 Yes	🗆 No	□ N/A
14.	Thoughtfully reviews differential diagnoses with student	□ Yes	□ No	□ N/A
15.	Allows student opportunities to suggest drug of choice, calculate dosages, suggest lab and x-ray to be ordered	□ Yes	□ No	□ N/A
16.	Communicates clinical knowledge well	□ Yes	□ No	□N/A
17.	Utilizes other members of the health care team	□ Yes	🗆 No	□N/A
18.	Suggests and provides additional learning experiences (i.e., outside of clinic or interesting; ex: rounds, patients being seen in the office)	□ Yes	□ No	□ N/A
19.	Suggests and provides additional learning experiences (i.e., outside of clinic or interesting; ex: rounds, patients being seen in the office)	□ Yes	□ No	□ N/A
20.	Reviews evaluations with student and provides immediate and constructive feedback	□ Yes	□ No	□ N/A
Comn	nents (optional):			



STUDENT'S EVALUATION OF SITE (NURS 750 Course)

Site:			
Student Name: _			

Preceptor Name: _

Student, please answer each question below regarding your preceptor. This will provide summative feedback to the preceptor and the site director. Space is provided at bottom for written comments (optional).

1.	Is adequate space provided?		□ Yes	🗆 No	□ N/A
2.	Is adequate time given to see patients?		□ Yes	□ No	□ N/A
3.	Are there significant numbers of patients	s?	🗆 Yes	🗆 No	□N/A
4.	Are the types of patients varied as to age	, type of dx, etc?	□ Yes	□ No	□N/A
5.	Are students allowed to select clients acc	cording to their needs?	□ Yes	🗆 No	□N/A
6.	Are students given the opportunity to fol of interest?	llow-up with patients and or problems	□ Yes	□ No	□ N/A
7.	Are reports from lab and X-Ray accessibl	e to students?	🗆 Yes	🗆 No	□N/A
8.	Is support staff appropriately helpful and	d supportive to students?	□ Yes	□ No	□N/A
9.	Are community resources, other agencie with client welfare?	s, and professional disciplines involved	□ Yes	□ No	□ N/A
10.	Is philosophy of clinic to provide health p	promotion?	□ Yes	□ No	□N/A
11.	Is philosophy of clinic to provide disease	dx and management?	🗆 Yes	🗆 No	□N/A
12.	Is philosophy of the clinic to provide both	h?	□ Yes	□ No	□N/A
13.	Are instructional materials available for (i.e. pamphlets, outside class opportuniti		□ Yes	□ No	□ N/A
14.	How did this site provide a good clinical experience for you?				
15.	List the areas of the site that need improvement for student learning?				
16.	Do you recommend this site for future students?	If not, why?:			s 🗆 No
General	Comments (optional):				



PRECEPTOR FAQ (NURS 750 Course)

Welcome to the University of Mary Washington's MSN(FNP) program. This document will provide answers to the most frequent questions asked by preceptors about the program. If you need further information or would like to discuss these issues, please contact the MSN program director, Dr. XXX XXX, at (XXX) XXX-XXXX or XXX@umw.edu.

Q. Can I receive credit or continuing education hours for precepting an FNP student?

A. All preceptors will receive a letter of appreciation for precepting a student within six to eight weeks from the completion of the semester. Family and Adult Nurse Practitioners will receive a letter and an ANCC Preceptor Verification Form for continuing education credit. MDs may receive AMA PRA Category 2 credit for teaching other health professionals (AMA: the Physicians Recognition and Award and Credit System Reward, 2010). Women's Health NPs, Pediatric NPs and Certified Nurse Midwives may use the letter of appreciation per the certification agency.

Q. How much time should I spend precepting the student?

A. Each semester, you should allow the student time to become familiar with your office policies, procedures and space. This usually only takes a couple of hours. The first three or four clinical days should be spent having the student "shadow" you with patients to become familiar with your practice style and so that you can become familiar with the level at which the student can function. All students are different and thus vary in their abilities. Some students have many years of clinical experience and can quickly become proficient at seeing patients. Others need more time to adjust to the demands of a primary care setting. Talk to the student to determine how comfortable he/she feels seeing patients. By the end of the third week, the student should be able to see a patient initially, interview them, examine them and develop a tentative plan of care. You should have the student present each of the patients to you and re-examine the patients if necessary and make any necessary changes to the proposed treatment plans. This process may take between five and 15 minutes. If it is taking any longer, the student needs to work on becoming more concise before presenting the patient to you.

Q. Can the student write prescriptions?

A. Yes, the student should be encouraged to write out prescriptions and make medication recommendations. However, the preceptor must sign all prescriptions. Students should not call prescriptions into the pharmacy over the telephone. If your office nurse calls in prescriptions, he/she can call in the student's prescription as long as you have reviewed the student's selection and agree with the drug choice.

Q. How involved should I be in the treatment plan?

A. Students will need more assistance in the beginning, especially the first semester of clinical. Students should also concentrate on health promotion, wellness and preventive care. They can also see established patients who have uncomplicated acute and/or chronic illnesses. They should not see patients who seem unstable. Your level of involvement will depend on a number of factors: the level of comfort you have with the student's skill level, the acceptance of the student role to your patients, prior experience working with FNP students, the type of patient the student is seeing and the level of service provided. For example, a gynecology exam may require more hands-on precepting from you than counseling a known diabetic on diet. Of course, the demands on your time from the practice will also be a factor.

Q. How many patients should the student see per eight hours?

A. In the first semester, the student should see from four to six patients per clinical day. Students are encouraged to look up diagnoses and treatments for their patients while in the office to reinforce their learning. Additionally,

they are to complete chart documentation and are encouraged to take their time initially in order to develop skills. By the end of the second semester, the student should see between five and 10 patients per day. By the end of the third semester, the student should be able to see at least 12 patients per day.

Q. What happens if patients that would be appropriate for the student to see are not available on the particular day the student attends clinical?

A. It is suggested that the preceptors have the students follow them around and concentrate on exposing them to physical findings or clinical situations they might not otherwise see. You can use these situations to teach students directly rather than indirectly by reviewing a case with them.

Q. What hours will the student attend clinical?

A. During this semester, students are required to spend eight hours per week seeing patients. These hours are arranged between you and the student. They can be at any time of the day or on any day of the week that you are available. All clinicals must be completed before the student's graduation.

Q. How are students evaluated?

A. Students are evaluated based on their ability to formulate a patient's diagnosis and plan care within a primary care setting. A written form is required to be completed by the preceptor and discussed with the student during clinical rotation. Grades are assigned, in part, based on your assessment of the student's level of competence for the particular semester they are completing. The form uses a scale with different behavioral characteristics for each point on the scale.

Any student who fails to meet a minimal level of competence should receive both written and verbal feedback from you regarding his/her performance, with specific suggestions for improvement. The instructor for the clinical course should also be notified. If the student's performance does not improve by the end of two clinical days, the preceptor should discuss the situation with the instructor and a clinical site visit should be made. The instructor may recommend that the student be transferred to another clinical site or suggest remedial work. Ultimately, it is the instructor's responsibility to determine if a student has failed a clinical rotation.

Q. Do students have malpractice insurance?

A. Yes, each student is covered by the amount of malpractice required by the Commonwealth of Virginia. The malpractice is provided by UMW. If an incident does occur, the student is required to notify the instructor and complete a form provided in the syllabus.

All students have completed courses in nursing theories, pharmacology, family and advanced physical assessment. Course-work has been completed by the student in acute illnesses, health promotion and wellness, women's health care, nursing research, and pediatric health concepts. The student's final semester will also include a course on chronic illnesses.

Q. How do I talk to faculty?

A. The MSN program has hired several clinical mentors who are Doctoral or Masters prepared nurse practitioners with a number of years of experience in the role. They are responsible for recruiting and assisting students with clinical placements; reading logs, and will visit each student once during the semester. Each of these clinical mentors is part of our adjunct faculty and are therefore responsible for the student's clinical experiences in concert with the faculty at the MSN program. At the beginning of the clinical rotation, ask your student who his/her clinical mentor is and how you can get in contact with that person, if so desired. Any questions which cannot be answered by the clinical faculty should be directed to the MSN program director (contact information provided above).



AGENCY SURVEY OF MSN PROGRAM (NURS 750 Course)

1.	Faculty members	and/or staff are re	sponsive to r	equests for additi	onal documenta	ntion/information.
	□ Not Applicable	□ Strongly Agree	□ Agree	□ Neutral	Disagree	□ Strongly Disagree
2.	Faculty members	and/or staff respo	nd to e-mails	in a timely fashio	n.	
	□ Not Applicable	□ Strongly Agree	□ Agree	□ Neutral	Disagree	□ Strongly Disagree
3.	Faculty members	and/or staff respo	nd to telepho	one calls in a timely	y fashion.	
	□ Not Applicable	□ Strongly Agree	□ Agree	□ Neutral	Disagree	□ Strongly Disagree
4.	Faculty members	and/or staff seek in	nput from ag	ency personnel re	garding student	t learning experiences.
	□ Not Applicable	□ Strongly Agree	□ Agree	□ Neutral	Disagree	□ Strongly Disagree
5.	Faculty members	and/or staff provid	le required s	tudent documenta	ition in a timely	fashion.
	□ Not Applicable	□ Strongly Agree	□ Agree	□ Neutral	Disagree	□ Strongly Disagree
6.	Faculty members	and/or staff keep r	equired stud	lent documentatio	n up to date.	
	□ Not Applicable	□ Strongly Agree	□ Agree	□ Neutral	Disagree	□ Strongly Disagree
7.	Agency required	student documenta	tion is comp	lete and accurate.		
	□ Not Applicable	□ Strongly Agree	□ Agree	□ Neutral	Disagree	□ Strongly Disagree
8.	Agency and UMW agency's needs.	MSN Program inte	rface (i.e., sit	e visits, written co	rrespondence)	adequately meets the
	□ Not Applicable	□ Strongly Agree	□ Agree	□ Neutral	Disagree	□ Strongly Disagree
9.	Please provide us	s with any additiona	al comments	that may help us t	o improve our p	orogram.



CLINICAL PRECEPTOR AGREEMENT (NURS 750 Course)

I agree to provide clinical experience and supervision in my facility for the below UMW MSN student. The student's clinical experience at my facility will consist of patient contact, and medical record documentation and confidential medical record evaluation by a UMW faculty member.

Each student has had an annual physical examination which verifies he/she is healthy and able to do clinical work. Each student is covered by the University's standard malpractice policy in the amount required by the Commonwealth of Virginia. The malpractice is for the number of hours per week stated in this contract. Each student has been advised of risks associated with clinical work and has signed forms which indicate his/her understanding of the risks inherent in nursing practice.

I agree to accept the conditions of this clinical contract with the times and days the student and I have agreed upon.

Preceptor Name:			
	(please print)		
Name of Facility:	(please print)		
Facility Address:	(please print)		
		_ Preceptor Email:	
Preceptor Signature:			
Student Name:	(please print)		
Total Hours Scheduled w/Prece			
Dates for clinical (from beginni	ng to end):	to	
attach your CV/resume to th phone numbers, SSN, and cu	nis form. The CV/resur rrent Virginia professi r degree. Please send	me should include ional license. Ensu all documents to t	ecome adjunct faculty. To do so, please e complete home and office addresses, re the CV lists all credentials and name the MSN Program Director via email or ecessary to mail it again.
Please check the appropriate s	tatement below:		
	sume and a copy of my he required information etter of Adjunct Clinical	Virginia profession n for an adjunct clin	al license to the MSN Program Director. lical appointment to the MSN Program. nt.



STUDENT INCIDENT REPORT (NURS 750 Course)

Include accidents and/or exposure to hazardous substance or disease.

1.	Student's Name:						
			(please pr	int)			
	Student's Address:			int)			
			(please pr	int)			
	SSN:	Tel:					
2.	Occurrence Date:		_ D	ay of Week:			
3.	Occurrence Time:	am/pm	R	eport Date:			
4.	Location of Occurrence:		(please pr				
5.	Activity Involved (check all that a	nnlu).	(please pr	int)			
5.	 Lifting Patient Lifting Other Invasive Procedure/Injection Other Patient Care Non-Work Activity 	□ Transpo □ Transpo □ Equipm □ Walking □ Hazardo □ Infection ssary):	ort Equipm ent Use/Ro g ous Substat us Exposu	epair nce re			
6.	Type of Injury (check all that appl	y):					
	 No Apparent Injury Laceration/Abrasion Puncture Burn Bruise/Crush Bite/Scratch 	 □ Foreign □ Strain/S □ Fracture □ Amputa □ Electrica □ Other (d) 	Sprain e tion al Shock	low)			
	Explain/describe injury (if necess	ary):					
7.	Part of Body (check all that apply):					
	Left Right Left Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Image: Head Imag		Left Arm Back Knee Foot Ankl		Left ☐ Abdomen ☐ Shoulder ☐ Finger(s) ☐ Toe(s) ☐ Chest	Right	

8.	Possible Causes	(check all that apply):
----	-----------------	-------------------------

	 Unclear as to Policy/Procedure Patient-Initiated Occurrence Improper Clothing/Equipment Equipment Defect/Malfunction Poor Illumination 	 Unaware of Safety Hazard Foreign Material on Floor Building/Premises Defect Improper Body Handling Other:	
9.	UMW Supervisor Notified at Time of	Occurrence:	
	□ Yes □ No Supervisor Name:		
10.	Description of Occurrence:		
11.	Witnessed by (please print all names):	
12.	Measures Taken to Prevent Recurren	ce:	
13.		ary □ First Aid □ Refused Treatment	□ Hospital
14.	Referred to Physician: □ No □ Ye		
	(If incident was a blood or body fluid expos	sure, please adhere to bloodborne pathogen p	post-exposure guidelines and document as directed.)
15.	Disposition: Returned to School Returned to Home		spitalized at:
16.	Time Lost:	d length of absence)	
		SIGNATURES	
Stı	udent Signature:		Date:
Cli	nical Supervisor:		Date:
UN	AW Course Supervisor:		Date:
Cor	mments:		



The student shall retain this checklist throughout his/her clinical experiences and document competency in the listed skills with the preceptors. **Preceptor signature and date are required for skill validation.** Prior to graduation, the student shall submit this completed checklist to the MSN Program for his/her permanent file. Skills marked with an * are required for successful completion of the MSN Program. Other skills are strongly recommended and the student should actively pursue competency in them.

Student's Name:

SKILL	PRECEPTOR SIGNATURE	DATE OF SIGNATURE
Vaginal wet mount/KOH*		
KOH skin slide for fungus		
Dipstick U/A and micro*		
Rapid strep test*		
Pregnancy test		
Pap smear*		
Urethral cultural (male)		
Audiogram		
Hbg/Het		
Blood glucose (finger stick)		
Herpes culture		
Peak flow meter*		



GRADE SHEET (SOAPS 1 and 2) (NURS 750 Course)

Student's	Name:	
Number	of Hours/Log: Total Hours:	
		<u>POINTS</u>
1.	Subjective Data (15 possible points)	
	Items should include: CC, HPI (pertinent to positive and negative), PMH, medications, allergies, FH, LMP, ROS.	
	Comments:	
2.	Objective Data (15 possible points)	
	Appropriate examination with objective documentation should be included.	
	Comments:	
3.	Assessment (15 possible points)	
	Includes ALL diagnosis(es) and diff dx. Provide rationale to rule in or out each diagnosis. Use of citations from resources expected to support your discussion for ruling in/out diagnoses.	
	Comments:	
4.	Plan (15 possible points)	
	Includes meds, teaching, labs/diagnostics, follow-up.	
	Comments:	
5.	Nursing Theory Application (10 possible points)	
	Identified theory needs to be explained (5 points) with theoretical concepts applied to the patient's evaluation and treatment (5 points).	
	Comments:	
6.	Health Promotion (2.5 possible points)	
	All age related health promotion must be included with the <u>highlighting</u> of items addressed with the patient.	
	Comments:	

GRADE SHEET (SOAPS 1 and 2), CONTINUED (NURS 750 Course)

	<u>POINTS</u>
7. Family Life Stage (10 possible points)	
Identify the appropriate family life stage for the patient (5 points) and apply the concepts of the stage to the patient (5 points). Student must use family theories, not individual theories.	
Comments:	_
8. Cultural Diversity (10 possible points)	
Identify TWO cultural diversity issues for the patient. Discuss ONE issue in detail.	
Comments:	_
9. APA Style (5 possible points)	_
Appropriate citation of references and citations within the SOAP content.	
Comments:	
	_
10. Evaluation (2.5 possible points)	-
Your interpretation of the visit in considering the standard of care that was given to the patient. This includes comparing the standard of care with sources you used. Therefore, a citation is expected with your documentation of the evaluation.	
Comments:	_
	_
Total Score:	
	(out of 100%)
Faculty Signature: Date:	



3F FORM (Faculty Feedback Form) (NURS 750 Course)

Student's Name: _____

SOAP Number: _____

You will receive up to one (1) point extra on your revision (not to exceed the total amount of points the assignment is worth!).

1.00 point = The student has appropriately addressed all faculty feedback issues.

0.50 point = The student has addressed most faculty feedback issues.

0.00 point = The student has not addressed the faculty feedback issues.

FACULTY FEEDBACK ISSUE	STUDENT CORRECTION
Faculty: Provide a brief summary of your feedback and SOAP content. Include the page number of the content.	Student: Provide an explanation to correct the SOAP content.
Example 1: <i>No LMP was provided for the patient.</i>	Example 1: It is essential to provide the LMP for female patients to avoid potential hazards related to pregnancy.
Example 2: Incorrect APA format of Kelley reference.	Example 2: <i>Reference format corrected per APA manual page 22.</i>



SOAP 3 GRADE SHEET

(NURS 750 Course)

Student's Name:

	Points	Co	omments					
Subjective: Items should include: CC, HPI (pert	nent pos a	nd neg), PMH, meds, a	allergies, FH, SH, LMP, ROS.					
All pertinent information provided	10							
Minimal omission of pertinent information	5							
Unable to elicit pertinent information	0							
	Objective: Appropriate examination with objective documentation should be included.							
Included all systems associated with history	10							
Omitted 1-2 systems associated with history	5							
Unable to identify and organize the physical exam	0							
associated with the history								
Assessment: Includes ALL diagnosis(es) and di	ff dx. <u>Provi</u>	de rationale to rule in	n and rule out each					
diagnosis. Use of citations from resources expe	ected to su	pport your discussion	for ruling in and ruling					
out diagnosis(es).								
Able to elicit assessment and all pertinent	15							
differential diagnoses								
Able to elicit assessment and some pertinent	7							
differential diagnoses								
Unable to elicit assessment and/or pertinent	0							
differential diagnoses								
Plan: Includes meds, teaching, labs/diagnostics		-	-					
Plan: Includes meds, teaching, labs/diagnostics F/U. Use of citations from resources expected t	<u>o support y</u>	-	-					
Plan: Includes meds, teaching, labs/diagnostics F/U. <u>Use of citations from resources expected t</u> Develops appropriate plans for the patient.		-	-					
Plan: Includes meds, teaching, labs/diagnostics F/U. Use of citations from resources expected t Develops appropriate plans for the patient. Incomplete development of plans for the patient	<u>o support y</u>	-	-					
Plan: Includes meds, teaching, labs/diagnostics F/U. Use of citations from resources expected t Develops appropriate plans for the patient. Incomplete development of plans for the patient Unable to develop a plan for the patient	<u>o support y</u> 15 7 0	vour plans for this pa	-					
 Plan: Includes meds, teaching, labs/diagnostics F/U. Use of citations from resources expected t Develops appropriate plans for the patient. Incomplete development of plans for the patient Unable to develop a plan for the patient Explanation of study design: Explain research of the patient 	<u>o support y</u> 15 7 0	vour plans for this pa	-					
 Plan: Includes meds, teaching, labs/diagnostics F/U. Use of citations from resources expected t Develops appropriate plans for the patient. Incomplete development of plans for the patient Unable to develop a plan for the patient Explanation of study design: Explain research of Study design is clearly stated. 	o support 15 7 0 lesign of th 5	vour plans for this pa	-					
 Plan: Includes meds, teaching, labs/diagnostics F/U. Use of citations from resources expected t Develops appropriate plans for the patient. Incomplete development of plans for the patient Unable to develop a plan for the patient Explanation of study design: Explain research of Study design is clearly stated. Study design is marginally presented. 	o support 15 7 0 lesign of th	vour plans for this pa	-					
 Plan: Includes meds, teaching, labs/diagnostics F/U. Use of citations from resources expected t Develops appropriate plans for the patient. Incomplete development of plans for the patient Unable to develop a plan for the patient Explanation of study design: Explain research of Study design is clearly stated. Study design is incorrect or not stated. 	o support y 15 7 0 lesign of th 5 3 0	vour plans for this par	tient.					
 Plan: Includes meds, teaching, labs/diagnostics F/U. Use of citations from resources expected t Develops appropriate plans for the patient. Incomplete development of plans for the patient Unable to develop a plan for the patient Explanation of study design: Explain research of Study design is clearly stated. Study design is incorrect or not stated. Discussion of the analysis of data: Thorough di 	o support y 15 7 0 lesign of th 5 3 0	vour plans for this par	tient.					
 Plan: Includes meds, teaching, labs/diagnostics F/U. Use of citations from resources expected t Develops appropriate plans for the patient. Incomplete development of plans for the patient Unable to develop a plan for the patient Explanation of study design: Explain research of Study design is clearly stated. Study design is incorrect or not stated. Discussion of the analysis of data: Thorough di Analysis of data is clearly stated. 	o support y 15 7 0 lesign of th 5 3 0 scussion an 5 points	vour plans for this par	tient.					
 Plan: Includes meds, teaching, labs/diagnostics F/U. Use of citations from resources expected t Develops appropriate plans for the patient. Incomplete development of plans for the patient Unable to develop a plan for the patient Explanation of study design: Explain research of Study design is clearly stated. Study design is incorrect or not stated. Discussion of the analysis of data: Thorough di Analysis of data is clearly stated. 	o support 15 7 0 lesign of th 5 3 0 scussion an	vour plans for this par	tient.					
 Plan: Includes meds, teaching, labs/diagnostics F/U. Use of citations from resources expected t Develops appropriate plans for the patient. Incomplete development of plans for the patient Unable to develop a plan for the patient Explanation of study design: Explain research of Study design is clearly stated. Study design is incorrect or not stated. Discussion of the analysis of data: Thorough di Analysis of data is clearly stated. 	o support y 15 7 0 lesign of th 5 3 0 scussion an 5 points	vour plans for this par	tient.					
 Plan: Includes meds, teaching, labs/diagnostics F/U. Use of citations from resources expected t Develops appropriate plans for the patient. Incomplete development of plans for the patient Unable to develop a plan for the patient Explanation of study design: Explain research of Study design is clearly stated. Study design is incorrect or not stated. Discussion of the analysis of data: Thorough di Analysis of data is clearly stated. 	o support y 15 7 0 lesign of th 5 3 0 scussion an 5 points 3 points 0 points	vour plans for this par ne study. nd explanation of data	a analysis from the study.					
 Plan: Includes meds, teaching, labs/diagnostics F/U. Use of citations from resources expected t Develops appropriate plans for the patient. Incomplete development of plans for the patient Unable to develop a plan for the patient Explanation of study design: Explain research of Study design is clearly stated. Study design is incorrect or not stated. Discussion of the analysis of data: Thorough di Analysis of data is marginally presented. Analysis of data is incorrect or not stated. 	o support y 15 7 0 lesign of th 5 3 0 scussion and 5 points 3 points 0 points Content =	vour plans for this par ne study. nd explanation of data Deduct 5 points.	tient.					
 Plan: Includes meds, teaching, labs/diagnostics F/U. Use of citations from resources expected t Develops appropriate plans for the patient. Incomplete development of plans for the patient Unable to develop a plan for the patient Explanation of study design: Explain research of Study design is clearly stated. Study design is incorrect or not stated. Discussion of the analysis of data: Thorough di Analysis of data is clearly stated. Analysis of data is incorrect or not stated. 15-Page Limit Exceeded for SOAP and Research 	o support y 15 7 0 lesign of th 5 3 0 scussion an 5 points 3 points 0 points Content = but feedba	nd explanation of data Deduct 5 points. ack can be given.)	a analysis from the study.					
 Plan: Includes meds, teaching, labs/diagnostics F/U. Use of citations from resources expected t Develops appropriate plans for the patient. Incomplete development of plans for the patient Unable to develop a plan for the patient Explanation of study design: Explain research of Study design is clearly stated. Study design is incorrect or not stated. Discussion of the analysis of data: Thorough di Analysis of data is clearly stated. Analysis of data is incorrect or not stated. 15-Page Limit Exceeded for SOAP and Research (Content exceeding the 15 pages will not be graded) 	o support y 15 7 0 lesign of th 5 3 0 scussion an 5 points 3 points 0 points Content = l, but feedba needs to be	vour plans for this par ne study. nd explanation of data Deduct 5 points. ack can be given.) e explained (5 points)	a analysis from the study.					
 Plan: Includes meds, teaching, labs/diagnostics F/U. Use of citations from resources expected t Develops appropriate plans for the patient. Incomplete development of plans for the patient Unable to develop a plan for the patient Explanation of study design: Explain research of Study design is clearly stated. Study design is incorrect or not stated. Discussion of the analysis of data: Thorough di Analysis of data is clearly stated. Analysis of data is incorrect or not stated. 15-Page Limit Exceeded for SOAP and Research (Content exceeding the 15 pages will not be graded) Nursing Theory Application: Identified theory 	o support y 15 7 0 lesign of th 5 3 0 scussion an 5 points 3 points 0 points Content = l, but feedba needs to be	vour plans for this par ne study. nd explanation of data Deduct 5 points. ack can be given.) e explained (5 points)	a analysis from the study.					
 Plan: Includes meds, teaching, labs/diagnostics F/U. Use of citations from resources expected t Develops appropriate plans for the patient. Incomplete development of plans for the patient Unable to develop a plan for the patient Explanation of study design: Explain research of Study design is clearly stated. Study design is incorrect or not stated. Discussion of the analysis of data: Thorough di Analysis of data is clearly stated. Analysis of data is incorrect or not stated. 15-Page Limit Exceeded for SOAP and Research (Content exceeding the 15 pages will not be graded) Nursing Theory Application: Identified theory applied to the patient's evaluation and treatme 	o support y 15 7 0 lesign of th 5 3 0 scussion an 5 points 3 points 0 points Content = l, but feedba needs to be nt (5 point	vour plans for this par ne study. nd explanation of data Deduct 5 points. ack can be given.) e explained (5 points)	a analysis from the study.					

SOAP 3 GRADE SHEET, CONTINUED

(NURS 750 Course)

Student's Name:			_			
	Points	Comments				
Family Life Stage: Identify the appropriate family life stage for the patient (5 points) and apply the						
concepts of the stage to the patient (5 points). Students must use family theories not individual theories.						
Life stage and application clearly stated	10					
Life stage and/or application marginally	5					
presented						
Life Stage and/or application poorly presented	0					
Cultural Diversity: Identify 2 cultural diversity	issues for	the patient. Discuss one issue in detail.				
Cultural Diversity issue clearly stated and	10					
discussed						
Cultural Diversity issue marginally presented	5					
Cultural Diversity issue poorly presented	0					
Evaluation of Care: Your interpretation of the v	isit in cons	nsidering the standard of care that was given to				
the patient. This includes comparing the standa	ard of care	e with sources you used. Therefore, a citation is				
expected with your documentation of the evaluation	ation.					
Evaluation is complete with references	5 points					
Evaluation is vague not supported by references	2 points					
Evaluation is unsatisfactory without references	0 points					
Eight-Page Limit Exceeded for Nursing Theory,	Life Stage,	e, Cultural Diversity				
and Evaluation of Care = Deduct 5 points.		Points Deducted	l			
(Content exceeding the eight pages will not be graded, but feedback can be given.)						
APA Format, Style, Grammar and Spelling: Appr	opriate cit	itation of references and citations within the				
SOAP content.						
Format, Style, Grammar and Spelling are	5 points					
consistent throughout the SOAP note						
Minor errors present	2 points					
Significant errors present	0 points					

Faculty Signature: _____ Date: _____