



FAMILY NURSE PRACTITIONER

Universidad del Turabo
School of Health Sciences
Nursing Department
Master of Science in Nursing
Program

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**ANA G. MENDEZ UNIVERSITY SYSTEMS
UNIVERSIDAD DEL TURABO
SCHOOL OF HEALTH SCIENCES
NURSING DEPARTMENT**

FNP STUDENT HANDBOOK

I. INTRODUCTION

A. Welcome

Dear FNP Student:

On behalf of the faculty and administrative staff at the School of Health Sciences, I would like to take this opportunity to welcome you to the Family Nurse Practitioner Program. As future FNP's we understand that you will confront obstacles along this arduous journey, but it will be worthwhile as you focus and dedicate the time and energy needed to complete this program.

Upon completion of this program of study, you will receive a **Master of Science in Nursing (MSN) degree with a specialty in Family Nurse Practitioner. This will make you eligible to sit for the ANCC or the AANP National Board Certification Examinations. It is our ultimate goal to prepare you for this task in order for you to contribute as an excellent Advanced Practice Nurse at any primary care provider setting.**

In this handbook, you will find the FNP program academic policies, course descriptions, clinical protocols, rules and regulations and forms that you will need to complete all of your clinical experiences. The transition process from BSN to an FNP primary care provider can be challenging but we are confident that you will be able to reach your professional goals. We wish you many blessings in your academic and professional endeavors.

Sincerely,

The FNP Program Faculty
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B. PURPOSE OF HANDBOOK

This handbook has been prepared as an orientation guide to policies, procedures, and other information specific to the FNP program. Information in this handbook is as accurate as is realistically possible; however, the contents may change periodically. Due notice will be given to all students when changes are made to policies contained in the handbook. If there are questions about any of the information contained in this document, do not hesitate to contact us for clarification. Clinical forms are located in the back of this handbook.

C. PROGRAM ACCREDITATION AND MEMBERSHIPS

The program has full accreditation through the Council on Higher Education in Puerto Rico, Middle States Association of Colleges and Secondary Schools and the Commission of Collegiate Nursing Education (CCNE). The Nursing Program holds membership in the American Association of Colleges of Nursing (AACN) and the National Organization of Nurse Practitioner Faculties (NONPF).

D. THE NURSING PROGRAMS HISTORY

In the year 1998, UT established the School of Health Sciences (SHS) with the goal of offering academic programs that satisfy the needs of the east-central region of the Island. This effort started with the Bachelor in Nursing Sciences degree (BSN), in April 2000. At the graduate level, SHS started the Master's degree of Science in Nursing with a specialty in Family Nurse Practitioner in March 2004 and later added two other programs: MSN with a specialty in Occupational and Environmental Health Adult Nurse Practitioner and MSN with a specialty as Clinical Nurse Leader. The MSN was reaccredited in November 2010-2015.

E. NURSING PROGRAM MISSION STATEMENT

The mission of the SHS is to prepare excellent human resources in the Health Sciences with innovative academic offerings across the curriculum who can respond properly and rapidly to the needs of local and global communities. With the current gaps in health care services, Puerto Rico needs well-trained advanced practice nurses and clinical nurse leaders with increased knowledge and skills to provide primary care to those lacking high quality accessible health care; therefore **students will be prepared to pass the FNP ANCC/AANP National Board Certifications**. The students in this FNP program will be encouraged to maintain a holistic perspective in the health care they provide with a multidisciplinary and collaborative focus throughout the individuals life span and increase access to health promotion, health prevention and primary care services, yet furthermore decrease morbidity and mortality in medically underserved low-income populations of Puerto Rico and globally.

F. Definition of FAMILY NURSE PRACTITIONER

Family Nurse Practitioners provide health care services to individuals, families, groups of clients and communities, with an emphasis on health promotion, disease prevention and diagnosis and management of common and acute illnesses/injury and stable chronic diseases. Within their scope of practice they may order, conduct and interpret diagnostic and laboratory tests and prescribe pharmacologic and non-pharmacologic treatments. Educating and counseling individuals and their families regarding healthy lifestyle behaviors are also within

their scope of practice. The students in the **Family Nurse Practitioner Academic Program** are encouraged to maintain a holistic perspective in the health care they provide with a multidisciplinary and collaborative focus throughout the clients life span.

The **Specialty in Family Nurse Practitioner** in the academic program of **Master of Science in Nursing** is embedded in the empowerment theory. Zerwekh (1992) describes empowerment as a helping process that enables a person to take charge of his/her life and make choices and believe that the future may be influenced. Empowerment is fostered through mutual participation where the patient and provider have equal power. According to Drevdahl (1995), empowerment is both a process and an outcome. Participation in community activities creates change through critical thinking and dialogue that can lead to outcomes such as economic ventures, educational opportunities, political action, and access to health care services. Through the dialogue process, the oppressed become self-reliant, self-assertive, self-determinative, and self-sufficient, while the academics must relinquish some of their own power and control.

Family Nurse Practitioners advocate for health promotion and disease prevention. They teach people ways to stay healthy and treat them for acute illnesses for (e.g. colds) and chronic diseases (e.g. diabetes). Family Nurse Practitioners may perform health histories, physical assessment and examinations, order and interpret diagnostic/laboratory studies, diagnose and treat common illnesses and minor injuries, make referrals to specialists, counsel and teach health and nutrition, prescribe/manage medication therapy and provide continued/follow-up and coordinate care for patients at any stage of development throughout the lifespan. Many research findings indicate that Nurse Practitioners provide primary health care that is equivalent to that provided by physicians. Nurse Practitioners have prescriptive privileges in 49 states. **Legislation for independent practice and prescriptive authority is pending in Puerto Rico, except for federal agencies.**

G. DESCRIPTION OF THE PROGRAM

The students in the Master of Sciences in Nursing with Specialty in Family Nurse Practitioner and the Graduate Certificate with Specialty in Family Nurse Practitioner will be encouraged to maintain a holistic perspective in the health care they provide with a multidisciplinary and collaborative focus throughout the life span of the patient.

H. TITLE OF PROGRAM

Master of Science in Nursing with Specialty in Family Nurse Practitioner and a Graduate Certificate with Specialty in Family Nurse Practitioner Academic Programs.

I. DURATION OF PROGRAM

The Master of Science in Nursing with a Specialty in Family Nurse Practitioner consists of 51 credits including a research project. The Graduate Certificate with a Specialty in of Family Nurse Practitioner consists of 31 credits. Students in both tracks are required to complete 690 hours of clinical experience. Graduates are encouraged to sit for the National Certification Exam of the American Nurses Credentialing Center. **Also the student must take the APN**

courses (Advanced Physical Assessment, Advanced Pathophysiology and Advanced Pharmacology if not previously taken)

J. FNP Program Schedule

The FNP Program didactic courses are given during the evening hours and clinical hours are completed in the daytime in family practice ambulatory primary care settings.

K. FNP Program Philosophy

The graduate program is oriented towards a greater depth and breadth of knowledge and a greater degree of complexity of skills and interventions in primary care. Currently, the American Nurse Association identifies the following four advanced practiced nursing roles: nurse anesthetist (CRNA), midwifery (CNM), clinical nurse specialist (CNS), and nurse practitioner (NP). As such, the School of Health Sciences selected the role of nurse practitioner, as the first graduate nursing advanced practice offering in P.R.

The Master of Science in Nursing degree program prepares advanced practice nurses to contribute in specialized areas with the first specialty being Family Nurse Practitioner. Specialty in Family Nurse Practitioner in the academic program of Master of Science in Nursing is the first nurse practitioner program in Puerto Rico. For over 30 years nurse practitioners have demonstrated to be an asset to the increased demand for primary health care services. Locally and globally there are increasing opportunities for nurse practitioners to provide primary care to underserved communities. Family Nurse Practitioners provide health care services to individuals, families, groups of clients and communities, with an emphasis on health promotion, disease prevention and diagnosis and management of common and acute illnesses/injury and stable chronic diseases. Within their scope of practice they may order, conduct and interpret diagnostic and laboratory tests and prescribe pharmacologic and non-pharmacologic treatments. Educating and counseling individuals and their families regarding healthy lifestyle behaviors are also within their scope of practice.

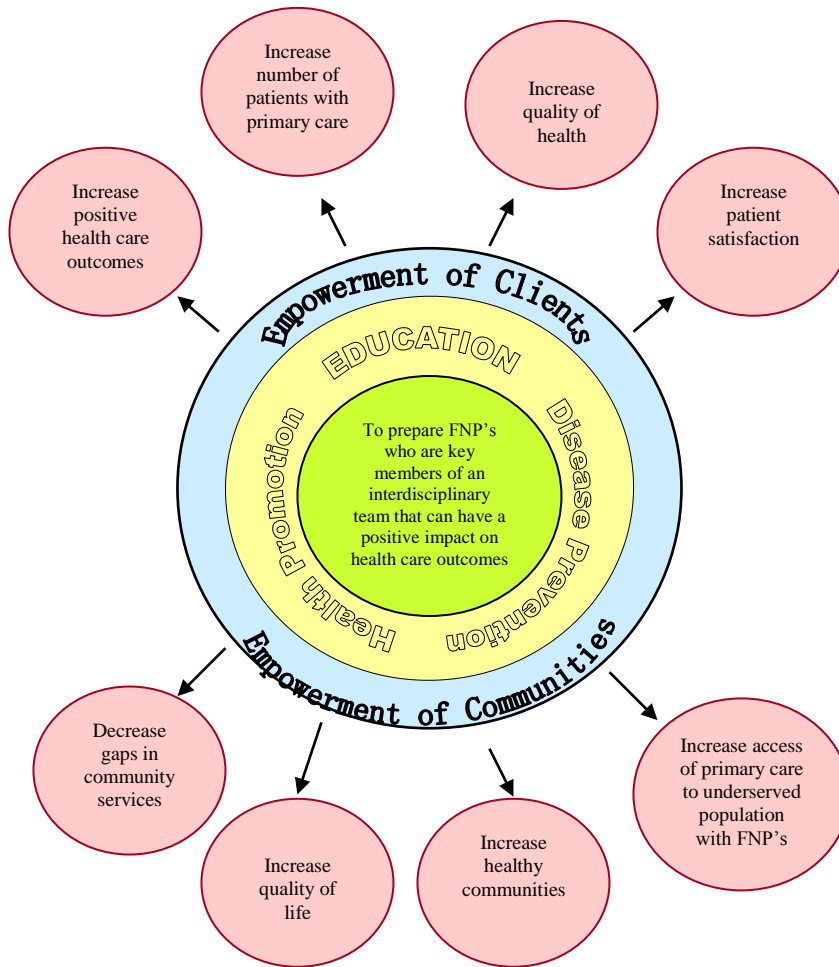
The students in the **Family Nurse Practitioner Academic Program** are encouraged to maintain a holistic perspective in the health care they provide with a multidisciplinary and collaborative focus throughout the individuals life span of the patient.

In addition to the Dimensions Model of Community Health Nursing the **Specialty in Family Nurse Practitioner** in the academic program of **Master of Science in Nursing** is embedded in the empowerment theory. Zerwekh (1992) describes empowerment as a helping process that enables a person to take charge of his/her life and make choices and believe that the future may be influenced. Empowerment is fostered through mutual participation where the patient and provider have equal power. According to Drevdahl (1995), empowerment is both a process and an outcome. Participation in community activities creates change through critical thinking and dialogue that can lead to outcomes such as economic ventures, educational opportunities, political action, and access to health care services. Through the dialogue process, the oppressed become self-reliant, self-assertive, self-determinative, and self-sufficient, while the academics must relinquish some of their own power and control.

The conceptual model (*See Figure 2*) is represented by three concentric circles with four arrows on the superior side of the outer circle pointing upwards and three arrows from the inferior side of the outer circle pointing downwards. The circle at the core of the model represents increased access to primary health care through the utilization of Family Nurse Practitioners (FNP's). The intermediate circle symbolizes the interventions of health promotion and health prevention through education provided to clients by FNP's. The outer circle depicts the empowerment of clients superiorly and the empowerment of communities inferiorly. From this outer circle, emerge the arrows that point the outcomes of the interaction of the FNP with individuals and communities. Consequently, the four superior external circles reflect increased client satisfaction, increased positive healthcare outcomes, increased quality of life and increased number of clients receiving primary care through the empowerment of clients with the practice of Family Nurse Practitioners.

Additionally, the three inferior external circles illustrate the increase of quality of life, increase of healthy communities and decrease of gaps in community services with the empowerment of communities through the utilization of Family Nurse Practitioners. The conceptual framework for the Master of Science in Nursing Program with Specialty in Family Nurse Practitioner is consistent with the goals of the undergraduate nursing program and the School of Health Sciences. The establishment of a FNP program will not only increase the access to health promotion, health prevention and primary care services, yet furthermore will decrease morbidity and mortality in medically underserved low-income populations of Puerto Rico and globally.

Figure 1: Adaptation of Zerwekh’s Empowerment Model



**L. FNP CURRICULUM
CORE COURSES**

There are six core courses that all graduate students are required to take: Theoretical Foundations of Advanced Practice Nursing (NURS 500), Public Health Policies, Ethics and Systems (NURS 501), Nursing Science and the Research Process (NURS 502), Nursing Research Project: From Proposal to Publication (NURS 503), Health Promotion and Disease Prevention: Transcultural Considerations (NURS 505), and Statistics Applied to Clinical Research (HESC 500). Together, the core courses account for 17 credits in the MSN curriculum.

NURS 500 Theoretical Foundations of Advanced Practice Nursing (3 credits).

Discussion and analysis of a wide range of theories from nursing and other sciences. Scientific knowledge of care is presented as the central concept and essence of nursing. Emphasis is given to clinical care and research focused on a comprehensive and holistic approach. The practice of nursing is viewed as directly related to the development and revision of nursing theory where advanced practice nurses can make important contributions.

NURS 501 Public Health Policies, Ethics and Systems (3 credits).

Explores the nature of the Puerto Rican health care system and the social, economic, cultural and political forces that impact the delivery of primary health care and how they influence nursing. Discuss and analyze the professional aspects of the advanced nurse practitioner including how to implement the role, modeling, job descriptions and others. Legal aspects of the advanced practice are discussed, analyzed and applied in terms of the local, state and national level. Public policies and legislation are discussed focusing at the local, national and global levels. The student examines health care policy development and analyzes the effects of policy on the health status of Puerto Rican communities. Provides an opportunity for students to design innovative strategies that may influence the direction of public policy to improve the health quality of health care locally and globally and advance the profession of nursing. Discussion and analysis of current bioethics issues in the care systems in a human society. Analyze various factors influencing the human being essential moral status and the ethics of the economics systems determine decisions. Different dilemmas are selected and analyze to justify the most appropriate decisions and actions to solve them in an ethical manner.

NURS 502 Nursing Science and the Research Process (3 credits).

Discussion of professional nursing practice that is based on evidence to achieve optimal outcomes. Pragmatic considerations of scientific inquiry in the use and conduct of research in practice. The scientific method is presented as it relates to nursing research. Experimental and non-experimental methods of conducting clinical research are examined, with ethical implications. Emphasis is given to the writing of a research proposal as the plan for a scientific project. Successful grantsmanship is presented as an art that requires sound planning of the project development of a well written proposal, and selection of an appropriate funding source.

NURS 503 Nursing Research Project: From Proposal to Publication (3 credits).

The research proposal for this study must have been approved in the previous course (NURS 502). The implementation phase of a clinical nursing research project focused on evidenced-based. This phase is presented as requiring a set of thoughtful, careful, organized and sequential activities to conduct a research project which improves the quality of care. Ethical conduct of research with human subjects, animal subjects and research staff is discussed. In this course the student demonstrates the implementation of a study that has received institutional approval and contributes to the advancement of nursing practice. Emphasis is given on preparation of a scientific paper about the research and submission for publication as an essential step of the research process in order to contribute to the development of a foundation for practice, to provide visionary leadership, and to achieve personal satisfaction.

NURS 505 Health Promotion and Disease Prevention: Transcultural Considerations (2 credits).

Discussion of health priorities according to Healthy People 2020. Analysis of human caring as an essential dimension of advanced practice nursing work, especially dealing with life crisis, health maintenance problems, and change in health practices. Discussion of demands made by changing life-styles and disease patterns, new and complex technologies, shifting

demographics, global economies, dramatic health system changes and sociobiological and environmental threats to health and safety. Development of culturally competent holistic plans of care that address the health promotion and disease prevention needs of client populations.

HESC 500 Statistics Applied to Clinical Research (3 credits)

The student will have the opportunity to study and apply statistical methods useful in quantitative and qualitative analysis of clinical research. Review of descriptive and inferential statistics with simple invariable procedures. Statistical analyses of multivariable and complex hypotheses testing procedures are also discussed. The material is presented to facilitate students' application of the concepts learned in research courses and focused on research utilization.

Advanced Practice Nursing Core Courses

There are three advanced practice nursing core courses that all graduate students are required to take: Advanced History Taking and Physical Assessment (NURS 504), Advanced Pathophysiology (NURS 506), and Advanced Pharmacology (NURS 507). Together, the advanced practice nursing core courses account for 9 credits in the MSN curriculum.

NURS 504 Advanced History Taking and Physical Assessment (3 credits).

Discussion, performance and interpretation of the theoretical knowledge and development of psychomotor skills for advanced health assessments and techniques with clients of all ages and cultural backgrounds. Develop a client database and a differential diagnosis of common client complaints encountered in primary health care practice settings. Demonstrate the ability to obtain and record a comprehensive adult, elderly, adolescent and well-client database (health history and physical exam).

NURS 506 Advanced Pathophysiology (3 credits),

A two-part course analyzing the complex interrelationships and interdependence of pathophysiological concepts that produce alterations in the human functioning across the life span. This serves as a primary component of the foundation for clinical assessment, decision making and management for advanced nursing practice. This course is given in two semesters. Interpretation of the natural history and clinical manifestations for specific illness in terms of their etiology and pathogenesis. Description of the relationship between pathologic changes in body defense and the illness experience. Examine the features of pathophysiologic processes involved in the body's reactions to injury and infection, the immune response, circulatory disturbances and abnormalities of cellular growth. Describe the relationship between pathophysiologic process and alterations in body fluids. Examine Pathophysiologic process involved in altered endocrine, exocrine and neuromuscular function.

NURS 507 Advanced Pharmacology (3 credits).

Analyze the essential pharmacotherapeutics for advanced nursing practice. Expand the study of the actions and effects of drugs on human systems across the life span. Analyze of the scope of legal professional nursing responsibilities related to pharmacology in an expanded

role. Describe and identify of the actions, effects, uses and potential interaction of the major categories of drugs. Explain the pharmacologic process of absorption, distribution, metabolism, excretion and the factors that influence the pharmacokinetics of drugs. Analyze the physiologic effects of the drugs in the individual across the life span. Analyze of the factors, which influence the patient response to therapeutic agents, adverse drug reactions and appropriate interventions. Describe controversies related to the biodisponibility and bioequivalents of the drugs are discussed.

Specialty Courses

There are six specialty courses that all FNP students are required to take: Diagnostic and Differential Diagnosis (NURS 508), Pharmacology for FNP's (NURS 509), Primary Care I (NURS 510), Primary Care II (NURS 511), Primary Care III (NURS 512), and Residency (NURS 513). Together, the specialty courses account for 22 credits in the MSN curriculum.

NURS 508 – Diagnostics and Differential Diagnosis

Presentation of the critical thinking process necessary to form differential diagnoses. These differential diagnoses are established after analyzing the findings from the history and physical assessment and results of laboratory findings (diagnostic findings). This course emphasizes the importance of ordering the correct diagnosis. Discussion and practice of proper specimen collection, handling of specimens, analysis of microscope slides and radiologic examinations.

NURS 509 Pharmacology For FNP's (3 credits).

Provide the practical exposure to the general principles of providing and monitoring drug therapy for FNP's. Identify a disease, review the drugs used to treat the disease, selected treatments, have special patient considerations and learn how to adjust therapy. Finally, learned how to provide a primary, second and third line therapy when the first line fails. Discuss the prescription, monitoring and evaluation of pharmacologic agents utilized to treat common disease states. Describe the teaching needed by individuals and families to properly adhere to prescribed pharmacology therapy. Identify the roles and responsibilities of the FNP in prescribing pharmacologic agents, monitoring and evaluating patient responses. Identify the collaborative role of the FNP with the physician when consulting in providing, monitoring and evaluating the pharmacologic agents.

NURS 510 Primary Care I (4 credits).

This course is the first of a three part series focusing on established primary care evidence based guidelines. Provides advanced practice knowledge of standard protocols through discussion in conference sessions and clinical experience. Emphasizes wellness, illness prevention, treatment of chronic and acute diseases throughout the life span. Builds upon the advanced practice core courses of advanced pathophysiology, advanced pharmacology, advanced history taking, and physical assessment. Integrates theories of collaborative practice, cultural competencies, ethical and legal issues. Covers: Health Maintenance Issues, Skin Disorders, and Infection diseases, general symptoms, behavioral problems, mental health and

HEENT. The clinical portion of the course will consist of 19 hours per week for the duration of this 8 week course making a total of 150 hours.

NURS 511 Primary Care II (4 credits).

This course is the second of a three part series focusing on established primary care evidence based guidelines. Provides advanced practice knowledge of standard protocols through discussion in conference sessions and clinical experience. Emphasizes wellness, illness prevention, treatment of chronic and acute diseases throughout the life span. Builds upon the advanced practice core courses of advanced pathophysiology, advanced pharmacology, advanced history taking, and physical assessment. Covers: Pulmonary and Cardiovascular Disorders, Gastrointestinal Diseases, Metabolic and Endocrine Disorders. The clinical portion of the course will consist of 19 hours per week for the duration of this 8 week course making a total of 150 hours.

NURS 512 Primary Care III (4 credits).

This is the third course of a three part series focusing on established primary care patient care evidence based guidelines. Provides advanced practice knowledge of standard protocols through discussion in conference sessions and clinical experience. Emphasizes wellness, illness prevention, treatment of chronic and acute diseases throughout the life span. Builds upon the advanced practice core courses of advanced pathophysiology, advanced pharmacology, advanced history taking, and physical assessment. Covers: Genitourinary Disorders, Prenatal Care, Post partum and Family Planning, Women's Health Issues, Sexually Transmitted Diseases, Hematologic Disorders, Musculoskeletal Disorders and Ambulatory Emergencies. The clinical portion of the course will consist of 19 hours per week for the duration of this 8 week course making a total of 150 hours.

NURS 513 Residency (4 credits).

Culminating clinical experience consisting of 240 hours of clinical practice in an ambulatory setting providing comprehensive primary care services to underserved communities. Students will be paired with qualified and credentialed nurse practitioners or physicians who will be oriented and trained and certified to serve as preceptors. Provides a depth of practice during 8-hour clinical days. Students develop and refine FNP competencies through clinical hours/experience. Weekly seminar conferences provide a forum for clinical case study discussions, case presentations and preparation for the mock FNP certification test, which is required to be taken and passed in order to approve the course.

M. Graduate Profile of the Specialty of Family Nurse Practitioner:

Nurse Practitioner students are expected to be professionals who perform the following graduate profile during the clinical experiences.

1. Provides and manages primary care to clients with acute and chronic illnesses according to established national protocols and guidelines.
2. Furnishes primary health care services in a variety of settings with culturally diverse and high-risk populations.

3. Analyzes and interprets history, presenting symptoms, physical findings and diagnostic information to develop appropriate differential.
4. Collaborates as autonomous yet interdependent members of multidisciplinary teams in order to provide comprehensive health services.
5. Participates in clinical research such as program evaluation studies, which improve the quality of primary health care services and the advancement of nursing practice.
6. Applies bio-ethical concepts while managing and researching primary health care populations.
7. Demonstrates leadership by actively participating in legislative, political and socioeconomic issues, which influence health care services and the advancement of nursing.
8. Utilizes advanced knowledge and skills in the delivery of health care promotion, maintenance and illness prevention across the individual's life span, families and communities.
9. Responsible for ones continuing education and professional organization active memberships through subscriptions of journals, attendance of conferences and knowledge of communication technologies.
10. Employs appropriate nursing diagnostic and therapeutic interventions and regimens with attention to safety, cost, invasiveness, simplicity, acceptability, adherence and efficacy.
11. Applies principles of epidemiology and demography in clinical practice by recognizing populations at risk, patterns of disease, and effectiveness of prevention and intervention.
12. Uses community/public health assessment information in evaluating client needs, initiating referrals, coordinating care, and program planning.
13. Administrates medications based on efficacy, safety and cost as legally authorized and teach concerning drug regimens, drug side effects, and interactions.
14. Evaluates the use of complementary/alternative therapies used by clients for safety and potential interactions.
15. Evaluates results of interventions using accepted outcome criteria, revises the plan accordingly and consults/refers when needed.
16. Schedules follow-up visits to appropriately monitor clients and evaluate health/illness care.
17. Applies principles of self-efficacy and empowerment in promoting behavior change.
18. Creates a climate of mutual trust and establishes partnerships with clients.
19. Preserves the client's control over decision making, assesses the client's commitment to the jointly determined, mutually acceptable plan of care, and fosters client's personal responsibility for health.
20. Maintains confidentiality while communicating data, plans, and results in a manner that preserves the dignity and privacy of the client and provides a legal record of care.

21. Shows respect for the inherent dignity of every human being, whatever their age, gender, religion, socioeconomic class, sexual orientation, and ethnic or cultural group.
22. Accepts the rights of individuals to choose their care provider, participate in care and refuse care.
23. Recognizes cultural issues and interacts with clients from other cultures in culturally sensitive ways.
24. Respects the inherent worth and dignity of each person and the right to express spiritual beliefs as part of his/her humanity.

Clinical preceptors and clinical experience are obtained in rural and urban underserved communities of Puerto Rico and in the Continental USA. The clinical site table illustrates the name, location and type of care provided at the sites. The executive directors and medical directors of the clinical sites are supportive to the advancement of nursing in Puerto Rico and underserved populations. Students will be matched with family practice physicians or nurse practitioners at the sites. Preceptors should hold a valid license to practice in Puerto Rico or in their state for Branch Campuses and be certified in their area of specialty. They should also demonstrate expertise, cultural competence and commitment to improving the health care status of underserved communities.

II. GENERAL POLICIES

A. STUDENT RESPONSIBILITIES

Students are responsible for meeting with the FNP program Director and Faculty Advisor to plan their program of study. Students should be familiar with FNP Program policies and to review them periodically in order to keep abreast of evolving changes. Additional policies, procedures and regulations pertinent to the FNP Program are found in this document. All provisions of the FNP Student Handbook are in effect for the year in which the graduate student enters the program. **The Graduate Nursing Program reserves the right to change the regulations and policies in the handbook at any time and to add, modify, or withdraw courses at any time. Program changes may be made during a student's program of study and students are responsible for following the most recent revisions. Student responsibilities include the following:**

- 1. Students are responsible for integrating personal learning objectives with course objectives.**
- 2. Contact approved clinical preceptor and determine the schedule for the clinical experience, including days of week and hours per day.**
- 3. Submit clinical calendar to coordinator.**
- 4. Develop and share clinical learning needs /objectives with clinical preceptor and discuss strategies to meet them.**
- 5. Maintain professional behavior and attire at all times.**
- 6. Complete the required course work and submit on time.**

7. **Collect and enter clinical data in log within 72 hrs. This information shall be emailed to the professor.**
8. **Demonstrate increasing competencies and progressive independence in clinical knowledge and skills.**
9. **Function under the role of a nurse practitioner under supervision of the clinical preceptor incorporating evidence based practice guidelines and clinical policies.**
10. **Attend all scheduled clinical experiences on time and be prepared, completing all required clinical hours for each clinical course.**
11. **The students' primary responsibility is for acquisition of advanced clinical knowledge and skills.**
12. **Students must evaluate the clinical site and clinical preceptor.**

Certain behaviors are essential for safe and ethical nursing practice. Students are referred to the American Nurses Association (ANA) Code for Nurses (ANA 1985) and the Nursing Practice Act of the state(s) in which they are licensed. Graduate nursing students should sign all clinical documentation as NPS after their name. Example, Yolanda Viera, RN, FNPS. Violations of such practice are defined below so that each student may be aware of the seriousness of such actions. Unsafe or unethical nursing practice may be evidenced by one or more of the following behaviors:

- ❖ Performing activities for which the student is not prepared or which are beyond the capabilities of the student
- ❖ Performing activities which do not fall within the legal realm of professional nursing practice
- ❖ Recording or reporting inaccurate data regarding client assessments, care plans, nursing interventions and/or client evaluations
- ❖ Failing to recognize and/or report and record own errors (incidents) performed in relation to client care
- ❖ Having physical, mental, and/or cognitive limitations which endanger or impair the welfare of the client and/or others
- ❖ Disclosing confidential or private information inappropriately
- ❖ Behaving in a disrespectful manner toward clients and/or other health team members

B. STUDENT EXPECTATIONS:

The following student expectations apply to all nursing programs and courses:

1. Completing a course's required prerequisites prior to enrolling in any course.
2. Adhering to standards of nursing practice appropriate to the student's level, and for independent learning activities.
3. Purchasing and maintaining current personal professional nursing liability and personal health and car insurance.
4. Maintaining current CPR certification.

5. Completing and maintaining a current health history and immunization up to date including annual retesting for tuberculosis.
6. Caring for, maintaining, and replacing materials and equipment used during clinical practice.
7. Completing and turning assignments in when due or making alternate arrangements with the instructor **PRIOR** to the due date. Excused late work will not be penalized. Unexcused will be.
8. Following the current edition of the ***Publication Manual of the American Psychological Association*** guidelines in preparing written course work.
9. Proof of CPR certification (professional level) on file in the Graduate Nursing Program at the School of Health Sciences.
10. Documenting a current health history, proof of immunizations, including Hepatitis B or proof of series immunity; annual PPD or Chest X-ray.

C. CLINICAL GUIDELINES

1. Only a one to one FNP Student per Preceptor Ratio is allowed.
2. A preceptor must have authorization by the appropriate state licensing entity to practice in his/her *population-focused and/or specialty area*.
3. A preceptor must have educational preparation appropriate to his/her area(s) of supervisory responsibility and at least two years of clinical experience.
4. Preceptors are oriented to program requirements and expectations for oversight and evaluation of NP students.
5. Preceptor CV's, credentials and licenses must be on file in the program director's office.
6. Preceptors must read the orientation handbook and sign the agreement prior to beginning a clinical rotation with a UT NP student.
7. The clinical log database will be utilized for student evaluation, evidence of types of clients and diagnoses, clinical hours, site evaluation evidence of types of clients and variety of diagnoses, clinical hours, site evaluation, preceptor evaluation and program evaluation will be conducted by NP faculty.
8. Students will be evaluated at midterm and final while officially registered in clinical courses at clinical sites by preceptors and clinical faculty. All clinical evaluation forms are located at the back of this handbook. All preceptors and clinical sites will be evaluated at midterm and final. **Clinical logs and hours completed must be registered and turned in weekly.**

D. RULES AND REGULATIONS

a. Confidentiality and Privacy of Client Information

The student is expected to adhere to the ANA Code for Nurses. Confidentiality is the protection of a client's privacy through careful use of oral and written communications. The client's right to privacy is safeguarded by judicious protection of confidential information. An individual can withhold any personal information desired. Nursing students must be especially careful regarding the invasion of the client's privacy. The graduate student is particularly concerned with the process of informed consent in the implementation of research during completion of the research option. The actual procedure used in obtaining informed consent and the basis for the Research Project Committee's determination that the procedures followed by the student are adequate and appropriate shall be fully documented. A copy of SOAP notes are to be submitted with clinical logs on a timely basis weekly.

b. Attendance at 100% of clinical experiences is expected of every student.

Students are expected to be punctual in all clinical sessions. If students are going to be late, the student is expected to call the clinical preceptor or designated contact person at the clinical site as soon as possible. When the student cannot attend the clinical session, the student must:

1. Call the clinical preceptor or designated contact person as soon as possible.
2. Call the clinical faculty as soon as possible.

The preceptor must see all patients seen by the student. If the preceptor is absent from work, students should not assume responsibility for patient care unless assigned to another preceptor. Failure to adhere to attendance policies with ongoing absenteeism or tardiness will result in an "Unsatisfactory" evaluation and could be grounds of failing this course.

E. ACADEMIC HONESTY

In their academic and independent research activities, students are expected to maintain high standards of honesty and integrity. Passing off as one's own the work of another (plagiarism) is totally unacceptable. A student is expected to maintain the professional standards of the nursing discipline.

Definitions of Unacceptable Behavior:

The following are the Universidad del Turabo School of Health Sciences, Department of Nursing definitions of unacceptable behavior.

- a. **Plagiarism:** Taking credit for someone else's ideas, words or statements or other works as one's own without proper acknowledgment. Examples of plagiarism include:
 - ❑ **Word-for-Word Plagiarism** – copying exactly from someone else's text.
 - ❑ **Section-by-Section Plagiarism** – lifting phrases from someone else's text.
 - ❑ **Select-Term Plagiarism** – lifting a special term from a text not one's own.
 - ❑ **Paraphrasing** – using someone else's ideas as if they were one's own thoughts.
 - ❑ **Borrowing facts, statistics and other illustrative material** – unless the information is common knowledge.

- b. **Cheating:** Committing fraud on a record, report, paper, computer assignment, examination or other course requirement. Examples of cheating include:
- ❑ **Using unauthorized notes,** study aids or information from another student or student's paper on an examination or any other course requirement, including giving or receiving assistance from another student without the instructor's permission.
 - ❑ **Altering a graded work** after it has been returned and then submitting the work for regrading.
 - ❑ **Allowing another person to do one's work** and to submit the work under one's own name.
 - ❑ **Submitting two copies of the same or nearly similar papers** to two professors without prior approval,
 - ❑ **Fabricating data in support of laboratory or fieldwork.** Dishonesty in reporting results, ranging from sheer fabrication of data, improper adjustment of results, and gross negligence in collecting or analyzing data, to selective reporting or omission of conflicting data for deceptive purposes.
- c. **Aiding and abetting dishonesty:** Providing material or information to another person with knowledge that the material or information will be used improperly.
- d. **Falsification of an academic records and official documents:** Without proper authorization. Altering documents affecting academic or University record; forging signatures of authorization; or falsifying information on an official academic document, election form, grade report, letter of permission, petition, clinical logs, clinical hour tally sheet, clinical lifespan encounter, clinical record or any other official University document. Misrepresentation attending clinical sites without official authorization and **fraudulently accessing patient records.**
- e. **Misuse of computers:** Violating the University's "*Condition of Use*" statement which defines proper and ethical use of computers.
- f. **Misuse of available facilities:** Intentionally abusing available facilities. Examples of available facilities include, but are not limited to, laboratories, classrooms and libraries.
- g. **Nurse-patient relationships:** The students of the Universidad del Turabo School of Health Sciences, Department of Nursing are expected to exhibit behavior appropriate to the profession of nursing. They must assume personal responsibility for being in physical and mental condition to give safe nursing care and for the knowledge and skills necessary to give this care. Unacceptable behavior includes, but is not limited to, the following examples:
- ❖ **Providing nursing care in an unsafe or harmful manner.**
 - a. Carrying out a procedure without competence or without the guidance of a qualified person.
 - b. Willfully or intentionally doing physical and/or mental harm to a client.
 - c. Exhibiting careless or negligent behavior in connection with the care of a client.

- d. Finding oneself unable to assume the assigned and necessary care of a client and failing to find alternative measures for the delivery of that care.

❖ **Falsifying patient's records or fabricating patient experience.**

- a. Failing to report omission of or error in treatments or medications.
- b. Fabricating patient experience or clinical hours

❖ **Disrespecting the privacy of a client: violating the confidentiality of the nurse/client relationship.**

- a. Disclosing the full name or position of a client in a manner that violates the individual's privacy.
- b. Discussing confidential information in inappropriate areas, such as elevators, or with inappropriate persons, such as media representatives.
- c. Discussing confidential information about a patient with third parties who do not have a clear and legitimate need to know.

- h. **Drugs and alcohol:** Using, possessing, selling, or distributing illicit drugs; illegally using, selling, possessing or distributing any drugs or alcohol; or using prescribed and/or illicit substance or alcohol in such a manner as to impair one's judgment or performance as a nursing student.

- i. Non-compliance with the NP program and SHS policies.
- ii. Defamatory statements about the clinic, fellow students, preceptors, patients or faculty.
- iii. Unexcused absence or lateness: Habitual or frequent lateness or absence from clinical, classes, conferences or extracurricular activities.
- iv. Untidiness: Both personal untidiness with respect to personal grooming and hygiene, or untidiness in work areas, care of equipment, keeping of records, etc.
- v. Smoking in an unauthorized area or at an unauthorized time.

Insubordination: Students are expected to comply with directions given by a faculty/preceptor, without argument or dissent. Any questions concerning the directions may be presented to the Program Director:

- Unsatisfactory performance of assignments.
- Contributing or causing unsafe conditions.
- Practical joking and laughing or playing on duty.
- Unauthorized absence from assigned work.
 - Extending lunches or break-time without permission.
 - Failure to sign-in and out when required.
 - The use of profane or abusive language.
 - Any conduct detrimental to patient safety, fellow students, faculty, employees or clinical settings.
 - Divulging any confidential information.
 - Refusal to carry out assignments.
 - Soliciting tips, loans, or gifts from patients or other person.

- Failure to report an injury, accident, incident or unsafe conditions occurring or existing on clinical premises.

Acts that are cause for dismissal

- **Failure to fulfill responsibilities to an extent that might or does cause injury to a patient, visitors, other students or hospital personnel.**
- **Deliberate violation of a posted health, safety, and fire prevention or security rule.**
- **Falsification of record, i.e., health forms, or application forms.**
- **Habitual non-compliance with departmental policies.**
- **Unauthorized clinical performance without the knowledge of faculty or program director that have been logged as official when not authorized by Faculty Director and clinical faculty instructor.**
- **Deliberate false, fraudulent or malicious statements or action involving relations with a patient, fellow students, the clinical settings, employees, or the public or other disloyal conduct.**
- **Theft: Removal of or unauthorized possession of property belonging to employee, students, visitors. This includes the intent to remove or the actual removal of university and property from clinical settings grounds.**
- **Illegal use of or possession of drugs or the dispensing of drugs without a prescription.**
- **Possession of use of intoxicating substances or narcotic on clinical settings of school premises of reporting to class under the influence of a intoxicating substance or drug as evidence by:**
 - **Inability to perform assignments.**
 - **Undesirable influence towards patient, visitors, staff and employees.**

F. GENERAL DRESS CODE POLICIES

Jewelry: Rings-engagement and wedding bands only. (Rings can cause injury to clients, also harbor organisms.) Small earrings, whether posts or loop earrings. Only one earring per ear is allowed. No other body piercing jewelry may be worn in the clinical area.

Fragrances (perfume, cologne, aftershave): Use only sparingly. Strong odors can be objectionable to clients who are ill. The odor of a smoker is also apparent and offensive to some clients and others.

Hair: Long hair must be pulled back from one's face and should not be allowed to fall forward in a work area. Use discretion in hair accessories to maintain a professional appearance, safety, and hygiene.

Fingernails: Short! Clear or very light color polish is permitted.

Tattoos: Any tattoos must be covered while in the clinical area.

Gum Chewing: NO gum chewing is allowed in the clinical area.

A professional appearance should be maintained at all times in the clinical setting. Students going into a clinical area for any reason other than direct patient care should wear a lab coat and Universidad del Turabo name pin. Blue jeans and shorts are not acceptable. Uniforms should not be worn in any places that are not related to the clinical experiences of students (e.g. restaurants, bars, supermarkets, etc.) Professional attire is required and students are expected to be well-groomed during classes and clinical practice. Unacceptable attire is interpreted by patients/ families as unprofessional and inappropriate.

Females: White lab coats, slacks, and appropriate length skirts. Mini-skirts and low cut blouses are not allowed in clinical area. Shoes should be comfortable with an enclosed heel and toe. Heels should be no higher than 2 ½ inches. Lab coats, when worn, should be white and long sleeved.

Males: White lab coats, shirt, tie, slacks, and closed toe shoes. Jeans, shorts and sneakers are not allowed in clinical area. Lab coats, when worn, should be white and long sleeved.

Identification: The following identification must be worn and clearly visible in every clinical setting:

- A. UT Student ID Badge
- B. An institutional ID badge should be worn in any health care agency requires and provides one.

Failure to comply with the dress code will result in potential dismissal from the clinical setting. If there are repeated clinical violations, the student will receive an academic warning for unprofessional behavior and may fail the clinical portion of the course.

G. CELLULAR PHONES OR TAPE RECORDERS

The use of cell phones is not allowed during class. Students conversing by cell phone or texting will be asked to exit the classroom. Students are not allowed to tape class sessions or meetings without previous authorization of the instructor.

H. DISCIPLINARY ACTION

Disciplinary action may be imposed upon a student in violation of any of the rules and regulations in the General Policy section of this FNP Handbook.

The FNP Program expects every student to observe the basic rules of good behavior in all academic settings including clinical rotations.

I. STUDENT REPRESENTATION ON DEPARTMENTAL COMMITTEE

Students in the MSN Program are eligible and encouraged to serve as representatives on the following committees: Graduate Program, CCNE committee, and Nursing Student Association.

J. CONFIDENTIALITY OF RECORDS

In accordance with federal statutes and regulations, student records are confidential. Students may have access to their personal student record upon request. Disclosure of any information contained in student records to anyone other than the student will be made only with written permission of the student. A form for release of information is available from the Student Affairs Director office.

K. PROFESSIONAL LIABILITY INSURANCE

Liability insurance is provided by the Universidad del Turabo, the insurance policy with Evanston Insurance Company covers all risks of the professional responsibility of physician, faculty and students for error and negligence while performing clinical skills/services.

L. HEALTH REQUIREMENTS:

All graduate nursing students must provide evidence of compliance with health requirements of the Universidad del Turabo, Graduate Nursing Program, and appropriate clinical agencies. The requirements may be met by completion of the health history and immunization records required by the Program. Documentation of immunizations may be from immunization books, medical records, public health records or secondary school records.

The following must be documented:

1. **Diphtheria-Tetanus:** A booster is required every ten years after the original series. A verbal statement of compliance will be accepted.
2. **Measles:** Two live immunizations after 12 months of age. Exempted are persons born before 1957 and those with physician documented proof of having the disease or an adequate titer.
3. **Rubella:** Immunization or physician documented proof of adequate titer.
4. **Polio:** The original series is required. A verbal statement will be accepted for compliance.
5. **Mumps:** Immunization or documented history of the illness.
6. **Chicken Pox:** Documented history of the illness or adequate titer.
7. **Yearly TB testing (PPD):** If the test is positive, a chest x-ray must be done and a nurse practitioner or physician's statement concerning the health status must be submitted with the results of the test. Documentation of current TB test status must be submitted prior to any clinical experience.

M. HEPATITIS B VACCINATION

All students will be required to show evidence of attending a formal presentation concerning the Occupational Safety and Health Administration (OSHA) guidelines regarding Hepatitis B vaccination at the beginning of initial coursework. The presentation may be from a work-related experience or obtained through the Nursing Program. Students will then be required to either make arrangements to receive the vaccines.

N. CONFIDENTIALITY

1. Within the Code of Federal Regulations are statements to protect medical information and the privacy of the individual when there is no overriding need for the public to know.
2. Individuals involved with health care-giving services who know they are infected with a communicable disease are ethically and legally obligated to conduct themselves in accordance with the following protective behaviors:
 - a. Seek medical advice.
 - b. Follow University and/or agency guidelines when involved in direct client care.
 - c. Be knowledgeable about and practice measures to prevent transmission of HIV.

O. INFECTION CONTROL IN CLINICAL SETTINGS

1. Students and faculty will treat contact with tissues, blood and other body fluids (e.g., semen, vaginal/rectal secretions, respiratory secretions, cerebrospinal fluid, synovial fluid, pleural fluid, periorbital fluid, peritoneal fluid, amniotic fluid) from ALL clients as potentially infective.
2. Faculty will be knowledgeable of infection control policies of agencies in which they supervise students and will monitor compliance with these policies by students. Protection for students will include the following Universal Precautions.
 - a. Washing hands before and after contact with clients. Hands should be washed even if gloves are used. If hands or other body areas come into contact with tissues, blood or other body fluids, they should immediately be washed with soap and water.
 - b. Gloves (nonsterile) – to be worn to avoid direct contact with tissues, blood or other body fluids.
 - c. Gowns or Plastic Aprons – recommended if blood or body fluid contact is anticipated.
 - d. Masks and Protective Goggles – should be worn when having contact with clients who are coughing extensively or requiring suctioning, such as tracheal or via endotracheal tubes, wound irrigations, and postmortem examination or whenever splashes, sprays, spatter or droplets of body fluids are likely.
3. Life Threatening Conditions - acute respiratory distress or cardiopulmonary arrest; with oral airway in place, client should be aerated with an ambu-bag or pocket-mask.
4. Care of Equipment/Specimens:
 - a. Needles and Syringes – should be disposable and disposed of in a rigid, puncture-resistant container. Needles should not be recapped, purposely bent, broken or cut. These precautions are to prevent needle sticks.

- b. Blood and Other Specimens – should be obtained and handled in accordance with the procedure established for food and body fluid precautions (Hepatitis B) within the health care facility. Contaminated specimen containers and specimen spills should be disinfected according to the Center for Disease Control guidelines for Hepatitis B/AIDS precautions; sodium hydrochloride (household bleach) and water, dilution 1:10.
- c. Soiled Linens – laundry and no disposable articles contaminated with blood or body fluids should be handled according to the procedure established for blood and body fluid precautions (Hepatitis B/AIDS) within the health care facility.
- d. Dishes/Silverware – for reusable items, no precautions are necessary. Institutional dishwashing is sufficient.
- e. Surgical and Invasive Client Care Equipment – if not disposable, should be sterilized before reuse.
- f. Gloves – when worn should be changed between clients. Health care workers should not reuse gloves.

P. UNPROTECTED EXPOSURE

1. Unprotected exposure is defined as being exposed to blood/body fluids through needle stick, or other percutaneous or per mucosal exposure.
2. If a student or faculty member comes into contact with blood or other body fluids through puncture, cut, splatter, or aerolization she/he will:
 - a. Report the incident to the clinical instructor and/or appropriate employee health representative of the agency.
 - b. Complete the appropriate health care agency forms if required. The institution's blood/body fluids (Hepatitis B/AIDS) policy should be followed.
3. Faculty member should notify the Nursing Graduate Program Coordinator.
4. The faculty member should notify the Student Health Services. The Student Health Services can arrange for follow-up testing at appropriate intervals.
5. When student experiences an unprotected exposure to blood/body fluids while in a clinical practicum agency, he/she should be made aware that the agency policy will mandate that an incident report be filed. While the University will make very effort to maintain confidentiality, the University cannot be held responsible for actions taken by the clinical agency. The supervising faculty will follow the procedure for reporting accidental exposure as outlined above.
6. The Nursing Program **does not** assume responsibility for costs of any resulting health care.
7. The Graduate Nursing Program **strongly recommends** that students carry health insurance.

Q. CPR Certification must be renewed prior to clinical rotations.

III. ACADEMIC POLICIES

Admission

The Universidad del Turabo and the School of Health Sciences Graduate Nursing Program are committed to the principles of nondiscrimination and equal opportunity for all persons. Students are evaluated and admitted to the MSN Program without regard to race, color, religion, gender, age, or national origin. Students may apply at anytime for admission to the Universidad del Turabo, School of Health Sciences. Universidad del Turabo, School of Health Sciences acceptance precedes Graduate Nursing Program acceptance. A University application form and information concerning the University entrance requirements can be obtained by calling the Admission office (787-743-7979 ext. 4453) for an admission packet. Admission to the MSN Program may occur in either the fall or spring semester.

Students must first meet all admission requirements of the Universidad del Turabo, School of Health Sciences.

1. Hold Bachelor's degree in Nursing from an accredited institution of higher education with a GPA of at least of 3.00.
2. Submit an official transcript of credits with the application for admission.
3. Complete an interview process with the Program Director and Faculty.
4. Submit three recommendation letters.
5. Submit an essay in English on a topic selected by the Admissions Committee.
6. Take one of the tests of admission to Graduate Studies offered by the Educational Testing Service, such as the Graduate Studies Admission Test (EXADEP), the Graduate Record Examination (GRE). Test results are valid for five years.
7. Curriculum Vitae or Resume.
8. Updated Professional Nursing license.
9. Updated registration at Colegio de Profesionales de la Enfermería de Puerto Rico (CPEPR).
10. Submit a \$25.00 nonrefundable application fee.

Readmission

1. Must have interrupted his/her studies for a full academic semester or more (summer sessions will not count as interruptions).
2. Must have a cumulative grade point average equivalent to the retention index.
3. Must have acquired a total number of credits equivalent to that required for the corresponding number of years of studies completed.
4. In the case of suspension for reasons of academic index accumulated credits, or for disciplinary reasons, the student must have complied with the period of suspension.
5. All candidates for readmission may be subject to an interview by the Dean of the SHS or his/her representative.
6. Meet the requirements for the requested study program as well as other general admissions requirements.

Standards for Academic Progress

There are three categories of regular students according to their Grade Point Average and number of courses completed: students with excellent achievement, students with satisfactory achievement and students on probation. A grade of 3.0 or above is considered passing.

Students with a satisfactory academic progress are those with a grade point index equal to or higher than the retention index established and satisfy the percentage of credit approved hours established in the Academic Norm.

At the end of each academic year; the Registrar's Office will determine the Grade Point Average (GPA), and the credit hours required per year of studies of each student. This information will be measured against the established retention standards in order to determine the academic status of the student. Academic progress of students admitted as transfer students will be evaluated for retention purposes at the end of their first year; credits and grade point average prior to that year will not be considered.

Probation

Students whose academic achievement is below the established retention index or do not complete the percent of credit approved hours required according to the regulations will be on academic probation.

Suspension of students for academic reasons

Any student whose cumulative GPA is less than established retention index or required credit hours for who do not complete the percentage of credit after a probationary period will be suspended from the University in accordance to the norm.

Graduation

The MSN degree is conferred by Universidad del Turabo following completion of criteria outlined in the current University Bulletin. All academic requirements for the degree must be completed within an eight (8) year period. **This time period includes any transfer courses counted toward the degree.**

Semester Load

Full-time graduate students are those enrolled in 6 credit hours during a regular trimester and summer session. Enrollment in fewer credits than 6 per semester constitutes part-time study. Academic load will not exceed nine (9) credits per term or summer session. An academic load of more than nine (9) credits will require prior approval by the School of Health Sciences Dean.

Absences

Students are expected to be diligent in the pursuit of their studies and present to their classes, exams and clinical hours. Loss of time in any course may require that the student repeat the course. Students have the responsibility of making arrangements satisfactory to the instructor regarding all absences. Such arrangements should be made prior to the absence if possible. Policies of making up work missed as a result of absence are at the discretion of the instructor and faculty advisors, and students should inform their course instructor at the beginning of each semester while remediation is still possible. Course faculty in consultation with the FNP program Director; reserve the right to withdraw a student from a course because of excessive absences that interfere with attainment of course objectives.

Clinical learning experiences represent a commitment and responsibility to clients as well as essential application of knowledge. Satisfactory demonstration of course requirements and clinical competency is necessary for successful completion of the course. Students who do not submit timely clinical logs weekly and are absent to three sessions will be advised to drop the course or fail.

Grades

The Registrar Office distributes final grades after the end of each term. Students are graded according to the following system of letters and percentage values.

- A – 4 grades points per credit hour
- B – 3 grades points per credit hour
- C – 2 grades points per credit hour
- D – 1 grade points per credit hour
- F – 0 grade point credit hour

In special cases the following grading system will be used:

- W Official withdrawal
- WF Discontinue attendance but did not officially withdraw in the Registrar’s Office.
- I Incomplete work
- IP To be awarded only with the Registrar’s permission in courses that span more one term
- P Passing grade – Grades of P are not counted toward quality point average.
- NP Failure
- NR Not reported
- * Repeated course
- WA Administrative withdrawal
- WN Non attendance – enrolled but did not attend classes

Universidad del Turabo is on a 4.0 grade point system. Graduate courses are graded A, B, C, D and F. The following grading scale for the MSN Program is:

90% - 100%	A
80% - 89%	B
70% - 79%	C
69% - 60%	D
59% and below	F

Completion of Degree Requirements

All requirements for the MSN degree must be completed within a **8-year period**. One half of the hours toward the degree must be in courses numbered 500 or above and completed at Universidad del Turabo.

Withdrawals

Withdrawals must be made through the Registrar's Office or a failing grade(s) will be recorded. Deadlines for withdrawal are provided in the Semester Schedule of classes.

Policy: Clinical Practice Hours. A student who has failed or has withdrawn from a Clinical course and has requested to be readmitted to the Program must file a new petition for admission to the Program via the Dean or Associate Dean of the School through the Program Director. Students must comply with all prerequisites that have been adopted. A student who has failed or has withdrawn from a Clinical course for a second time shall not be readmitted to the FNP Program.

Failure to petition for a timely withdrawal may lead to a deficient grade.

Incomplete (I) Grades

Students who fail to take the final examination and have at least two partial grades, will be given an incomplete grade. Students must give the professor valid reasons for the absence from the final exam. It is the responsibility of the students to make the necessary arrangements with the Professor, Nursing Department Director or Dean to complete any final class requirements and/or take the final exam in order to remove the Incomplete thirty (30) days after the next semester begins or in accordance with the Academic Calendar, if the grade if not made up, will be changed automatically to F.

Transfer Credits into the Graduate Program

Students from other accredited institutions must meet the following requirements for admission:

1. Transfer courses must be from an accredited university.
2. Must not have been subjected to any academic or disciplinary sanctions.
3. Must meet the admission requirements of the particular program and specialty to which he/she is applying.
4. Must satisfactory pass an interview with the Dean or his/her representative.
5. Submit an official transcript with admission application. Students who are transferring from a University outside of Puerto Rico must submit a course catalog from the previous institution.
6. Description of the course at the Institution it was taken.

Computer Literacy

The faculty recommends that FNP students develop computer literacy by preparing power point presentations and written materials with the aid of computer technology. Additionally, students are introduced to computerized statistical analyses in the research course and in completion of the research project. Utilization of the Internet is encouraged throughout the curriculum.

Confidentiality and Privacy of Client Information

The student is expected to adhere to the ANA Code for Nurses. Confidentiality is the protection of a client's privacy through careful use of oral and written communications. The

client's right to privacy is safeguarded by judicious protection of confidential information. HIPPA confidentiality laws must be adhered to. Nursing students must be especially careful regarding the invasion of the client's privacy. Graduate students must observe the process of informed consent prior to the implementation of research data collection process. The actual informed consent protocol must be approved by the IRB Committee of the University.

Academic Honesty

In their academic and independent research activities, students are expected to maintain high standards of honesty and integrity. Passing off as one's own the work of another (plagiarism) is totally unacceptable. A student is expected to maintain the professional standards of the nursing discipline.

IV.PRECEPTOR GUIDELINES

Only a One to One FNP Student per Preceptor Ratio is allowed.

- 1. A preceptor must have authorization by the appropriate state licensing entity to practice in his/her *population-focused and/or specialty area*.**
- 2. A preceptor must have educational preparation appropriate to his/her area(s) of supervisory responsibility and at least one year of clinical experience.**
- 3. Preceptors are oriented to program requirements and expectations for oversight and evaluation of NP students.**
- 4. Preceptor CV's, credentials and licenses must be on file in the program director's office.**
- 5. Preceptor must read the orientation handbook and sign the agreement prior to beginning a clinical rotation with a UT NP student.**
- 6. The clinical log database will is utilized for student evaluation, evidence of types of clients and diagnoses, clinical hours, site evaluation evidence of types of clients and variety of diagnoses, clinical hours, site evaluation, preceptor evaluation and program evaluation will be conducted by NP faculty.**
- 7. Students are evaluated at midterm and final while in clinical courses at clinical sites by preceptors and clinical faculty.**
- 8. All clinical evaluation forms are located at the back of this handbook.**
- 9. All preceptors and clinical sites will are evaluated at midterm and final.**



FNP Program

STUDENT CONFIDENTIALITY AGREEMENT

Patient confidentiality at the facilities used by the Universidad del Turabo is considered to be of primary importance. In addition to each facility policy, a federal law called the Health Insurance Portability and Accountability Act (HIPAA) require patient health information to be kept confidential. Additionally, patients and their families have a right to deal with their issues in a private and secure manner, trusting that their privacy will be maintained. In order to protect this right to confidentiality and to comply with federal and state laws, students must agree to hold all information (including, but not limited to, patient names, their medical information, and relevant agency information) gained through their clinical assignments at any facility used by the **UT** in strictest confidence. Confidentiality includes, but is not limited to, not discussing patients or their medical conditions with persons who do not have a need to know and not removing any documents with individually identifiable patient data from the facility.

I understand that I have a legal responsibility to report to my immediate supervisor any adult or child abuse or neglect which I may observe or suspect.

I also understand the terms of this Student Confidentiality Agreement, and I agree to abide by the above confidentiality requirements. I further understand that any breach of patient's confidentiality may result in disciplinary action against me and my removal from the FNP program.

Printed Student Name

Student Signature

Date



FNP Program

CLINICAL LOG DATABASE CONSENT FORM

As part of the clinical learning experiences in coursework required for a Master Science in Nursing (MSN), I understand that I will be maintaining clinical log of each patient encounter. Data entered into the clinical log about the patient protects the privacy of the patient and does not require entry of information that would reveal the identity of any one individual patient. I understand that the clinical log and the data therein will be used as part of the information on which my performance in clinical coursework will be evaluated and on which my course grades will be based.

I understand that the faculty of the UT who wishes to use the data from my clinical log to create a database that contains the clinical log data from all students completing each of the clinical courses required for an MSN or a post-master's certificate FNP program. I understand that this clinical database will be used to evaluate the MSN curriculum and its courses and will be available to School of Nursing approved faculty members conducting research on the clinical activities performed by students while in the program.

I understand that the clinical database entries associated with my clinical learning experiences will be identified using a code known only to the Director of FNP Program. In the analysis and reporting of data from the clinical database, no one student's clinical log data will be identifiable.

I have had the opportunity to ask questions about the development and potential use of the clinical database. My questions have been satisfactorily answered. I know that if I have additional questions, I can contact Dr. Josué Pacheco at **Tel. (787) 743-7979 ext. 4017**

_____ I voluntarily consent to the inclusion of my electronic log data to an Universidad del Turabo clinical database.

_____ I understand that my electronic logs will be used to evaluate my clinical performance, but I do NOT want them to be included in the database for program evaluation and research.

Student Name (Printed)

Student Signature

Date



CLINICAL LOG FNP Program

Student Name: _____ Course: _____ Preceptor: _____ Agency: _____

Visit Date	Age	Gender	Race/Ethnicity	Payment Source	Diagnosis 1	Diagnosis 2	Diagnosis 3	Procedures Performances	Type of Decision-making	Student Participation in Decision-making	Measurable outcomes

Summary: _____ # of Acute Visits/Page _____ # of Adults Patients/Page
 _____ # of Chronic Visits/Page _____ # of Pediatric Patients (<21)/Page
 _____ # of Health Promotion Visits/Page _____ # Total Patient Visits/Page

Cumulative Clinical Hours: _____ Preceptor Signature: _____

Comments: _____



**Universidad del Turabo
School of Health Sciences
Graduate Nursing Program**

Clinical Hour Tally Sheet

Student: _____ **Semester/Year:** _____
Course: PC I ___ **PC II** ___ **PC III** ___ **Residency** ___

DATE	CLINICAL SITE	PRECEPTOR	HOURS	RUNNING	TOTAL
				PRECEPTOR I	PRECEPTOR II



FNP Program

RUBRIC FOR SOAP NOTES

Student: _____

This sheet is to help you understand what we are looking for, and what our margin remarks might be about on your write-ups of patients. Since at all of the write-ups that you hand in are uniform, this represents what MUST be included in every write-up.

- 1) **Identifying Data and Chief Complaint** (____ 5 pts): The opening list of the note must contain age, sex, race, marital status, etc. The patient's complaint should be given in quotes. If the patient has more than one complaint, each complaint should be listed separately (1, 2, etc.) and each addressed in the subjective and under the appropriate number.
- 2) **Subjective Data** (____ 30 pts.): This is the historical part of the note. It contains the following:
 - a) *Symptom analysis/HPI* (location, quality, quantity or severity, timing, setting, factors that make it better or worse, and associate manifestations. (10 pts).
 - b) *Review of systems of associated systems, reporting all pertinent positives and negatives* (10pts).
 - c) *Any PMH, family hx, social hx, allergies, medications related to the complaint/problem* (10 pts). If more than one chief complaint, each should be written up in this manner.
- 3) **Objective Data** (____ 25 pts.): Vital signs need to be present. Height and weight should be included where appropriate.
 - a) Appropriate systems are examined, listed in the note and consistent with those identified in 2b. (10 pts.).
 - b) Pertinent positives and negatives must be documented for each relevant system. (10 pts.).
 - c) Any abnormalities must be fully described. Measure and record sizes of things (like moles, scars). Avoid using "ok", "clear", "within normal limits", positive/negative, and normal/abnormal to describe things. (5 pts.).
- 4) **Assessment** (____ 10 pts.): Diagnoses should be clearly listed and worded appropriately.
- 5) **Plan** (____ 15 pts.): Be sure to include any teaching, health maintenance and counseling along with pharmacological and non-pharmacological measures. If you have more than one diagnosis, it is helpful to have this section divided into separate numbered sections.
- 6) **Subjective/Objective, Assessment and Management are Consistent** (____ 10 pts.): Does the note support the appropriate differential diagnosis process? Is there evidence that you know what systems and what symptoms go with which complaints? The assessment/diagnoses should be consistent with the subjective and objective data provided. Make sure that all relevant problems described by the patient are addressed in the objective section and then the assessment and plan. The management should be consistent with the assessment/diagnoses identified.
- 7) **Clarity of the Write-up** (____ 5 pts.): Is it literate, organized and complete?

Comments:

Total Score: _____

Instructor: _____



FNP Program

STUDENT SELF – EVALUATION

Student: _____

Date _____

DIRECTIONS: Indicate on a scale of 0 to 5, your progress in accomplishments of the Family Nursing educational objectives.

IV. OBJECTIVE	SCALE					
	Low Value				High Value	
	0	1	2	3	4	5
1. Apply knowledge from the sciences, in the delivery of primary care.	0	1	2	3	4	5
2. Evidence competency in data collection resulting in an appropriate data base	0	1	2	3	4	5
3. Demonstrate beginning skills and knowledge in decision making management for Primary care	0	1	2	3	4	5
4. Apply knowledge of nursing to refine a personal framework for primary care practice.	0	1	2	3	4	5
5. Analyze research findings relative to the delivery of primary care to families.	0	1	2	3	4	5
6. Develop beginning collaborative approaches to facilitate comprehensive adult health care.	0	1	2	3	4	5
7. Demonstrate knowledge of national, state and local health care policy affecting the Practitioner role in the clinical setting.	0	1	2	3	4	5
8. Demonstrate knowledge of role components of the nurse practitioner.	0	1	2	3	4	5
9. Apply concepts of diverse culture in the delivery of primary health care to families.	0	1	2	3	4	5

Student Signature _____



FNP Program

STUDENT EVALUATION OF PRECEPTOR AND CLINICAL SITE

Preceptor ID Number

Course Number

Semester

Fall Spring
 Summer

Year

Please rank your Level of Agreement with the statements describing your level of satisfaction with the preceptor and clinical site

1 = STRONGLY DISAGREE to 5 = STRONGLY AGREE by filling in the circle.

MARKING INSTRUCTIONS: PLEASE USE A BLACK PEN OR BLACK FINE-POINT MARKER – NO PENCILS.

The Preceptor created an environment of:

	STRONGLY DISAGREE	DISAGREE	NEUTRAL	AGREE	STRONGLY AGREE
1. Sharing knowledge and expertise willingly	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
2. Encouraging dialogue with FNP students	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
3. Welcoming questions and discussions	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
4. Utilizing appropriate up-to-date references or resources	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
5. Sharing clinical examples of normal variations deviations, and abnormalities	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
6. Providing time for discussion	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
7. Being an effective teacher	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
V. Preceptor demonstrates support of ANP role by:					
8. Collaborating with the student regarding patients and families	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
9. Utilizing members of the health care team for counseling, teaching, and health maintenance	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
10. Acknowledging student's knowledge and expertise of nursing	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
11. Supporting student's assessment and management of patient and families	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
12. Utilizing appropriate referrals within the health care delivery system	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
VI. The Clinical Site Evaluation:					
13. Would you recommend this preceptor for other students?	<input type="radio"/> No	<input type="radio"/> Yes			
14. Would you recommend this site for other students?	<input type="radio"/> No	<input type="radio"/> Yes			

You may add comments on the reverse side of this evaluation



FNP Program

PRECEPTOR EVALUATION OF NURSE PRACTITIONER STUDENT

Student _____ **Name:** _____

Site: _____ **Date:** _____

Course: _____ **Preceptor:** _____

Please use the following scale to indicate the student's performance during this clinical.

- N/A
- 0=omits required item
- 1=requires extensive help
- 2=requires much help
- 3=requires moderate help
- 4=requires minimal help
- 5=performs independently

ASSESSMENT

- | | | | | | | | |
|--|-----|---|---|---|---|---|---|
| 10. Obtains appropriate history for comprehensive, interval, or acute episodic visits. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 11. Performs the indicated exam in an organized, timely manner (i.e., physical, developmental and/or mental status). | N/A | 0 | 1 | 2 | 3 | 4 | 5 |

DIAGNOSIS

- | | | | | | | | |
|---|-----|---|---|---|---|---|---|
| 12. Formulates appropriate diagnoses, including differentials and rule-outs. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 13. Provides rationale for diagnoses. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 14. Interprets tests, procedures, and/or screening findings. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 15. Includes health maintenance, disease prevention, and/or health restoration. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |

MANAGEMENT

- | | | | | | | | |
|--|-----|---|---|---|---|---|---|
| 16. Prescribes appropriate pharmacological therapies. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 17. Orders indicated diagnostic tests/procedures as appropriate. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 18. Performs clinical procedures as indicated. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 19. Provides health maintenance, disease prevention and/or disease management, education and counseling. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 20. Orders consults and/or referrals as indicated. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 21. Designates follow up as appropriate. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 22. Includes client in decision-making. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 23. Works collaboratively with health care personnel. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |

PRESENTATION/DOCUMENTATION

24. Oral presentation is succinct and accurate. N/A 0 1 2 3 4 5
25. Written documentation is succinct, complete, and accurate. N/A 0 1 2 3 4 5

ROLE

26. Seeks and accepts constructive criticism. N/A 0 1 2 3 4 5
27. Uses effective communication skills. N/A 0 1 2 3 4 5
28. Presents a professional demeanor appropriate for clinical setting (i.e., appearance, dress, behavior, and language). N/A 0 1 2 3 4 5

Did the students communicate learning needs and objectives to preceptor?

Yes _____ No _____

COMMENTS:

STRENGTHS:

AREAS NEEDING IMPROVEMENT:

SUGGESTIONS:

Preceptor Signature: _____ **Telephone Number:** _____

Preceptor Name (Print): _____

Would you like the student's advisor to contact you to discuss this student? Yes _____ No _____

Thank you for taking the time to complete this Evaluation Form. Please return the completed form to:

Universidad del Turabo
School of Health Sciences
PO Box 3030
Gurabo, PR 00778
Tel. (787) 743-7979 ext. 4015
Fax (787) 704-2703

Thank you for your service to the profession and to the Universidad del Turabo!



FNP Program Faculty Evaluation of Preceptor and Clinical Site

Preceptor ID Number

--	--	--	--

Course Number

--	--	--	--

Semester

Fall Spring
 Summer

Year

--	--	--	--

Please rank your Level of Agreement with the statement below describing level of satisfaction with the preceptor and clinical site, where:

1 = STRONGLY DISAGREE to 5 = STRONGLY AGREE. Place a checkmark next to your ranking.

PLEASE USE A BLACK PEN OR BLACK FINE-POINT MARKER – NO PENCILS.

Preceptor Evaluation:

The Preceptor:	STRONGLY DISAGREE	DISAGREE	NEUTRAL	AGREE	STRONGLY AGREE
1. Facilitates student involvement in clinical practicum experiences	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
2. Facilitates student independence appropriate to the course objectives	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
3. Assists students in developing critical thinking skill	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
4. Assists student to integrate theory, research, and practice	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
5. Involves the student as a member of the interdisciplinary health team	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
6. Provides timely feedback to student regarding progress in decision making	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
7. Maintains open lines of communication with faculty	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
8. Completes student evaluations as requested	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
9. Provides a quality learning experience appropriate to student level in the Graduate Nursing Program	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
10. Provides adequate physical space for student	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
11. Provides Patient population relevant to student learning needs	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5

VII. The Clinical Site Evaluation

12. Would you recommend this preceptor for other students? No Yes
13. Would you recommend this site for other students? No Yes



FNP Program

FACULTY OBSERVATION AT CLINICAL SITE

Student Name _____ Site _____ Date _____

Course: all clinical courses Primary Care I, II, III Residency Major: _____ Mid Semester: _____ Final: _____

Faculty Evaluator(s): _____

Client Profile (age, chief complaint)

Circle the number that corresponds to the student's clinical performance a majority of the time. Use the following key:

- N/A opportunity to perform
- 0 omitted required item (omitted a critical element)
- 1 required extensive prompting
- 2 required much prompting

I. ASSESSMENT

B. Subjective Data (History)

- | | | | | | | | |
|--|-----|---|---|---|---|---|---|
| 1. Obtains appropriate history for comprehensive, interval, or acute episodic visits. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 2. Focuses on priority areas in data collection. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 3. Demonstrates skillful interviewing techniques sensitive to individual, family, or group client needs including sensitivity to socioeconomic groups. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 4. Identifies factors influencing health and/or disease management. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |

Comments:

C. Objective Data – Physical Examination

- | | | | | | | | |
|--|-----|---|---|---|---|---|---|
| 1. Performs the indicated exam (comprehensive, interval, or acute episodic) in an organized manner. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 2. Uses assessment techniques and equipment correctly. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 3. Differentiates normal from abnormal findings (obvious and subtle). | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 4. Modifies the exam to reflect chief complaint, presenting symptoms, exam findings, and differential diagnoses. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |

- | | |
|---|-----------------|
| 5. Conducts and/or reviews previous physical, developmental, and screening procedures o labs. | N/A 0 1 2 3 4 5 |
|---|-----------------|

COMMENTS: _____

II. DIAGNOSIS

- | | |
|--|-----------------|
| 1. Formulates appropriate differential diagnoses. | N/A 0 1 2 3 4 5 |
| 2. Formulates appropriate nursing and medical diagnoses and/or rule outs. | N/A 0 1 2 3 4 5 |
| 3. Prioritizes nursing and medical diagnoses. | N/A 0 1 2 3 4 5 |
| 4. Provides rationale (pathophysiology, psychosocial) for diagnoses formulated. | N/A 0 1 2 3 4 5 |
| 5. Interprets test, procedure, and/or screening findings correctly. | N/A 0 1 2 3 4 5 |
| 6. Identifies risk profile and prevention/counseling/screening needs appropriate to the situation. | N/A 0 1 2 3 4 5 |

COMMENTS: _____

III. MANAGEMENT

A. Therapeutics/Diagnostics

- | | |
|---|-----------------|
| 1. Prescribes appropriate pharmacological therapies (including drug and dose). | N/A 0 1 2 3 4 5 |
| 2. Recommends/prescribes non-pharmacological therapies. | N/A 0 1 2 3 4 5 |
| 3. Provides appropriate rationale for therapy. | N/A 0 1 2 3 4 5 |
| 4. Demonstrates sound clinical judgment in determining the treatment plan. | N/A 0 1 2 3 4 5 |
| 5. Orders additional diagnostic tests/procedures as appropriate. | N/A 0 1 2 3 4 5 |
| 6. Initiates interventions for health promotion, prevention, maintenance, and/or restoration. | N/A 0 1 2 3 4 5 |

COMMENTS: _____

B. Education/Counseling

- | | |
|--|-----------------|
| 1. Provides appropriate education based on client learning needs. | N/A 0 1 2 3 4 5 |
| 2. Provides mental health counseling based on client needs. | N/A 0 1 2 3 4 5 |
| 3. Provides anticipatory guidance and counseling for growth and developmental needs throughout the life cycle. | N/A 0 1 2 3 4 5 |

COMMENTS: _____

C. Follow-up and Referral

- | | | | | | | | |
|--|-----|---|---|---|---|---|---|
| 1. Orders consults and referrals as indicated. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 2. Designates follow-up as appropriate. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |

COMMENTS: _____

IV. PRESENTATION/DOCUMENTATION

- | | | | | | | | |
|--|-----|---|---|---|---|---|---|
| 1. Oral presentation is succinct, complete, and accurate. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 2. Written documentation is succinct, complete, and accurate | N/A | 0 | 1 | 2 | 3 | 4 | 5 |

COMMENTS: _____

V. ROLE IMPLEMENTATION

- | | | | | | | | |
|--|-----|---|---|---|---|---|---|
| 1. Knows own limitations. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 2. Seeks and accepts constructive criticism. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 3. Presents a professional demeanor appropriate for clinical setting ie appearance, dress, behavior, and language. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 4. Completes client encounter within designated time frame. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |
| 5. Develops therapeutic rapport. | N/A | 0 | 1 | 2 | 3 | 4 | 5 |

COMMENTS: _____

VI. SUMMARY COMMENTS: _____

- I. Assessment (Subjective & Objective Data) = 45% _____
- II. Diagnosis = 10% _____
- III. Management = 30% _____
- IV. Presentation/Documentation = 10% _____

V. Role = 5%

Total Points: _____ = Final Grade _____

Student Signature

Preceptor Signature (as applicable)

Faculty Signature

Faculty Signature (as applicable)



Universidad del Turabo
School of Health Sciences
Nursing Graduate Program
Family Nurse Practitioner Specialty

FNP STUDENT AGREEMENT

I _____, FNP student of Universidad del Turabo, School of Health Sciences, acknowledge that I have attended the FNP student orientation today and that I have reviewed with the FNP Nursing Faculty all of the contents and forms within this MSN Handbook.

I agree to follow all of the rules and guidelines of this handbook and those instructions given during today's presentation.

Student's Signature

Date

Nursing Department Director

Date