



WESTERN
NEW MEXICO UNIVERSITY

**STUDENT HANDBOOK FOR THE
FAMILY NURSE PRACTITIONER (FNP)
PROGRAM**

Western New Mexico University
School of Nursing and Kinesiology (SONAK)
Academic Year 2025-2026
Reviewed and Revised 03/2025

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Accreditation Status of the FNP Program

The FNP Program is seeking CCNE accreditation with plans for an on-site evaluation visit to occur in Spring 2026.

Student Acknowledgement

Students enrolled in the Post-Graduate Advanced Practice Registered Nurse (APRN) Certificate Program (hereafter called the Family Nurse Practitioner (FNP) Program) at Western New Mexico University (WNMU) are responsible for their knowledge of and adherence to regulations printed in these Graduate Nursing Guidelines.

The School of Nursing reserves the right to modify any provisions or requirements when such an action serves the interest of the client/patient, the nursing program, track, or its students. Notification of changes will be communicated to students ongoing.

Students will complete an acknowledgement form of receipt found in Appendix A and upload this to CastleBranch.

Mission and Vision of the FNP Program

MISSION

The mission of the Western New Mexico University School of Nursing FNP program is to offer a caring, diverse, inclusive, and innovative community for learners. The program encourages the advancement of higher-level nursing knowledge established through evidence-based practices and supports the principles of community, nursing scholarship, and sound practices for purposes of health and wellness in rural/frontier communities at the regional, national, and international levels.

VISION

The FNP program prepares the nurse at a higher level of advanced nursing knowledge to be a leader in healthcare delivery systems of rural, regional, national, and international communities

CORE VALUES

The FNP program, with its focus on community and rural/frontier healthcare, strives to facilitate the ability of graduate nursing students to achieve the following objectives:

1. **Excellence** in clinical practice and healthcare delivery to communities and rural/frontier areas.
2. **Integrity** as healthcare professionals entrusted with the lives of individuals, especially those who reside in communities and rural/frontier areas.

3. **Leadership** as healthcare professionals dedicated to the overall health and well-being of communities and rural/frontier areas.
4. **Scholarship** by means of maintaining an attitude of lifelong learning.

University Mission, Vision, and Values

Mission

An open-access Hispanic-Serving Institution (HSI) and New Mexico's Applied Liberal Arts and Sciences University, Western New Mexico University combines a foundation of liberal arts education with quality professional programs and career and technical preparation in a diverse, inclusive, creative, and caring community of learners empowered with the essential skills and knowledge for lifelong success in work and life.

Al ser una Institución al Servicio de Hispanos (HSI) y de inscripción abierta, así como la Universidad de Artes Liberales y Ciencias Aplicadas de Nuevo México, Western New Mexico University combina una base de educación en artes liberales con programas profesionales de calidad y preparación técnica en una comunidad diversa, inclusiva, creativa y solidaria de estudiantes capacitados con habilidades y conocimientos esenciales para el éxito permanente en la vida y el trabajo.

Vision

Western New Mexico University is a premier and innovative Applied Liberal Arts and Sciences University in combination with internationally recognized professional programs and career and technical preparation. Its students achieve career goals, become conscientious citizens, practice social and environmental responsibility, and impact their communities and their futures as independent thinkers who know themselves within the changing context of a global, digital world. Embracing its identity as a Hispanic Serving Institution, WNMU is the central contributor in its region for public service, economic development, and cultural enrichment.

Western New Mexico University es una Universidad de Artes Liberales y Ciencias Aplicadas líder e innovadora que combina programas profesionales reconocidos internacionalmente y la preparación profesional técnica. Sus estudiantes alcanzan metas profesionales, formándolos en ciudadanos comprometidos, que practican la responsabilidad social y ambiental, que tienen impacto en sus comunidades y en su futuro como pensadores críticos independientes que se conocen a sí mismos dentro del contexto cambiante de un mundo global y digital. Adoptando su identidad como una institución al servicio a

hispanos, WNMU es la contribuyente central en su región para el servicio público, el desarrollo económico y el enriquecimiento cultural.

Core Values

1. **Innovation/Creativity:** In every obstacle we see opportunities to provide practical solutions to problems, addressing and redefining them to match our institutional strengths. We embrace continuous improvement, encourage invention, and continually seek better, more efficient ways to achieve our goals. We reward creativity and support actions toward positive changes for society.
2. **Integrity:** We operate ethically, and hold ourselves accountable to our students, the community, and all who serve WNMU's mission. We uphold standards of honesty, confidentiality, trust, respect, and transparency. We recognize that we are individually accountable and collectively responsible for living and encouraging the highest of ethical standards.
3. **Intellectual Curiosity:** We seek the advancement of knowledge, critical thinking, inquiry, and discovery through our teaching, service, and research. We continuously learn from our achievements and our challenges. We encourage our students and colleagues to challenge each other in the support of academic freedom: inquiry, pursuit of ideas, and creative activity.
4. **Personal Responsibility:** We recognize our responsibilities to the students, to each other, and to the community. Individually and collectively, we strive to exceed our students' and our colleagues' expectations, achieving teaching and service excellence and creating a welcoming positive learning environment.
5. **Service to University and Community:** We are good neighbors and a positive force for change. We foster communities of caring, respect, and civility. We engage with our communities, serve society, and build capacity for relating to one another.
6. **Student Success:** We provide our students with the tools essential to build their futures and succeed in life as productive, educated citizens who can think critically about, adapt to, and change the world around them.

Program Learning Outcomes

By completion of the FNP program, graduates will be able to:

1. Demonstrate advanced clinical expertise and judgment in assessing, diagnosing, and managing acute and chronic health conditions across the lifespan, integrating comprehensive knowledge of pathophysiology, pharmacology, and health assessment.
2. Deliver compassionate, patient-centered care that respects the diverse cultural, spiritual, and socioeconomic backgrounds of individuals and families, promoting health equity and improving health outcomes.

3. Analyze population health data to design and implement effective health promotion, disease prevention, and risk reduction strategies for individuals, families, and communities.
4. Integrate current evidence and research findings into clinical practice to enhance patient care, improve outcomes, and contribute to the advancement of the nursing profession.
5. Apply quality improvement methodologies to monitor and enhance the safety, effectiveness, and efficiency of healthcare delivery systems, ensuring optimal patient outcomes.
6. Collaborate effectively with healthcare professionals from various disciplines to deliver coordinated, comprehensive care and address complex healthcare challenges.
7. Evaluate and influence healthcare systems and policies to improve access, quality, and affordability of care, advocating for policy changes that benefit patients and communities.
8. Utilize advanced informatics and healthcare technologies to improve patient care, enhance clinical decision-making, and support the efficient management of health information.
9. Demonstrate professionalism by adhering to ethical principles, legal standards, and the nursing code of conduct, while consistently advocating for patients' rights and well-being.
10. Exhibit leadership in clinical and organizational settings, engage in continuous professional development, and mentor future generations of nurses, fostering a culture of excellence in nursing practice.

The Program Objectives and Student Learning Outcomes for the FNP Program are based on The Essentials: Core Competencies for Professional Nursing Education (AACN, 2021).

- Domain I: Knowledge for Nursing Practice
- Domain II: Person-Centered Care
- Domain III: Population Health
- Domain IV: Scholarship for Nursing Discipline
- Domain V: Quality and Safety
- Domain VI: Interprofessional Partnerships
- Domain VII: Systems-Based Practice
- Domain VIII: Informatics and Healthcare Technologies
- Domain IX: Professionalism
- Domain X: Personal, Professional and Leadership Development

FNP Program Description

The mission of the Western New Mexico University School of Nursing is to promote health and improve the quality of life for diverse populations by providing nursing education which instills the values of community, nursing scholarship, practice and community service.

Western New Mexico University offers a Post-MSN Family Nurse Practitioner (FNP) certificate. Students who complete the FNP program will be eligible to sit for the Family Nurse Practitioner national certificate exams offered by the American Nurses Credentialing Center (ANCC) and the American Academy of Nurse Practitioners (AANP) Certification Board.

Student enrollment in the Master of Science in Nursing (MSN) program at Western New Mexico University (WNMU) School of Nursing does not imply nor guarantee admission to the FNP Program at WNMU.

Furthermore, students must meet admission requirements which include at least one year of Registered Nurse (RN) experience within the past five years by the time of application to FNP Program.

Final admission to the FNP Program is contingent on passing a criminal background check.

FNP Program Admission Requirements

Master of Science in Nursing

Applicants are required to have graduated from an accredited college or university with a master's degree in nursing, documented by an official transcript. Completion of the "3P" courses (Pathophysiology, Pharmacology, and Physical Assessment) within three years of admission and appropriate as considered per gap analysis.

GPA

All applicants are required to demonstrate a minimum nursing GPA of 3.0.

Licensure

Applicants are required to hold a valid, unencumbered, RN license in the United States

Clinical Practice Requirements

At least one year of full-time RN experience in a clinical setting, preferably medical-surgical, critical care, or emergency department, is required.

Resume or Curriculum Vitae

- A résumé or curriculum vitae (CV) is required. In chronological order, include details of your relevant work history, academic accomplishments, volunteer activities and professional affiliations, licenses, **and** certifications applicable to advanced practice nursing or nurse leadership.

- Describe the basic elements and particular details of each experience, including the title of your position, the schedule (e.g., three weekends per month, five shifts per week) and a brief description of the duties involved.
- Be concise. Your submitted résumé / CV document should be 2-5 pages in length. A résumé / CV may include the following and any other pertinent information:
 - Educational background
 - Work experience
 - Honors, awards and scholarships
 - Professional organizations, community and/or public service including leadership role(s) i.e., membership versus leadership roles
 - Professional certifications
 - Professional presentations
 - Research experience
 - Publications

Goal Statement

A comprehensive well-written goal statement essay is an *essential* component of a successful application.

The goal statement essay is used as a source of information and as a sample of your writing ability. You should focus on your professional goals and how you envision these goals can be achieved through your designated area of specialization and study at WNMU. Please include the following information in this order if possible:

- Describe your professional or career rationale for applying to the FNP certificate program
- Explain the reasons for choosing the FNP specialty
- Address future career goals and contributions you expect to make to nursing after completing the degree program

Your submitted Goal Statement should be no more than 500 words, double-spaced and typewritten. Please include your full legal name and page number at the top of each page. The use of artificial intelligence (AI) is strictly prohibited in the completion of this statement. This includes the use of AI-generated text, as well as the use of AI tools or software.

Letters of Recommendation

Applicants to the FNP program must submit three letters of recommendation that meet the following criteria:

1. One recommendation from current/recent employer or supervisor
2. One recommendation from a faculty member who can assess your academic performance in the area in which you wish to study.
3. One recommendation from an individual, not a relative, who is well acquainted with your professional preparation and experience. For example:
 - Professional colleague
 - Advanced practice nurse (in the specialty you are applying if possible)

Recommenders should address one or more of the following areas in their letters:

- Relationships with team members such as nurses, physicians, and others
- Professional nursing ability including independent judgment where appropriate, and quality of patient care
- Leadership Skills
- Communication Skills
- Creativity
- Self-direction in learning
- Writing Skills
- Teaching
- Recommender's relationship to the applicant

Graduate Nursing Courses for the FNP Program

The number of courses and hours for the FNP Program directed at community and rural/frontier health are found in Table 1.

Table 1

Instructional Areas for FNP Program in Community & Rural/Frontier Health Core Required Coursework

Pre-Requisite Courses	Credit Hours	Clinical Hours
Advanced Pathophysiology Across the Lifespan	3	
Advanced Physical Assessment Across the Lifespan	3	
Advanced Pharmacology Across the Lifespan	3	
<hr/>		
FNP Certificate Program Course Work Course Name	Credit Hours:	Clinical Hours
NUR 600 Diagnostic Reasoning and Clinical Skills for Advanced Practice Nurses	5	
NUR 610 Advanced Care Management for Family Nurse Practitioners I	5	188
NUR 620 Advanced Care Management for Family Nurse Practitioners II	5	188
NUR 694 Advanced Care Management for Family Nurse Practitioners III	5	188
NUR 695 Advanced Care Management for Family Nurse Practitioners IV	5	188
NUR 696 Family Nurse Practitioner Certification Review	2	
Total Credit/Clinical Hours	27	752

FNP Program Course Descriptions

NUR 600 Diagnostic Reasoning and Clinical Skills for Advanced Practice Nurses (5 Credits)

Throughout the course, students will engage in a detailed examination of diagnostic frameworks and decision-making models. Emphasis will be placed on integrating patient history, physical examination findings, and diagnostic tests to formulate accurate and evidence-based diagnoses. Students will develop proficiency in recognizing common and complex clinical presentations, interpreting laboratory results, and utilizing advanced diagnostic tools. Students will also learn and practice primary care skills and procedures.

NURS 610 Advanced Clinical Management for Family Nurse Practitioners I (5 Credits)

This course provides advanced training in the clinical management of patients across the lifespan for Family Nurse Practitioners (FNPs) with a focus on rural and frontier health. Emphasizing evidence-based practice, students will develop the skills necessary to perform comprehensive health assessments, make accurate diagnoses, and manage common acute and chronic conditions. The course covers key areas including patient-centered care planning, pharmacological management, health promotion, and disease prevention. This course has a total of 188 clinical hours.

NURS 620 Advanced Clinical Management for Family Nurse Practitioners II (5 Credits)

This course provides advanced training in the clinical management of patients across the lifespan for Family Nurse Practitioners (FNPs) with a focus on rural and frontier health. Emphasizing evidence-based practice, students will develop the skills necessary to perform comprehensive health assessments, make accurate diagnoses, and manage common acute and chronic conditions. The course covers key areas including patient-centered care planning, pharmacological management, health promotion, and disease prevention. This course has a total of 188 clinical hours.

NURS 694 Advanced Clinical Management for Family Nurse Practitioners III (5 Credits)

This course provides advanced training in the clinical management of patients across the lifespan for Family Nurse Practitioners (FNPs) with a focus on rural and frontier health. Emphasizing evidence-based practice, students will develop the skills necessary to perform comprehensive health assessments, make accurate diagnoses, and manage common acute and chronic conditions. The course covers key areas including patient-

centered care planning, pharmacological management, health promotion, and disease prevention. This course has a total of 188 clinical hours.

NURS 695 Advanced Clinical Management for Family Nurse Practitioners IV (5 Credits)

This course provides advanced training in the clinical management of patients across the lifespan for Family Nurse Practitioners (FNPs) with a focus on rural and frontier health. Emphasizing evidence-based practice, students will develop the skills necessary to perform comprehensive health assessments, make accurate diagnoses, and manage common acute and chronic conditions. The course covers key areas including patient-centered care planning, pharmacological management, health promotion, and disease prevention. This course has a total of 188 clinical hours.

NURS 696 Family Nurse Practitioner Certification Review (2 Credits)

This Family Nurse Practitioner Certification Review course is designed to prepare graduate nursing students for the FNP certification exam. Using Advanced Practice Education Associates (APEA) review materials, the course provides a comprehensive, high-yield overview of essential topics and competencies required for FNP certification. Topics include advanced pathophysiology, pharmacology, health assessment, diagnosis, and management of primary care conditions across the lifespan. Interactive learning modules, case studies, and practice exams are incorporated to solidify knowledge, refine critical thinking, and enhance test-taking skills. This course aims to equip FNP students with the essential skills and confidence to succeed on the certification exam and excel as primary care providers in clinical practice.

Canvas Learning Management System

The School of Nursing utilizes Canvas, an internet-based learning platform. This learning management system (LMS) allows students to submit assignments, take exams, view grades, discuss course readings and topics, among other course-related activities. Students access Canvas from their WNMU account. Canvas assistance can be found at <https://online.wnmu.edu/canvas/>

Digital Literacy Skills

Students will need digital literacy skills to complete assignments in the FNP Program. These skills include:

- Use of online course libraries and databases to locate and gather appropriate information.

- Use of computer networks to locate and store files or data.
- Use of online search tools for specific academic purposes that include search criteria, keywords, and filtering options.
- Proper citation of information sources.
- Preparation and presentation of research finding.

Course Syllabi

All graduate nursing course syllabi are posted at the beginning of the semester as part of the Canvas course shell for each FNP course. Students are responsible for accessing the course and reviewing the syllabus. If the student does not understand the syllabus and/or has questions about the course, then the student should plan to talk with the course instructor for more information to gain clarity.

Academic Integrity and Code of Civility (Conduct)

Western New Mexico University policies on academic integrity and student codes of conduct specified in the WNMU Catalog and WNMU Student Handbook apply to students in the graduate nursing programs. Students will be expected to abide by these policies and by all policies and procedures established by the University.

Please refer to the most recent version of the Student Handbook for additional information.

<https://admin.wnmu.edu/handbooks/student-handbook/>

Online Exams

Failure to complete online exams during the allotted timeframe will result in a grade of zero for the exam. Exceptions may be made, and a make-up exam possibly offered if the student (a) has a reasonable excuse for not taking the exam during the regular timeframe and (b) contacted the instructor in a timely manner. Illnesses will require a signed note from the student's healthcare provider.

All online exams will require the use of Respondus Lock Down Browser and the student purchase of Respondus Monitor. Failure to use Respondus Lock Down Browser and Respondus Monitor during the exam will result in a grade of zero for the exam.

Assignments and Due Dates

Assignments are due by the dates specified in the assignment schedule. All assignments/discussions are due in Mountain Time (MST). If an assignment will be late, then the instructor must be contacted before the due date and will decide whether to grant an extension or not. If the instructor is not contacted prior to the assignment due date, then

a score of '0' will be given for that assignment. Late assignments will not be accepted without prior arrangements. If an extension is granted, then there will be a 5% (or 5 points) grade deduction per day up to three days. After three days, a score of '0' will be given for the assignment.

Incomplete Grades

The FNP program follows the University's incomplete grade guidelines. It is the responsibility of the student to contact the instructor to request a grade of "I" and develop a plan to complete coursework. Students may not request an incomplete if they are failing (F) a course.

Use of Artificial Intelligence (A.I.) Software and Platforms

Artificial Intelligence (A.I.) resources can be useful and powerful tools in the educational experience. As an institute of higher learning, WNMU also promotes expectations for the development of human skills and learning. For each WNMU course, the instructor will establish guidelines and rules for the use of A.I.-based resources, including whether their use is permitted at all. To satisfy University standards of academic integrity, students must read and adhere to the specific A.I. usage policies and guidelines established for each course by its instructor. This information will be in each course syllabus. (Credit to Professor Jost, WNMU).

Student Accessibility

Information Services for student accommodation are provided through the Wellness and Accessibility Services Office in the Global Resources Center (GRC). Services may vary depending on the needs of the student. Contact information for the office is as follows:

Mailing Address:

Wellness and Accessibility Services Coordinator

P.O. Box 680

Silver City, NM 88062

Telephone Number: 575-538- 6277

Email: accessibility@wnmu.edu

Website: Wellness and Accessibility Services – Center for Student Success (wnmu.edu)

Students are asked to notify the Wellness and Accessibility Services office as soon as possible to discuss accommodation concerns and needs. Testing accommodations are provided when approved through Wellness and Accessibility Services. Faculty are not expected to lower their academic standards using accommodations available. Students should be able to demonstrate their knowledge without the need for alternative tests or

different evaluation/grading standards. Accommodation letters state the appropriate testing accommodations, depending on the nature of the coursework and the accommodation needs of the student.

Scope of Practice

The WNMU School of Nursing recognizes that students from all over the United States can apply to the FNP Program through WNMU. The FNP Program has the expectation that all enrolled students adhere to their state Nurse Practice Act, which can be found here (NCSBN, n.d.). In addition, licensed nurses are expected to utilize the American Nurses Association Code of Ethics (2015) (Table 2) and the American Nurses Association Professional Nursing Scope and Standards of Practice (2021) (Table 3) as guidelines for safe and ethical practice.

Table 2

Provisions of the Code of Ethics for Nurses with Interpretive Statements

Provision	Description
Provision 1	The nurse practices with compassion and respect for the inherent dignity, worth and unique attributes of every person.
Provision 2	The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
Provision 3	The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
Provision 4	The nurse has authority, accountability, and responsibility for nursing practice; makes decisions, and takes action consistent with the obligation to promote health and to provide optimal care.
Provision 5	The nurse owes the same duty to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
Provision 6	The nurse, through individual and collective effort, establishes, maintains, and improves ethical environment of work setting and conditions of employment that are conducive to safe, quality healthcare.
Provision 7	The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
Provision 8	The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
Provision 9	The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing health policy.

Table 3

ANA Standards of Professional Nursing Practice

Standard	Description
Standard 1: Assessment	The registered nurse collects pertinent data and information relative to healthcare consumer's health or information.
Standard 2: Diagnosis	The registered nurse analyzes assessment data to determine actual or potential diagnosis, problems, and issues.
Standard 3: Outcomes Identification	The registered nurse identifies expected outcomes for a plan individualized to the healthcare consumer or the situation.
Standard 4: Planning	The registered nurse develops a collaborative plan encompassing strategies to achieve expected outcomes.
Standard 5: Implementation	The registered nurse implements the identified plan.
Standard 5a: Coordination of Care	The registered nurse coordinates care delivery.
Standard 5b: Health Teaching and Health Promotion	The registered nurse employs strategies to teach and promote health and wellness.
Standard 6: Evaluation	The registered nurse evaluates progress toward attainment of goals and outcomes.

Essential Eligibility Requirements

Table 4

Essential Eligibility Requirements for Participation in the School of Nursing

ESSENTIAL FUNCTIONS	SOME EXAMPLES OF NECESSARY ACTIVITIES
Critical thinking abilities sufficient for clinical judgment	Identify cause/effect relationships in clinical situations; develop nursing care plans.
Interpersonal abilities sufficient to interact with individuals, families, and groups from a variety of social, emotional, cultural, and intellectual backgrounds.	Establish rapport with patients/families and colleagues.
Communication abilities sufficient for interactions with others in verbal and written form.	Explain treatment procedures, initiate health teaching, document and interpret nursing actions and patient/client responses.
Abilities sufficient for observation and assessment necessary in nursing care.	Observe patient/client responses.
Abilities sufficient to monitor and assess health needs.	Hear monitor alarms, emergency signals, auscultate sounds, and cries for help.
Abilities sufficient to move from room to room and to maneuver in small places.	Move around in patients' rooms, workspaces, and treatment areas, and administer cardio-pulmonary resuscitation.
Abilities sufficient for physical assessment.	Perform palpation, functions of physical examination and/or those related to therapeutic intervention, e.g., insertion of a catheter.
Abilities sufficient to provide safe and effective nursing care.	Calibrate and use equipment, position patients/clients. Safely lift and move clients/patients.

Technology Requirements

Students must have access to a desk or laptop computer capable of high-speed internet use. Computers are available for checkout, on a first-come/first-serve basis at the WNMU media center. Computers should have the capability to support the Canvas LMS. Also, a current version of JAVA, Microsoft Office 2010 or higher for documents and written assignments and Adobe Reader for opening PDF files will be needed.

Smart-phone application

Access to a smartphone is recommended to review patient laboratory results, medications, and other findings that will help the student to care for clients/patients.

Attendance

Attendance is tracked in online courses within the Canvas LMS tracking mechanisms. Unexcused absences will activate the Early Academic Warning System. See [Clinical Disruption Policy](#) and [Student Attendance on Scheduled Clinical Days](#) for clinical attendance policies.

Student Retention and Progression

- Graduate nursing students enrolled in the FNP program must achieve a minimum score of 80% or higher in coursework and a grade of “B” or better in all courses.
- Individual assignments and/or exam scores will not be rounded up or down. For example, a score of 79.7% will not be rounded up to 80%.
- No retakes of exams are allowed.
- No extra-credit opportunities will be offered as part of the FNP courses and/or program.
- Complete scoring and grade calculation information may be found within the course syllabus for each individual course. The scoring and grade calculation information contained within an individual course syllabus will determine the final grade calculation for the course.
- A student who fails one course or receives a grade of less than 80% will be ineligible to progress within the FNP program. However, the student may reapply to the program.
- The criteria for passing practicum components are included in the evaluation rubrics/tools included in the courses.

- Students marginally passing or potentially failing may be placed on probationary status. Conditions of probationary status will be detailed in a Learning Contract with the student.
- As adult learners, students are expected to assume responsibility for monitoring their own progress throughout the semester. If a student experiences difficulty, then the student must take responsibility to seek help from the nursing faculty and/or the academic support center.

Holistic Nurse Coach

The School of Nursing utilizes a holistic success model for all enrolled nursing students. A resource that is free to students enrolled in a School of Nursing Program is the services of one of our certified Holistic Nurse Coaches. To access this resource, the student may directly contact a Nurse Coach. Also, faculty, with student consent, may refer students to a Nurse Coach.

Code of Civility

To promote a positive, professional atmosphere among students, faculty and staff, the following Code of Civility has been developed: Respect: Treat all students, faculty, staff, and property with respect and in a courteous and professional manner. This includes all communications, whether verbal or written. Let your actions reflect pride in yourself, your university, and your profession.

- **Kindness:** A kind word and gentle voice go a long way. Refrain from using profanity, insulting slang remarks, or making disparaging comments. Consider another person's feelings. Be nice.
- **Truth:** Exhibit honesty and integrity in your dealings with fellow students, faculty, and staff members. Don't lie, don't cheat, and don't steal.
- **Responsibility:** Take responsibility for your actions. This includes gracefully accepting the consequences of your behavior.
- **Cooperation:** Exhibit a cooperative manner when dealing with students, faculty, and staff so we may all work towards our common goals and mission.
- **Acceptance:** Accept differences in others, as they accept differences in you. This includes diversity in opinions, beliefs, ideas, and everything else that makes us unique individuals. Professionalism: Always conduct yourself in a manner that will bring pride to your profession, to the School of Nursing, to Western New Mexico University, and most importantly, to yourself.

Grading, Exam, and Progression Policies

The grading scale used within the WNMU FNP Program is as follows:

Table 5

Post-MSN FNP Grading Scale

Letter Grade	Point Scale
A	90.0-100.0
B	80.0-89.9
C	70.0-79.9
D	60.0-69.9
F	0.00-59.9

Again, a grade of at least 80% or “B” or better must be maintained to progress and to remain in the FNP program. The School of Nursing will not round scores up or down. Any one course failure at any point in the FNP program will result in dismissal from the program. Students may petition to reapply to the FNP program. Students who are readmitted after the one-year dismissal timeframe will be required to repeat the entire program and will not receive credit for courses completed successfully prior to the dismissal. A course withdrawal will not be treated as a failure.

Extra-Credit Policies

The WNMU School of Nursing does not allow extra credit assignments within courses. Students who encounter difficulties with course material should contact faculty as soon as such difficulties surface within a course. There will be no extra credit opportunities to allow students who are unsuccessful in course assignments and/or exams to achieve passing scores.

Exam Policies

Exams must be taken at scheduled times. Students must notify the instructor prior to the exam time if they are unable to take the exam at the designated time. Failure to notify faculty will earn the student a grade of zero, with no option of a make-up exam. Missed exams must be re-scheduled with course faculty within 24 hours and taken within one week of the original exam day/time. Students will be allowed to make up a maximum of two exams in different courses per semester (one exam per course if the student is taking two courses) if faculty receives notification prior to the missed exam. Additional exams missed

after the student has completed two different make-up exams shall receive a score of zero (0).

APA Style Guidelines for Nursing Papers

Graduate nursing students are expected to use the most current American Psychological Association (APA) edition and guidelines for all written work unless specified in the guidelines for the paper. A tutorial is provided at the following web-link:
<https://apastyle.apa.org/learn/tutorials/basics-tutorial> .

Communications Policy Statement

As with all practices in the School of Nursing, students, faculty, and staff are expected to conduct themselves ethically and professionally. This includes professionalism with respect to all written and verbal communication, regardless of its purpose. When sending written communication, the use of correct grammar, spelling and punctuation, appropriate professional titles, and generally accepted professional etiquette is essential to maintain a professional atmosphere conducive to a positive working and learning environment. For telephone communication, professionalism is also required, which includes the provision of identifying information and a return contact number as part of any voicemail message. Parties who do not leave a voicemail message with identifying information and/or contact information should not expect their call to be returned. Program faculty and staff strive to respond to student email and telephone communication in a timely manner and are allotted up to two (2) business days to respond to these communications. Please note that this timeline may be adjusted due to a variety of conditions such as holiday or break schedules, timing (during finals week or the first week of classes, for instance), workload, or other factors, so patience is appreciated. If urgent attention is required, students should follow up on initial communication with a second follow-up communication. After the second follow-up, students should contact the School of Nursing main line (575) 538-6960 or the department's main email at wnmu.sonak.edu for support in reaching the party they are trying to contact. WNMU policies require that all official communication be sent via Mustang Express/WNMU e-mail addresses. As a result, all emails related to enrollment at WNMU, and class communication (including changes in assignments and grades) will be sent to wnmu.edu email addresses. **It is very important that students access their**

WNMU email daily to check for correspondence from the University.

If students prefer to receive their email at a different address, they are expected to forward their messages from Mustang Express to the other address.

Forwarding WNMU Email

1. Log on to Mustang Express.
2. Click on the purple MAIL icon.
3. When this opens, click on the tool icon on the top right of the screen.
4. Scroll down to Your App Settings and click on Mail Communications Policy Statement Regarding Official Email (cont.)
5. On the left of the screen, scroll down to Accounts and click on Forwarding. 6. Enter the preferred email address.

Graduate Nursing Student Involvement in School of Nursing Governance

Students are encouraged to participate in governance activities related to their nursing program. To that end, faculty meeting agendas include student representative participation in bringing student concerns forward to faculty and taking program information back to their fellow students. Students will be excused from faculty meetings when discussion items are confidential or not appropriate for student participation.

Patient Confidentiality

The Privacy Rule of the Health Insurance Portability and Accountability Act (HIPAA) protects all individually identifiable health-related information pertaining to individuals. Nursing students will have access to protected information during clinical experiences and may discuss cases in confidential conferences with faculty and other students. They may not discuss this information with others outside of the activities of the nursing program. Any such breach of privacy shall be considered a breach of client confidentiality and constitutes grounds for immediate dismissal from the WNMU nursing education program. Students will sign a Confidentiality Agreement which will remain in the student file for the duration of the program. Students may be asked to sign confidentiality agreements at clinical agencies in addition to the agreements retained by the School of Nursing.

Social Networking Policy

Social media and electronic communication, while accessible and convenient, can also have unintended and potentially damaging consequences for individuals. The American Nurses Association (ANA) Code of Ethics with Interpretive Statements (2021) defines social media as any form of “electronic communication such as web sites for social networking and blogging where users create online communities to share information, ideas, personal

messages, and other content (p. 46).” Anyone using these social networking sites should become familiar with the concepts of defamation and invasion of privacy (ANA, 2021), HIPAA (USDHHS, 2023; CMS, 2023), and FERPA (Family Educational Rights and Privacy Act) (USDE, 2022). Provision Three (3) of the ANA Code of Ethics with Interpretive Statements (2021) requires the nurse to promote, advocate for and protect the rights, health, and safety of the patient. Interpretive statement 3.1 clearly outlines the nurse’s responsibilities toward protection of the rights of privacy and confidentiality (pp. 9-10).

Disqualifying Convictions

Conviction of a criminal statute while enrolled in the nursing program will result in referral to the Dean of the College of Professional Studies, the Vice President of Academic Affairs and the Vice President of Student Affairs for possible further action which may include disciplinary action including but not limited to reprimand, probation, suspension, and/or dismissal from the nursing track.

Graduate Nursing Student Suspected of Impairment in Class or Clinical Setting

Impairment is the inability or impending inability to deliver safe, professional care because of a behavioral, mental, or physical condition associated with drugs or alcohol (Toney-Butler & Siela, 2022). Impairment occurs when providers of care, such as nurses, are unable to provide safe and competent care because of the use of any mind-altering substances. Due to these conditions, nurses cannot perform their professional responsibilities and duties consistent with nursing standards (Lengel, 2023). Although WNMU maintains and enforces policies regarding substance and alcohol use, the special needs of the School of Nursing programs require additional procedures for handling the suspected drug/alcohol impairment of students enrolled in nursing coursework. Due to the nature of the course of study, students enrolled in nursing courses must not be under the influence of any substance (regardless of whether the use of the substance is legal or illegal, prescription or otherwise), which impairs or is likely to impair the student’s clinical judgment while in the classroom, clinical practicum, or laboratory setting.

Purpose

This policy aims to provide guidelines for identifying and addressing student impairment among FNP clinical students enrolled in the School of Nursing. Student impairment, which includes physical, psychological, or substance-related issues affecting a student's ability to fulfill academic and professional responsibilities, will be addressed with sensitivity, fairness, and a commitment to student’s well-being. This policy demonstrates the School of Nursing’s commitment to safeguard the health of the students and the public and

provides a safe place for students to learn. Drug or alcohol use, either while on-campus or in a classroom, clinical practicum, or laboratory setting can seriously endanger the safety of patients and students, as well as render it impossible to provide safe healthcare and service. Impairment or potential impairment of judgment in the clinical, practical or laboratory setting places the safety of students, patients, clinical staff, faculty, and the general public at unacceptable risk. This policy:

- Provides clear recommendations and consistent procedures for handling incidents of student under the influence of alcohol, drugs, or controlled substances that affect or are likely to affect judgment in the classroom, clinical, practical, or laboratory setting.
- Informs students of their responsibility to conform to all state and federal laws and regulations and WNMU policies, rules, and regulations regarding alcohol, drugs, or controlled substances.
- Provides recommendations regarding student impairment for all nursing faculty regarding problem recognition and implementation of this policy.
- Balances the need to safeguard the public with that of recognizing the rights of the student.

Student Impairment

WNMU SONAK recommends the following:

- Students who appear to be impaired or under the influence of drugs or alcohol while engaged in public contact related to coursework be asked to submit to drug or alcohol tests at their own expense.
- WNMU recognizes that facility policies differ and recommends that the preceptor follow all facility policies and procedures related to suspected caregiver impairment.
- Students who refuse to submit to testing will be sent home by their community preceptor.
- Students who refuse to submit to testing will not be allowed to participate in any classroom, laboratory, simulation, or clinical agency experiences; the refusal of a urinalysis related to suspected impairment follows the same protocol as a positive drug screen. Please see the Substance Use Testing Procedures outlined on pages 24-26 of the Post-MSN FNP Student Handbook.
- Depending on the circumstances, absences related to impairment will result in a clinical absence at a minimum and may result in dismissal from the program.
- Students who are impaired should coordinate transportation from the clinical site and should not drive themselves to the testing site and/or home.

- WNMU requires if an incident regarding suspected impairment occur, the clinical preceptor/mentor notifies the WNMU course faculty as soon as possible.

Substance Use Testing Procedures

Note that testing procedures may vary according to state and – in the information provided below – are based on the procedures for New Mexico.

1. The student will be removed from the practicum or clinical site without delay.
 - a. The student will be given an opportunity to explain the student's behavior.
 - b. If the instructor/preceptor suspects impairment, the student shall be sent for a drug screen to a suitable laboratory.
 - c. The preceptor should follow facility protocol for suspected impairment.
 - d. It is the recommendation of WNMU that a student suspected of impairment coordinates transportation from the clinical site rather than driving themselves.
2. To obtain a urine analysis for alcohol and drug testing, the student will follow the protocol established by the facility where they are conducting their clinical/practical experience.
3. The reporting of any incident to the applicable state Board of Nursing is at the discretion of the precepting agency, their policies, and individual state and licensing statutes.
4. The student will not be able to return to the clinical or practicum site until they have met with the Associate Dean of the School of Nursing to review the urinalysis results. The student remains responsible for all course or program requirements during such period.
 - a. If the urinalysis is negative, after meeting with the student as outlined above, lead faculty of the course will notify the agency preceptor that the student is able to return to the clinical site.
 - b. If the urinalysis is positive, after meeting with the student as outlined above, faculty will notify the agency preceptor that the student is not able to return to the clinical site.
5. The SONAK will only accept urinalysis results sent certified mail from the testing facility.
 - a. A copy of the urinalysis will be uploaded to the student's CastleBranch account, but it will not be accepted as the final result without a paper copy that originates from the testing site, sent to the Associate Dean of SONAK via certified mail.

6. If the test results are negative, then the student will meet with the instructor and the Associate Dean of the School of Nursing within two working days of the receipt of the test results to discuss returning to classes (see 4a).
7. If the test result is positive, then the student may request and pay for a retest of the collected (split) urine specimen at the original laboratory or another certified laboratory.
 - a. Results from the second test will be sent to the Associate Dean of SONAK via certified mail, originating from the testing facility. This is the only way a second test result will be accepted by SONAK MSN Program.
8. If the initial drug or alcohol screen is positive and the student declines a second test at their own expense (see item 7, 7i), then the following actions will occur:
 - a. The student will be notified by the Associate Dean of the School of Nursing or identified designee of the results of the test and will be dismissed from the program.
 - b. All documentation will be sent to the Dean of the College of Professional Studies, the Vice President of Academic Affairs, and the Vice President of Student Affairs and Enrollment Management for further action per the WNMU Sanctions for Violations of the WNMU Student Code of Conduct.
 - c. If the student opts for a re-test of the split specimen at their own expense, they remain on suspension from clinical site activities awaiting the test results of the second specimen. Students are responsible for all coursework during this period.
 - d. The results of the second test will follow the same procedure as outlined above, depending on the results of the second test.
9. If a student admits to being impaired by drugs or alcohol at the clinical site, then the student will be removed from the site and treated as for a positive drug screen. The admission of drug or alcohol related impairment follows the same protocol as a positive drug screen.
 - a. Impairment related to other factors that do not include drug or alcohol, i.e. sleep deprivation, will be assessed individually. The student may still be asked to submit to a urinalysis and follow all clinical site policies and procedures.
10. If a student fails to comply with clinical site protocol for urinalysis, or refuses to have a drug screen completed, then such failure or refusal shall be treated as a positive drug screen. All documentation will be forwarded to the Dean of the College of Professional Studies, the Vice President of Academic Affairs and the Vice President of Student Affairs and Enrollment Management for further action.

11. Students testing positive for drugs and/or alcohol will be strongly advised to complete Drug/Alcohol Rehabilitation Program or a Diversion Program through their state Board of Nursing.
12. Results of the test(s) and the contents of the Student Documentation Form shall remain confidential and may be released only to the appropriate faculty of the School of Nursing, Associate Dean for Nursing and Kinesiology (SONAK), Dean of the College of Professional Studies, the Vice President of Academic Affairs, and the Vice President of Student Affairs and Enrollment Management and those with a legitimate need to know.

Re-admission Opportunities After Program Dismissal (Impairment)

If a student is dismissed from the School of Nursing and/or WNMU for impairment and the student thereafter appeals and is allowed to return to the nursing program, the following steps will be required prior to re-entry.

- All WNMU School of Nursing requirements associated with the dismissal must be met.
 - All general admission criteria to the Graduate Division and the MSN Program must be met.
 - The student must hold a valid, unencumbered RN license in the United States.
 - The student must provide a negative drug and alcohol urinalysis prior to re-entry.
 - i. The student will pay for the test, which will be conducted at a designated or certified laboratory.
 - ii. For results to be accepted by the School of Nursing and Kinesiology, the results must be sent from the testing laboratory to the Associate Dean of Nursing via certified mail.
 - iii. The student may be requested to submit to a random urinalysis at the discretion of the clinical preceptor/agency per their facility policy and protocol.
 - iv. A positive test will result in immediate dismissal and referred to the Vice President for Student Affairs office for further action with a recommendation from the School of Nursing for permanent dismissal from the nursing program. University guidelines, policies, and procedures will be followed.
13. Students who appeal any of the above decisions will remain on suspension pending outcome of the appeal. The procedure for the student appeal process may be found in the WNMU Program Dismissal Appeals Policy.

Definitions

Drug: A drug is any chemical substance that when consumed causes a change in an organism's physiology, including its psychology, if applicable. Drugs are typically distinguished from food and other substances that provide nutritional support. Consumption of drugs can be via inhalation, injection, smoking, ingestion, absorption via a patch on the skin, suppository, or dissolution under the tongue. In pharmacology, a drug is a chemical substance, typically of known structure, which, when administered to a living organism, produces a biological effect. A pharmaceutical drug, also called a medication or medicine, is a chemical substance used to treat, cure, prevent, or diagnose a disease or to promote well-being (AHSD, 2007; SMD, 2008; Ritter et al., 2023).

Legal Drugs: Legal drugs include over the counter and prescribed medications for the specific individual. The School of Nursing prohibits the use/abuse of such drugs to the extent that behavior or judgment is adversely affected.

Per the Food and Drug Administration (FDA, n.d.), a [legal] drug is defined as:

- A substance recognized by an official pharmacopoeia or formulary.
- A substance intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease.
- A substance (other than food) intended to affect the structure or any function of the body.
- A substance intended for use as a component of a medicine but not a device or a component, part or accessory of a device.
- Biological products are included within this definition and are generally covered by the same laws and regulations, but differences exist regarding their manufacturing processes (chemical process versus biological process) (n.d., para. 15).
-

Illegal Drugs: Illegal drugs include those controlled substances (certain drugs or substances that are subject to or have potential for abuse or physiological dependence) under federal or state law that are not authorized for sale, possession or use/abuse (confirmed, detectable levels), and legal drugs which are obtained or distributed illegally. Manufacture, use/abuse, possession, sale, purchase, or transfer of illegal drugs is prohibited (Title 42, 2008). The WNMU Student Handbook and WNMU Policies further elaborates on University policies concerning illegal drugs.

Impairment: the state of being diminished, weakened, or damaged, especially mentally or physically (Toney-Butler & Siela, 2022).

Chemical Impairment: [specific to healthcare]: The inability or impending inability to provide safe, professional activities and duties due to a behavioral, mental, or physical disorder related to alcohol or drugs. A chemically impaired person is one who is under the influence of a substance that interferes with mood, perception, or consciousness resulting in the physical and/or behavioral characteristics which affect the individual's ability to meet standards of performance, behavior and/or safety in classroom, clinical, practical or laboratory course settings (Toney-Butler & Siela, 2022; Lengel, 2023).

Legal Use of Substance under Direction of Healthcare Provider: A student taking legal drugs must be able to provide documentation of a medical reason for such in the event of a positive drug screen. This student may not participate in any clinical, practical or laboratory settings if impaired. All attendance policies remain in place and the student remains responsible for completing all requirements of the course or program. Working days are defined for the purpose of this section as Monday through Friday, excluding school holidays or WNMU closure periods. If the last day of the designated time period is a school holiday or WNMU closure period, the designated time period will run until the end of the next day which is not a school holiday or WNMU closure period. The term "WNMU closure period" includes the week of final exams.

Factors Suggesting Impairment

Students while in the classroom, patient care area, clinical, practical or laboratory setting may be asked to submit to a drug test, if cause or reasonable suspicion of substance use exists. Factors which could establish cause/reasonable suspicion include, but are not limited to:

- Unsteady gait
- Unusual sleepiness or drowsiness
- Slurred speech or change in the student's usual speech pattern
- Blood-shot eyes
- Unusually disheveled appearance
- Aggressive tone of voice or body language
- Physical aggression
- Odor of alcohol or marijuana
- Residual odor peculiar to some chemical or controlled substances
- Unexplained and/or frequent absenteeism during a scheduled class or clinical laboratory
- Personality changes or disorientation

- Inappropriate behavior which suggests that the student is under the influence of a chemical substance that impairs or could impair clinical, practical or laboratory judgment.
- Repeated failure to follow instructions, policies or procedures
- Violation of clinical, practical or laboratory facility or WNMU or School of Nursing safety policies
- Involvement in an accident or near-accident
- Decrease in manual dexterity and/or coordination in body movement
- Presence of drugs/drug paraphernalia in student's possession
- Alcohol in a student's possession
- Theft or absence of narcotics from the student's clinical or practical site(s)
(Toney-Butler et al., 2022; Trinkoff et al., 2021; Lengel, 2023; Knipe & Petula, 2007).

FNP Program Dismissal

In addition to those conditions described elsewhere in these guidelines, any of the following or a combination of the following are grounds for dismissal from the FNP program.

Performance in the clinical agency which could jeopardize the patient including:

Physical Hazard: Any action or inaction on the part of the student which threatens the patient's physical well-being. The critical elements for concluding that the student has caused a physical hazard will depend on the situation as judged by the instructor, in conjunction with the clinical preceptor (when one is involved), and the instructor's evaluation of the student's behavior. The instructor is alerted of behavior in the student which violates principles of safety, and/or lack of student preparation. Documentation is the responsibility of the instructor (Hughes, 2008).

Emotional Hazard: Any action on the part of the student which threatens the patient's emotional well-being. There are no pre-determined criteria listed under this area because they are entirely dependent upon the student, the patient, and the situation. The instructor will evaluate student behaviors, in conjunction with the clinical preceptor, which creates emotional distress to the student's patients. Documentation is the responsibility of the instructor (Hughes, 2008).

Failure to maintain patient confidentiality: Students must comply with Health Insurance Portability and Accountability Act (HIPAA) standards within each clinical/practicum facility. These standards for security, privacy and confidentiality apply to paper documents, electronic documents, information systems and verbal communications. Students will be cited and summarily dismissed from the program for failure to maintain patient confidentiality. Violations may include, but are not limited to:

- Username/Password/Log-in sharing

- Accessing a record of a patient and/or verbally communicating information about a patient without a legitimate reason.
- Releasing, disclosing, or sending patient data inappropriately or without proper permission or authorization, including social networking sites. (See the social networking policy.)
- Releasing data for personal gain.
- Intentional destruction or falsification of data
- Releasing data with the intent to alter any personal or associated outcome or to harm any individual or the organization.
- Inappropriate use of systems resources with knowledge and intent to cause corruption of data or network systems.
- Accessing the student's own medical records information or those of one or more relatives and taking inappropriate actions because of this access.
- Removal of patient data from the facility upon which the patient's identifying information is displayed (without marking out or otherwise covering the identifying information).
- Photographing or recording a client/patient without appropriate consent.
- Unacceptable behavior, including behavior that is contrary to the philosophy of the University, the nursing program, and/or the clinical agency. This includes any of the above listed behaviors, exceeding the proper scope of practice, breaching academic integrity, and failure to maintain ethical standards, legal standards, and client/patient confidentiality.
- Violation of codes of conduct specified in these guidelines, the WNMU catalog, or the WNMU Student Handbook.

If a student violates one of the above areas of concern, then the student will receive an "F" for the course or will be dropped from the course. Appeal of such action shall be provided under the Student Academic Complaints in the WNMU Student Guidelines. Students who are dismissed from the program for jeopardizing the patient or for unacceptable behavior will not be considered for readmission.

Scope of Discipline

In addition to dismissal, graduate nursing students may be subject to grade reduction, suspension or expulsion or other forms of discipline as deemed appropriate by the Associate Dean for the School of Nursing or WNMU Administration in accordance with WNMU policies and procedures.

Appeal from Dismissal

A nursing student dismissed or recommended for dismissal may appeal such action under the [WNMU Program Dismissal Appeals Policy](#).

Discrimination and Harassment Information

To report a violation of the Policy of Discrimination and Harassment, please refer to the Office of Civil

Rights and Title IX

Mailing Address:

Office of Civil Rights & Title IX

P.O. Box 680

Silver City, NM 88062;

Telephone Number: 575-538- 6025

Website: Home - Title IX (wnmu.edu)

Academic Integrity

The WNMU Academic Integrity Policy covers cheating and plagiarism. Violations of this policy are addressed through the Academic Integrity Procedures. Further details and information are available in the WNMU Student Handbook concerning academic integrity.

Student Academic Complaint Procedures

Students with a complaint involving the assignment of grades or the professional conduct of an instructor that does not involve a complaint of discrimination or harassment, or is not related to program dismissal, will refer to the WNMU Student Handbook's Student Academic Complaint Policy for the appropriate steps and information to address the complaint.

Early Academic Warning System

Any student whose class grade is less than 80% at the midterm of the semester should be brought to the attention of the course instructor and the FNP Program Director. The instructor is encouraged to use the system earlier in the semester if the student is failing the course. The following apply:

- Instructors should initiate contact via email with the student to explain the academic issues in the course. Academic issues can be – and are not limited to – these:

- no class participation, did not take exams, late submission of assignments, and other(s) as determined by instructor.
- The instructor should make at least two attempts to contact the student.
- If the student does not respond after two attempts or within 48 hours after the second attempt is made, then the instructor will complete an Early Academic Warning System form and forward this to the Nursing Advisor and Program Director.
- The Nursing Advisor will contact the student by email and/or phone to inquire about the student's situation.
- The Nursing Advisor will keep the instructor and the Program Director updated regarding the student's response to the inquiry.
- If the student does not respond, then the instructor, Program Director, and Nursing Advisor will discuss the next best step(s).
- The form will be placed into the student's file within the School of Nursing

Program Evaluation

- Faculty members will meet each semester to review all courses required of graduate nursing students. Data from student evaluations will be reviewed.
- Course evaluation forms submitted by students will be available to nursing faculty. A summary of student comments and suggestions are utilized to revise course content. Changes in course sequence, teaching methods, required courses and prerequisite courses will be discussed by faculty in May of each year. Data needed for the meeting will be presented by the Graduate Program Director/Associate Dean of Nursing. Information on the evaluation process will be submitted to the Vice President for Academic Affairs.
- Students will be asked to submit information on clinical/practicum learning. This information will be used to evaluate and revise plans for clinical/practicum experience.
- Information on library and audiovisual resources will provide data for future acquisition of materials. The Graduate Program Director will set a meeting for collaboration between library personnel and nursing faculty.
- Review of course evaluation forms will be completed at the end of each semester and/or summer session. Specific course revisions will be implemented before the course is presented again.
- The Graduate Program Director will be responsible for collecting and summarizing the data necessary for curriculum revision. All revisions will be submitted to university committees and the Board of Nursing.

Clinical Policies for Family Nurse Practitioner Students

Clinical and Practicum Placement

Students are expected to locate their own preceptor and clinical/practicum site. The goal is to ensure a strong working relationship between the preceptor and student and avoid the need to travel long distances or incur travel-related expenses. Students have better luck when they visit a potential site/preceptor in person and bring information and paperwork. The preceptor or office manager often agrees to complete the paperwork during the visit. The student should approach this initial visit as an “interview” and an excellent opportunity to “sell” their abilities/interest in becoming a leader in the organization or nurse practitioner. The practice site may be an excellent opportunity for future employment or valuable professional connections. Another option is to direct message providers/preceptors via LinkedIn. Students may also have professional relationships in the workplace, community group, church, etc., who may be able to serve as a preceptor or personally introduce them to someone who may be available. If students encounter difficulty finding a site/preceptor after multiple documented attempts, we offer assistance and support to ensure students can access the clinical practicum experiences they need. Please contact kathryn.vanravenstein@wnmu.edu for any questions.

Student Health: Illness/Injury During Clinical

Student Health

Student Health Services for all WNMU students are provided by Hidalgo Medical Services (HMS), although coverage is limited to areas where HMS is located. Explanation of coverage is found on the WNMU Coverage website.

Accidents

Any accidents that occur in the practicum setting must be reported immediately to the instructor. Illness or injury incurred during participation in the nursing program are not covered by the University risk management policy or the clinical agency policies (e.g., employee health or worker compensation policies). Students are encouraged to purchase personal medical insurance before attending an affiliated clinical agency. Students are expected to schedule for themselves and/or family any appointments with dentists and/or Primary Care Providers at times that do not conflict with class, clinical, and/or exam times.

Needle Stick Policy

Students sustaining a needle stick injury and/or percutaneous or mucous membrane exposure to blood and bodily fluid should:

- Report the incident to the infection control nurse at the facility and follow facility policy/protocol.
- Report the incident to the faculty as soon as possible/safe to do so.
- Complete an Incident Report form for the facility and WNMU School of Nursing.
- Evaluation and management of exposure will follow the latest CDC guidelines.

Clinical Disruption Policy

The Clinical Disruption Policy applies to any student who is a qualified individual with a documented disability causing a temporary lapse in progress within their clinical coursework

Procedure

- Students should alert the Program Director regarding a temporary or permanent disability that would necessitate a temporary lapse in their clinical coursework.
- Students must contact and register with the Wellness and Accessibility Services Office and provide appropriate documentation regarding accommodation needs.
- The Wellness and Accessibility Services Office will interact with the student to determine the appropriate accommodation to support the documented disability. This may involve engagement with the Faculty/Program Director to assess the appropriateness and acceptability of the accommodation.
- Wellness and Accessibility Services Office will contact the Faculty/Program Director, officially identifying the recommended accommodation to be provided to the student.
- The Faculty/Program Director will implement and oversee the applicable accommodation(s).

Policy Details

- Students will be provided with the appropriate amount of time as is medically necessary to navigate their disability with required clinical coursework. Keeping this in mind, the time provided to assist the student cannot fundamentally alter the requirements of the clinical assignment.
- Faculty will demonstrate flexibility in working with students who follow the abovementioned procedure.
- Standard accommodations may include but are not limited to (1) Allowance of a student to achieve a grade of Incomplete (“I”) in a course should the student have forty (40) clinical hours left to complete. Students must complete all clinical course hours by a date determined by the Faculty/Program Director. (2) Allow a student to

withdraw from a course at no charge via an application for a Tuition Fee Waiver should it be deemed that they do not meet the hour threshold for receiving an Incomplete or cannot complete the course due to their recorded disability.

- All students seeking medically based extensions or accommodations to clinical requirements or coursework in the program must obtain and provide medical clearance documentation to continue or return to clinical coursework. A health care provider providing treatment for the documented disability must provide documentation.

Policy Notes

- Students should work with the Faculty/Program Director and Clinical Site to determine how to complete the remaining hours in the course. All parties will explore appropriate alternatives to help the student.

Clinical Practicum Policies and Procedures

Health and Safety

All students participating in clinical/practicum experiences must meet health and safety requirements. Documentation must begin six (6) months prior to the practicum/clinical course and always meet requirements. See Appendix for all required items. Students cannot start any practicum experience until all requirements and documentation have been submitted to Castle Branch and verified by the Program Director.

Preceptors and Clinical Sites

Preceptors may be nurse practitioners, MDs, and DOs. Clinical sites will be determined by track/role specialization and minimal clinical expectations. Faculty are responsible for approving clinical site placements and will communicate with students before the start of each clinical course.

Preceptor Qualifications

- The preceptor must have a current unencumbered state license as an APRN or Physician, and at least one year of experience in an area of practice relevant to the student's clinical needs.
- Nurse Practitioners must have a master's or doctoral degree.
- Nurse Practitioners must have a national certification (exceptions are possible based on state board of nursing rules).
- Curriculum Vitae/Resume, copy of the license, and certification (as appropriate) are required for faculty approval.

Assignment of Preceptors

- Preceptors may not have more than one (1) student during a clinical day. Contact the clinical supervising faculty member if there are additional students and you are not seeing adequate patients.
- Students may spend no more than 10 hours on a clinical site in one day. Students may be placed in an office or clinic owned or managed by their employer. However, this cannot be the office, clinic, or unit where they are employed. Preceptors cannot be relatives, close friends, or the personal health care provider of the student.
- Preceptors will be provided with an orientation to each course, progressive expectations, and course outcomes and competencies. The preceptor will provide an acknowledgment and agreement before starting each clinical experience.

Scheduling Clinical Hours

The student should schedule clinical practicum hours in keeping with the preceptor's schedule and availability - not the student's schedule or convenience. Before beginning the clinical practicum, the student and preceptor must agree on the days and times that the student will be in the clinical site. The student's personal and work schedules are expected to accommodate participation in the required clinical hours specified by the course. Students may not begin clinical practicum hours before the first official day of the semester that the course starts. All required supervised practice hours must be completed by the end of the semester unless an Incomplete has been authorized by the clinical faculty (see the Clinical Disruption Policy). Clinical hour scheduling for the semester must be completed in Typhon no later than the 3rd day of the first week of the course. Any changes must be communicated to the clinical supervising faculty member via email at the same time the change is made in Typhon.

Number of Clinical Hours Required

The clinical hour requirements are detailed in the course syllabus, which students are to send to preceptors before the start of the academic semester. Students are expected to schedule a clinical day at least once a week throughout the semester. The student will notify the clinical supervising faculty regarding how clinical time will be scheduled, e.g., ten-hour shifts, one day per week, or blocks of time, following a discussion with the preceptor. Students are not permitted to be in the clinical site during weekends, holidays, or other times when the university is not in session without written approval of the clinical supervising faculty member at least 2 weeks in advance of the scheduled time.

Student Attendance on Scheduled Clinical Days

The student must attend the number of clinical hours consistent with the program requirements. Clinical hours completed above the course minimum requirements do not count toward the required hours for any other course. Students should not assume they will be permitted to make up clinical hours with their preceptor if they fail to complete the required number of clinical hours for the term. The clinical supervising faculty and course instructor must approve extending clinical hours beyond the semester the course is scheduled (see the Clinical Disruption Policy). Suppose a student cannot complete the required hours due to an unforeseen event. In that case, the student must notify the clinical supervising faculty immediately to determine if the situation warrants an extension of the clinical practicum and under what conditions this will occur. On or before the first clinical day, students should identify the procedure for contacting the preceptor in case of absence. If a student is to be absent for a scheduled clinical day (due to illness or an emergency), the student should notify the preceptor before the beginning of the clinical

day. Additionally, the student must inform the clinical supervising faculty and course instructor of the absence and negotiate make-up clinical time with the preceptor. If the student is not attending clinical days/hours as scheduled, the preceptor should promptly notify the clinical supervising faculty and the course instructor. In the event of a planned absence of the preceptor, they will plan for a qualified back-up preceptor. The clinical placement coordinator and course instructor will determine credentialing needs for back-up preceptor if this is anticipated for more than 1 day.

Professional Dress and Behavior

Students are expected to dress appropriately (business casual) and behave in a professional manner consistent with Occupational Safety and Health Administration (OSHA) standards. The clinical site may specify an alternative dress code (i.e., scrubs) following OSHA and state law considerations. Students must wear their WNMU picture identification nametag and always introduce themselves as a Student in the clinical setting.

Preparation

The student should prepare for the clinical experience recommended by the preceptor, course instructor, clinical supervising faculty, and the Program Director. This preparation includes understanding and meeting course learning objectives, conferring with faculty on areas of weakness that need to be reviewed, and seeking independent learning experiences that will promote self-confidence and competence. It is recommended that before starting the clinical experience, the preceptor will discuss the patient population and the most common health problems the student can expect to encounter at the clinical site with the student and supervise clinical faculty. The student is expected to prepare for the clinical experience by reviewing reference materials relevant to the patient population and diagnoses they may encounter in the clinical setting. On the first day of the clinical experience, the preceptor will orient the student to the clinical practice setting, facility policies and procedures, and required safety and learning modules.

Patient Care Responsibility and Medical Record Documentation

The student is expected to document in the patient's medical record (paper or electronic), if permitted by the facility, and sign all entries with their first and last name followed by a student designation (i.e., Jane Doe, FNP Student). Since the preceptor is legally responsible for examining the patient, establishing the diagnosis, and determining the treatment and evaluation plan, they must also sign the medical record and all billing documentation. In some settings, students are not permitted to document in the official patient medical record and will need to provide alternative sample documentation to the preceptor. Patient

confidentiality, consistent with the Health Insurance Portability and Accountability Act (HIPAA), must be observed. At no time may patient records be copied, photographed, or removed from the clinical site. Any infraction of this policy will result in a failure of the course and a written notice in the student file.

Clinical Logs

Students are required to keep a log of all patient encounters and clinical hours throughout their clinical courses. Students maintain an official clinical log in an electronic format. For this purpose, WNMU utilizes Typhon. The use of Typhon enables students to track the number of patient encounters, procedures, diagnoses and ICD codes, diagnostic testing ordered, and medications prescribed. Students enter the clinical data regarding patient encounters into Typhon at the end of each clinical day. Patient encounters must be entered into Typhon within 72 hours of the clinical day to be considered valid. Patient encounters entered after 72 hours may not be approved, which can result in additional clinical hours being required. Clinical hours and required case logs in Typhon must be verified and approved by the clinical supervising faculty member to pass the course. It is the responsibility of the clinical supervising faculty to routinely evaluate the clinical case and time logs. Patient confidentiality, consistent with the Health Insurance Portability and Accountability Act (HIPAA), must be observed. Specifically, the information in Typhon will disclose no patient identifiers. Students will receive information and instructions on the use of Typhon during orientation to the clinical experience.

Evaluation of the Preceptor and Clinical Site

Following the clinical practicum, the student will give feedback to the preceptor regarding their satisfaction with the quality of their learning experience. Students will complete an evaluation of the preceptor and clinical site. This evaluation will be available and completed in Typhon. Preceptors receive a login and password from Typhon, and reminders are sent out via the preceptor email address on record when evaluations are due to be completed. The preceptors will complete a mid-term and final student evaluation for all clinical courses.

Clinical Student Responsibilities

1. Submit the [FNP Student Clinical Site Request](#) at least six (6) months prior to the start of a clinical course to the Program Director.
2. WNMU Nursing faculty assigns students to clinical sites after the appropriateness of site and preceptor have been determined. WNMU requires an affiliation agreement to be in place before student attendance at the clinical site. Preceptors are required to complete credentialing and a preceptor agreement for each student. For a preceptor to be approved, documentation of the preceptor's license, certification, resume or curriculum vitae, and acknowledgment of receipt of the preceptor handbook must be on file. Students are not permitted to participate in clinical experiences at sites that the nursing department does not approve.
3. Clinical experiences are Monday through Friday during regular business hours. Evenings, weekends, and holidays are not permitted unless prior arrangements have been made with the clinical supervising faculty, clinical coordinator, and lead course faculty member at least two weeks in advance. All students must complete the required clinical hours as verified by your clinical supervising faculty member and case logs in Typhon to pass the course.
4. Students are expected to begin clinical experiences in the first week of classes and attend at least once weekly through finals week unless otherwise notified by the lead course faculty member. This may lead to more hours than required for the course and provides some flexibility in case of student or preceptor illness, vacation, or unexpected days off. Hours in excess of course requirements do not count towards another course.
5. Maintain patient confidentiality. Comply with HIPAA standards per clinical agency and course syllabi policy. Under no circumstance may records be copied, photographed, or removed from the agency.
6. Adhere to all clinical agency policies and procedures. Students are required to identify themselves and sign any medical records as a WNMU FNP Student.
7. Maintain all required documentation, including current Basic Life Support (BLS), immunizations, health care insurance, and student professional liability insurance in Typhon. The student is responsible for ensuring all documentation is current and updated throughout clinical practicums.
8. Adhere to all WNMU policies and procedures and your state Board of Nursing rules. Failure to exhibit integrity, ethical conduct, professional standards, or any violation of the responsibilities listed herein may result in a failing grade or dismissal from the nursing program and the University. Student conduct in the clinical setting must be in a manner that demonstrates safety, adherence to professional standards, and

reflects positively upon WNMU. Furthermore, the student will notify the clinical supervising faculty immediately of any unprofessional behavior or breach of contract by the preceptor.

9. Comply with all health documentation and other professional requirements of the clinical agency prior to the start of the clinical experience, including any request for a drug screen or additional background check. Students who are unable to successfully complete these requirements will not be permitted to complete the FNP track. In addition, each site may have unique requirements which the student is responsible for fulfilling.
10. Be prepared to work the day(s) and hours of the preceptor, as agreed upon between the student, the preceptor, and the clinical supervising faculty. Students may have an occasional opportunity to work with an additional practitioner on-site. The primary preceptor must be on site during this experience. All preceptors must be approved and credentialed prior to extended periods of supervision.
11. Maintain a clinical log per course in Typhon. Patient experiences must be entered within 72 hours of a clinical day.
12. Attend all scheduled clinical days or notify the supervising clinical faculty and the clinical preceptor if an absence is necessary. Arrange for make-up time.
13. Collaborate with the clinical preceptor and clinical supervising faculty to develop specific learning goals for this clinical experience; ensure mid-term and final preceptor evaluations of student are completed.
14. Demonstrate to the preceptor competence of specific skill(s) prior to performing them on the patient without direct supervision.
15. Maintain the student role. At no time is the student to assume a fully independent role in seeing patients without appropriate collaboration and reporting to the preceptor per the progressive expectation algorithm.
16. Arrange appointments, either in person or electronically, with the supervising clinical faculty to discuss progress toward goal achievement.
17. Check the WNMU email account for messages every 24 hours. Your WNMU student email does not reach the Canvas LMS inbox.

Appendix A: WNMU FNP Clinical Documentation Requirements

All students participating in clinical/practicum experiences must meet the following health and safety requirements to be enrolled in clinical courses. To ensure that documentation always meets requirements, students must provide evidence prior to the start of each semester. For example, if a CPR card expires in September, the card needs to be renewed prior to the start of the FALL semester in August.

Influenza vaccines or a declination of refusal must be received no later than two (2) weeks from the time that students are notified that they are available. Failure to keep documents up to date may result in an administrative withdrawal from the course or prohibition from attending clinical until the deficit is corrected.

Registered Nurse (RN) license must be active and unencumbered in the student's primary licensing state, as well as the state of clinical placement, as applicable throughout the entire program. Licenses will be verified at the start of each semester.

Health insurance must be maintained in active status throughout all clinical rotations.

Table 6

FNP Clinical Documentation Requirements

Submitted Once	
Test	Details
Tuberculin ¹	2-step TST OR QuantiFERON OR T-SPOT <i>TB blood tests are not affected by the BCG vaccine</i>
COVID-19	Some sites require COVID vaccines and boosters for attendance. Students will need to comply with the requirements of their site(s).
Hepatitis B	Choice of either the 2 or 3-dose series documentation (and any boosters) and post-vaccination any anti-HBs titers showing immunity OR recent anti-HBs titers showing immunity OR non-responder documentation OR signed declination
Measles, Mumps, Rubella (MMR)	2-dose series documentation OR titer
Tetanus/Diphtheria/Pertussis	Tdap or Td vaccination date within 10 years
Varicella (chicken pox)	Vaccine OR immunity by titer
Authorization for Release of Record	For clinical practicum site
BLS	American Heart Association (AHA) BLS provider or Military Training Network (MLT) course; must be current through the semester to be placed in clinical/practicum
General Waiver or Releaser of Liability Form	(link)
Required Education	Each healthcare institution will communicate to faculty and students any required educational content to be completed prior to participating in clinical/practicum experience.

¹ TB screening and testing of healthcare personnel:
<https://www.cdc.gov/tb/topic/testing/healthcareworkers/htm>

Submitted Annually (as applicable)	
Tuberculin¹	1-step TST OR QuantiFERON OR T-SPOT OR known positive annual symptom check from health care provider Tuberculosis Chest X-RAY: required only for a first-time positive TB test.
Influenza	Effective dates 10/01-04/30 annually OR signed declination <i>Note: clinical practicum site has the right to refuse access to the site or require masks at their discretion</i>
Professional Liability Insurance	Must be current through a semester to be placed in clinical/practicum
Background check	National Criminal Background Check including Excluded Provider Search on OIG and GSA. <i>Note: clinical/practicum facility has the right to request additional background checks including monthly OIG & GSA and drug screening at student costs</i>
Additional Requirements	This list may change, as clinical/practicum sites may require more than the program standard minimum. Changes will be communicated to the student in writing within 10 days of University notification.

Appendix B: WNMU FNP Clinical Requirements

Table 7

FNP Clinical Requirements

Population	Total Hours (Recommended)	Minimum Number of Visits (Recommended)	Procedures/Visits (Recommended)	Percent of Time	Course Focus
Lab	16 hours prep and activities		Suturing, biopsy, toenail removal, I&D	0%	NUR 600
Pediatric	75-100 hours	75		15%	NUR 610, 620, 694, 695
Newborn (0-4 weeks) exams		15			
Well child (5 weeks – 5 years)		20	15 well-child exams		
School-age (5- 12 years)		20	5 well-child exams		
Adolescents (13-17)		20	10 wellness exams or sports PE		
Adult	452-602 hours	452 total		60%	NUR 610, 620, 694, 695
Ages 18-65 and Geriatric 66+			226 episodic, acute and wellness exams 226 chronic care		
Women’s Health	75-100 hours	75 visits	10 pelvic examinations	15%	NUR 610, 620, 694, 695
Specialty **	100 hours		See below for options.	10%	NUR 696

This chart represents the recommended minimum requirements for clinical hours, visits, and procedures for completing the FNP Clinical Competencies.

Potential sites include clinics, medical offices, mobile clinics, rural health centers, telehealth, retail health (limited), long-term care settings, school or college health centers, employee health, health departments, and other appropriate settings for the course and content.

Women's Health Visits may include well-woman examinations, dysmenorrhea, STI testing, pelvic pain, breast mass, menopause and menopause-related problems, contraception, pregnancy, and post-partum.

**Specialty areas may include dermatology, urgent care, cardiology, pulmonary, long-term care, additional rotations in pediatrics, women's health and gerontology, and other common specialties. The application for a specialty rotation must be pre-approved and submitted 6 weeks prior to the end of NUR 694.

Appendix C: Family Nurse Practitioner Preceptor Evaluation of Student

NOTE THIS INFORMATION IS COLLECTED ELECTRONICALLY VIA TYPHON

FAMILY NURSE PRACTITIONER STUDENT CLINICAL PRACTICUM Clinical Competency
Evaluation

Student Name: _____ Preceptor Name: _____

Practicum dates: _____ to _____

Course Number: _____

The midterm and final evaluations are based on accepted nurse practitioner competencies* and provide individualized feedback to students regarding strengths and areas for growth. The faculty has established expected averaged competency levels **for each domain** that students should meet by the **END of each clinical course:**

NUR 610 3.0 average

NUR 620 3.0 average

NUR 694 4.0 average

NUR 695 4.5 average

FOR MID-TERM EVALUATION: IT IS NOT EXPECTED THAT THE STUDENT WILL REACH THE END OF COURSE AVERAGES. PLEASE MARK ACCORDINGLY AND PROVIDE COMMENTS DETAILING AREAS FOR IMPROVEMENT.

PLEASE EVALUATE THE STUDENT'S PERFORMANCE BY SCORING EACH ELEMENT USING THE FOLLOWING CRITERIA:

NA = Not applicable or not observed

1 = **Omits** element or achieves **minimal competence** even with assistance

2 = Needs a **lot of direct supervision**

3 = Needs **some direct supervision**

4 = Needs **minimal direct supervision**

5= **Mostly independent** practice

DOMAIN II: PERSON-CENTERED CARE						N A
NP2.3 Integrate advanced assessment in NP practice. (AACN 2.3)	1	2	3	4	5	
1. Obtains and accurately documents a relevant health history for patients of all ages and in all phases of the individual and family lifecycle using collateral information, as needed.						
2. Performs and documents complete or symptom-focused physical examinations on patients of all ages, (including developmental and behavioral screening, physical exam, and mental health evaluations).						
3. Demonstrates proficiency in family assessment , including identification of health and psychosocial risk factors of patients across the lifespan and families in all stages of the family life cycle.						

4. Assesses specific family health needs and identifies and plans health promotion interventions for families at risk, within the context of community.							
5. Assesses the impact of acute and/or chronic illness or common injuries on the family.							
6. Distinguishes between normal and abnormal changes across the lifespan.							
Comments:							
NP 2.4 Diagnose actual or potential health problems and needs (AACN 2.4)							N A
	1	2	3	4	5		
1. Identifies signs and symptoms of acute or chronic physical and mental illnesses across the lifespan.							
2. Manages diagnostic testing through the ordering and interpretation of age-, gender-, and condition-specific tests and screening procedures, with consideration of the costs, risks, and benefits to the individual.							
3. Applies theoretical knowledge and current research findings in analyzing and synthesizing data to make clinical judgments and decisions , individualizing care for individuals and families.							
4. Formulates comprehensive differential diagnoses and prioritizes health problems, considering epidemiology, life stage development and environmental and community characteristics.							
5. Assesses decision-making ability, consults, and refers, appropriately							
Comments:							
NP 2.5 Manage care of individuals (AACN 2.5) NP 2.7 Evaluate outcomes of care. (AACN 2.7) NP 2.9 Provide care coordination. (AACN 2.9)							N A
	1	2	3	4	5		

1. Uses knowledge of family theories and development stages to individualize care provided to individuals and families.							
2. Treats common acute, chronic, or acute exacerbations of physical and/or mental illnesses across the lifespan, to minimize complications and promote function and quality of living, including women’s reproductive health, perinatal care, and end of life issues.							
3. Prescribes medications , understanding altered pharmacodynamics and pharmacokinetics with special populations, such as infants and children, pregnant and lactating women, and older adults.							
4. Prescribes therapeutic devices with consideration of the costs, risks, and benefits to the individual.							
5. Manages individual and family responses to the plan of care through evaluation, modification and documentation that includes response to therapies and changes in condition.							
6. Evaluates coping and support systems, lifestyle adaptations and resources for patients and families, facilitates transition and coordination of care between and within health care settings and the community and initiates appropriate referrals to other healthcare professionals.							
7. Adapts interventions to meet the complex needs of individuals and families arising from aging, developmental/life transitions, comorbidities, psychosocial, and financial issues.							
8. Facilitates family decision-making about health.							
9. Performs primary care procedures.							
Comments:							
<p align="center">NP 2.1 Engage with individuals and/or caregivers in establishing a caring relationship (AACN 2.1)</p> <p align="center">NP 2.2 Communicate effectively with individuals (AACN 2.2)</p> <p align="center">NP 2.8 Promote self-care management. (AACN 2.8)</p>							NA
1. Maintains a sustainable partnership with individuals and families and communicates effectively with the individual and the family, provides anticipatory guidance and facilitates decision-making.							

2. Analyzes the impact of aging and age-and disease-related changes in sensory/perceptual function, cognition, confidence with technology, and health literacy on the ability and readiness to learn and tailor interventions accordingly.						
3. Applies principles of self-efficacy/empowerment in promoting behavior change.						
4. Develops educational interventions appropriate to individual and/or family needs, language and cultural beliefs, values, and cognitive level; reinforces positive health behaviors and incorporates self-care activities.						
5. Demonstrates knowledge and skill in addressing sensitive issues , such as sexuality, finances, mental health, terminal illness, and substance abuse and provides anticipatory guidance, teaching, counseling, and education for self-care.						

6. Assesses and promotes self-care in patients with disabilities.						
7. Plans and orders palliative care and end-of-life care, as appropriate.						

Comments:	
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<p style="text-align: center;">NP DOMAIN IX: PROFESSIONAL ACUMEN (AACN DOMAIN IX)</p> <p>NP 9.1 Demonstrate an ethical comportment in one's practice reflective of nursing's mission to society. (AACN 9.1)</p> <p>NP 9.2 Employ participatory approach to NP care. (AACN 9.2)</p> <p style="text-align: center;">NP Domain 10: Personal and Professional Leadership (AACN Domain X)</p> <p>NP 10.2 Demonstrate professional maturity. (AACN 10.2)</p>	N A
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1. Recognizes own biases and delivers care to all individuals in an ethical manner						
2. Demonstrates a professional novice NP identity						
3. Conducts self in a professional manner. Shows up to clinical on-time and prepared. Treats others with respect.						

Comments:			
PRECEPTOR COMMENTS:	STUDENT COMMENTS:		FACULTY COMMENTS:

Adapted from:

American Association of Colleges of Nursing. (2021). The Essentials: Core Competencies for Professional Nursing Education. <https://www.aacnnursing.org/Portals/42/AcademicNursing/pdf/Essentials-2021.pdf>

National Organization of Nurse Practitioner Faculties, (2022). National Organization of Nurse Practitioner Faculties' Nurse Practitioner Role Core Competencies. <https://www.nonpf.org/page/14>

Appendix D: Family Nurse Practitioner Progressive Clinical Expectations

NUR 610 (188 hours)	Weeks 1-5 (1-2)	Weeks 6-8 (3-4)	Weeks 9-11 (5-7)	Weeks 12-16 (8-9)
1. Completes facility orientation and reviews relevant policies and procedures.				
2. Communicates effectively with office staff, nurses, and other professionals.				
3. Maintains professional standards including dress, timeliness, and language.				
4. Demonstrates interest and takes initiative in learning.				
5. Has references and uses them effectively and efficiently in the clinical setting.	1	2	2	3
6. Reviews chart prior to encounter.	1	2	2	3
7. Demonstrates effective communication with patients and their families including ability to recognize cultural nuances and manage sensitive or emotional issues.	1	2	2	3
8. Obtains subjective assessment data: history of present illness (HPI), review of systems (ROS), past medical history (PMH), medications, family history (FH), and relevant social history (SH) for patients presenting for complete physical examinations and episodic visits. Demonstrates logical systematic methodology in obtaining subjective patient data. Students will see at least 4 midterm and no more than 6 (after midterm) adult patients in an 8–10-hour clinical day.	1	2	2	3

9. Performs appropriate and accurate physical examination on the adult patient (18+) for the presenting problem using correct techniques and equipment.	1	2	2	3
10. Identifies appropriate diagnostic testing as appropriate.	1	2	2	3
11. Formulates a list of differential diagnoses (considers at least three diagnoses for most patients).	1	2	2	3
12. Arrives at correct diagnosis based on clinical data.	1	2	2	3
13. Creates an evidence-based treatment plan that includes pharmacologic and non-pharmacologic treatments, lifestyle modifications, referrals, expected outcomes, and plan for follow-up care.	1	2	2	3
14. Communicates detailed and clinically sound follow-up plan, including relevant and cardinal symptoms for which they should seek treatment.	1	2	2	3
15. Provides anticipatory guidance, teaching, counseling, and specific information about the diagnosis. Provides written information to patients when appropriate.	1	2	2	3
16. Chooses appropriate medication and therapeutic dosage.	1	2	2	3
17. Determines health care maintenance and screening needs utilizing USPSTF recommendations.	1	2	2	3-4
18. Documents patient visits using a SOAP format that demonstrates clarity, organization, and appropriate use of medical terminology.	1	2	2	3-4
19. Presents patients to the preceptor in a thorough, concise, and organized manner.	1	2	2	3-4
20. Identify patients whose health needs require urgent or emergent care.	1	2	2	3-4
21. Completes patient encounter in a timely manner. New patient or complete exam (90 minutes); Chronic or complex visit (60 minutes); Acute episodic visit (45 minutes).	1	2	2	3-4
22. Incorporates cost in decision-making.	1	2	2	3

23. Correctly uses ICD coding for diagnosis documentation.	1	2	2	3
NUR 620 (188 hours)	Weeks 1-5 (1-2)	Weeks 6-8 (3-4)	Weeks 9-11 (5-7)	Weeks 12-16 (8-9)
1. Completes facility orientation and reviews relevant policies and procedures.				
2. Communicates effectively with office staff, nurses, and other professionals.				
3. Maintains professional standards including dress, timeliness, and language.				
4. Demonstrates interest and takes initiative in learning.				
5. Has references and uses them effectively and efficiently in the clinical setting.				
6. Reviews chart prior to encounter.	3	3	3	3
7. Demonstrates effective communication with patients and their families including ability to recognize cultural nuances and manage sensitive or emotional issues. Communication incorporates knowledge of child growth and development.	3	3	3	3
8. Obtains subjective assessment date: history of present illness (HPI), review of systems (ROS), past medical history (PMH), medications, family history (FH), and relevant social history (SH) for patients presenting for complete physical examinations and episodic visits. Demonstrates logical systematic methodology in obtaining subjective patient data. Students will see 6 through midterm and no more than 8 (after midterm) adult and adolescent patients in an 8-10 hour clinical day.	3	3	3	3
9. Performs appropriate and accurate physical examination on adult and adolescent patients (13-17 only) for the presenting problem using correct techniques and equipment. Performs examination considering the patient's age and stage of development.	3	3	3	3
10. Identifies appropriate diagnostic testing as appropriate.	3	3	3	4

11. Formulates a list of differential diagnoses (considers at least three diagnoses for most patients).	3	3	3	4
12. Arrives at correct diagnosis based on clinical data.	3	3	3	4
13. Creates an evidence-based treatment plan that includes pharmacologic and non-pharmacologic treatments, lifestyle modifications, referrals, expected outcomes, and plan for follow-up care. Incorporates knowledge of growth and development in development of treatment plan.	3	3	3-4	4
14. Communicates detailed and clinically sound follow-up plan, including relevant and cardinal symptoms for which they should seek treatment.	3	3	3-4	4
15. Provides anticipatory guidance, teaching, counseling, and specific information about the diagnosis. Provides written information to patients when appropriate.	3	3	3-4	3-4
16. Chooses appropriate medication and therapeutic dosage. Can calculate medication dosage for pediatric patients.	3	3	3-4	4
17. Determines health care maintenance and screening needs for adult and pediatric patients utilizing USPSTF recommendations.	3	3	3-4	3-4
18. Documents patient visits using a SOAP format that demonstrates clarity, organization, and appropriate use of medical terminology.	3	3	3	3-4
19. Presents patients to the preceptor in a thorough, concise, and organized manner.	3	3	3	3-4
20. Identify patients whose health needs require urgent or emergent care.	3	3	3	3-4
21. Completes patient encounter in a timely manner. New patient or complete exam (60 minutes); Chronic or complex visit (45 minutes); Acute episodic visit (30 minutes).	3	3	3	3-4
22. Incorporates cost in decision-making.	3	3	3	3-4
23. Correctly uses ICD coding for diagnosis documentation.	3	3	3	3-4

NUR 694 (188 hours)	Weeks 1-5 (1-2)	Weeks 6-8 (3-4)	Weeks 9-11 (5-7)	Weeks 12-16 (8-9)
1. Completes facility orientation and reviews relevant policies and procedures.				
2. Communicates effectively with office staff, nurses, and other professionals.				
3. Maintains professional standards including dress, timeliness, and language.				
4. Demonstrates interest and takes initiative in learning.				
5. Has references and uses them effectively and efficiently in the clinical setting.				
6. Reviews chart prior to encounter.	5	5	5	5
7. Demonstrates effective communication with patients and their families including ability to recognize cultural nuances and manage sensitive or emotional issues. Evaluates and incorporates communication challenges (vision and hearing deficits).	5	5	5	5
8. Obtains subjective assessment data: history of present illness (HPI), review of systems (ROS), past medical history (PMH), medications, family history (FH), and relevant social history (SH) for patients presenting for complete physical examinations and episodic visits. Demonstrates logical systematic methodology in obtaining subjective patient data. Consider co-morbidities and chronic illness when obtaining data. Students will see 8-10 adult, pediatric, and geriatric patients in an 8-hour clinical day. Primary focus woman and men's health, birth to 12, and older adult.	5	5	5	5
9. Performs appropriate and accurate physical examination on patients across the life span for the presenting problem using correct techniques and equipment.	3	4	4	4-5
10. Identifies appropriate diagnostic testing as appropriate.	3	4	4	4-5
11. Formulates a list of differential diagnoses (considers at least three diagnoses for most patients).	4	4	4	4-5

12. Arrives at correct diagnosis based on clinical data.	3	4	4	4-5
13. Creates an evidence-based treatment plan that includes pharmacologic and non-pharmacologic treatments, lifestyle modifications, referrals, expected outcomes, and plan for follow-up care. Considers functional status and polypharmacy when developing treatment plan.	3	4	4	4-5
14. Communicates detailed and clinically sound follow-up plan, including relevant and cardinal symptoms for which they should seek treatment.	3	4	4	4-5
15. Provides anticipatory guidance, teaching, counseling, and specific information about the diagnosis. Provides written information to patients when appropriate.	3	4	4	4-5
16. Chooses appropriate medication and therapeutic dosage.	3	4	4	4-5
17. Determines health care maintenance and screening needs utilizing USPSTF recommendations.	3	4	4	4-5
18. Documents patient visits using a SOAP format that demonstrates clarity, organization, and appropriate use of medical terminology.	4	4	4	4-5
19. Presents patients to the preceptor in a thorough, concise, and organized manner.	4	4	4	4-5
20. Identify patients whose health needs require urgent or emergent care.	4	4	4	4-5
21. Completes patient encounter in a timely manner. New patient or complete exam (45 minutes); Chronic or complex visit (30- 45 minutes); Acute episodic visit (15-30 minutes).	3-4	4	4	4-5
22. Incorporates cost in decision-making.	4	4	4	4-5
23. Correctly uses ICD coding for diagnosis documentation.	4	4	4	4-5
NUR 695 (188 hours)	Weeks 1-5 (1-2)	Weeks 6-8 (3-4)	Weeks 9-11 (5-7)	Weeks 12-16 (8-9)

1. Completes facility orientation and reviews relevant policies and procedures.				
2. Communicates effectively with office staff, nurses, and other professionals.				
3. Maintains professional standards including dress, timeliness, and language.				
4. Demonstrates interest and takes initiative in learning.				
5. Has references and uses them effectively and efficiently in the clinical setting.				
6. Reviews chart prior to encounter.	5	5	5	5
7. Demonstrates effective communication with patients and their families including ability to recognize cultural nuances and manage sensitive or emotional issues. Evaluates and incorporates communication challenges (speech, vision, and hearing deficits).	5	5	5	5
8. Obtains subjective assessment data: history of present illness (HPI), review of systems (ROS), past medical history (PMH), medications, family history (FH), and relevant social history (SH) for patients presenting for complete physical examinations and episodic visits. Demonstrates logical systematic methodology in obtaining subjective patient data. Consider comorbidities and chronic illness when obtaining data. Students will see 10-12 patients in an 8-hour clinical day. Specialty rotations are limited to 6-7 patients and expectation level 3-4.	4-5	4-5	5	5
9. Performs appropriate and accurate physical examination on adult, pediatric, and geriatric patients (specific components) for the presenting problem using correct techniques and equipment.	4-5	4-5	5	5
10. Identifies appropriate diagnostic testing as appropriate.	4-5	4-5	5	5
11. Formulates a list of differential diagnoses (considers at least three diagnoses for most patients).	5	5	5	5
12. Arrives at correct diagnosis based on clinical data.	5	5	5	5

13. Creates an evidence-based treatment plan that includes pharmacologic and non-pharmacologic treatments, lifestyle modifications, referrals, expected outcomes, and plan for follow-up care. Considers functional status and polypharmacy when developing treatment plan.	4-5	4-5	5	5
14. Communicates detailed and clinically sound follow-up plan, including relevant and cardinal symptoms for which they should seek treatment.	4-5	4-5	5	5
15. Provides anticipatory guidance, teaching, counseling, and specific information about the diagnosis. Provides written information to patients when appropriate.	4-5	4-5	5	5
16. Chooses appropriate medication and therapeutic dosage.	4-5	4-5	5	5
17. Determines health care maintenance and screening needs utilizing USPSTF recommendations.	4-5	4-5	5	5
18. Documents patient visits using a SOAP format that demonstrates clarity, organization, and appropriate use of medical terminology.	4-5	5	5	5
19. Presents patients to the preceptor in a thorough, concise, and organized manner.	5	5	5	5
20. Identify patients whose health needs require urgent or emergent care.	5	5	5	5
21. Completes patient encounter in a timely manner. New patient or complete exam (45 minutes); Chronic or complex visit (30 minutes); Acute episodic visit (15 minutes).	4-5	4-5	5	5
22. Incorporates cost in decision-making.	4-5	4-5	5	5
23. Correctly uses ICD coding for diagnosis documentation.	4-5	4-5	5	5

Levels of Independence

1. Observation only	
2. Performance and decision making done with preceptor present	*Requires detailed assistance

3. Performance and decision making done in collaboration with preceptor	*Requires moderate assistance
4. Performance and decision making done with minimal assistance from preceptor	*Requires minimal assistance
5. Performance and decision making independent of preceptor	*Requires no assistance; ALL cases reviewed and approved by preceptor