

School of Nursing College of Behavioral, Social and Health Sciences

DOCTOR OF NURSING PRACTICE (DNP) & MASTER'S STUDENT HANDBOOK 2022-2023



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Section I: The School of Nursing

Welcome!

We want you to have a challenging, rewarding and enriching educational experience with us.

Clemson's School of Nursing offers the following graduate options:

- Post Master's Doctor of Nursing Practice (MS DNP)
- Post Baccalaureate Doctor of Nursing Practice (BS DNP) with a focus in (Family Nurse Practitioner (FNP), Adult Gerontology Nurse Practitioner (AGNP), Health Systems Leadership (HSL) or Pediatric Nurse Practitioner (PNP)
- Master of Nursing with a focus in Nursing Education or Adult/Gerontology Clinical Nurse Specialist (A/G CNS)

This handbook was prepared at the suggestion of fellow students as a supplement to the current Clemson University Graduate Handbook. The Graduate Handbook is an important source of information about academic policies and should be referred to whenever you have questions. The faculty and staff will assume that you are familiar with this information, so please take a few minutes of your time to locate and review the <u>Graduate Handbook</u> as well as the <u>Graduate School</u> webpages. Best wishes in your studies at the School of Nursing and Clemson University!

-School of Nursing Faculty and Staff-

The School of Nursing Overview

The School of Nursing is an integral part of Clemson University, a land grant, state supported institution of higher learning. The school is committed to the purposes of the university which are teaching, research and service to the people of South Carolina, the nation and the world. The goal of Clemson University School of Nursing is to prepare nurses for professional practice and leadership, and to advance nursing knowledge. More information about the School of Nursing's mission, vision and goals can be found on the School of Nursing website.

In a climate of rapid changes in the health care system, driven by control of health care costs, nursing is recognized historically and currently as a major health care provider in health promotion, health maintenance and rehabilitation. Nurses have more sustained contact with recipients of health care than any other health care professional. They are often the first responders to health care problems of the public. In addition to being the provider of direct care and the manager of health care provided by others, nurses are the advocates, teachers and counselors for health care recipients. Nurses are increasingly involved in complex decisions crucial to the life and safety of patients. They accept greater responsibility for care, which was previously assumed by other disciplines. As a result of these rapid changes in the health care system, the complexity of nursing practice has increased significantly. Thus, a broad and in-depth educational experience is needed to prepare the professional nurse of the future.

The School of Nursing contributes to the improvement of the health and quality of life of South Carolinians through its related activities in teaching, research and service. The School of Nursing is led by Dr. Kathleen Valentine, Director and Chief Academic Nursing Officer, who is responsible for the Bachelor of Science in Nursing, Master of Science in Nursing, Doctor of Nursing Practice, and Interdisciplinary PhD in Healthcare Genetics programs.

The College of Behavioral, Social and Health Sciences (CBSHS) is headed by Dr. Leslie Hossfeld, Dean. The College of Behavioral, Social and Health Sciences is comprised of seven degree-granting units: School of Nursing, Department of Communication, Department of Parks, Recreation & Tourism Management, Department of Public Health Sciences, Department of Psychology, Department of Political Science, and Department of Sociology, Anthropology and Criminal Justice.

Mission

The mission of Clemson University School of Nursing, as a scholarly center of learning, is to educate students at the baccalaureate, master's, and doctoral levels to become healthcare professionals who advance scientific knowledge and evidence-based practice through research and outreach.

Vision

Clemson University School of Nursing will shape the future of nursing and healthcare through leadership, scholarship, and practice to optimize the health and quality of life for the people of South Carolina, the nation, and the global community.

Goals

- Research: The School of Nursing will contribute to the health innovation area of focus within the Clemson University research priority by
 increasing visibility of School of Nursing as scientists pursuing research.
- Engagement: The School of Nursing will be recognized as a leader for fostering connectivity, collaboration, and creativity between student, faculty, and alumni groups with the global, local, and interprofessional communities, both in and outside the classroom.
- Academic Core: The School of Nursing will cultivate and deliver academic excellence in nursing and healthcare genetics using sustainable, innovative, and interprofessional pedagogies to create a seamless transition from didactics to clinical practice.
- **Living**: The School of Nursing will enhance the living environment by leading health and wellness programs that nurture a climate of diversity, inclusion and respect.

National Accreditation

The baccalaureate degree program in nursing, the master's degree program in nursing and Doctor of Nursing Practice program at Clemson University are accredited by the Commission on Collegiate Nursing Education, 655 K Street, NW, Suite 750, Washington, DC 20001, 202-887-6791.

Notice of Non-Discrimination

Clemson University is committed to a policy of equal opportunity for all persons and does not discriminate on the basis of race, color, religion, sex, sexual orientation, gender, pregnancy, childbirth or related medical conditions, national origin, age, disability, veteran's status, genetic information or protected activity (e.g., opposition to prohibited discrimination or participation in any complaint process, etc.) in employment, educational programs and activities, admissions and financial aid. This includes a prohibition against sexual harassment and sexual violence as mandated by Title IX of the Education Amendments of 1972.

Student Accessibility Services

Clemson University values the diversity of our student body as a strength and a critical component of our dynamic community. Students with disabilities or temporary injuries/conditions may require accommodations due to barriers in the structure of facilities, course design, technology used for curricular purposes, or other campus resources. Students who experience a barrier to full access to this class should let the professor know and make an appointment to meet with a staff member in Student Accessibility Services as soon as possible. You can make an appointment by calling 864-656-6848, by emailing studentaccess@lists.clemson.edu, or by visiting Suite 239 in the Class of 1956 Academic Success Center building. Appointments are strongly encouraged. Drop-ins will be seen, if at all possible, but there could be a significant wait due to scheduled appointments. Students who receive Academic Access Letters are strongly encouraged to request, obtain and present these to their professors as early in the semester as possible so that accommodations can be made in a timely manner. It is the student's responsibility to follow this process each semester. You can access further information here.

International Students

International Services, within the Office of Global Engagement, exists to ensure all international students, scholars, faculty, and staff feel welcome at Clemson University. International students must first be aware of and stay updated on policies for their home countries regarding Visas and other requirements. Students should be maintaining contact with their advisor in <a href="International International Internatio

Civility Statement

Students at Clemson University School of Nursing are expected to demonstrate professional conduct in both the clinical and classroom settings. Students will demonstrate professional conduct by maintaining respectful, constructive verbal and non-verbal interactions and written communication with faculty, peers, staff, and clinical agency personnel

SON Org Chart in Progress

CBSHS Important Contact Numbers

College and School Leadership

- Dr. Leslie Hossfeld, Dean, College of Behavioral, Social and Health Sciences, hossfe@clemson.edu
- Dr. John Whitcomb, Interim Director and Chief Academic Nursing Officer, School of Nursing jwhitco@clemson.edu
- Dr. Ann Wetsel, Associate Director of Academic Programs, School of Nursing mwetsel@clemson.edu
- Dr. Lucia Gonzales, Associate Director of Research, School of Nursing <u>luciag@clemson.edu</u>

School of Nursing Program Directors

- Dr. Nicole Davis, Director for Graduate Programs, njd@clemson.edu
- Leslie Ravan, Director for Undergraduate Programs, wagner3@clemson.edu

Track Coordinators

- Dr. Lisa Miller, FNP/Post-Master's DNP Coordinator, millelb@clemson.edu
- Dr. Nicole Davis, AGNP/Nursing Education/HSL Coordinator, njd@clemson.edu
- Dr. Heide Temples, PNP Coordinator, heidet@clemson.edu
- Dr. Sara Sarasua, Healthcare Genetics, PhD Coordinator smsaras@clemson.edu

Support Staff

- Ellen Chiles, Graduate Student Service Program Coordinator (PhD, DNP, MS), achiles@clemson.edu
- Missy Gray, Administrative Coordinator, mgray7@clemson.edu
- Ben Card, Lead IT Consultant, ecard@clemson.edu
- John Williams, IT Consultant, jkw4@clemson.edu
- Rob Atkinson, Administrative Assistant, <u>raatkins@clemson.edu</u>

Additional Contacts

- Sally Smith, Health Science Librarian, sally2@clemson.edu
- Mike Namaranian, CU Bookstore, mnamar@clemson.edu
- Clemson Computing and Information Technology (CCIT), 864-656-3494, ithelp@clemson.edu

School of Nursing Doctorally Prepared Faculty

For a current listing of PhD and DNP prepared faculty who are eligible to serve on dissertation and project committees click here.

Section II: School of Nursing Graduate Program Policies and Procedures

Admission and Continued Enrollment Requirements

All nursing students are required by the School of Nursing and clinical agencies to meet specific requirements to enroll in nursing courses and research experiences.

All requirements should be submitted to Missy Gray, Clinical Coordinator, Clemson University Nursing Building, 605 Grove Rd., Greenville, office 465, mgray7@clemson.edu by the stated deadlines below:

All requirements due by August 1 of each year.

If requirements are not received by the due dates above, the School of Nursing will drop those students from all nursing courses. Incomplete packets will not be accepted. Please note that faxed copies will not be accepted. Original forms may be submitted in person or by email to mgray7@clemson.edu as a pdf attachment.

If dropped from courses, consideration for re-admission will only occur once all documentation has been submitted and is based on space availability and time of lapse from course. A late registration fee may apply. Students who do not comply with the stated requirements will not be allowed to enroll in or attend any nursing courses or clinical experiences. Students may not attend any research experiences with expired or missing admission/enrollment requirements and doing so will be considered an academic violation. Students are responsible for knowing the expiration dates of these requirements and submit them prior to expiration and by due dates.

Clemson School of Nursing – Enrollment Requirements Checklist

Requirements highlighted in yellow are to be submitted to Missy Gray, Clinical Compliance Coordinator (mgray7@clemson.edu);
All others must be submitted to myClinicalExchange (mCE),
using instructions provided. You will receive an email with this information.

<u>Submi</u>	t once upon Admission:
	Student Info/Personal Health History
	Alcohol/Drug Policy & Drug Screen Permission
	Academic Integrity Statement
	Copy of Drug Screen results – Students may use Arcpoint lab (form attached to Welcome email) OR another lab. Student
	must schedule drug screen and have results come directly from the lab to SON Compliance Coordinator
	(mgray7@clemson.edu).
	Copy of Federal Background Check from www.srandi.com
	Copy of Hep B Immunization (series of 3 OR Titer). If over 5yrs, need to update. If negative, will need booster.
	Copy of MMR (Measles, Mumps, Rubella) – Series of 2 on or after 1yr BD OR Titer.
	Copy of Varicella/Chicken pox – 2 dose immunization OR positive Titer. *HAVING HAD THE DISEASE IS NOT SUFFICENT.
	Copy of Covid immunization card. If have not received, a religious/medical exemption must be requested through Prisma
	Health Student Services. Contact Missy Gray (mgray7@clemson.edu), Clinical Compliance Coordinator for further
	information.
	Copy of HIPAA/Bloodborne training certificates (from employer).
	Copy of Health Insurance Card.
<u>Submi</u>	t upon Admission and as expires: Copy of Td/Tdap (Tetanus/Diphtheria/Pertussis) – Every 2 yrs recommended, but must be every 10 yrs.
	Copy of PPD (T-Spot/TB) – Must be submitted yearly. Initial submission may be ONE of the following:
	- A 2 Step TB PPD test w/in the past year (2 placements, 2 readings) OR
	- Annual PPD if previously received a 2 Step and have maintained yearly test since the 2 Step. Must submit the 2 Step
	plus all annual tests after (at least 3) OR
	- Quatiferon or T-spot test – drawn w/in the past year. A positive test indicates TB infection in the distant past.
	Chest X-ray and further evaluation will be necessary. Must submit the test, results, and chest x-ray if necessary.
	Chest X-ray must be done within 6 months prior to the start of a clinical rotation.
	Copy of Flu immunization for current season. Administered between Aug. 1 and Oct. 31 of each year if possible.
	Due by Nov. 1 st each year.
	Copy of CPR certification – Must be from an American Heart Association provider. 1 person/2 person, infant, child, choking
	& AED. "Community CPR" OR "Heart Saver CPR" are NOT ACCEPTABLE. No online CPR courses will be accepted without a
	personal skills certification by a licensed instructor. Submit every 2 years.
	Copy of Liability Insurance – Coverage must be \$1 mill/occurrence and \$6 mill aggregate. Education & HSL students may
	purchase "Non-Direct Patient Care" rider. Please only submit the policy "face" page or memorandum showing dates/details
	of coverage. Must renew every year. Suggested sites used by students: www.proliability.com OR www.NSO.com
	RN License — Submit on even years. Must notify Graduate Coordinator of ANY changes in licensure status, immediately.

STUDENT INFORMATION/PERSONAL HEALTH HISTORY

(Submit on admission to program)

Name:	CUID:	
Address:		_
Home Phone:	Work Phone	_
	@g.clemson.edu; Personal email:	
	Relationship:	
Phone:		
General Health Information		
Date of last physical examinati	ion:	
Have you ever experienced admedications?	verse reactions (hyper-sensitivities, allergies, upset stomach, rash, hive	s, etc.) to any
	Type reaction:	
	Type reaction:	
	Type reaction:	
Medication:	Type reaction:	<u></u>
Please indicate existing conditi patients/clients:	ions which might impair or affect your functioning in the health care se	tting or the safety of
Hearing or vision impairn	ment Emotional Problems	
Seizure disorder/fainting	spells Latex allergy	
Acute infection	Diabetes	
Heart condition	Physical limitations	
Any chronic disease	Other (Please specify)	
Please list any medications – P	Prescription and Over the Counter (OTC) that you use regularly	
Name of medication:	Frequency of use:	
Name of medication:	Frequency of use:	
Name of medication:	Frequency of use:	
Name of medication:	Frequency of use:	
Name of medication:	Frequency of use:	
Name of medication:	Frequency of use:	
Name of medication: Use back of page if additional	Frequency of use:space is needed	
Signature:	Date:	

Program Policies

Advisement

Upon acceptance to the graduate program all students are assigned to their Program Coordinator as an advisor who will develop the student's program plan of study. By completion of 9 credit hours, all master's students will be assigned to a Chairperson for their Final Oral Comprehensive Examination. (S)he will be a member of the SON faculty who is Doctorally prepared and holds a full-time regular faculty appointment and be tenured or eligible for tenure in the School of Nursing.

The Graduate Student Services Coordinator and the Program Coordinators will assist students with ongoing advisement throughout the program and the program plan of study.

Grading

Grade Scale (Unless otherwise posted in course syllabi)

A = 90 - 100

B = 80 - 89

F = 75 or Below (no credit)

Assignments submitted for grading may not be re-submitted in the same or subsequent courses. All work must be original for each course (including repeat courses).

Final Examinations in Clinical Management Courses:

All final examinations in clinical management courses are cumulative and worth 30-35% of the course grade. Percentage of grade for final exams for nursing courses that do not have a clinical component are at the discretion of the faculty member responsible for the course.

Program Progression

MS and DNP Nursing course grades are determined by the numerical score earned in the classroom and a Pass/Fail in the clinical laboratory. To pass the course, a student must earn a minimum of 75.0 or higher in the didactic class and a Pass (P) in the clinical laboratory. Progression through the program is systematic (based on the student's Plan of Study) and successful completion of courses is required to progress to the subsequent semesters.

Students must achieve a minimum grade of 75.0 before any grade may be "rounded up." For example, 74.9 does not round up to 75. After the student has achieved a minimum grade of 75, the choice to round up lies with the faculty member in charge of the course. Extra Credit may be given at the discretion of the faculty to all students in a course; however, extra credit may not bring any student's average to a passing level. Students must maintain a 3.0 GPA, or they will be placed on Academic Probation as per Graduate School policies.

Students may repeat one graduate nursing course only. Withdrawing from a course constitutes one attempt (excluding medical withdrawal). Students who are unsuccessful in a second nursing course are not eligible to continue in the program.

Dropping a Course

Please discuss with the Program Coordinator before dropping any classes through iROAR. This may have implications for graduation. A Leave of Absence (policy link later in this handbook) may be applicable. It is the students' responsibility to follow through with the implications of dropping a course with the Graduate School. Classes that are not dropped become incomplete and later convert to an F. Please see graduate announcements for deadlines.

Minimum Credit Hour Requirements for GTAs and Full-time Students

Students holding an assistantship and full-time students must be enrolled for at least 9 academic credits (summer = 6 credit hours). Students who are part-time must be registered for at least 6 credit hours. Any students who are registered for less than the required credit hours may take NURS 8790: Special Topics for up to 3 credit hours per semester. Contact the Financial Aid Office for questions 864-656-2280 or finaid@clemson.edu.

Guidelines for Expressing Student Concerns

Graduate students who have concerns about the program, courses, or grading should follow the process outlined for expressing student concerns. Students will initially approach the course faculty with concerns. If unresolved, the concern should be taken to the Program Coordinator for your plan of study, who will confer with the faculty and student to resolve the issue. Resolution may also involve the Director of Graduate Programs. If unresolved, the student may then take the issue to the SON Director. If unresolved, the concern may be taken to the Dean of the College. The University Ombudsman Office may be a resource for you during this time. The academic grievance policy and procedures can be found here.

Ombudsman

The ombudsman is an independent, confidential resource who provides assistance to faculty, graduate students, and postdoctoral students in resolving problems, complaints, and conflicts when normal procedures have not worked satisfactorily. The Ombudsman's Office is available to graduate students who:

- need guidance in resolving a problem or a concern relating to the University;
- need information about policies or procedures;
- need someone to mediate between individuals or within the University;
- feel the University has made an error in a particular case;
- feel they have been victims of harassment or discrimination;
- are unsure about which University policies, procedures, or regulations apply to a given situation;
- have specific academic problems that cannot be resolved by following regular University procedures;
- feel they have been unfairly treated;
- have a problem that requires someone to negotiate a solution or to help facilitate communication between parties; and/or feel that a university policy, procedure, or regulation has been applied unfairly or erroneously.

Professional Practice Dress Code

The dress, personal appearance, and hygiene of our students create an impression – either favorable or otherwise – on patients, other healthcare providers and the public.

Clinical Dress Code

Graduate students should dress professionally in conservative shirt/blouse and slacks or dress and a white lab coat or other professional dress as appropriate. Clothing should be clean and unwrinkled (pressed/ironed).

- 1. Shoes should have closed toes and backs.
- 2. Name tags are considered to be part of the official uniform and are required of students in all clinical areas. It is to be placed in the Clemson ID badge holder for this purpose. One will be provided by the School of Nursing.
- 3. A School of Nursing patch should be purchased from the Student Nurses' Association (in the Nursing Suite) and must be placed either on the chest or upper arm of the lab coat.
- 4. Wrist watches with a second hand, and professional pins (ex. Sigma Theta Tau) are permitted. Jewelry, other than wedding bands and one pair of pierced earrings (posts only) in ears only, should not be worn.
- 5. Unprofessional appearance and dress are not permitted and includes, but is not limited to: body odor, non-human hair colors on visible areas of head/face/body, visible tattoos, body jewelry (other than 1-2 earrings/ear) or other decorative/self-injury marks, shorts, capri pants/leggings, yoga pants, gym pants, denim blue jeans, tee shirts, plunging necklines, undergarments visible through outer garments (thong underwear), athletic shoes, flip flops/sandals, pictures/drawings/writing on clothing and any other prohibitions which are imposed by the faculty or the agency. No visible midriff, gluteal crease, or excessive cleavage. Be aware that you will be bending and stooping in the clinical setting.

Disruptive Classroom Behavior or Disorderly Conduct

Students are expected to conduct themselves in a professional manner in all classroom and research settings.

See the Clemson University Classroom Behavior Policy here.

Nursing graduate students will:

- Conduct themselves as nursing professionals and representatives of Clemson University at all times;
- Arrive at least 5 minutes prior to the class starting time and at least 15 minutes prior to the clinical experience starting time;
- Prepare in advance for class/clinical/research experiences and review learning afterward;
- Use technology, e.g. laptop computers and PDAs, for class/clinical use only; and personal messages during class/clinical experiences are permitted only for illness, accident, or emergency;
- As a common courtesy to everyone in class, cellular telephones and any other communication or messaging devices should be turned off or placed on vibration mode during class time; online chatting, surfing and other non-class related laptop activities are prohibited.;
- Allowance for mobile apps approved by faculty (e.g. Epocrates); and,
- Communicate respectfully (both verbally and in writing).

Netiquette and Civility

The following are guidelines for communication in all School of Nursing online courses. Always be aware that with online communication the reader cannot see body language or hear voice tone. All communication to and from students must go through their Clemson University email address. If a message is sent from another email address, the faculty will either ignore the mail or return it with instructions to send through the Clemson University email system.

- Be clear
 - o Make sure the subject line (email) or title (webpage) reflects content.
 - o Use proper spelling, grammar, and punctuation and avoid abbreviations, unless they are commonly used.
- Use appropriate language
 - o If you have a question as to whether or not your message is too emotional, do not send it, save it and review it later.
 - o Do not use all capital letters. This signifies yelling in on-line communication.
 - o Humor and sarcasm may easily be misinterpreted as well, so try to be as matter of fact and professional as possible.
 - Avoid any inappropriate comments regarding race, gender, age, religion, or sexual orientation. These will be considered unacceptable and subject to the same disciplinary action as if in any other classroom.
 - o Emoticons are frequently used to help show the emotion behind comments, but excessive use should be avoided.
- Be brief
 - o If your message is short people are more likely to read it.
 - o Keep sentences brief and on point so that readers do not miss the point of the statement because of a lot of 'fluff'.
- Make a good impression
 - Your words and content represent you. Proofread before sending.
- Be selective on information
 - o Remember that the internet is public and can be seen by anyone, including criminals.
- Remember you are not anonymous
 - O What you write in an email and website can be traced back to you.
- Consider others
 - Forgive bad spelling and offensive remarks of others. They may not have intended for them to appear offensive and may be new at on-line communication.
 - Consider other's feelings when writing.
 - o Remember that the recipient is a human being whose culture and language come from different backgrounds.
 - o Remember that perceptions vary by person and things may not be read as intended.
 - Never use offensive language.
 - Avoid humor and sarcasm. They often rely on facial expressions so in on-line writing they may appear as offensive.
- Be forgiving of others
 - If someone writes something you find offensive report it to the faculty. It most likely was not intended to be offensive and could be cleared up by the faculty.
- Think before you send
 - o Remember that once you hit 'enter' or 'send' the communication cannot be retrieved.
 - Always speak it like it will be heard and write it like it will be seen.
- Test message for clarity
 - Messages may seem very clear to the writer but not be clear to the reader. Check for clarity by reading the message out loud to see
 if it flows clearly and smoothly or have a friend proofread the message for you.
- An Online Classroom is Still a Classroom
 - Always treat others, as you would like to be treated.
- Email Communication with Faculty
 - o Treat it like a business letter. Include an informative subject line.
 - Avoid greetings like "Hey" or using the faculty's first name.
 - Briefly state the reason for the email.
 - o If you are addressing a concern, suggest a solution and be considerate of how your solution might create additional work for the professor. Remember they get many emails daily.
 - Write professionally.
 - Ask yourself why you are sending an email message and if this is something that could easily be checked by asking a
 friend/classmate, looking at the syllabus, or reviewing the student handbook.
 - Read over the message for spelling, clarity and flow.
 - o Allow 48 business hours for a response (and more in the summer as faculty do not work full time in the summer).
 - Once a reply has been received, acknowledge it. A simple thank you is fine.

School of Nursing Social Media Policy: Adapted from White Paper: A Nurse's Guide to the Use of social media;2011, p. 3; National Council of State Boards of Nursing

Awareness and caution are required to avoid inadvertently disclosing confidential or private information about patients. All Clemson University School of Nursing students are expected to comply with the following requirements related to the use of social media:

- First and foremost, nurses and nursing students must recognize that they have ethical and legal obligations to maintain patient privacy and confidentiality at all times.
- Students are strictly prohibited from transmitting by way of any electronic media any patient-related or facility related information and/or images. In addition, students are restricted from transmitting any information that may be reasonably anticipated to violate patient rights to confidentiality or privacy, or otherwise degrade or embarrass the patient.
- Do not share, post, or otherwise disseminate any information, including images, about a patient or information gained in the nurse-patient relationship or within your clinical facility with anyone.
- Do not identify patients by name or post or publish information that may lead to the identification of a patient. This
 includes any information about the patient: name, address, age, gender, diagnosis, room number, admission date,
 discharge date, date of birth or death, date of care, or anything else. NO PATIENT OR FACILITY RELATED INFORMATION
 CAN BE POSTED ON SOCIAL MEDIA!! Limiting access to postings through privacy settings is not sufficient to ensure
 privacy.
- Never refer to patients in a disparaging manner, even if the patient is not identified.
- Do not take photos or videos of patients on personal devices, including cell phones
- Maintain professional boundaries in the use of electronic media. As with in-person relationships, the nurse has the
 obligation to establish, communicate and enforce professional boundaries with patients in the online environment. Use
 caution when having online social contact with patients or former patients. Online contact with patients or former
 patients blurs the distinction between a professional and personal relationship. The fact that a patient may initiate contact
 with the nurse does not permit the nurse to engage in a personal relationship with the patient.
- Do not post any information regarding work related issues. Do not even post seemingly innocuous information such as "It was a busy day". Such information could be used in a lawsuit to imply various things about the work environment.
- Promptly report any identified breach of confidentiality or privacy to your instructor and lead teacher.
- Be aware of and comply with facility policies regarding use of employer-owned computers, cameras and other electronic devices and use of personal devices in the workplace.
- Do not make disparaging remarks about employers or co-workers. Do not make threatening, harassing, profane, obscene, sexually explicit, racially derogatory, homophobic or other offensive comments. DO NOT POST ANY INFORMATION WITH REFERENCE TO YOUR SPECIFIC CLINICAL EXPERIENCE.
- Do not post content or otherwise speak about employer or facility.

Summary of CU SON Social Media Policy:

Do not post any clinical, patient, or facility related information on any social media. Doing so will result in disciplinary action, up to and including dismissal from the clinical, school of nursing and/or Clemson University.

Policy for Use of Personal Digital Devices in the Clinical Area

Personal digital devices (PDD's), including phones, tablets, laptops, or other digital devices, are to be used in the clinical areas only as approved in advance and directed by faculty. Their use is primarily to access clinical support applications that have been stored on the device. Use of portable electronic devices in clinical is regulated by the clinical agencies, local, state, and federal regulations and laws and by the School of Nursing. All students are fully responsible for following all regulations of the Health Insurance Portability and Accountability Act (HIPAA) guidelines and for following HIPAA guidelines when using their PPD's in the clinical or other settings.

- No personal health identifiers (PHI) can be entered into the device. All personal health identifiers must be removed from any patient data collected by students on PPD's. Students are fully responsible to ensure that they adhere to all HIPAA regulations at all times. This includes proper management of confidential client information.
- All telephone and camera functions must be disabled during clinical and lab sessions by placing devices in "Airplane" mode. With the exception of instructor approved activities, ALL PHONES WILL REMAIN ON AIRPLANE MODE in the clinical area. Students must adhere to professional standards for all communications, including maintaining confidentiality, proper conduct of communication, and communicating appropriate material.
- Using the device for personal, non-school related functions is strictly prohibited. Inappropriate use or violation of HIPAA guidelines may result in dismissal from the clinical, the School of Nursing and/or Clemson University. Inappropriate use includes making or receiving personal calls while in the clinical area, sending or receiving personal texts while in the clinical area, accessing any non-clinical related websites while in the clinical area, taking pictures during clinical, or recording any PHI on the device.
- Students should only use the personal digital device in areas designated by the instructor in compliance with institutional policy
- Infection control precautions must be maintained when using personal devices in patient care areas (See Personal Digital Device Infection Control below).
- All students will sign the CU SON electronic compliance form indicating that they have read and understood these policies. This form will be placed in each student's file.

Personal Digital Device Infection Control

- Wash hands before using handheld device.
- Do not handle device with contaminated gloves.
- Wipe down handheld device using solutions recommended by manufacturer and approved by the institution.
- Avoid placing device on surfaces that can possibly contaminate device, such as bedside tables or patients' beds.
- Avoid taking devices into isolation rooms.
- The risk for transmission of organisms is not only to your patients, but also to yourself and your family and friends.

Summary

- Protected Health Information (PHI) cannot be entered into the digital device. All patient related information is protected.
- Phones must be in Airplane mode while in clinical.
- Pictures cannot be taken in the clinical setting.
- The usage of personal cell phone functions, including personal text messaging, personal calls, or accessing non-clinically related websites is prohibited during clinical hours.
- Cleaning of digital device must comply with the clinical organization's infection control policy and procedures. If the device becomes contaminated, it should be cleaned with the recommended disinfectant. If a patient is on isolation, the digital device cannot be taken into the patient's room. Hand hygiene is the best method of preventing transmission of disease.
- Inappropriate use of personal digital devices or violation of HIPAA guidelines may result in dismissal from the clinical, the School of Nursing and/or Clemson University.

Attendance Policy:

Due to the nature of graduate courses and the amount of material covered in each class, students are expected to attend all classes, tests, and clinical experiences. Regular and punctual attendance at all class/clinical sessions is the personal responsibility of each student. Class attendance will be assessed each day. Late arrival or failure to complete attendance requirements will be considered an absence for the day. Leaving class early is considered an absence. Absences will only be 'excused' for genuine medical emergencies or legitimate causes as determined by the Professor(s). Examples include death in the immediate family and personal conditions requiring hospitalization or emergency treatment. In the event of extenuating circumstances, students are responsible for contacting the faculty member and for obtaining material missed. For an absence to be excused the student must contact the Professor(s) prior to the class, or as soon as possible after class if prior contact is not possible, by email with a request explaining the nature of the absence. After receiving the above information, the Professor(s) will inform the student if the absence will be classified as excused.

Class content is essential to effective patient care. The scheduling of graduate courses often represents two to three weeks of content. Students missing more than three weeks of content (one day in summer session) may be dropped from the course. Please plan events around class schedules.

If the Professor(s) is late to class, students are expected to wait at least 15 minutes from the time class was to have started, after which they may be excused from class unless the Professor(s) has given advance warning and instructions to wait.

Cancellation of Classes and/or Clinical Labs Due to Hazardous Weather and Driving Conditions

For any inclement weather, we will follow Clemson University emergency closing policies. The decision by the Crisis Management Team on main campus drives the decision for all campus locations (often dependent on the SC Emergency Management Division that closes county offices across the state). Please check with your instructor if you are uncertain of whether or not your class is cancelled.

If main campus closes and/or cancels classes, the Clemson University Nursing building will also be closed / classes canceled. If, for some reason, government offices in Greenville County are closed and our main campus is open, the CU Nursing building will be closed – following Greenville County. Some of our clinical placement cancelations are driven by local school district closings. *Please check with your instructor if you are uncertain of whether or not your class is cancelled.*

Students must always use their personal judgment when unforeseen weather conditions are encountered and must keep safety first and foremost. Students should contact their faculty instructor when questions exist regarding attendance in class and/or clinical due to inclement weather.

Students and faculty should check the following stations/station websites to obtain information on weather conditions and school closings:

TELEVISION

WYFF-TV (Greenville, Channel 4) www.wyff4.com; WSPA-TV (Spartanburg, Channel 7) https://www.wspa.com/; WLOS-TV (Asheville, Channel 13) www.wlos.com; WHNS-TV (Fox Carolina, Channel 12) www.whns.com

Information about closings can also be located on the <u>Clemson University web site</u>.

Health Insurance Portability and Accountability Act

All students are expected to comply with the guidelines of the Health Insurance Portability and Accountability Act.

Multi-State Registered Nurse Licensure & Name Change

Information on multi-state licensure for Registered Nurses is located on the National Council of State Boards of Nursing and the South Carolina Board of Nursing websites. The South Carolina Board of Nursing should be notified of name and contact information changes in a timely manner. All students utilizing the State of South Carolina compact agreement must complete all Board of Nursing requirements for compact listed here for instructions.

Student Records and Confidentiality

Academic records for purposes of advising are maintained in the Office of Student Services. The School of Nursing will not release information to a third party without the written consent of the student.

Official Name Change Procedure

There is a form that you need to complete if you have gotten married and/or changed your name once you start your classes. Please access it online at the following <u>CU website</u>.

Continuous Enrollment and Leave of Absence

Continuous Enrollment: Graduate students enrolled in a degree program are required to maintain continuous enrollment after initial matriculation. Continuous enrollment refers to a student's registration each semester, excluding summer sessions, until he/she has either graduated, been permanently withdrawn, or dismissed. All students attending classes must be registered for either credit or audit. Students on 12-month graduate assistantships must maintain continuous enrollment during the summers as well as during both fall and spring semesters.

The Graduate School will dismiss any student without further notice who fails to comply with the continuous enrollment policy. If a student is terminated from his/ her program for failure to maintain continuous enrollment, the student will be required to reapply for admission. Readmission requires a positive recommendation from the student's academic program as well as approval by the Graduate School and, therefore, is not guaranteed.

Leave of Absence: A leave of absence is usually granted for compelling personal, family, medical, or professional reasons that require the student to suspend graduate study and to be absent from the University for a period of time. During a leave of absence, students are expected to be focused on these non-academic priorities. Students may not make progress toward their degree requirements while on leave (e.g., taking comprehensive or qualifying exams, completing incomplete grades, submitting or defending a thesis or dissertation, etc.). A leave of absence is not intended to be a mechanism for students to avoid tuition costs while making progress toward a degree. Students on leave will maintain access to basic CCIT services such as University email but should not be using other University resources such as research labs, faculty time, recreation facilities, or health and wellness services. A student in good academic standing (who has a minimum 3.0 GPA and who has successfully met other program or Graduate School requirements) who must interrupt a graduate program may request a leave of absence from graduate study. A leave of absence may be granted for 12 months, with a possible renewal of one additional 12-month period. A student not in good standing (who has a GPA lower than 3.0 or who has failed critical program or Graduate School requirements, e.g., comprehensive or qualifying exams) may also request a leave of absence. However, the Graduate School may also choose to permanently dismiss the underperforming student where future success seems unlikely. Should the request for the leave of absence be approved by the Graduate School, the student will return in the same academic status as prior to the leave.

As a graduate student enrolled in a degree program, you are required to maintain continuous enrollment after initial matriculation (i.e., you must register each fall and spring semester until you either have graduated, have permanently withdrawn, or have been dismissed). See full policy <u>here</u>.

- Students unable to remain continuously enrolled must apply for a Leave of Absence <u>here</u>.
- If you take a semester off, (fall or spring), you will have to complete a re-admit form (form is available on the Graduate School web site here.

Financial Assistance

Assistantships:

These guidelines may be changed by the University without notice. Assistantships are generally assigned based on availability by semester. Selection for assistantships is based on clinical experience and the recommendation of the lead teacher in that clinical area. Students who are interested in being considered should send curriculum vitae to the School of Nursing Director. Most assistantships require a commitment of 20 hour/week (15 weeks/semester). Students who hold an assistantship receive a tuition waiver, a reduced fee for University charges, and a stipend for the hours they work. Students holding an assistantship must be enrolled for at least nine academic credits. These guidelines may be changed by the University without notice.

Traineeships:

Pending availability, full-time students are eligible for Federal traineeship funds. Applications for these traineeships are made through the School of Nursing. Students will receive notification through their Clemson email of availability of fund and application deadlines. Funds awarded through this source may be used to help cover the cost of tuition or fees for the following semester.

Scholarships and Fellowships:

Centralized University-wide information relative to financial aid is available from the Financial Aid Office (G-01 Sikes) at 864-656-2280 or finaid@clemson.edu and the Graduate School (E-108 Martin Hall). State level incentive grants and loan replacement opportunities may be available through the SC Office of Rural Health. Contact Stacey Day at Stacey@scorh.net or by phone at 803-454-3850 (EST), ext. 2009.

Student Policy Governing Use and/or Abuse of Drugs and/or Alcohol

Use of substances which interfere with the judgment and/or motor coordination of students of the School of Nursing pose unacceptable risk for patients, the University, the faculty and health care agencies. Therefore, use of alcohol, use of illegal drugs and/or the misuse of legal therapeutic drugs by nursing students while engaged in any portion of their educational experience is strictly prohibited. Furthermore, nursing students are strictly prohibited from being under the influence of alcohol or any drug while engaged in any portion of their formal educational experience. Students my not attend clinical/research experiences while taking new medications which may have side effects of sedation or stimulation or may impact clinical performance in any manner.

Faculty members who suspect a violation of this policy are required to act. The actions to be taken are spelled out in the procedures which follow. Students are required to read and acknowledge by signature that they understand this policy. Parents or guardians of students will be informed of the policy.

As this policy refers to positive drug/alcohol screen procedures, the following definitions of positive will be used:

- 1. Screen results indicating use of an illegal drug;
- 2. Screen results indicating non-therapeutic drug level of prescribed or non-prescribed drugs;
- 3. Screen results indicating presence of alcohol in blood.

Any one or more of the following behaviors may constitute evidence that a student is under the influence of alcohol or drugs:

- 1. Observable lack of motor coordination without reasonable explanation. Such behavior must be described objectively by the person making such observations;
- 2. Incoherent speech without reasonable explanation;
- Inappropriate decision-making behavior without reasonable explanation. This behavior must be described objectively by
 persons making such observations and must clearly be inappropriate based upon reasonable expectations of students at the
 same academic level.
- 4. Odor of alcohol detected from a distance of two feet on breath of student.

Drug and /or Alcohol Abuse Policy Procedure

See also <u>University Student Handbook</u> for University policy on drug use.

- o If reasonable suspicion exists that a School of Nursing student has violated any provision of this policy, the faculty member in charge will make arrangements to accompany the student from the area immediately.
- o In all cases, the student may not participate in any clinical laboratory experience until an appropriate plan of action has been identified.
- o If incident occurs in classroom, the student will be accompanied to the office of the Program Coordinators, Assistant Director of the School of Nursing or a leadership designee.
- o If incident occurs in clinical laboratory, the Program Coordinators or designee will be notified by telephone.
- The student will be required to immediately have drug testing at their expense.
- o If the student is asked and agrees to submit to a drug/alcohol screen and the test results are negative, the student will be allowed to resume the clinical laboratory experience without penalty. The Dean will notify the faculty/administrative committee that the matter has been resolved, and no further action is required.
- Subsequent to an immediate preliminary investigation by the Program Coordinators or designee, the incident will be reported to the Dean, College of Behavioral, Social and Health Sciences. After review by the Dean, one of the following actions will be taken:
 - The student will be allowed to continue attendance at clinical laboratories without penalty, and no further investigation will take place.
 - A faculty/administrative committee will be appointed to investigate the incident and the student will be asked to submit
 to an immediate drug/alcohol screen. (Blood to be drawn in the Nursing Center, and cost of screen to be paid by the
 SON)
 - If the student is asked and refuses to submit to a drug/alcohol screen, or if the student submits to the screen and the results are positive (on a second retesting after an initial positive), this information will be given the faculty/administrative committee conducting the investigation.
 - After its investigation, the faculty/administrative committee will consult with and make a recommendation for a plan of action to the Dean. The plan of action ultimately decided upon may include, but is not limited to, one or more of the

following:

- The student may be allowed to resume participation in clinical laboratory experiences.
- The student may be required to enroll and successfully complete and approved in-patient and/or out-patient substance abuse program.
- The student may be required to repeat any nursing course when a significant portion of the clinical laboratory experience has been missed.
- The student may receive a failing grade in any nursing course in which a significant portion of the clinical laboratory experience has been missed.
- The student may be barred from further participation in clinical laboratory experiences.
- The ultimate decision on a plan of action to be followed will rest with the Dean. Students are reminded that participation in clinical laboratories is necessary to pass clinical nursing courses, and two successive failures of a nursing course will bar a student from repeating the course. Graduate students in nursing will be expected to abide by the policy.
- Notification of failure to adhere to the policy will be made to the State Board of Nursing for the state in which the student
 is licensed to practice nursing, if appropriate. All information related to these procedures will be held in confidence and
 released only in those instances required by University, School of Nursing and/or appropriate State Board of Nursing
 policy.

Understanding of Clemson University Alcohol/Drug Policy & Drug Screening

(To be included in Clinical Requirement Packet)

I have read and understand the Alcohol and Drug Policy as found in my Student Handbook and agree to the drug screen guidelines. I hereby release the designated testing agency and its Deans/Directors/FNP or AGNP Program Coordinators, Clemson University, the School of Nursing and faculty from any claim in connection with the drug screening guidelines. I understand that in the event any legal action is taken as a result of the drug screening guidelines, confidentiality may no longer be maintained. I further understand that I will be subject to drug tests while enrolled in the School of Nursing. A positive drug screen or refusal to submit to testing will result in dismissal from the School of Nursing.

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^{*}Student signature may be witnessed by a spouse, mother, father, friend etc.

Graduate Academic Integrity Policy

"An academic environment of integrity is one in which students, faculty and staff interact with each other from a position of mutual trustworthiness. As a member of the consortium of institutions comprising the International Center for Academic Integrity, Clemson University has committed itself to preparing a community of scholars dedicated to integrity in teaching, research, scholarship, mentorship and the acquisition and display of professional values of *trust, honesty, fairness, responsibility, respect, and courage*. Clemson graduate students are expected avail themselves of the many opportunities and resources both on and off campus to learn how to engage in professional practice with integrity. The Graduate School and the community of scholars engaged in graduate-level education will respond vigorously and expeditiously to charges of violations of academic integrity."

All work submitted for a grade must be your own, unless group work is assigned. All text included in assignments that was written by someone other than the student must be correctly quoted and cited. Failing to comply with School of Nursing, clinical facility policies, and state and federal regulations are also Academic Integrity violations.

The Clemson University School of Nursing Academic Integrity Statement and Charge of Graduate Academic Integrity Violation forms can be found on the following pages of this Student Handbook.

Clemson University School of Nursing Academic Integrity Statement

All research depends to some extent on the work of others who have come before you. Other researchers' ideas and results are often the *starting point* of your own work, but it is important to properly acknowledge the work of others to avoid one of the most serious forms of academic misconduct: plagiarism.

The Clemson University <u>Academic Integrity Policy</u> says plagiarism "includes the copying of language, structure or ideas of another and attributing the work to one's own efforts." Be advised that the definition makes no distinction between deliberately using someone else's work without attribution and doing so unintentionally; both are plagiarism.

Some common forms of plagiarism are:

- Directly reproducing or paraphrasing someone else's work (published or unpublished), including insights and opinions, without attribution, regardless of length.
- Failing to clearly identify quoted material by using quotation marks (for short sections) or block text (for larger sections).
- Directly quoting your own text from previous projects or papers, without attribution.

Plagiarism also includes using someone else's ideas, art, figures, tables, maps, charts, diagrams, and so forth, even if you recreate or reformat the material.

An exception is made for material that is common knowledge. If information is readily available from general reference sources in the chosen field, or if the information appears undocumented in several sources, it may be common knowledge. Whether material is common knowledge is often a judgement call. If in doubt err on the side of caution and cite the source. In no case should you ever copy text of *any kind* and appropriate it as your own.

Printed Student Name:	
Student Signature:	Date:
Witness Signature:	Date:

School of Nursing Charge of Graduate Academic Integrity Violation

(To be completed by Faculty)

The following student is being charged with a violation of the Academic Integrity Policy.		
Student:CI	JID:	
Course/Section #:		
Summary of Violation (Additional documentation may be attached):		
Faculty Signature	Date	
Student Signature (Signature is acknowledgment of charge and not an admission of guilt or in	Date	

Faculty:

- Attach Turnitin report (or equivalent report) and/or other supporting documentation/evidence.
- Provide a copy to the student for their record as well as to the Associate Dean of Graduate School in a sealed envelope.

Section III: Clemson University School of Nursing Facilities, Resources and Student Organizations

Joseph F. Sullivan Center for Nursing and Wellness

The Sullivan Center for Nursing and Wellness is operated by the College of Behavioral, Social and Health Sciences. The Center provides unique opportunities for students to gain experience in providing health promotion, disease prevention and wellness services. Under the guidance of faculty, students plan and implement these services in a well-equipped, up-to-date health facility.

Computers

Clemson Computing and Information Technology provide a variety of support services. For assistance, contact (864) 656-3494 or visit the CCIT website.

Printing Posters

Students who need printer and plotting services, can check with Clemson Printing to determine what resources may be available for their use at 864 656-4766. Prices vary depending on size of poster. The fee is charged to student accounts. They complete the printing with 24 hours. Instructions for downloading and sending to them can be found here.

Connection to the Clemson University Libraries Catalog & Databases

Access Clemson libraries here. The Library Reference Desk may be contacted at: 864.656.3024. You may also email the **STEM Subject Librarians** directly for research assistance, science librarian@lists.clemson.edu.

Sigma Theta Tau International, Gamma Mu Chapter

Sigma Theta Tau is the international honor society of nursing with chapters at schools and colleges of nursing throughout the United States and the world. Gamma Mu Chapter was installed at Clemson University in the Spring of 1978. Its purposes are those of the international organization:

- o to recognize superior achievements;
- o to recognize the development of leadership qualities;
- o to foster high professional standards;
- o to encourage creative work; and
- o to strengthen commitment to the ideals and purposes of the profession.

Through the membership, Gamma Mu Chapter works to support the purposes of the society by engaging in activities which are of an educational or scientific nature and by cooperating with other chapters and the international council. At least two program meetings are held during the year, one of which consists of research presentations by nurses.

Membership is an honor, designed to recognize and encourage superior scholarship and leadership. Selection is made from among students in the baccalaureate and graduate programs in nursing, and from among community nurse leaders who hold a minimum of bachelor's degree. Candidates shall be elected from Master's students who:

- Have completed ¼ of the nursing curriculum;
- Achieve academic excellence (at schools where a 4.0 grade point average system is used, this equates to a 3.5 or higher); and
- Meet the expectation of academic integrity.

Invitations are sent to eligible students in January of each year. Upon acceptance and payment of the associated fees, new members are inducted in the Gamma Mu Chapter each spring.

Student Representation

Students are also encouraged to participate in School of Nursing activities through elected or appointed membership on School Committees. Student input is one of many important ways that faculty learn about concerns and issues in the program. At the beginning of each year, students from each program's specialty options (one from the first year and one from the second year) are elected to serve on the Master's Program Advisory Committee and other School of Nursing Committees. It is important to elect representatives who will agree to attend designated meetings in order for this process to take place. Students are free to speak at any of these meetings but are not voting members. Further information about their activities is available through the Office of the School Director or the Program Coordinator.

- Master's Student Advisory Committee: One graduate student from each level (1st year and 2nd year) and specialty option (CNS, Education).
- DNP Advisory Committee: One graduate student from each level (1st year and 2nd year) and specialty option (FNP,AGNP, HSL).
- Graduate Student Government: Two student Senators will be elected each year.

Graduate students are also encouraged to participate in the University Graduate Student Association (GSA) through a representative elected in the fall semester. Regular activities are sponsored by this group with announcements of upcoming activities posted across campus. (http://www.grad.clemson.edu/gsg/)

Lunch and Learn Meetings

Graduate students are encouraged to bring their lunch and join faculty and fellow students for Lunch and Learn meetings. Special presentations will be announced via e-mail in advance. Topics may include discussion of faculty research and related opportunities for students, clinical Research, course and clinical planning, clinical management, job recruitment, and more. Meals may be provided at some sessions. Students will be notified whether to bring lunch or if lunch will be provided.

Tips for Success and Graduation Information

Graduate Steps to Success

- 1. Once you have been admitted, plan to attend Orientation.
- 2. Read the School of Nursing DOCTOR OF NURSING PRACTICE (DNP) & MASTER'S STUDENT HANDBOOK and complete the Enrollment Requirements.
- 3. Visit the **Graduate School** webpages. Look under Current Students for important dates & forms. An A to Z index is provided. You are responsible for meeting all the deadlines. It is not the faculty or staff's responsibility to make you aware of any deadlines.
- 4. Obtain your computer ID and a password for on-line registration at orientation. You should change the password after you log on for the first time to one that only you know. The CCIT Support Center can provide needed assistance: 864.656.3494.
- 5. DNP students make contact with your Committee Chair. Most faculty are available after August 15 for the fall semester and the second week of January for the spring semester.
- 6. **Register** for courses. Follow your individual curriculum **Plan of Study**. Any changes must be approved by the Director of Graduate Programs (in consultation with the DNP committee Chair).
- 7. DNP students start thinking about a committee. A list of faculty members and their research interest/expertise is included in this handbook. The committee should consist of a Chair and two (2) members, one who is a faculty in the School of Nursing and one outside member. Your Chair will provide guidance on the selection of your other two committee members.
- 8. **DNP students file a GS2 Form**. This plan of study should be completed before completing 9 credits and once you have selected a Chair. A revised plan of study may be submitted if there are any changes with the course schedule or committee membership.
- 9. Plan to attend **Convocation** and **Graduation**.

Tips for Working with Faculty

Graduate level faculty are busy professionals who spend their time teaching, conducting research, advising and mentoring graduate students, writing and consulting. Because of the nature of their work, they may initially appear distant and less open to students than what may have been your undergraduate experience. However, once you gain an understanding of the graduate school process and the protocol for dealing with graduate level colleagues, you should be able to develop a good working relationship with faculty who teach courses or have research interest in your area of major concentration.

Here are some tips for developing a rapport with the graduate level faculty:

- Do treat them as busy professionals
- Arrange a suitable time (in advance) for help or advanced advising

- Expect constructive criticism from your faculty this can only help you
- Do take the initiative to build a solid foundation of support
- If you need help, ask for it take initiative
- Do treat everyone with respect and honesty
- · Maintain integrity in all that you do
- Respectful communication (both written and verbal)
- · Consider asking a friend about assignments before contacting faculty

Due Dates: It is student responsibility to know all deadline dates for Graduate School Graduation Requirements and Deadlines.

Application for Graduation and Diploma Order

The application for Graduation and Diploma Order Online form can be completed only by students who plan to graduate in the next gradation. Students obtain required forms through IROAR. (Online - Graduate School, "Forms and Procedures, Graduating Forms"). Contact Enrolled Services at 656-5339 with questions. Form maintained by Office of the Registrar is available through iROAR.

Ordering Regalia

The University sends information on ordering graduation regalia. All students attending nursing convocation and/or graduation/hooding ceremony will need regalia. Graduation supplies can be ordered through the <u>Clemson Bookstore</u>

Nursing Professional Convocation

At the time of graduation, the School of Nursing holds a Professional Convocation to honor its graduates and to welcome new graduates into the profession. Students completing the DNP or MS degree receive their master's hoods as part of the ceremony (hoods can be purchased through the Clemson University Bookstore online). University officials and nursing agency members are invited to this important occasion, as are families and friends of all graduating students.

Convocation Awards

Graduate Excellence Award

Given annually to one outstanding graduate student who has demonstrated two of the following three:

- 1. Academic excellence in the classroom (3.75 and above)
- 2. Leadership excellence (commitment to the profession at the community, state, or national level)
- 3. Scholarship excellence (presentation of thesis, Clinical Research, or other scholarly work at local, state, or national level)

Faculty nominate candidates and selection is completed by an anonymous faculty vote. Eligible students must complete their degree within one semester of completion of coursework.

Graduate Student Academic Excellence Awards

Faculty will nominate and select a graduate student from each track for the Graduate Student Academic Excellence Award.

Graduate Teaching Excellence. Graduate Teaching Assistants are students who serve in the role of mentor and teacher for undergraduate nursing students

Graduate Research Excellence. Graduate Research Assistants are students who assist faculty in implementation and evaluation of a research project.

Section V:
Clemson University School of Nursing
Post Master's & Post Baccalaureate
Doctor of Nursing Practice (DNP)

DNP Purpose, Objectives, and Curriculum Information

DNP Degree Program Overview

The Doctor of Nursing Practice (DNP) consists of both an online post-master's nursing degree program as well as a hybrid post-baccalaureate nursing degree program focused on evidence-based practice, leadership, healthcare policy and advocacy, interprofessional collaboration, and expert clinical, advanced nursing practice. The DNP program will prepare nurses at the highest level of practice for leadership roles applying and translating research into practice with the goal of producing expert clinical leaders for positions in practice. Students will spend up to 2 days/ year during the summer in on-campus immersion experiences for a program orientation and translational research symposia (a maximum of three summer immersions is anticipated). Immersion days will take place the last Thursday and Friday of July each year.

MS-DNP

The Post-MS DNP is a 35-credit hour program. All course work will be provided in an online asynchronous format. Graduation is based upon successful completion of all coursework and a DNP project. DNP graduates must complete a minimum of 1,000 hours of practice post-baccalaureate, which may include precepted practicum hours earned in the MS(N) Nursing Program. Students will complete a DNP Project designed to demonstrate clinical scholarship by utilizing the evidence to improve practice and healthcare outcomes.

BS-DNP

The Post BS Doctor of Nursing Practice (DNP) degree program is The Post-BS DNP is a 74-credit hour program designed to build upon the first professional degree. The Post BS DNP options are Family Nurse Practitioner, Adult-Gerontology Nurse Practitioner, Pediatric Nurse Practitioner, and Health Systems Leadsership. The student acquires knowledge and skills in advanced nursing. The Post BS Doctor of Nursing Practice is delivered in a hybrid format. Classes are held every Thursday at the Clemson University Nursing building. Faculty utilize Canvas, an online student management system, to enhance student learning. Clinical management labs are scheduled on days other than class days based on lab/preceptor availability. Other learning experiences (e.g., Boy Scout physicals, skills labs, lobby days, etc) may be scheduled in the evening or on days other than Thursday but sufficient notice will be given. Graduation is based upon successful completion of all coursework and a DNP project

DNP Objectives

Upon completion of the program students will be able to:

- Demonstrate relationship centered nursing leadership to improve the healthcare, health status, and health outcomes of individuals, families, communities, and populations while addressing health disparities.
- Integrate biopsychosocial, cultural, organizational/systems, informatics, ethical and legal knowledge with nursing science as a foundation for expert clinical nursing practice in a specific nursing clinical specialization.
- Engage in interprofessional, collaborative partnerships to frame problems, design and implement evidence- based interventions and evaluate outcomes.
- Formulate health promotion, disease prevention and treatment strategies that translate and integrate genetics/genomics, individual behaviors and lifestyle factors, family, community and culture, social and economic forces, and public and person health systems addressing access, quality, and safety.
- Transform practice through knowledge reflection, knowledge-based resources, information technology/informatics, strategic resource management and evidence-based practice research/action inquiry.
- Translate knowledge for application in the delivery of advanced nursing practice and nursing administration/health leadership.
- Implement changes based on evaluation of health systems, health policy, and nursing science in response to social, political, economic and ethical issues.
- Develop and evaluate care delivery approaches that meet current and future needs of patient populations based on scientific findings in nursing and other clinical sciences, as well as organizational, political, and economic sciences.

DNP Admission and Post-admission Requirements found here

State Reciprocity

South Carolina is a member of the State Authorization Reciprocity Agreement (SARA) and Clemson University (CU) is an approved SARA institution, which means we adhere to established standards for offering post-secondary e-learning programs. State authorization allows CU the ability to offer online programs to students who live outside of SC OR enroll students in learning placements that will take place outside of SC (such as internships, clinicals, practicums, and student teaching). CU must meet all of the regulatory requirements, including those from licensure/certification boards, of the state where the student physically resides or where an activity will take place.

IT IS IMPERATIVE YOU UNDERSTAND THE REGULATIONS FOR YOUR STATE PRIOR TO ENROLLING IN ANY ACADEMIC PROGRAM OR COURSE.

Please review our <u>state authorizations</u> to determine if specific program offerings or learning placements are available in the state which you will be physically located while enrolled. If you experience difficulty finding the requirements for a specific state, please email <u>stateauth@clemson.edu</u> for help.

If you are expecting a change in your physical location, contact the State Authorization office (state-auth@clemson.edu) as soon as you know the anticipated location(s). Physical presence in a location where we do not meet state regulatory requirements can negatively impact our ability to offer you federal financial aid, military tuition assistance, or your continuation within the program. These restrictions extend to courses taken online over the summer, internships, clinicals or other forms of learning placements if they are conducted outside of an approved state. Students are responsible for providing accurate and updated information about their physical presence to the institution. Early notification allows the institution to minimize, but may not prevent, the possibility of program delays/offerings.

MS DNP Curriculum Plan of Study



DNP (Post MS)

Student Name:	CUID:	Clemson email:
Summer NURS 9050 NURS 9210	DNP Health Informatics DNP Role, Theory & Philosophy of Science	3(3,0) 3(3,0)
Fall NURS 9020	DNP Clinical Epidemiology & Biostatistics	3(3,0)
Spring NURS 9040 NURS 9270	DNP Leadership in Healthcare Systems Healthcare Economics, Finance, & Policy	3(3,0) 3(3,0)
Summer NURS 9030 NURS 9090	DNP Evidence Integration DNP Project I	3(3,0) 3(0,3)
Fall NURS 9060 NURS 9100	DNP Outcomes Management DNP Project II *Individual Faculty Assignme	3(3,0) nt 4(0,4)
Spring NURS 9080 NURS 9110	DNP Genomics, Ethics & Health Policy DNP Project III *Individual Faculty Assignment	3(3,0) ent 4(0,4)
		Total Credita: 2

Total Credits: 35

Graduation dependent on completion of the DNP Project.

BS DNP Curriculum Plans of Study

(students in clinical course should refer to Section VII: Clinical Management Course Information of Student Handbook)



DNP (Post BS) Primary Care AGNP

Student Name:	CUID:	Clemson email:
Summer NURS 9210 NURS 9050	DNP Role, Theory & Philosophy of Science DNP Health Informatics	3(3,0) 3(3,0)
Fall NURS 9020 NURS 8090 NURS 8060/8061	DNP Clinical Epidemiology & Biostatistics Pathophysiology for Advanced Nursing Advanced Assessment for Nursing	3(3,0) 3(3,0) 3(2,3)
Spring NURS 9040 NURS 9270 NURS 8050	DNP Leadership in Healthcare Systems Healthcare Economics, Finance, & Policy Pharmacotherapeutics for Advanced Nursing	3(3,0) 3(3,0) 3(3,0)
Summer NURS 8070 NURS 9030	Nurse Research Design & Methods DNP Evidence Integration	3(3,0) 3(3,0)
Fall NURS 9060 NURS 8210/8211 NURS 8820/8821	DNP Outcomes Management Adult Nursing Primary Care for Elders	3(3,0) 4(2,6) 4(2,6)
Spring NURS 9080 NURS 8840/8841 NURS 8200/8201	DNP Genomics, Ethics & Health Policy Mental Health & Illness of Adults Gerontology Nursing	3(3,0) 4(2,6) 4(2,6)
Summer NURS 8010 NURS 9090	Advanced Family & Community Nursing DNP Project I	3(3,0) 3(0,3)
Fall NURS 8180 NURS 9100 NURS 8230	Women's Health in Primary Care DNP Project II Nurse Practitioner Clinical Practicum I	2(2,0) 4(0,4) 3(0,9)
Spring NURS 9110 NURS 8240	DNP Project II Practicum II	4(0,4) 3(0,9)

Total Credits: 74

Students need 9 credit hours to be considered full time so for any semester short (except summers) add NURS 8790 for the missing hours up to 3 credits. Courses ending in "1" (except NURS 8061) need a clinical preceptor. See handbook for information on clinical preceptors.



DNP (Post BS) Primary Care FNP

Student Name:	CUID:	Clemson email:	
Summer NURS 9210 NURS 9050	DNP Role, Theory & Philosophy of S DNP Health Informatics	Science	3(3,0) 3(3,0)
Fall NURS 9020 NURS 8090 NURS 8060/8061	DNP Clinical Epidemiology & Biostar Pathophysiology for Advanced Nursi Advanced Assessment for Nursing		3(3,0) 3(3,0) 3(2,3)
SpringNURS 9040DNP Leadership in Healthcare SystemsNURS 9270Healthcare Economics, Finance, & PolicyNURS 8050Pharmacotherapeutics for Advanced Nursing		Policy	3(3,0) 3(3,0) 3(3,0)
Summer NURS 8070 NURS 9030	Nurse Research Design & Methods DNP Evidence Integration		3(3,0) 3(3,0)
*Fall NURS 9060 NURS 8210/8211 OR NURS 8200/8201 NURS 8190/8191 OR NURS 8220/8221	DNP Outcomes Management Adult Nursing Child and Adolescent Nursing Women's Health Nursing Gerontology Nursing		3(3,0) 4(2,6) 4(2,6) 4(2,6) 4(2,6)
*Spring NURS 9080 NURS 8210/8211 OR NURS 8200/8201 NURS 8190/8191 OR NURS 8220/8221	Adult Nursing Child and Adolescent Women's Health Nursing Gerontology Nursing		4(2,6) 4(2,6) 4(2,6) 4(2,6)
Summer NURS 8010 NURS 9090	Advanced Family & Community Nurs	sing	3(3,0) 3(3,0)
Fall NURS 8850 NURS 9100 NURS 8230	Mental Health in Primary Care DNP Project II Nurse Practitioner Clinical Practicum	n I	2(2,0) 4(0,4) 3(0,9)
Spring NURS 9110 NURS 8240	DNP Project III Practicum II		4(0,4) 3(0,9)

Total Credits: 74

Students need 9 credit hours to be considered full time so for any semester short (except summers) add NURS 8790 for the missing hours up to 3 credits. Courses ending in "1" (except NURS 8061) need a clinical preceptor. See handbook for information on clinical preceptors.

*Course selections predetermined to ensure preceptorship



Clemson email:

DNP (Post BS) HSL Student Name:

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CUID:

Total Credits: 74

Students need 9 credit hours to be considered full time so for any semester short (except summers) add NURS 8790 for the missing hours up to 3 credits. Courses ending in "1" (except NURS 8061) need a clinical preceptor. See handbook for information on clinical preceptors.



Clemson email:

DNP (Post BS) PNPStudent Name:

Summer NURS 9210 NURS 9050	DNP Role, Theory & Philosophy of Science DNP Health Informatics	3(3,0) 3(3,0)
Fall NURS 9020 NURS 8090 NURS 8060/8061	DNP Clinical Epidemiology & Biostatistics Pathophysiology for Advanced Nursing Advanced Assessment for Nursing	3(3,0) 3(3,0) 3(2,3)
Spring NURS 9040 NURS 9270 NURS 8050	DNP Leadership in Healthcare Systems Healthcare Economics, Finance, & Policy Pharmacotherapeutics for Advanced Nursing	3(3,0) 3(3,0) 3(3,0)
Summer NURS 8070 NURS 9030	Nurse Research Design & Methods DNP Evidence Integration	3(3,0) 3(3,0)
Fall NURS 9060 NURS 8610/8611 NURS 8620/8621	DNP Outcomes Management PNP Pediatric Health Promotion PNP Common Illness in Children & Adolescents	3(3,0) 4(2,6) 4(2,6)
<u>Spring</u> NURS 9080 NURS 8630/8631 NURS 8840/8841	DNP Genomics, Ethics & Health Policy PNP Chronic Illness in Infants/Children/Adolescents Mental Health and Illness of Adults	3(3,0) 4(2,6) 4(2,6)
Summer NURS 8010 NURS 9090	Advanced Family & Community Nursing DNP Project I	3(3,0) 3(3,0)
Fall NURS 8180 NURS 9100 NURS 8230	Developing Family in Primary DNP Project II Nurse Practitioner Clinical Practicum I	2(2,0) 4(0,4) 3(0,9)
Spring NURS 9110 NURS 8240	DNP Project III Nurse Practitioner Clinical Practicum II	4(0,4) 3(0,9)

CUID:

Total Credits: 74

Students need 9 credit hours to be considered full time so for any semester short (except summers) add NURS 8790 for the missing hours up to 3 credits. Courses ending in "1" (except NURS 8061) need a clinical preceptor. See handbook for information on clinical preceptors.

Nursing 9210: DNP Role, Theory, & Philosophy of Science 3(3,0)

This course examines the historical development of the role of the DNP prepared nurse leader. The application of philosophy of science, historical, and theoretical underpinnings of the advanced nursing practice (ANP) role and the advanced practice nursing (APN) nurse practitioner role are presented. Nursing theories and concepts; integration of knowledge from biological and social sciences; and leadership expectations and translation of knowledge are applied to improve practice outcomes.

Nursing 9020: DNP Clinical Epidemiology & Biostatistics 3(3,0)

This course is designed to build upon principles learned in introductory epidemiology and statistical courses in an applied clinical setting. Analytical techniques used to analyze and interpret data for advanced nursing practice, emphasizing clinical applications of epidemiological and biostatistical concepts. Emphasis is on applications of these methods, with enough derivation to comprehend the procedures. Principles and methods of data analysis center to understanding health-related indicators for population health management will be used.

Nursing 9030: DNP Evidence Integration 3(3,0)

Focuses on the process of literature synthesis with the goal of analyzing, integrating and applying the evidence. Students will formulate practice recommendations to critically appraise existing guidelines and other forms of evidence. Principles of scientific inquiry, quantitative and qualitative research methods and research ethics will be explored.

Nursing 9040: DNP Leadership in Healthcare Systems 3(3,0)

Examines transformational leadership in complex health care organizations. Emphasis on complexity, leadership principles, context, culture, assessment of strengths and opportunities, strategic planning, and leading change.

Nursing 9050: DNP Health Informatics 3(3,0)

Focus on the nature, acquisition and analysis of clinical data management of nursing information to support clinical and administrative decision-making, will be explored. Emphasis is placed in becoming knowledgeable and competent with available resources to manage data relationship to patient care and patient outcomes.

Nursing 9060: DNP Outcomes Management 3(3,0)

Examines the science of systems improvement including the models, methods, and tools of process improvement applied to healthcare. Emphasis is on designing outcomes and evidence-based safe and efficient processes and workflows to achieve customer satisfaction and targeted outcomes.

Nursing 9270: DNP Healthcare Economics and Finance 3(3,0)

Analyzes and synthesizes the reciprocal relationship among client, community, health care system, socio-cultural and economic variables, and policy-making. Analyzes healthcare economic trends, reimbursement issues and funding sources. Applies key principles and methods of financial analysis, which include budgeting and cost analysis. Theory and application are integrated and aimed at preparing DNP graduates for leadership roles.

Nursing 9080: DNP Genomics, Ethics, and Health Policy 3(3,0)

Analysis of relationships among political climate, policy design, and government action as related to ethical, legal and social issues surrounding availability of genetic information. Examination of ethical perspectives and outcomes on health policies relating to genomic issues plus contemplated actions based on emerging diagnostic technologies.

Nursing 9090: DNP Project I 3(1,2)

A practice immersion experience that enables synthesis literature and knowledge from nursing and other sciences. In this course the DNP student will complete the first phase of the DNP Project: literature search, synthesis of literature, and development of the DNP Project Plan.

Nursing 9100: DNP Project II 4(0,4)

A practice immersion experience that enables student to obtain Institutional Review Board approval and allows implementation and data collection for the DNP Project. In this course the DNP student will complete the second phase of the DNP Project: Institutional Review Board approval, implementation, and data collection.

Nursing 9110: DNP Project III 4(0,4)

A practice immersion experience that enables student to evaluate collected data to identify the impact on healthcare outcomes from the DNP Project. In this course the DNP student will complete the final phase of the DNP Project: evaluation and dissemination of findings.

Nursing 8010: Advanced Family and Community Nursing 3(3,0)

Developmental, psychodynamic, social-political, and cultural theories and concepts are synthesized and applied to the analysis of health and illness in communities and in families across the life cycle. Roles and functions of advanced practice nurses in promoting community health and family health are examined.

Nursing 8050: Pharmacotherapeutics for Advanced Nursing 3(3,0)

Prescription administration and patient/family education in use of pharmacological agents emphasizing drugs prescribed for common or chronic illnesses; drug selection; adverse drug reactions; age-related differences in utilization; regulations affecting nurse's prescriptive authority.

NURS 8060 - Advanced Assessment for Nursing 3(2,3)

Comprehensive assessment and diagnosis of health problems and status for individuals of all ages including assessment of families; physical and laboratory/radiologic diagnostic assessments; directed laboratory experiences in advanced assessment of clients of several ages. Coreq: NURS 8061.

Nursing 8070: Nursing Research Design and Methods 3(3,0)

Quantitative and qualitative research methodologies useful and appropriate to clinical nursing practice and for the development of nursing knowledge; ethics with human subjects; does not include thesis advisement.

Prerequisites: NURS 8040, 8080.

Nursing 8090: Pathophysiology for Advanced Nursing 3(3,0)

Human response to health alterations as they impact nursing knowledge and practice; recognizing the manifestations of health alterations and developing nursing interventions accordingly.

NURS 8180 - Developing Family in Primary Care 2(2,0)

Theories related to nursing management in the care of women's health and developing families. Students apply critical thinking to health problems and needs of women and developing families, related nursing issues, and current research. Preq: NURS 8060.

NURS 8190 - Women's Health Nursing 4(2,6)

Theories and concepts related to nursing management in the care of developing families; critical thinking applied to health problems and needs of developing families before, during and immediately following pregnancy; application of related nursing issues and current research; clinical practice with developing families in a variety of settings. Preq: NURS 8010 and NURS 8040 and NURS 8050 and NURS 8060 and NURS 8090. Coreq: NURS 8191.

NURS 8200 - Child and Adolescent Nursing 4(2,6)

Advanced nursing roles and functions applied to health promotion, health maintenance, health restoration, habilitation and rehabilitation of infants, children and adolescents with existing or potential health problems. Critical thinking is used to assess, diagnose, intervene and promote continuity of care with clients of these ages irrespective of setting. Preq: NURS 8010 and NURS 8040 and NURS 8050 and NURS 8060 and NURS 8090; and either NURS 8190 (Maternal/Child CNS students only) or NURS 8210 (Family Practitioner students only). Coreq: NURS 8201.

Nursing 8210: Adult Nursing_4(2,6)

Roles and functions embodied in advanced practice applied to the health promotion, and clinical management of common or chronic health problems of adults within the context of family; clinical practice with adult clients in a variety of settings. Prerequisites: NURS 8010, 8040, 8050, 8060, 8090.

Nursing 8220: Gerontology Nursing 4(2,6)

Roles and functions of advanced practice applied to the preventive, restorative and rehabilitative care of the older adult with existing or potential health problems; clinical practice in a variety of settings. Prerequisites: NURS 8010, 8040, 8050, 8060, 8090.

Nursing 8230: Nurse Practitioner Clinical Practicum 6(0,18)

Guided practice applying advanced nursing knowledge in family nursing and advanced practice roles (clinical nurse specialist, case manager, and/or practitioner); joint preceptor and faculty guidance and supervision in the care of selected populations in a variety of health care settings. Prerequisites: FNP track: NURS 8190/8191, 8200/8201, 8210/8211, 8220/8221; Nursing 8210/8211, 8220/8221, 8820/8821, 8840.

Nursing 8240: Nurse Practitioner Clinical Practicum II 3(0,9)

Guided practice applying advanced nursing knowledge in family nursing and advanced practice roles (clinical nurse specialist, case manager, and/or practitioner); joint preceptor and faculty guidance and supervision in the care of selected populations in a variety of health care settings. Prerequisites: FNP track: NURS 8190/8191, 8200/8201, 8210/8211, 8220/8221, 8230; Nursing 8210/8211, 8220/8221, 8230, 8820/8821, 8840.

NURS 8260 - Quality and Outcomes Management in Health Care 4(3,3)

4 Credits (3 Contact Hours) Examines the science of systems improvement including the models, methods and tools of process analysis and improvement applied to health care. Emphasis is on designing outcome and evidence-based safe and efficient processes and workflows to achieve customer satisfaction and targeted outcomes. Practicum with quality experts permits guided application of classroom content. Preq: NURS 8250 or consent of instructor. Coreq: NURS 8261.

NURS 8460 - Healthcare Financial Management 3(3,0)

Analysis of financial theory and practice for healthcare executives. Includes methods of financial reporting and defines accounting practices for decision making and operating activities. Includes processes for measuring and reporting financial information, analysis, interpretation and use of financial information for planning and controlling the health-care business. Students must have completed an undergraduate accounting course before enrolling in this course.

NURS 8840 - Mental Health and Illness of Adults 4(2,6)

Psychosocial, developmental, spiritual and cultural theories are synthesized and applied to the analysis of mental health and illness in adulthood. Considers roles and functions of advanced practice nurses in promoting the mental health of adults and their families. Clinical practice in the community is incorporated. Preq: NURS 8010 and NURS 8040 and NURS 8050 and NURS 8060 and NURS 8090. Coreq: NURS 8841.

NURS 8850 - Mental Health in Primary Care 2(2,0)

Psychological, developmental, spiritual and cultural theories are synthesized and applied to the analysis of mental health and illness in adulthood. Roles and functions of advanced practice nurses in promoting the mental health of individuals and their families are examined. Preq: NURS 8060

NURS 8610 - PNP Pediatric Health Promotion 4(2,6)

Advanced nursing roles and functions applied to health assessment, diagnosis and collaborative management of newborns, infants, children, adolescents, and young adults during the course of growth and development. Students use critical thinking skills, synthesis and application of evidence-based research in the promotion of wellness, prevention of illness or injury and promote continuity of family centered care. Preq: NURS 8050 and NURS 8060 and NURS 8090. Coreq: NURS 8611.

NURS 8620 - PNP Common Illness in Children and Adolescents 4(2,6)

Advanced nursing roles and functions applied to health assessment, diagnosis and collaborative management of newborns, infants, children, adolescents, and young adults with common or potential health problems. Students use critical thinking skills, synthesis and application of evidence-based research to manage common pediatric illnesses and promote continuity of family centered care. Preq: NURS 8050 and NURS 8060 and NURS 8090. Coreq: NURS 8621.

NURS 8630 - PNP Chronic Illness in Infants/Children/Adolescents 4(2,6)

Advanced nursing roles and functions applied to health assessment, diagnosis and collaborative management of newborns, infants, children, adolescents, and young adults with chronic illness or potential chronic health problems. Students use critical thinking skills, synthesis and application of evidence-based research to manage common pediatric illnesses and promote continuity of family centered care. Preq: NURS 8050 and NURS 8060 and NURS 8090. Coreq: NURS 8631.

NURS 8740 - HSL Theoretical Basis of Organizational Behavior and Change 3(3,0)

This course promotes the use of organizational sciences as a basis for health systems leadership. The student is required to apply these theories in developing organizational change scenarios to improve patient and healthcare outcomes. Students develop multiple theory-based strategies for generating and sustaining changes that promote enhanced effectiveness, safety, accessibility, and satisfaction in health care organizations. These strategies must address organizational structure, dynamics, and processes of change in the context of culturally sensitive nursing practice. Preq: NURS 9040.

NURS 8760 - HSL Environmental Influences for Aggregate and Global Health Planning 3(3,0)

This course integrates environmental health influences to facilitate planning for healthcare related interventions and programs for advanced nursing practice. Current issues related to population health, cultural issues, environmental data and policy are included with respect to health systems and international health programs. Preq: NURS 9020.

Nursing 8790: Special Topics in Nursing 1-3 (1-3, 0-9)

In-depth seminar on selected topics such as therapeutic communication, legal and ethical issues in nursing, and health care and political process in health.

Nursing 8820: Primary Care for Elders 4(2,6)

Application of the roles and functions of advanced practice in the management of frailty in old age; prevention of early disability and dependence; maintenance of function, independence and self-care; cultural, social, and ethical issues. Prerequisites: NURS 8010, 8040, 8050, 8060, 8090.

NURS 8840 - Mental Health and Illness of Adults 4(2,6)

Psychosocial, developmental, spiritual and cultural theories are synthesized and applied to the analysis of mental health and illness in adulthood. Considers roles and functions of advanced practice nurses in promoting the mental health of adults and their families. Clinical practice in the community is incorporated. Preq: NURS 8010 and NURS 8040 and NURS 8050 and NURS 8060 and NURS 8090. Coreq: NURS 8841.

NURS 9730 - HSL Assessment and Collaboration with Communities and Systems 4(2,2)

This course challenges the student to integrate techniques of community assessment and principles of collaboration to develop strategic operational or evaluation plans based on objective comprehensive assessments. Concepts related to a broad spectrum of communities are included with respect to health systems. Emphasis is placed on the evaluation and included with respect to health systems. Coreq: NURS 9731.

NURS 9740 - Health Systems Leadership Field Experience I 4(0,4)

This course consists of guided practice to apply advanced nursing knowledge in health systems leadership and advanced practice roles. Students engage with a mentor and faculty to learn about topics of health system leadership, specifically in strengthening leadership, business, and operations skills appropriate to the setting. The focus of this experience is quality improvement, application of rapid cycle change, and assessing organizational culture and patient-centered care. To be taken Pass/No Pass only.

NURS 9750 - Health Systems Leadership Field Experience II 3(0,3)

This course continues expansion of guided practice in health systems leadership and advanced practice roles. Students engage with a mentor and faculty to learn about topics of health system leadership and policies appropriate to the setting and across organizations and agencies. As policy activists, students demonstrate expertise in clinical judgment and systems thinking by leading a focused system change, policy development, grant proposal or presentation at a national meeting. To be taken Pass/No Pass only. Preq: NURS 9740.

Change of Program Tracks:

Applications are reviewed based on the cohort to which prospective students apply. Admitted students may not transfer between tracks. In order to change tracks, student will need to apply to the program in which they would to like to change and be recommended for admission by the Admission's Committee based on blind review of all applications.

AACN DNP Essentials, Selected Corresponding DNP Courses, and Related Course Objectives

https://www.aacnnursing.org/Portals/42/AcademicNursing/pdf/Essentials-2021.pdf

2021 AACN Essentials for Doctoral Education

Four Spheres of Care

- 1. Diagnosis prevention and health promotion
- 2. Chronic disease care
- 3. Regenerative and restorative care
- 4. Hospice, palliative, and supportive care

Concepts

- Clinical judgement
- Communication
- Compassionate care
- Diversity, equity and inclusion
- Ethics
- Evidence-based practice
- Health policy
- Social determinants of health

Domains, Level 2 Competencies and Sub-Competencies

Competency	Sub-Competencies Sub-Competencies
nursing knowledge and ways of knowing	ice: Integration, translation, and application of established and evolving disciplinary, as well as knowledge from other disciplines, including a foundation in liberal arts and ishes the practice of professional nursing and forms the basis for clinical judgment and
1.1 Demonstrate an understanding of the discipline of nursing's distinct perspective and where shared perspectives exist with other disciplines	 Translate evidence from nursing science as well as other sciences into practice. Demonstrate the application of nursing science to practice Integrate an understanding of nursing history in advancing nursing's influence in health care.
1.2 Apply theory and research-based knowledge from nursing, the arts, humanities, and other sciences.	 Synthesize knowledge from nursing and other disciplines to inform education, practice, and research Apply a systematic and defendable approach to nursing practice decisions. Employ ethical decision making to assess, intervene, and evaluate nursing care. Demonstrate socially responsible leadership Translate theories from nursing and other disciplines to practice.
1.3 Demonstrate clinical judgment founded on a broad knowledge base.	 Integrate foundational and advanced specialty knowledge into clinical reasoning. Synthesize current and emerging evidence to Influence practice. Analyze decision models from nursing and other knowledge domains to improve clinical judgment.

evidence-based, and developmentally appropriate. Person-centered care builds on a scientific body of knowledge that guides nursing practice regardless of specialty or functional area. 2.1 Engage with the individual in Promote caring relationships to effect positive outcomes. establishing a caring relationship. Foster caring relationships 2.2. Communicate effectively with Demonstrate advanced communication skills and techniques using a variety of modalities individuals. with diverse audiences. Design evidence-based, person-centered engagement materials Apply individualized information, such as genetic/genomic, pharmacogenetic, and environmental exposure information in the delivery of personalized health care. Facilitate difficult conversations and disclosure of sensitive information. 2.3 Integrate assessment skills in practice. Demonstrate that one's practice is informed by a comprehensive assessment appropriate to the functional area of advanced nursing practice. 2.4 Diagnose actual or potential health problems and needs. Employ context driven, advanced reasoning to the diagnostic and decision-making Integrate advanced scientific knowledge to guide decision making. 2.5 Develop a plan of care. Lead and collaborate with an interprofessional team to develop a comprehensive plan of Prioritize risk mitigation strategies to prevent or reduce adverse outcomes. Develop evidence-based interventions to improve outcomes and safety. Incorporate innovations into practice when evidence is not available. 2.6 Demonstrate accountability for care Model best care practices to the team. delivery. Monitor aggregate metrics to assure accountability for care outcomes. Promote delivery of care that supports practice at the full scope of education. Contribute to the development of policies and processes that promote transparency and accountability. Apply current and emerging evidence to the development of care guidelines/tools Ensure accountability throughout transitions of care across the health continuum 2.7 Evaluate outcomes of care. Analyze data to identify gaps and inequities in care and monitor trends in outcomes Monitor epidemiological and system-level aggregate data to determine healthcare outcomes and trends. Synthesize outcome data to inform evidence-based practice, guidelines, and policies. 2.8 Promote self-care management. Develop strategies that promote self-care management. Incorporate the use of current and emerging technologies to support self-care management. Employ counseling techniques, including motivational interviewing, to advance wellness and self-care management Evaluate adequacy of resources available to support self-care management. Foster partnerships with community organizations to support self-care management 2.9 Provide care coordination. Evaluate communication pathways among providers and others across settings, systems, and communities. Develop strategies to optimize care coordination and transitions of care. Guide the coordination of care across health systems. Analyze system-level and public policy influence on care coordination. Participate in system-level change to improve care coordination across settings

Domain 2: Person-Centered Care: Person-centered care focuses on the individual within multiple complicated contexts, including family and/or important others. Person-centered care is holistic, individualized, just, respectful, compassionate, coordinated,

affected communities, public health, industry, academia, health care, local government entities, and others for the improvement of equitable population health outcomes. (Kindig & Stoddart, 2003; Kindig, 2007; Swartout & Bishop, 2017; CDC, 2020). 3.1 Manage population health Assess the efficacy of a system's capability to serve a target sub-population's healthcare Analyze primary and secondary population health data for multiple populations against relevant benchmarks Use established or evolving methods to determine population-focused priorities for care. Develop a collaborative approach with relevant stakeholders to address population healthcare needs, including evaluation methods Collaborate with appropriate stakeholders to implement a sociocultural and linguistically responsive intervention plan Ascertain collaborative opportunities for individuals and organizations to improve 3.2 Engage in effective partnerships population health. Challenge biases and barriers that impact population health outcomes. Evaluate the effectiveness of partnerships for achieving health equity. Lead partnerships to improve population health outcomes Assess preparation and readiness of partners to organize during natural and manmade disasters Analyze cost-benefits of selected population-based interventions. 3.3 Consider the socioeconomic impact of Collaborate with partners to secure and leverage resources necessary for effective, the delivery of health care sustainable interventions. Advocate for interventions that maximize cost-effective, accessible, and equitable resources for populations. Incorporate ethical principles in resource allocation in achieving equitable health. Identify opportunities to influence the policy process Design comprehensive advocacy strategies to support the policy process 3.4 Advance equitable population health Engage in strategies to influence policy change policy Contribute to policy development at the system, local, regional, or national levels. Assess the impact of policy changes Evaluate the ability of policy to address disparities and inequities within segments of the population. Evaluate the risks to population health associated with globalization. Appraise advocacy priorities for a population Strategize with an interdisciplinary group and others to develop effective advocacy 3.5 Demonstrate advocacy strategies. Engage in relationship-building activities with stakeholders at any level of influence, including system, local, state, national, and/or global. Demonstrate leadership skills to promote advocacy efforts that include principles of social justice, diversity, equity, and inclusion. Collaboratively initiate rapid response activities to protect population health. Participate in ethical decision making that includes diversity, equity, and inclusion in advanced preparedness to protect populations. 3.6 Advance preparedness to protect Collaborate with interdisciplinary teams to lead preparedness and mitigation efforts to population health during disasters and protect population health with attention to the most vulnerable populations. public health emergencies Coordinate the implementation of evidence-based infection control measures and proper use of personal protective equipment. Contribute to system-level planning, decision making, and evaluation for disasters and public health emergencies

Domain 3: Population Health: Population health spans the healthcare delivery continuum from public health prevention to disease management of populations and describes collaborative activities with both traditional and non-traditional partnerships from

Domain 4: Scholarship for the Nursing Discipline: The generation, synthesis, translation, application, and dissemination of nursing knowledge to improve health and transform health care (AACN, 2018) 4.1 Advance the scholarship of nursing Apply and critically evaluate advanced knowledge in a defined area of nursing practice Engage in scholarship to advance health

- Discern appropriate applications of quality improvement, research, and evaluation methodologies
- Collaborate to advance one's scholarship
- Disseminate one's scholarship to diverse audiences using a variety of approaches or modalities
- Advocate within the interprofessional team and with other stakeholders for the contributions of nursing scholarship
- 4.2 Integrate best evidence into nursing practice

4.3 Promote the ethical conduct of

scholarly activities

- Use diverse sources of evidence to inform practice
- Lead the translation of evidence into practice
- Address opportunities for innovation and changes in
- practice
- Collaborate in the development of new/revised policy or regulation in the light of new evidence
- Articulate inconsistencies between practice policies and best evidence.
- Evaluate outcomes and impact of new practices based on the evidence
- Identify and mitigate potential risks and areas of ethical concern in the conduct of scholarly activities
- Apply IRB guidelines throughout the scholarship process.
- Ensure the protection of participants in the conduct of scholarship.
- Implement processes that support ethical conduct in practice and scholarship
- Apply ethical principles to the dissemination of nursing scholarship

Domain 5: Quality and Safety: Employment of established and emerging principles of safety and improvement science. Quality and

safety, as core values of nursing practice,	enhance quality and minimize risk of narm to patients and providers through both system
effectiveness and individual performance).
5.1 Apply quality improvement principles in	 Establish and incorporate data driven benchmarks to monitor system performance.
1 12	

- care delivery Use national safety resources to lead team-based change initiatives
 - Integrate outcome metrics to inform change and policy recommendations.
 - Collaborate in analyzing organizational process improvement initiatives.
 - Lead the development of a business plan for quality improvement initiatives.
 - Advocate for change related to financial policies that impact the relationship between economics and quality care delivery
 - Advance quality improvement practices through dissemination of outcomes
- 5.2 Contribute to a culture of patient safety
- Evaluate the alignment of system data and comparative patient safety benchmarks.
- Lead analysis of actual errors, near misses, and potential situations that would impact safety.
- Design evidence-based interventions to mitigate risk
- Evaluate emergency preparedness system-level plans to protect safety.
- 5.3 Contribute to a culture of provider and work environment safety
- Advocate for structures, policies, and processes that promote a culture of safety and prevent workplace risks and injury.
- Foster a just culture reflecting civility and respect
- Create a safe and transparent culture for reporting incidents.
- Role model and lead well-being and resiliency for self and team.

Domain 6: Interprofessional Partnerships: Intentional collaboration across professions and with care team members, patients, families, communities, and other stakeholders to optimize care, enhance the healthcare experience, and strengthen outcomes.

- 6.1 Communicate in a manner that facilitates a partnership approach to quality care delivery
- Evaluate effectiveness of interprofessional communication tools and techniques to support and improve the efficacy of team-based interactions.
- Facilitate improvements in interprofessional communications of individual information (e.g. EHR).
- Role model respect for diversity, equity, and inclusion in team-based communications.
- Communicate nursing's unique disciplinary knowledge to
- strengthen interprofessional partnerships
- Provide expert consultation for other members of the
- healthcare team in one's area of practice.
- Demonstrate capacity to resolve interprofessional conflict
- Integrate evidence-based strategies and processes to improve team effectiveness and outcomes.
- Evaluate the impact of team dynamics and performance on desired outcomes.
- Reflect on how one's role and expertise influences team performance.
- Foster positive team dynamics to strengthen desired outcomes.
- Direct interprofessional activities and initiatives
- 6.3 Use knowledge of nursing and other professions to address healthcare needs

6.2 Perform effectively in different team

roles, using principles and values of team

dynamics

- 6.4 Work with other professions to maintain a climate of mutual learning, respect, and shared values.
- Practice self-assessment to mitigate conscious and implicit biases toward other team members
- Foster an environment that supports the constructive sharing of multiple perspectives and enhances interprofessional learning.
- Integrate diversity, equity, and inclusion into team practices.
- Manage disagreements, conflicts, and challenging conversations among team members
- Promote an environment that advances interprofessional learning.

Domain 7: Systems-Based Practice: Responding to and leading within complex systems of health care. Nurses effectively and proactively coordinate resources to provide safe, quality, and equitable care to diverse populations.

- 7.1 Apply knowledge of systems to work effectively across the continuum of care.
- Participate in organizational strategic planning
- Participate in system-wide initiatives that improve care delivery and/or outcomes
- Analyze system-wide processes to optimize outcomes
- Design policies to impact health equity and structural racism within systems, communities, and populations
- 7.2 Incorporate consideration of costeffectiveness of care
- Analyze relevant internal and external factors that drive healthcare costs and reimbursement
- Design practices that enhance value, access, quality, and cost-effectiveness
- Advocate for healthcare economic policies and regulations to enhance value, quality, and cost-effectiveness
- Formulate, document, and disseminate the return on investment for improvement initiatives collaboratively with an interdisciplinary team
- Recommend system-wide strategies that improve cost- effectiveness considering structure, leadership, and workforce needs.
- Evaluate health policies based on an ethical framework considering cost-effectiveness, health equity, and care outcomes.
- 7.3 Optimize system effectiveness through application of innovation and evidence-based practice.
- Apply innovative and evidence-based strategies focusing on system preparedness and capabilities.
- Design system improvement strategies based on performance data and metrics.
- Manage change to sustain system effectiveness.
- Design system improvement strategies that address internal and external system processes and structures that perpetuate structural racism and other forms of discrimination in healthcare systems.

Domain 8: Informatics and Healthcare Technologies: Information and communication technologies and informatics processes are used to provide care, gather data, form information to drive decision making, and support professionals as they expand knowledge and wisdom for practice. Informatics processes and technologies are used to manage and improve the delivery of safe, high-quality, and efficient healthcare services in accordance with best practice and professional and regulatory standards.

- 8.1 Describe the various information and communication technology tools used in the care of patients, communities, and populations.
- Identify best evidence and practices for the application of information and communication technologies to support care.
- Evaluate the unintended consequences of information and communication technologies on care processes,
- communications, and information flow across care settings
- Propose a plan to influence the selection and implementation of new information and communication technologies.
- Explore the fiscal impact of information and communication technologies on health care
- Identify the impact of information and communication technologies on workflow processes and healthcare outcomes.
- 8.2 Use information and communication technology to gather data, create information, and generate knowledge
- Generate information and knowledge from health information technology databases
- Evaluate the use of communication technology to improve consumer health information literacy
- Use standardized data to evaluate decision-making and outcomes across all systems levels
- Clarify how the collection of standardized data advances the practice, understanding, and value of nursing and supports care
- Interpret primary and secondary data and other information to support care
- 8.3 Use information and communication technologies and informatics processes to deliver safe nursing care to diverse populations in a variety of settings.
- Evaluate the use of information and communication technology to address needs, gaps, and inefficiencies in care
- Formulate a plan to influence decision-making processes for selecting, implementing, and evaluating support tools
- Appraise the role of information and communication technologies in engaging the patient and supporting the nurse-patient relationship
- Evaluate the potential uses and impact of emerging technologies in health care.
- Pose strategies to reduce inequities in digital access to data and information
- 8.4 Use information and communication technology to support documentation of care and communication among providers, patients, and all system levels.
- Assess best practices for the use of advanced information and communication technologies to support patient and team communications
- Employ electronic health, mobile health, and telehealth systems to enable quality, ethical, and efficient patient care.
- Evaluate the impact of health information exchange, interoperability, and integration to support patient-centered care.
- 8.5 Use information and communication technologies in accordance with ethical, legal, professional, and regulatory standards, and workplace policies in the delivery of care
- Apply risk mitigation and security strategies to reduce misuse of information and communication technology
- Assess potential ethical and legal issues associated with the use of information and communication technology
- Recommend strategies to protect health information when using communication and information technology
- Promote patient engagement with their personal health data.
- Advocate for policies and regulations that support the appropriate use of technologies impacting health care
- Analyze the impact of federal and state policies and regulation on health data and technology in care settings

Domain 9: Professionalism: Formation and cultivation of a sustainable professional identity, including accountability, perspective,
collaborative disposition, and comportment, that reflects nursing's characteristics and values.

- 9.1 Demonstrate an ethical comportment in one's practice reflective of nursing's mission to society
- 9.2 Employ participatory approach to nursing care.
- 9.3 Demonstrate accountability to the individual, society, and the profession.

9.4 Comply with relevant laws, policies, and regulations.

9.6 Integrate diversity, equity, and inclusion as core to one's professional identity

9.5 Demonstrate the professional identity

of nursing.

- Analyze current policies and practices in the context of an ethical framework.
- Model ethical behaviors in practice and leadership roles
- Suggest solutions when unethical behaviors are observed
- Assume accountability for working to resolve ethical dilemmas.
- Foster opportunities for intentional presence in practice
- Identify innovative and evidence-based practices that promote person-centered care
- Advocate for practices that advance diversity, equity, and inclusion.
- Model professional expectations for therapeutic relationships.
- Facilitate communication that promotes a participatory approach.
- Advocate for nursing's professional responsibility for ensuring optimal care outcomes
- Demonstrate leadership skills when participating in professional activities and/or organizations
- Address actual or potential hazards and/or errors
- Foster a practice environment that promotes accountability for care outcomes
- Advocate for policies/practices that promote social justice and health equity
- Foster strategies that promote a culture of civility across a variety of settings
- Lead in the development of opportunities for professional and interprofessional activities
- Advocate for polices that enable nurses to practice to the full extent of their education.
- Assess the interaction between regulatory agency requirements and quality, fiscal, and value-based indicators
- Evaluate the effect of legal and regulatory policies on nursing practice and healthcare outcomes
- Analyze efforts to change legal and regulatory policies that improve nursing practice and health outcomes.
- Participate in the implementation of policies and regulations to improve the professional practice environment and healthcare outcomes.
- Articulate nursing's unique professional identity to other interprofessional team members and the public
- Evaluate practice environment to ensure that nursing core values are demonstrated.
- Identify opportunities to lead with moral courage to influence team decision-making.
- Engage in professional organizations that reflect nursing's values and identity.
- Model respect for diversity, equity, and inclusion for all team members.
- Critique one's personal and professional practices in the context of nursing's core values.
- Analyze the impact of structural and cultural influences on nursing's professional identity
- Ensure that care provided by self and others is reflective of nursing's core values.
- Structure the practice environment to facilitate care that is culturally and linguistically appropriate
- Ensure self and others are accountable in upholding moral, legal, and humanistic principles related to health

Domain 10: Personal, Professional, and Leadership Development: Participation in activities and self-reflection that fosters personal health, resilience, and well-being; contributes to lifelong learning; and supports the acquisition of nursing expertise and the assertion of leadership

- 10.1 Demonstrate a commitment to personal health and well-being.
- Contribute to an environment that promotes self-care, personal health, and well-being.
- Evaluate the workplace environment to determine level of health and well-being.
- 10.2 Demonstrate a spirit of inquiry that fosters flexibility and professional maturity
- Demonstrate cognitive flexibility in managing change within complex environments
- Mentor others in the development of their professional growth and accountability
- Foster activities that support a culture of lifelong learning.
- Expand leadership skills through professional service.
- 10.3 Develop capacity for leadership.
- Provide leadership to advance the nursing profession
- Influence intentional change guided by leadership principles and theories
- Evaluate the outcomes of intentional change
- Evaluate strategies/methods for peer review
- Participate in the evaluation of other members of the care team.
- Demonstrate leadership skills in times of uncertainty and crisis.
- Advocate for the promotion of social justice and eradication of structural racism and systematic inequity in nursing and society
- Advocate for the nursing profession in a manner that is consistent, positive, relevant, accurate, and distinctive.

Advisement

Upon acceptance to the DNP program students are assigned to the Graduate Coordinator and the Graduate Student Services Coordinator as advisors who will develop the student's Plan of Study. Prior to starting NURS 9090 students will identify a committee Chair and committee members for the DNP Project. The Chair will be PhD or DNP prepared and hold a full-time faculty appointment. The Director of Graduate Programs and the Graduate Student Services Coordinator will assist DNP students with ongoing advisement throughout the program.

The student completes the Graduate Degree Curriculum Form GS2. The form is in electronic form and may be found here.com/h

Completion of Degree Requirements

Due Dates: It is student responsibility to know all deadline dates for Graduate School Graduation Requirements and Deadlines.

Plan of Study (GS2 form) due in the first semester:

A degree seeking student must file a graduate degree curriculum (form GS2) in accordance with the Enrolled Student Service's timeline – the initial GS2 is filed when a Plan of Study is completed after 9 hours of coursework and a revised or final GS2 when the student selects their committee Chair and committee members. The form is in electronic form and may be found here.

Instructions for Completing the GS2 Form (2-step process)

Courses completed more than those required by the Advisory Committee should not be listed on the GS2. Definite required courses should be listed first while elective courses may be listed in an optional manner under a sub-heading such as "any 2 of the following 4 courses." The Electronic submission is a 2-step process.

- **Step One**: All courses will be 9000 or higher for the DNP. Courses completed more than those required by the Advisory Committee should not be listed on the GS2. Definite required courses should be listed first while elective courses may be listed in an optional manner under a sub-heading such as "any 2 of the following 4 courses." The Electronic submission is a 2-step process.
- **Step Two**: Once the committee has been selected, and each person has accepted electronically, you will need to submit a new GS2 with the new committee members and your Plan of Study. The Plan of Study is the list of courses or your program (given to you at orientation).

Transfer Credits

Credits to be transferred must be labeled by an asterisk in the list of required courses and must bear the course number listed in the catalog of the institution(s) awarding the credits. The institution(s) and grade(s) should be identified along with the course(s) in the space provided below. Do not use the corresponding Clemson University course numbers on the front page or below. All transfer credit has to be approved by faculty and the Director of Graduate Programs. Transfer credits must not have been used to satisfy the requirements for any other degree and must have been completed within the six-year period preceding the date the graduate degree will be awarded. Transfer courses cannot be revalidated for graduate credit. There are no exceptions to this requirement.

Revision of the Preliminary Graduate Degree Curriculum and/or Advisory Committee

Any revision in graduate degree requirements or committee membership listed on the Form GS2 will require submission of a new form and approval of all committee members and appropriate administrators.

GS7D Form -Final Project Approval (aka Thesis/Project Approval form)

The GS7D form is the form on which your advisor and committee indicate that you have successfully defended and properly formatted your project. The student will bring a hard copy of this form to the project defense.

The following information should be completed by the student (typed, not handwritten): date, student name, and CUID #, DNP, with a major in Nursing. Graduate School forms are available here as a fillable MS Word template. The Chair will complete the results and all committee members will sign the form. Copies are made for the student, the student's file at UCG, the Chair, and each committee member.

Portfolio and Candidacy

An initial portfolio for Candidacy is due on February 1 of the final year of study. The portfolio will be given a Successful/Unsuccessful grade. Successful completion of the initial portfolio will move the DNP student into candidacy. At the time of candidacy students may begin using the credential DNP(c). Unsuccessful completion will require a resubmission. A second unsuccessful completion will follow Graduate School policies.

Initial Portfolio Submission due February 1

- Curriculum vitae
- DNP Project Contract
- DNP Project Full Proposal Guidelines
- DNP Project Topic Approval
- DNP Project Proposal Cover Sheet
- Draft of manuscript (if ready)
- Evidence of meeting DNP Essentials
 - Section for each essential and evidence of how the DNP student met each essential.
 - Examples: Scholarly papers, PowerPoints of presentations, publications, awards, evaluations, financial support (grants).

Final Portfolio Submission due July 25th

- Components include:
 - Curriculum vitae
 - DNP Project Contract
 - O DNP Project Full Proposal Guidelines
 - DNP Project Topic Approval
 - DNP Project Proposal Cover Sheet
 - Final manuscript
 - Evidence of meeting DNP Essentials
 - Section for each essential and evidence of how the DNP student met each essential.
 - Examples: Scholarly papers, PowerPoints of presentations, publications, awards, evaluations, financial support (grants).

DNP Project Overview (NURS 9090, 9100 and 9110)

Advisory Committee for the Project (Committee Guideline in handbook)

The advisory committee for the DNP Project will consist of four (4) faculty members from the School of Nursing or three (3) faculty members from the School of Nursing and a fourth member from outside the School of Nursing. The external committee member must meet Graduate School requirements (doctoral degree or terminal professional degree), with adjunct or graduate faculty status or consent of the Dean of the Graduate School. The external member's CV/resume should be sent to the DNP Project Chair for submission to the Tenure, Promotion and Reappointment committee review.

Members of the Project committee should be chosen for the contributions which they can make to your project. Therefore, in addition to the requirements for membership on an advisory committee, each member should have some special knowledge and expertise that will be beneficial.

On-going communication with the Committee members as you plan, conduct and report your project is your responsibility. As completion of the project nears, it will be essential to have more frequent contact with the Committee members. In planning your completion dates, remember to allow Committee members sufficient time to review each draft. School of Nursing and other faculty are involved in many activities, some of which require that they be off campus for several days. These absences must be considered in your planning as well. Two weeks are essential to assure committee members adequate time to review the final draft. Establishing a timeline for completion with your chairperson is strongly encouraged.

Approval of Proposed Project

Students should check with their committee Chair about any special requirements regarding preparation of the proposal. All committee members should have input into the initial proposal/project. The graduate student is responsible for making sure that the Committee members receive copies of the proposal well in advance of all meetings, for arranging a mutually agreeable time for meetings, and for reserving a room in conjunction with the Chair.

All projects will require Clemson University Institutional Review Board approval. Other approvals may be required based on facility requirements.

The Project Defense

The project defense will be held only after all committee members have had input into the final project paper and the committee deems the project is ready to be presented. Deadline dates are published for final project defense and graduation dates.www.grad.clemson.edu.

All members of the committee should have copies of the project paper well in advance and arrange for a mutually convenient date. The project defense normally requires one hour. The DNP student is also responsible for bringing the typed GS7D form to the defense. The GS7D may be obtained here.

The purpose of the project defense is to have a formal overview of the purpose of the project, what has been accomplished by the project and to approve the final product negotiated with the Chair. At this point, the graduate student is the expert in this particular research project and should be ready to discuss any part of it. The committee will ask questions and give their ideas and responses related to the project. Anticipate being asked to leave the room while the faculty discusses their approval of the defense. The committee members will decide if any final changes are needed, and if all members approve, will sign the GS7M form and the Thesis Approval Form (if applicable).

DNP Project Guidelines

The DNP Project is designed to synthesize knowledge and evidence-based initiatives to in order to investigate and chance nursing practice or policy in an attempt to resolve an issue or problem that affects patient outcomes. The aim of the project is to elicit system wide or population-based change through assessment, translation and application of evidence to practice. The project is not a typical research-based study but rather an in-depth analysis or test of interventions for an issue or problem. DNP students may design the project to make a system more efficient, analyze a local, state, regional or national healthcare policy, or initiate other system wide changes to improve patient outcomes, or others based on committee approval. The project should bring recognition to the student, committee members, School of Nursing, the College of Behavioral, Social and Health Sciences, and Clemson University. All students must submit a committee approved manuscript to a scholarly journal prior to due date for candidate grades.

Project Criteria

The project should be relevant to the students' advance practice and national certification area. Topics for the project and possible Chair of the project committee should be identified early in the program. The project topic should be relevant and translatable to practice. It should reflect a system wide change that ultimately positively affects patient care outcomes.

Examples of Acceptable Projects

- Translation of evidence-based research into practice.
- Creation of a quality improvement project that positively affects patient outcomes.
- Development, implementation and evaluation of evidence-based practice guidelines that affect patient outcomes.
- Analyze and develop a plan for revision of local, state, regional, or national policy.
- Conduct financial analysis and revise model for potential cost savings to improve patient outcomes.
- Collaborate with preceptor to identify, answer and solve clinical questions/issues.
- Collaborate with advocacy group or legislative representative to elicit policy change.
- Develop, implement, and evaluate a new health program.

Examples of Unacceptable Projects

- Nursing education projects (including simulation, classroom and clinical practice).
- Development of a website as the sole purpose and outcome of the project.
- Projects that cannot be measured or evaluated (exception: Collaborate with advocacy group or legislative representative to elicit policy change)

Steps for Completing the Project (checklist in handbook)

- 1. Submission of brief proposal to Chair and committee members
- 2. Submission of full proposal to Chair and committee members
- 3. Approval of topic by Chair and committee members
- Submission of Letter of Support from clinical site granting permission and support in completing the project (if not already done)
- 5. IRB approval from Clemson University and all facilities (as applicable)
- 6. Implement and evaluate project
- 7. Dissemination of findings (manuscript and poster/podium presentation).

Translational Research Symposium Poster Information

Poster size: 36 inches high and 48 inches wide.

Students who need printer and plotting services, can check with Clemson Printing to determine what resources may be available for their use at 864 656-4766. Prices vary depending on size of poster. The fee is charged to student accounts. They complete the printing with 24 hours. Instructions for downloading and sending to them can be found here.

AnMed Health and Prisma Health DNP IRB & Project Requirements

AnMed Health

- 1. Please contact Andrea Franks, <u>andrea.franks@anmedhealth.org</u> or <u>864-512-8551</u> in order to notify the Nursing Research/EBP Council that you have potential project.
- 2. Schedule time to present project to Research/EBP Council for approval.
- 3. Upon approval by council, notify Kerri Shiflett, IRB Coordinator, kerri.shiflett@anmedhealth.org or 864-512-3813 that study/project has been approved and is ready to begin IRB process.
- 4. IRB process and approval
- 5. Conduct research/project
- 6. Upon completion of research/project, formal report to BOTH IRB and Nursing Research/EBP Council is required.

Prisma Health

- 1. Information on Prisma IRB Research Requirements can be found here.
- 2. IRB Application can be found here.

DNP Project Defense Guidelines

In accordance with the Clemson University Graduate School Announcements, each candidate for the Doctor of Nursing Practice (DNP) is required to pass a public defense of their DNP Project to be graded by the student's committee at least three weeks before the degree is to be awarded. One hour is allotted for the project defense.

The project defense will summarize and present the DNP Project, resulting outcomes and plans for dissemination. The Graduate School will be notified by the committee Chair of the time and place of the defense at least ten days prior to the scheduled time. Members of the faculty, as well as members of the University community and the practice facilities involved are invited to attend. Within three days after the examination, the Chair will notify the Graduate Dean of the results of the examination by forwarding the appropriate form (Form GS7D) to the Graduate School.

A student who is unsuccessful on the project defense may be allowed a second opportunity only with the recommendation of the project Committee. A second unsuccessful attempt will result in dismissal from the Graduate School.

Preparation for the Project Defense Presentation

- Submit final draft of manuscript to committee at least two weeks before project defense
- Prepare electronic presentation (PowerPoint, Prezi or other form). Presentation should take about 45 minutes (about 30-45 slides – avg 1 minute per slide)
- Make copies for committee members and anticipated other attendees
- Practice presentation several times before day of defense
- Allow time for audience questions

After Presentation

- Meet with project committee to identify changes to manuscript, and presentations.
- Make changes and submit to committee within 1 week of defense

DNP Project Committee Guidelines

No part of the DNP Project may be implemented until approved by the DNP committee and IRB approval for all facilities has been obtained.

Project Committee Members

- The DNP Project will consist of four (4) faculty members from the School of Nursing or three (3) faculty members from the School of Nursing and a fourth member from outside the School of Nursing. One faculty member will serve as the Chair of the committee.
- The committee Chair must have an earned doctorate and hold a full-time, regular faculty position in the School of Nursing.
- The remaining committee members must have an earned doctorate or terminal degree and hold a full-time, part-time, or adjunct or graduate faculty position in the School of Nursing. (Student is to send a CV/resume for the non-SON person to the Chair for submission to the Tenure, Promotion and Reappointment Committee).
- The non-SON expert committee member should be one who brings expertise to the project in content area, methodology and/or evaluation, and the clinical or service area.

DNP Project Topic Approval

- DNP student will submit a brief one-page APA proposal for the project that must be approved by the committee Chair.
 - If the project is part of a larger project, the project components must be clearly delineated as independent DNP student work and the student must be allowed to publish and present her/his part of the project. Projects already in progress are not eligible.
- Once approved by the Chair, the proposal is then sent to the other committee members for approval.

Scheduling

 The project defense should be scheduled with the Chair at least 2 weeks prior to Graduate School due dates (per the Academic Calendar) for graduation. The project committee must all agree that the project is complete and ready to be disseminated publicly.

DNP Chair Responsibilities

- o Guide student through process.
- Oversight of student preparation for public dissemination (abstract, poster/podium presentation, manuscript).
- Oversight of manuscript submission. Second author for any scholarly work resulting from this project. Student will be Primary Author, remaining faculty will be 3rd and 4th author and non-CU expert will be 5th author (unless otherwise negotiated with the committee at initiation of project).

Committee Member Responsibilities

- Meet regularly with the Chair and/or student.
- o Advice the DNP student on project planning, implementation and evaluation.
- Work closely with committee Chair on project progression.
- o Contributing author for any scholarly work resulting from this project.

DNP PROJECT CHAIR CHECKLIST

Electronic copies of all items below must be provided to the Student Service Coordinator

Remember to keep a copy for yourself!

Student:	
Topic:	
Committe	ee Members:
On Admi:	ssion (Chair to verify submission)
-	DNP Project Letter of Support
-	Verification of hours from NP program
Required	Forms at Initiation of DNP Project (Fall 2 nd Year)
-	DNP Project Request Appointment to the Committee
-	DNP Project Student/Faculty Contract
-	DNP Project Topic Approval
-	Content Expert CV to TPR for Graduate Faculty Status Approval
After Abo	ove Approved:
-	DNP Project Full Proposal with Proposal Cover Sheet
-	Affirmation Statement (1 st submission)
-	IRB Proposal for Chair Submission
	Submitted on date:Approval letter received on:
Candidad	cy (Spring 2 nd Year)
-	Initial Portfolio due February 1st. Everything except final project and poster. (Grading rubric)
-	Complete GS5D: https://www.clemson.edu/graduate/files/pdfs/GS5D.pdf
At Oral D	efense:
-	DNP Project (Written and Oral) Defense Grading Rubric
-	Complete GS7D: https://www.clemson.edu/graduate/files/pdfs/GS7D.pdf and submitted to GS
-	Approval of Poster for Translational Research Day
-	Final Portfolio due July 25 th (Grading rubric)
Required	at Completion of DNP Project and Before Final Grade Posted (Summer 2 nd Year):
-	Affirmation Statement (2 nd submission)
-	Turnitin Report
-	Submission of final manuscript to journal (once Turnitin verified and clear)
-	Documentation of Completion of DNP Project Form
-	Final log documenting at least 500 hours on DNP project <u>and</u> at least 1000 hours with
	DNP project and MS clinicals combined
_	Student evaluation of DNP mentor (off-campus person)

DNP Project Request Appointment of Committee

l,	(Student's name/CUID#) request approval for the following faculty members	
to serve on the Project Committee. Each member has	rve on the Project Committee. Each member has been contacted be me.	
Student's anticipated topic of interest.		
	agrees to serve on the committee, to meet regularly with the Chair and/or a contributing author for any scholarly work resulting from this project.	
Chair	Date	
SON Faculty Member Signature	Date	
SON Faculty Member Signature	Date	
SON Faculty or Project Mentor Signature	Date	

DNP Project Student/Faculty Contract

Student's Name:	CUID#:
Address:	
	Email:
Committee Chair Name:	
Address:	
Phone:	Email:
SON Faculty Member Name:	
Phone:	Email:
SON Faculty Member Name:	
Phone:	Email:
SON Faculty or Project Mentor Name:	
Address:	
Phone:	Email:
Project Title:	
Project Goals:	

Student's responsibility for project:

- o Complete own work with guidance of committee members.
- Submit work in timely manner being cognizant of committee and Graduate School due dates.
- Completing all Graduate School requirements for project and graduation.
- Make reasonable progress toward identified goals in agreed upon timeframes
- o If challenges arise, contact committee Chair to discuss immediately
- o Maintain communication with Chair regarding progress through phone or email at agreed upon intervals
- Submit completed time log at midterm and end of project courses
- Upon committee approval, disseminate work through manuscript submission and poster/podium presentation.

Committee Chair responsibility for project:

- Guide student through process.
- Oversight of student preparation for public dissemination (abstract, poster/podium presentation, manuscript).
 Approval of all abstract submissions prior to actual submission.
- Oversight of abstract development and manuscript/poster/podium submissions. All committee members will serve as co-authors with the DNP student serving as Primary Author for any manuscript publications and poster or podium presentations resulting from the project.
- Oversight of DNP portfolio submission.
- Liaison with other faculty serving on committee.

Student Signature/Date:	
Committee Chair Signature/Date:	

DNP Project Topic Approval

(Submit prior to full proposal)

Student's Name:	CUID#	Date:
Committee Chair:		
Proposed Committee Members:		
Project Title:		
This proposal is for (Check one):		
Program of practice evaluati	ion	
	t with evaluation component	
Meta-analysis or systematic	review	
Practice model evaluation		
Practice change initiative		
	an evidence based clinical protocol	
Research utilization or analy Policy or legislative developr		
Other (describe)	ment of analysis	
Attach a one page narrative with the following	3:	
 List words that will be used f 	for systematic literature review	
 List project purpose and spe 	cific aims	
 Background 		
 How is this issue rel 	levant to nursing?	
 What is the clinical 	issue that needs addressing with this proj	ject?
 What clinical site w 	ill be used for this project? Attach Clinical	Site Agreement form.
 Methodology & project plan 	1	
 What sample/popu 	lation will be included in this project?	
 What is the setting? 	?	
 What methodology 	will be used to complete this project?	
 What are the expect 	cted outcomes of this project?	
 Will you use an inst 	rument to gather data? If yes, describe.	
 Implications for practice 		
Signature of Chair indicates topic approval		
CUSON Committee Chair Signature	Date	

DNP Project Full Proposal Guidelines

A) Project Title

B) Project purpose and specific aim

- Purpose of project/paper
- List specific aims

C) Background

- Relevance to nursing
- Describe clinical issue that needs addressing
- Clinical support

D) Literature Review

- Develop an extensive systematic literature review of pertinent current articles
- Include APA reference list or based on journal guidelines (discuss with committee Chair)

E) Methodology (Most important component of the proposal)

- Project plan, implementation and evaluation
- Expected outcomes (who, what, when, where)
- If project is part of a larger study describe your part and how it will be independent from the rest of the project
- Sections
 - Setting Where will this project be completed? Who will be assisting?
 - Sample Population, recruitment procedures. How will you get access to the population?
 - Outcomes What approvals are needed besides CU IRB?
 - Measurement How will data be collected? What instruments will be used? Describe reliability and validity of instruments. Protection of human subjects.
 - o Evaluation Who will be involved in data analysis? What statistical tests will be utilized?

F) Evaluation Plan

• Who will be assisting with evaluation?

G) Implications for Practice, Policy, and /or Education

• How will your project affect practice, policy and or education?

H) Sustainability

• How will the project be maintained after you are done? How will it be funded? Who will be responsible for continued oversight?

I) Plans for Dissemination of Outcomes

Which journals (required) and conferences, or other venues will you target for dissemination?

J) References

• Current (<5 years unless classics)

K) Appendices

DNP Project Proposal Cover Sheet (Submit with full proposal)

Student Name:	C	UID#	Date:	
Title of Project:				
This proposal is	or a:			
	Program of practice evaluation			
	Quality improvement project wit	h evaluation co	omponent	
	Meta-analysis or systematic revie	:w		
	Practice model evaluation			
	Practice change initiative			
	Development and testing of an e	vidence based	clinical protocol	
	Research utilization or analysis			
	Policy or legislative development	or analysis		
	Other (describe)			
IRB approval has	been obtained Yes N	10		
If yes, d	ate of approval	Sul	omit copy of approval letter.	
CUSON Commit	ee Chair Signature		Date	

DNP Project Practice Letter of Support

(To be submitted at beginning of program)

Students' Name	CUID#:	
Cell#	Email	
State of APRN and RN Licensure:	License #:	
Board Certification and Agency:		
I attest that my license is in good standing an Nursing and is current (see student handbool	nd that all required clinical documentation has book).	een submitted to the School of
Student Signature:	Date:	
	ate in the review and approval process for	
report, a manuscript submission and poster/preported as aggregate results. Preceptor will be	nair and/or faculty as needed for project complet podium presentation. Any data collected will be be listed as a contributing author (unless they chowledged based on their preferences. The project	de-identified and all data will be ose otherwise) on any scholarly work
	DNP Project Mentor and Practice Site	
Name of Facility:	Phone:	
Name of Project Mentor	Phone:	
State License Number:	Board Certification:	
Full Mailing Address:		
Project Mentor Signature/Date:		
Signature of Agency Representative/Adminis	trator & Date:	
DNP Student Signature & Date:		
Does your state Board of Nursing have specia	al requirements for students attending classes or	nline or outside of the state borders?
No Yes – Describe:		

DNP Project Request to Change Committee

Student's Name:	_ CUID #:	
Committee Chair:		
Reason for Change:		
Faculty/Project Mentor to be removed:		
Faculty/Project Mentor to be added:		
Role of member being replaced: Chair Committee Member Project Mentor		
Committee Chair signature indicating approval/Date:		
Signature of Faculty/Project Mentor leaving committee/Date:		
Signature of new Faculty/Project Mentor/Date:		

Affirmation Statement

DNP Project

To be submitted to Chair twice: 1) with DNP Project Proposal, and 2) with evidence of final project manuscript Submission

"As members of the Clemson University community, we have inherited Thomas Green Clemson's vision of this institution as a 'high seminary of learning.' Fundamental to this vision is a mutual commitment to truthfulness, honor, and responsibility, without which we cannot earn the trust and respect of others. Furthermore, we recognize that academic dishonesty detracts from the value of a Clemson degree. Therefore, we shall not tolerate lying, cheating, or stealing in any form. In instances where academic standards may have been compromised, Clemson University has a responsibility to respond appropriately and expeditiously to charges of violations of academic integrity."

se refer to the Graduate Academic Integrity Policy, approved March 26, 2007 by the Provost's Advisory Council.
n graduate student should read this policy annually to be apprised of this critical information.
, a student in the Doctor of Nursing Practice (DNP) program, affirm that
DNP Project submitted by me was my original work in collaboration with the DNP Project Committee and I did not at any time
iarize other's ideas or writings.
o acknowledge that should an act of plagiarism be discovered, even after completion of the DNP program, a hearing may be
ducted, and appropriate action may be taken, including possible revocation of awarded degree.
t Student Name:
lent Signature:
D# Date:

Clemson University School of Nursing - DNP Initial Portfolio Rubric

Student: CUID#:

Title of DNP Project:

Date of Submission: Chair (evaluator):		
·	ıll expectations to successfully com	plete the DNP initial portfolio
	Does not meet expectations	Meets expectations
	(unacceptable)	(acceptable)
Curriculum Vitae		
DNP Project Contract		
DNP Project Full Proposal Guidelines		
DNP Project Topic Approval		
DNP Project Proposal Cover Sheet		
Draft of manuscript (progress to date)		
For Each of the DNP Essentials, describe i	n 1-2 paragraphs how the assignme	ent you chose meets the Essential
Evidence of meeting DNP Essentials:		
Essential I: Scientific Underpinnings for Practice		
Integrate nursing science with knowledge from ethics, the biophysical, psychosocial,		
analytical and organizational sciences as the		
basis for the highest level of nursing practice Essential II: Organizational and Systems		
Leadership for Quality Improvement and		
Systems Thinking		
Develop and evaluate care delivery		
approaches that meet current and future		
needs of patient populations based on		
scientific findings in nursing and other		
clinical sciences, as well as organizational,		
political, and economic sciences.		
Essential III: Clinical Scholarship and		
Analytical Methods for Evidence-Based		
Practice		
Use analytic methods to critically appraise		
existing literature and other evidence to		
determine and implement the best evidence		
for practice.		

Clemson University School of Nursing - DNP Initial Portfolio Rubric

Page 2

Essential IV: Information	
Systems/Technology and Patient Care	
Technology for the Improvement and	
Transformation of HealthCare	
Design, select, use, and evaluate programs	
that evaluate and monitor outcomes of	
care, care systems, and quality	
improvement including consumer use of	
health care information systems.	
Essential V: Health Care Policy for Advocacy	
in Health Care	
Critically analyze health policy proposals,	
health policies, and related issues from the	
perspective of consumers, nursing, other	
health professions, and other stakeholders	
in policy and public forums.	
Essential VI: Interprofessional	
Collaboration for Improving Patient and	
Population Health Outcomes	
Employ effective communication and	
collaborative skills in the development and	
implementation of practice models, peer	
review, practice guidelines, health policy, standards of care, and/or other scholarly	
products.	
Essential VII: Clinical Prevention and	
Population Health for Improving the	
Nation's Health	
Analyze epidemiological, biostatistical,	
environmental, and other appropriate	
scientific data related to individual,	
aggregate, and population health.	
abbredate, and population health.	

Clemson University School of Nursing - DNP Final Portfolio Rubric

Student: CUID#:

Date of Submission:		
Chair(evaluator):		
DNP student must mee	et all expectations to successfully comp	plete the DNP initial portfolio
	Does not meet expectations (unacceptable)	Meets expectations (acceptable)
Curriculum Vitae		
DNP Project Contract		
DNP Project Full Proposal Guidelines		
DNP Project Topic Approval		
DNP Project Proposal Cover Sheet		
Project manuscript		
For Each of the DNP Essentials, d	escribe in 1-2 paragraphs how the assi	gnment you chose meets the Essential
Evidence of meeting DNP Essentials:		g
Essential I: Scientific Underpinnings for		
Practice		
Integrate nursing science with		
knowledge from ethics, the biophysical,		
psychosocial, analytical and		
organizational sciences as the basis for		
the highest level of nursing practice		
Essential II: Organizational and Systems		
Leadership for Quality Improvement		
and Systems Thinking		
Develop and evaluate care delivery		
approaches that meet current and future		
needs of patient populations based on		
scientific findings in nursing and other		
clinical sciences, as well as		
organizational, political, and economic		
sciences.		
Essential III: Clinical Scholarship and		
Analytical Methods for Evidence-Based		
Practice		
Use analytic methods to critically		
appraise existing literature and other		
evidence to determine and implement		
the best evidence for practice.		

Clemson University School of Nursing - DNP Final Portfolio Rubric Page 2

Essential IV: Information	
Systems/Technology and Patient Care	
Technology for the Improvement and	
Transformation of HealthCare	
Design, select, use, and evaluate	
programs that evaluate and monitor	
outcomes of care, care systems, and	
quality improvement including consumer	
use of health care information systems.	
Essential V: Health Care Policy for	
Advocacy in Health Care	
Critically analyze health policy proposals,	
health policies, and related issues from	
the perspective of consumers, nursing,	
other health professions, and other	
stakeholders in policy and public forums.	
Essential VI: Interprofessional	
Collaboration for Improving Patient and	
Population Health Outcomes	
Employ effective communication and	
collaborative skills in the development	
and implementation of practice models,	
peer review, practice guidelines, health	
policy, standards of care, and/or other	
scholarly products.	
Essential VII: Clinical Prevention and	
Population Health for Improving the	
Nation's Health	
Analyze epidemiological, biostatistical,	
environmental, and other appropriate	
scientific data related to individual,	
aggregate, and population health.	
Essential VIII: Advanced Nursing	
Practice	
Conduct a comprehensive and	
systematic assessment of health and	
illness parameters in complex situations,	
incorporating diverse and culturally	
sensitive approaches.	

Clemson University School of Nursing DNP Project (Written & Oral) Defense Evaluation Rubric

Student:
CUID#:
Title of DNP Project:
Date of Defense:
Evaluator:

DNP student must meet or exceed all expectations to successfully complete the DNP Project defense

	Expectation	Does not meet expectations	Meets expectations
		(unacceptable)	(acceptable)
	Knowle	dge and Skills	
Project Purpose	*Purpose of the project/paper clearly		
and Aims	identified		
	*Listed specific aims of the project		
	*Aims appropriate for project		
Background	*Relevance nursing clearly supported		
	*Clinical issue clearly defined		
Literature Review	*Synthesis clearly written		
	*Information synthesized appropriately		
	*Appropriate for clinical issue		
	*Extensive and thorough		
	*Within 5 years unless classics		
Methodology	* Appropriate methodology utilized		
	*Appropriate setting, sample,		
	outcomes, and measurements		
Evaluation	*Outcomes/results clearly described.		
	*Appropriate statistical testing utilized		
Implications for	*Impact on practice or policy clearly		
Practice	defined		
	*Recommendations for expansion of		
	work included		
	*Plan for dissemination of results		
	Communication	on and Presentation	
Writing	*Project materials are clearly written		
	*Doctoral level work		
Format of	* Project requires no or minimal		
PROJECT	changes		
	*Appropriate and ready for publication		
	submission		
Electronic	*Slides are clear and easy to see and		
Presentation	read		
	*Slides professional and neat		
Verbal	*Clear, succinct presentation		
Presentation	*Tone clear with good projection		
	*Engaged audience		
	*Allowed for Q&A		

Clemson University School of Nursing DNP Project (Written & Oral) Defense Evaluation Rubric Page 2

Critical thinking		
Analysis of Data	*Analyses appropriate for project	
	*Described well	
	*Reliability and validity noted as	
	appropriate	
Interpretation of	*Accurate interpretation	
Results	*Good synthesis	
Conclusions	*Correlates with findings	
	Ethic	al research
IRB Approval	IRB documented	
Copyrights	Included as needed	
Appropriate	*No evidence of plagiarism	
citations	*Citations relevant to issue	
	Fo	rmatting
Writing Style	*Current APA in-text citations or based	
	on Author Guidelines for journal	
	*Proper grammar, context, verb tenses,	
	sentence structure	
Reference List	*APA (or based on journal)	
	*Relevant references	
	*Current references (<5 yrs unless	
	classics)	

CLEMSON UNIVERSITY SCHOOL OF NURSING

EVALUATION OF DNP PROJECT MENTOR

Student's Name:	
Project Mentor's Name:	
DNP Student: Please evaluate the DNP Project mentor on the following criteria based on their participation with your project	ect

	Quality	Frequently	Sometimes	Seldom	Not at All
1)	Is available to student.				
2)	Demonstrates understanding of the DNP role.				
3)	Utilizes student's strengths and knowledge for learning enhancement.				
4)	Serves as a role model.				
5)	Demonstrates effective rapport with others				
6)	Assists student in identifying goals and needs for experience.				
7)	Provides immediate and adequate feedback				
8)	Leads students through decision- making rather than giving own impressions.				
9)	Offers constructive comments about PIP, manuscript and poster				
10)	Encourages questions.				
11)	Communicates well with DNP student and others				
12)	Suggests and provides additional learning experiences				
13)	Reviews student project and provides feedback				

Overall I would rate this mentor as:	Excellent	Good	Fair	Poor

Clemson University School of Nursing

Documentation of Completion of DNP Project

Name:	CUID#
has successfully completed the DNP Project as of	
	Date
Successful completion is attested by the Committee Chair's sign	nature below:
CUSON Committee Chair Signature	

Project Chair to initial indicating completion	Initials and Date
Public project defense completed	
Manuscript submitted to Journal	
Portfolio submitted	
Poster presented	
Student evaluation of DNP Mentor	

Section VI:

Clemson University School of Nursing
Master of Science, Major in Nursing (MS) Program

MS Purpose, Objectives and Curriculum Information

MS Program Overview

The Master of Science, Major in Nursing (MS) program is designed to build upon the first professional degree. The student acquires knowledge and skills in advanced nursing. Master's major options available are nursing education and clinical nurse specialist (adult/gerontology) The graduate program articulates with the baccalaureate program in the continued acquisition of advanced nursing knowledge and skills of the specialist. Theory, research, and role development are emphasized to enable the graduate to participate in the development of nursing knowledge and contribute to the advancement of the nursing profession. Specialization builds toward advanced specialties in selected clinical practice and role areas. Thesis or Clinical Research (non-thesis) options are available. The required credit hours vary from 38-42 depending upon the specialty option chosen by the student. The objectives of the Master of Science, Major in Nursing (MS) degree program are to provide graduates with the ability to:

Objectives

- 1. Integrate advanced knowledge from nursing and related disciplines into a specialized area of nursing practice;
- 2. Demonstrate competence in a selected functional role of clinical specialist, nurse practitioner, educator or administrator;
- 3. Evaluate and apply research findings from nursing and related disciplines to an advanced nursing specialty;
- 4. Participate in the development of nursing knowledge by identifying researchable nursing problems, conducting research and selectively integrating research findings in advanced nursing practice;
- 5. Utilize leadership, management, and teaching knowledge and competency to influence nursing practice;
- 6. Participate as a leader to influence health policy and improve the health care delivery system; and
- 7. Contribute to the advancement of the nursing profession.

Course Delivery

The Master of Science, Major in Nursing program is delivered in a hybrid format. Classes are held every Thursday at the Clemson University Nursing building. Faculty utilize Canvas, an online student management system, to enhance student leaning. Clinical management labs are scheduled on days other than class days based on lab/preceptor availability. Other learning experiences (e.g., Boy Scout physicals, skills labs, lobby days, etc.) may be scheduled in the evening or on days other than Thursday but sufficient notice will be given.

MS Admission and Post-admission Requirements found here

State Reciprocity

South Carolina is a member of the State Authorization Reciprocity Agreement (SARA) and Clemson University (CU) is an approved SARA institution, which means we adhere to established standards for offering post-secondary e-learning programs. State authorization allows CU the ability to offer online programs to students who live outside of SC OR enroll students in learning placements that will take place outside of SC (such as internships, clinicals, practicums, and student teaching). CU must meet all of the regulatory requirements, including those from licensure/certification boards, of the state where the student physically resides or where an activity will take place.

IT IS IMPERATIVE YOU UNDERSTAND THE REGULATIONS FOR YOUR STATE PRIOR TO ENROLLING IN ANY ACADEMIC PROGRAM OR COURSE.

Please review our state authorizations to determine if specific program offerings or learning placements are available in the state which you will be physically located while enrolled. If you experience difficulty finding the requirements for a specific state, please email stateauth@clemson.edu for help.

If you are expecting a change in your physical location, contact the State Authorization office (stateauth@clemson.edu) as soon as you know the anticipated location(s). Physical presence in a location where we do not meet state regulatory requirements can negatively impact our ability to offer you federal financial aid, military tuition assistance, or your continuation within the program. These restrictions extend to courses taken online over the summer, internships, clinicals or other forms of learning placements if they are conducted outside of an approved state. Students are responsible for providing accurate and updated information about their physical presence to the institution. Early notification allows the institution to minimize, but may not prevent, the possibility of program delays/offerings.

MS Curriculum Plans of Study



MS EDUCATION

Student Name: CUID:		Clemson email	
<u>Summer</u> NURS 8410/8411:	Advanced Assessment for Nurse Educators	3(2,3)	
or NURS 8090:	Pathophysiology for Advanced Nursing	3(3,0)	
Fall NURS 8040: NURS 8050: NURS 8410/8411: or	Knowledge Development in Advanced Nursing Pharmacotherapeutics for Advanced Nursing Advanced Assessment for Nurse Educators	2(2,0) 3(3,0) 3(2,3)	
NURS 8090:	Pathophysiology for Advanced Nursing	3(3,0)	
Spring NURS 8010: NURS 8080: NURS 8480:	Advanced Family & Community Nursing Nursing Research Statistical Analysis Health Care Policy & Economics	3(3,0) 2(2, 0) 3(3,0)	
Summer NURS 8070:	Nursing Research Design & Methods	3(3,0)	
Spring NURS 8420/8421:	Adult Nursing & Patient Education Clinical	4(2,6)	
Spring (even years) NURS 8270:	Foundations of Nursing Education	3(3, 0)	
Summer (even years) NURS 8140:	Instructional Technologies for Nursing Educators	3(3, 0)	
Fall (even years) NURS 8280:	The Nurse Educator	4(1,9)	
Requirement: NURS 8310:	Clinical Research	3(3, 0)	
or NURS 8850:	Mental Health in Primary Care	2(2,0)	

Total Credits: 38-39

Note: Completion of this specialty prepares students to take the National League for Nursing Certification for Nurse Educators examination.

Students need 9 credit hours to be considered full time (6 in summer). Any semester in which students are short hours NURS 8790 can be added for needed hours. Assignments are based on credit hours taken.

MS Curriculum Plans of Study



CLINICAL NURSE SPECIALIST (CNS) – ADULT/GERONTOLOGY

Student Name:	CUID:	Clemson email:
Summer		
NURS 8060/8061	Advanced Assessment for Nursing	3(2,3)
Fall NURS 8040 NURS 8050 NURS 8090	Knowledge Development in Advanced Nursing Pharmacotherapeutics for Advanced Nursing Pathophysiology for Advanced Nursing	3(3,0) 2(2,0) 3(3,0)
Spring NURS 8010 NURS 8080 NURS 8210/8211	Advanced Family & Community Nursing Nursing Research Statistical Analysis Adult Nursing	3(3,0) 2(2,0) 4(2,6)
Summer NURS 8070	Nursing Research Design & Methods	3(3,0)
Fall NURS 8220/8221 NURS 8290	Gerontology Nursing Theories & Models of Clinical Specialization	4(2,6) 3(3,0)
Spring NURS 8300 NURS 8480	Clinical Specialty Practicum in Nursing Health Care Policy & Economics	6(0,18) 3(3,0)
Requirement NURS 8310	Clinical Research	3(3,0)

Total Credits: 42

Note: Completion of this specialty prepares students to take the national Adult/Gerontology Clinical Nurse Specialist certification exam offered by the American Nurses Credentialing Center (ANCC) or the Adult-Gerontology Clinical Nurse Specialist certification exam offered by the American Association of Critical Care Nurses Corp (AACN Corp).

Students need 9 credit hours to be considered full time (6 in summer). Any semester in which students are short hours NURS 8790 can be added for needed hours. Assignments are based on credit hours taken.

COURSE DESCRIPTIONS

Nursing 8010: Advanced Family and Community Nursing 3(3,0)

Developmental, psychodynamic, social-political, and cultural theories and concepts are synthesized and applied to the analysis of health and illness in communities and in families across the life cycle. Roles and functions of advanced practice nurses in promoting community health and family health are examined.

Nursing 8040: Knowledge Development in Advanced Nursing 2(2,0)

Nursing theories and theories relevant to nursing practice and research; processes of theoretical thinking and critical thinking are applied to health problems and needs of individuals and their families in the community; theoretical and conceptual models of contemporary practice and research.

Nursing 8050: Pharmacotherapeutics for Advanced Nursing 3(3,0)

Prescription administration and patient/family education in use of pharmacological agents emphasizing drugs prescribed for common or chronic illnesses; drug selection; adverse drug reactions; age-related differences in utilization; regulations affecting nurse's prescriptive authority.

NURS 8060 - Advanced Assessment for Nursing 3(2,3)

Comprehensive assessment and diagnosis of health problems and status for individuals of all ages including assessment of families; physical and laboratory/radiologic diagnostic assessments; directed laboratory experiences in advanced assessment of clients of several ages. Coreq: NURS 8061

Nursing 8070: Nursing Research Design and Methods 3(3,0)

Quantitative and qualitative research methodologies useful and appropriate to clinical nursing practice and for the development of nursing knowledge; ethics with human subjects; does not include thesis advisement.

Prerequisites: NURS 8040, 8080.

Nursing 8080: Nursing Research Statistical Analysis 2(2,0)

Quantitative research methods in nursing science including basic elements of statistical design with a focus on the use of nursing informatics and computer applications.

Nursing 8090: Pathophysiology for Advanced Nursing 3(3,0)

Human response to health alterations as they impact nursing knowledge and practice; recognizing the manifestations of health alterations and developing nursing interventions accordingly.

Nursing 8140: Instructional Technologies for Nursing Educators 3(3,0)

Provides novice and experienced nurse educators an opportunity to integrate emerging instructional technologies. Covers theories and trends that support the use of technologies for the enhancement of teaching and learning. Emphasized the integration of education technologies and the evaluation of current technologies to enhance instruction.

Nursing 8210: Adult Nursing 4(2,6)

Roles and functions embodied in advanced practice applied to the health promotion, and clinical management of common or chronic health problems of adults within the context of family; clinical practice with adult clients in a variety of settings. Prerequisites: NURS 8010, 8040, 8050, 8060, 8090.

Nursing 8220: Gerontology Nursing 4(2,6)

Roles and functions of advanced practice applied to the preventive, restorative and rehabilitative care of the older adult with existing or potential health problems; clinical practice in a variety of settings. Prerequisites: NURS 8010, 8040, 8050, 8060, 8090.

Nursing 8270: Foundations of Nursing Education 3(3,0)

Exploration of the foundations of nursing education. Emphasizes curriculum development in nursing for the collegiate or continuing education areas. Current issues and research that influence nursing education.

COURSE DESCRIPTIONS

Nursing 8280: The Nurse Educator 4(1,9)

Roles and functions of nurse educators applied to education of nurses and nursing students in collegiate and continuing education nursing education programs; current issues and research in classroom, laboratory, and continuing education programs. A teaching practicum is required. Prerequisite: NURS 8270 or consent of instructor.

Nursing 8290: Theories and Models of Clinical Specialization 3(3,0)

Caregiver, researcher, manager, teacher and consultant roles of the clinical nurse specialist in a variety of settings; theories, models, and health care issues underlying the role of clinical nurse specialist. Prerequisites: NURS 8040, CNS graduate option, or consent of instructor.

Nursing 8300: Clinical Specialty Practicum in Nursing 6(0,18)

Advanced practice in a selected clinical specialty area in nursing that emphasizes application of the clinical specialist role. Prerequisites; NURS 8209 and a clinical course.

Nursing 8310: Clinical Research 1-3(1-3,0)

Critical thinking and methodologies of scientific inquiry applied to clinical issues/problems encountered in advanced nursing practice. May be repeated for a maximum of three credits. To be taken on Pass/Fail basis. Prerequisites: NURS 8040.

Nursing 8410: Assessment for Nurse Educators 4(2,6)

Application of the roles and functions embodied in advanced practice to the health promotion and clinical aspects of management of common acute health problems of adults within the context of family. Focuses on the development of skills required for effective patient teaching across a variety of clinical settings. This course prepares the graduate level nurse to utilize learning theory and research to develop educational materials for improved health outcomes.

<u>Nursing 8420: Adult Nursing and Patient Education 3(2,3)</u> Focuses on the advanced assessment component of the nursing process to analyze health status of individuals throughout the lifespan. Focuses on health, risk factors affecting health and the role of health promotion strategies in the prevention of illness. This course will build on the nurse educator student's undergraduate knowledge base of anatomy, physiology and pathophysiology.

Nursing 8480: Health Care Policy and Economics 3(3,0)

Reciprocal relationship between client, community, health care system, sociocultural and economic variables, and policy making; analysis and synthesis of these relationships and their impact on the role and responsibility of the advanced practice nurse and nurse administrator. Prerequisites:

Nursing 8790: Special Topics in Nursing 1-3 (1-3, 0-9)

In-depth seminar on selected topics such as therapeutic communication, legal and ethical issues in nursing, and health care and political process in health.

Change of Program Tracks:

Applications are reviewed based on the cohort in which prospective students apply. Admitted students may not transfer between tracks. In order to change tracks, student will need to apply to the program in which they would to like to change and be recommended for admission by the Admission's Committee based on blind review of all applications.

Advisement

Upon acceptance to the MS program students are assigned to the Graduate Coordinator and the Graduate Student Services Coordinator as advisors who will develop the student's Plan of Study

• The student completes the Graduate Degree Curriculum Form GS2. The form is in electronic form and may be found <a href="https://www.here.com/here

Completion of Degree Requirements Plan of Study (GS2 form)

A degree seeking student must file a graduate degree curriculum (form GS2) in accordance with the Enrolled Student Service's timeline – the initial GS2 is filed when a Plan of Study is completed after 9 hours of coursework and a revised or final GS2 when the student selects their Major Advisor and Committee. Since each track require slightly different coursework (Nurse Practitioner, Clinical Nurse Specialist, Health Systems Leadership and Nursing Education), this planned program represents the curriculum as recommended by the School of Nursing Advisory committee for this plan of study.

- The Electronic submission is a 2-step process. Students will first complete the committee selection process and once approved, the Plan of Study (provided at orientation) is to be submitted. The Committee Selection and GS2 submission may be completed <a href="https://example.com/here/bases/b
- Once the committee has been selected, and each person has accepted electronically, you will need to submit a new GS2 with the new committee members and your Plan of Study here. The Plan of Study is the list of courses or your program (given to you at orientation).

Answers for the form: (Please answer carefully)

- O Degree: MS. (Not MSN) or DNP
- Focus: Education (see below) or CNS.
- o Thesis: Non-thesis
- o GS7 or no-GS7: GS7 required.
- o Education add on is a nursing certificate and not degree. So do not list with degree. Only list education if that is your degree.

The following should be noted carefully in completing this form in order to expedite approval of your curriculum:

- (1) At least one-half of the required courses for a graduate degree must be selected from those numbered 700 or above for professional master's degrees and numbered 800 or above for Master of Arts and Master of Science degrees, including all transfer credits.
- (2) Courses completed in excess of those required by the specialty option should not be listed. Definite required courses should be listed first while elective courses may be listed in an optional manner under a sub-heading such as "any 2 of the following 4 courses." In general, no more than 12 credit hours should be listed in this manner. This procedure is designed to alleviate problems resulting from uncertainties in course scheduling and to eliminate frequent alterations of the list of required courses.

Transfer Credits

Admitted students may request up to 12 credit hours be considered for transfer credit from an accredited university that utilizes a letter grade system. After admission, students requesting transfer credits must supply syllabi for all courses in the request to the FNP/DNP, CNS, or AGNP/Education Program Coordinator who will then complete a gap analysis. The submitted syllabi will be provided to faculty who lead the corresponding Clemson University courses to review for equivalency. The student will be provided with a written copy of the gap analysis and revised Plan of Study showing accepted credits.

- Transfer credits must not have been used to satisfy the requirements for any other degree and must have been completed within the six-year period preceding the date the graduate degree will be awarded. Transfer courses cannot be revalidated for graduate credit. **There** are no exceptions to this requirement.
- Credits to be transferred must be labeled by an asterisk in the list or required courses and must bear the course number listed in the catalog of the institution(s) awarding the credits. The institution(s) and grade(s) should be identified along with the course(s) in the space provided below. Do not use the corresponding Clemson University course numbers on the front page or below.

GS7D Form -Final Project Approval (aka Thesis/Project Approval form)

The GS7D form is the form on which your advisor and committee indicate that you have successfully defended and properly formatted your project. The student will bring a hard copy of this form to the project defense.

• The following information should be completed by the student (typed, not handwritten): date, student name, and CUID #, DNP, with a major in Nursing. Graduate School forms are available here as a fillable MS Word template. The Chair will complete the results and all committee members will sign the form. Copies are made for the student, the student's file at UCG, the Chair, and each committee member.

Clinical Research (8310) and Thesis (Nursing 8910)

Guidelines for Clinical Research Proposal and Manuscript

Clinical Research:

The Clinical Research is a scholarly paper on a clinical issue or problem, which has significance for nursing practice, education, or administration. The nature of the Clinical Research should be negotiated between the student and committee members.

Clinical Research Proposal:

The Clinical Research proposal is a plan for conducting a systematic literature review related to a Clinical Research or issue. Criteria for the proposal include a statement of the problem, a statement of the paper's purpose, a summary of research, a description of a strategy for identifying relevant evidence for the synthesis, and description of potential journals for publishing the completed manuscript. A copy of journal publication guidelines should be included in the appendix.

Clinical Research Manuscript:

The completed manuscript is a report of the knowledge synthesis of a specific clinical issue/problem. It includes all components of the guidelines described below, including the practice implications and research needed. Appendices should include a copy of the cover letter to the editor of the journal, tables and figures, journal guidelines for manuscripts, and clinical protocols that were developed and described in the manuscript.

Required Format:

The required format is the current APA (Publication Manual of the American Psychological Association) format for manuscript preparation.

Guidelines

Abstract: A 200-word structured abstract summarizing the manuscript. The abstract should follow the format of the journal to which the paper is being submitted.

Problem Statement

- Identify the specific area of concern
- Describe the scope of the problem (e.g., how many people/patients are affected by it).
- Why it is important to study or write an article about the problem.
- How nursing science would be influenced by the study or the article.
- General characteristics of the population of interest.
- The overall goal or aim of the study or article or the question to be answered.

Statement of Purpose

Provide a clear, delimited description of the topic to be addressed.

Search Strategies

This section refers to the strategies used to identify the relevant evidence for the synthesis.

- Include electronic searches, hand search, and unpublished research.
- Provide detailed information on how the review was constructed.
- Provide criteria for article inclusion or reason for article rejection.
- Provide information about the methods for assessing the evidence.
- List search terms and search limitations (e.g., language and years searched) used to locate studies, databases.

Summary of Research

- The narrative section should focus on the summarized findings, gaps and limitations and on integrating the findings in a meaningful and organized way.
- Cluster the findings for each theme based on the findings from your critique of clinical and research articles, guidelines or standards, and synthesized reviews.
- Describe how and/or link the information in part b to the major concept(s)/theme of your literature review.
- Use tables and figures to provide detailed information on each study. Tables should be formatted in portrait orientation.
- Develop a table of relevant studies that includes the purpose, variables or concepts, methodology, subjects, data analysis, and findings for each study. Note if the article is clinical, an integrated review, research, case report, or theory
 - Develop a narrative the summaries the findings in the tables and critiques. Discuss the strengths and weakness of the articles/studies using criteria for substantiated evidence, fit and feasibility.
- Summary of findings, gaps, and limitations.

Clinical Implications

- Describes the specific clinical implications that stem from the research.
- Includes decision trees, tables, or figures as applicable.
- Includes information from the summary reference that is important to clinicians.

Research Needed

- Identify what is known and not known from the research
- Specify priorities for further research.
- Include suggestions on methods and measures in recommendations as appropriate.

References

Appendices

- Protocols
- Tables and figures
- Journal Publication guidelines
- Cover letter addressed to editor of the targeted journal

Cover Page

List title, authors with titles and affiliations, mailing addresses, phone, email address and fax number. The student should be first author, followed in ranking order by the chair of Clinical Research problem committee and then remaining committee members.

Journal Submission for Publication

The first page of the manuscript should not have names of authors. Utilize author guidelines for the targeted journal to supplement preceding guidelines.

Adapted from the <u>Online Journal of Knowledge Synthesis</u> publication requirements. Approved by the School of Nursing Faculty, 12/13/99 & rev. 8/09.

Guidelines for Thesis Proposal and Thesis

Research activities related to thesis are taken as NURS 8910 credits. A minimum of 6 credit hours are required if choosing the thesis option. Prerequisites: NURS 8040.

Thesis Proposal:

The thesis proposal is a plan for research that includes a table of contents; three chapters (Introduction, Review of the Literature, and Methods and Procedures); and appendices. The proposal is written in future tense according to the guidelines that follow.

Thesis:

The completed thesis is a report of the completed research. It includes all components of the guidelines described below including chapters describing the results of the study and discussion and interpretation of findings. The completed thesis is written in the past tense.

Required Format:

The required format is the current APA (Publication Manual of the American Psychological Association) format which should be used in conjunction with the current version of "Guide for Preparation of Theses and Dissertations" published by the Graduate School.

Thesis Guidelines

Abstract

Chapter One: Introduction

- A. Problem: Background and extent of the problem
- B. Purpose of the study
- C. Research objective, question or hypothesis

This includes variables and their conceptual and operational definitions.

- D. Conceptual Framework: Linkage of the study's variables
- E. Justification or Significance of the Study

Chapter Two: Review of the Literature

- A. Review of relevant theoretical literature, including nursing or other theories
- B. Review of relevant research for each of the study's variables
- C. Summary is a synthesis of the review of the related literature and research findings including gaps and how this study addresses a gap(s) or issue(s).

Chapter Three: Methods and Procedures

- A. Study Design: Design, level of significance
- B. Sample
 - Criteria for selecting the sample
 - Sampling technique
 - Sample size, use of power analysis to determine sample size (if applicable)
 - If subjects are divided into groups, describe method of assignment and the number groups
 - Describe protection of subject rights and process of informed consent
 - If applicable, describe if human subject approval was obtained from clinical agencies, organization, etc.
- C. Setting
 - Describe the setting
 - Omit agency names unless permission is granted
- D. Instruments
 - Describe each instrument and/or interview
 - The description of each instrument should include the following information:
 - Use in previous research, including the frequency
 - Previously published reliability and validity
 - Plans to establish reliability and validity for the current study

- Accuracy, precision, selectivity
- Psychological measures: sensitivity, sources of error
- E. Data Collection
 - Describe data collection process, including who will collect the data and the experience and training of the data collectors
 - Describe precautions taken to ensure consistency if more than one person collects data
 - Describe the frequency of measures obtained and include a timetable for data collection and description of the duration for the study
- F. Data Management and Data Analysis: Describe coding of variables and data recording forms and the statistical procedures that will be used for each research question, objective, or hypothesis.
 - Describe the statistical package that will be used
- G. Extraneous Variables: Discussion related to extraneous variables
- H. Limitations of Study: Describe the threats to internal and external validity and other limitations.

Chapter IV: Results (presentation of findings)

- A. Present descriptive of the sample and relevant variables (include tables if appropriate).
- B. Present the data and describe the findings in relation to each research objective, question, or hypothesis; include tables of the findings.

Chapter V: Discussion and Conclusions

A. This section should include an analysis of results and an interpretation of the study's findings. Describe the implications of the study's findings for nursing practice and research. Discuss recommendations for future research.

References

Appendices

Letters of Review and Human Subjects Approval Copies of Instruments and Recording Form Preamble for the Study and Informed Consent

Adapted from the <u>Online Journal of Knowledge Synthesis</u> publication requirements. Approved by the School of Nursing Faculty, 12/13/99 & rev. 8/09.

Advisory Committee for Clinical Research or Thesis

The advisory committee for thesis or Clinical Research consists of two (2) faculty members from the School of Nursing and a third member from outside the School of Nursing. The third committee member must meet Graduate School requirements (doctoral degree or terminal professional degree), with adjunct faculty status or consent of the Dean of the Graduate School.

External Committee Member (Advisor): This process is used to add an External Committee Member (Advisor), to a student's dissertation or DNP project advisory committee. Student's initiate this form requesting the advisor be assigned to the student's department as Graduate Faculty.

When non-Clemson faculty serve on doctoral committees:

• When an external advisor (non-Clemson faculty) serves on doctoral committees, students must follow procedures and submit documentation found at:

https://www.clemson.edu/graduate/students/forms.html https://www.clemson.edu/graduate/students/external-advisor.html

When Clemson faculty from a department other than the School of Nursing serve on doctoral committees:

- When Clemson faculty from a department other than the School of Nursing serve on doctoral committees students follow this process:
 - A current CV is sent to Dr. Wetsel (Mwetsel@clemson.edu) to initiate the approval process.
 - Once approved the student can then find that person in the drop down menu.

In consultation with your Program Coordinator your Clinical Research/Thesis Committee is chosen. This Committee guides and approves your topic, research design and methodology, and the final paper. Members should be chosen for the contributions which they can make to your research. Therefore, in addition to the requirements for membership on an advisory committee, each member should have some special knowledge and expertise that will be beneficial.

On-going communication with the Committee members as you plan, conduct, and report your research is your responsibility. Usually, the first drafts are reviewed by the major advisor who will tell you when they are ready to be shared with the Committee members. As completion of the project nears, it will be helpful to have more frequent contact with the Committee members. In planning your completion dates, remember to allow Committee members sufficient time to review each draft. School of Nursing and other faculty are involved in many activities, some of which require that they be off campus for several days. These absences must be considered in your planning as well. Two weeks are essential to assure committee members adequate time to review the final draft. Establishing a timeline for completion with your chairperson is strongly encouraged.

Approval of Proposed Research

Students should check with their advisors about any special requirements regarding preparation of the proposal. All committee members should have input into the initial proposal meeting at least one semester prior to graduation. The graduate student will present the research proposal at the first committee meeting. The graduate student is responsible for making sure that the Committee members receive copies of the proposal well in advance (minimum 2 weeks) of the meeting, for arranging a mutually agreeable time for the meeting, and for reserving a room in conjunction with the Major Advisor. The proposal meeting allows for discussion of the research, clarification of any ambiguous areas, and provides formal direction by the Committee. When the Committee agrees that this is appropriate research, further changes can only be made with approval of all Committee members.

Following Committee approval, the research study involving data collection should be submitted for consideration and approval by the Institutional Review Board for the Protection of Human Subjects in the office of University Research and Economic Development. The instructions and format for this submission should be reviewed with the major advisor. Institutional review approval usually requires a minimum of one month and may be longer if more than one institution is involved. When all necessary approvals have been obtained (including any necessary agency approvals) subjects can be approached for consent and data collection can begin. Note: It is a good idea to gather information about agency requirements for approval near the beginning of the proposal development. These requirements vary widely and some of them require several weeks processing time.

The Defense

Usually, the defense meeting is held only after all committee members have had input into the final research paper. The Graduate School Announcements has information about requesting a formal review if this is necessary. Deadline dates are published for the Final Examination and the review by the Graduate School in the same book and on the website: www.grad.clemson.edu. Preparation of the thesis for defense should be as nearly like the thesis to be submitted as is possible. This means that the thesis approval sheet, title pages, table of contents, acknowledgments, abstract, etc. should be included. The format should meet both American Psychological Association and Clemson University requirements.

Graduate student responsibilities for preparing for the defense are like those for the proposal meeting. All members of the committee should have copies of the thesis well in advance and arrange for a mutually convenient date. The defense normally requires one hour. The graduate student is also responsible for bringing the typed GS7M form to the defense and the Final Examinations. The GS7M may be obtained from the Graduate School web page. The thesis approval form, typed on the acceptable bond paper in the thesis final font form, and a black ink pen should also be brought to the thesis meeting so that all needed signatures can be obtained at the time of approval. The Major Advisor will send notifications and arrange for a meeting place.

The purpose of the defense is to have a formal overview of the purpose of the research, what has been accomplished by the research and to approve the Clinical Research or thesis. At this point, the graduate student is the expert in this particular research project and should be ready to discuss any part of it. Preparation includes thinking about the steps that might be taken to continue research related to this topic. The committee will ask questions and give their ideas and responses related to the research. Anticipate being asked to leave the room while the faculty discusses their approval of the paper/thesis. The committee members will decide if any final changes are needed, and if all members approve, will sign the GS7M form and the Thesis Approval Form (if applicable). See Graduate School Announcement for printing and binding cost of final copy of thesis and required copies.

Master's Final Oral Examination

In accordance with the *Clemson University Graduate School Announcements*, each candidate for the Master of Science, Major in Nursing is required to pass a Final Examination administered by the student's Advisory Committee <u>at least three weeks</u> before the degree is to be awarded. Check the Academic Calendar for due dates. One hour is allotted for the Final Examination.

The Final Examination will ascertain the general knowledge of the candidate relative to the area of study. Six broad and comprehensive questions will be developed by the Committee Chairperson with input from the other committee members and will be available to the candidate up to 72 hours before the scheduled examination.

This affords students to rearrange work schedules and family obligations to allow for 72 hours of dedicated time to prepare for the Final Oral Examination. The candidate will choose three questions to answer for the examination (one in each section). Students will be expected to demonstrate: (1) synthesis of current nursing and related theories and application to advanced practice; (2) integration of research process and findings into advanced nursing practice; and (3) synthesis of role specialization into practice.

A student who is unsuccessful on the Final Oral Examination may be allowed a second opportunity only with the recommendation of the Advisory Committee. Failure of the second examination will result in dismissal from the Graduate School.

The <u>GS7M</u> must be completed (typed) and brought to the Final Oral Examination. The committee will sign upon successful completion and the Chair will submit to the Graduate Student Services Coordinator who will submit to the Graduate School.

Student Name:	Date:	

	me:				Date
Committee Ch	nairperson's Signat	ure:			
GUIDELINES F	OR EVALUATION O	F COMPRE	HENSIVE EXAMINA	ATION	
are identified related answer sho minutes for facul	ated to application of t uld include enough dep	heory, researd oth (detail) for n question. St	ch development/utilizar or a presentation of app oudents are allowed to	ntion and a third roximately 10-1	rom each of three sections. The section of three sections are policy to practice or policy to minutes followed by approximately such are encouraged to use them
RATING SCALE	E:	_	_		
0 No Credit	1 1 Unsatisfactory	2 Poor	3 Satisfactory	4 Good	5 Excellent/outstanding
RESEARCH (Sc Delivery Organiza Content		ates confidenc in a logical ma nd current, wi	atter. ith reference citations.	of knowledge.	

- Candidates scoring less than 10 points for any section will be asked to complete a written response to that section as determined by the committee. A due date (typically 1-2 weeks) will be determined by the committee with allowance for two weeks for faculty to respond after the written materials are submitted.
- Candidates who are unsuccessful on the Final Oral Examination (scoring less than 30 total points) will be asked to reschedule another comprehensive examination (with new questions) 2-4 weeks following the initial examination. Additional coursework may be required at committee's discretion.
- In most cases, unsuccessful attempts will delay graduation by one or more semesters. A second unsuccessful attempt will result in dismissal from graduate study.

Section VII: Clinical Management Course Information

Clinical Information and Procedures

Clinical Preceptors

Selecting, contacting, and securing preceptors is an important part of graduate education. It provides students with the opportunity to become familiar with practice resources and opportunities in the community and hone interviewing skills. Faculty will assist with clinical placements as needed.

Preparation is key! Review the information about a potential preceptor on their webpage or their healthcare institution (hospital) affiliate. Preceptors may be MD, DO, NP, or CNM and must have a minimum of 1 year of practice experience. Physician's Assistants (PA's) may not serve as preceptors.

Students are responsible to report to the lead faculty any clinical site that does not provide an effective, hands-on, interactive learning experience which includes assessment, diagnosis, and clinical management of patients or if student feels uncomfortable in the setting. Students may not be in clinical observational sites except those approved by the faculty. Students may not start clinical before the Clemson University first day of classes. Students are not covered under their liability insurance unless in an active clinical course. Time between semesters is not considered enrollment. Students must complete clinical hours by Friday 5pm the week prior to the date that grades are due each semester to allow for grade calculations and reporting. See the current Academic Calendar for dates. Students not completing clinical hours one week prior to grade posting dates may be given an "incomplete" for the course. Incomplete grades calculate into the GPA as an "F" until completed. Incomplete grades must be completed before the start of the next course. Any deviation from this policy must be approved by the course faculty.

Students may not complete clinical hours in their place of employment e.g., clinic where they currently work (not hospital system).

Clinical Hours

Students must complete most clinical experiences with preceptors from the same population-focused area of practice in primary care (adult, gerontolgy or across the lifespan). Over the course of the program the student must have 25% of the required clinical hours (167/675) with an APRN preceptor and preferably an NP with expertise in the same population-focused area of practice in primary care.

The ratio of clock to credit hours is 3 to 1 (3:1) in all clinical management courses. The ratio of clock to clinical hours is 1:15. The clinical hours posted for each course are the minimum number of hours required. Students must complete a minimum of 675 hours (500 of which must be hands on, direct patient cares hours) to be eligible for graduation and national certification. Students may seek additional experiences/time (based on faculty approval and space availability) or may be instructed to complete additional time to enhance knowledge and/or skills. All clinical hours must be completed no later than 1 week prior to the date course grades are due to avoid an incomplete. Students may review the <u>Academic Calendar</u> for due dates. Students may not start clinical prior to the first class. Students may not be in a clinical setting while not actively enrolled in a clinical management course (i.e., students may not start clinical rotations early).

Preceptor Requests for Affiliates of:

Prisma Health

Eligible graduate nursing students will now be responsible for securing their own Prisma Health preceptors here in the Upstate and submitting their placement request for approval and processing through the Independent Student Request portal found here.

Prisma Health Nurse Practitioners, serving as a preceptor, must have held their APRN license for a minimum of 2 years and have approval from their supervisor to serve as a graduate nursing student preceptor.

No student may be in a clinical placement within the Prisma Health Clinical Learning Environment until their placement has been approved by Prisma Health and the student has completed the required Prisma Health student clearance process in myClinicalExchange (student clearance database).

*This new process does not include the Clemson University ANEW grant students. In collaboration with Prisma Health, these placements will continue to be facilitated by Nursing Academics each semester.

Bon Secours St. Francis

Students who are BSSF employees should contact Mrs. Noreen Bachman, Educational Liaison- Graduate Studies to inform her of their need for clinical placement. Office: (864) 255-1856. Email: noreen_bachman@bshsi.org

Please do not contact a BSSFHS practice or provider for a clinical placement. Priority is given to current BSSFHS employees.

AnMed Health

Only AnMed Health employees and students from our local partners (Anderson University and Clemson University) will be considered for placement." Students should contact Ms. Cynthia Wurst at AnMed Health Physician's Network Services to inform her of the need for clinical placement. Office: 864-512-3896; Email: Cynthia.Wurst@anmedhealth.org

Spartanburg Regional Medical Center

All clinical requests should come through the Corporate Education Department. Cynthia Rice is the liaison for all nursing students and may be contacted at crice@srhs.com or 864-560-6549.

New Horizons

Submit packet found on the Program Canvas Page or see Missy Gray to get packet. Must submit the first two pages to New Horizons.

Other Clinical Sites

Clinical requirements may vary by site. If a new contract is required, the process takes 1-2 months to complete so students should submit the information early. See Graduate Student Services Coordinator for assistance.

CVS MinuteClinic

To apply:

- Go to.minuteclinic.com
- Click on Careers
- Click on College Students
- Complete application

Semesters	Application portal opens for the month of:	Applicants interviewed in:	Students notified of placement no later than 1 st week of:
Spring (January-April)	August	September	October
Summer (May-August)	December	January	February
Fall (September- December)	April	May	June

Contact: Amy Waggoner, MSN, FNP-BC, Senior Manager, College Relations. Amy.waggoner@cvshealth.com

Clemson University School of Nursing - Preceptor Agreement

Preceptor should also be given Preceptor Handbook/Guide

Student Information

Student Name	Course #	Semester	
(Cell)	(Email)		
		I clinical documentation has been submitted to the to my licensure status to the Program Director.	
Student Signature:		Date:	
	Practice or Agency Info	ormation	
Please prin	t clearly. We need this information	on to mail your certificate.	
Name:	Phone	e:	
Hospital Affiliation:			
Full Mailing Address:			
Administrator's Signature (if applicable): _			
	Preceptor's Information	ation	
Name (print):		Credentials:	
State License Number:	Board Cert	ification:	
Email:			
Is this your 1 st time precepting a Clemson Ves (If yes, please submit a current re			
Verification o	of Preceptor's Responsibilit	y & Eligibility to Precept	
objectives of the advanced practice nursing	g (APRN) student. I understand m	o review the clinical course objectives and the persony responsibility to the APRN student and retain tice for a minimum of one year post-graduation	onal
Preceptor Signature:		Date	

Student: Return original to your lead faculty.

Preceptor & student should retain one copy for their records

NURS 8190/8191: Women's Health

Preceptor Qualifications: Minimum 90 Clinical Hours

Clinical preceptors must be one of the following: OB/GYN (MD or DO), Nurse Practitioner (FNP, WHNP either with master's degree or higher), Certified Nurse Midwife (CNM with master's degree or higher)

Practice Qualifications:

OB/GYN Practice, Birth Center, Family Planning Clinic, STD Clinic, Health Department If practice has a specific focus (mainly OB, or mainly GYN) go ahead and sign up and we can help to find additional hours in the alternate specialty.

If you find hours in a specialty practice (i.e.-fertility, maternal fetal medicine), you will only be allowed to do a maximum of 16 hours in this type of practice since our course focuses on health promotion and assessment.

If your preceptor works out of a non-traditional site (i.e. Family Practice office) that sees patients other than women, or women with problems other than GYN or OB related issues, you can only count those patients/time spent with the patient on issues that relate specifically to this course

See criteria below for non-traditional sites:

- The patient must be FEMALE
- Only the actual hours spent with the female patient with a female complaint can be counted towards your 8190 clinical experiences.
- The hours cannot be counted for 2 clinical courses (no double counting)
- Chief complaint must be one you will be studying in 8190 (refer to syllabus and course outline): acceptable examples include
 contraception, pelvic exams, breast health, menopause; examples not acceptable include bronchitis, sinus infections, gastritis
 etc.

Classroom Topics

- Reproductive Basics (Women's Health History, Risk Assessment-FRAX, CV, BrCA, preconception, WiseWoman, ASCCP, ACR Birads)
- Microscopy-wet mount, STI, Reproductive Endocrinology, Amenorrhea, Androgen excess, Ovarian Dysmetabolic Syndrome
- Contraception-BCM's, LARC, Menstrual Migraines, Menopause-Natural, surgical, premature, HT, Cardiovascular-Cardiac Dysmetabolic Syndrome
- Obstetrics-Normal changes, common complaints, risk assessments, tests, follow up, newborn. Obstetric Complications, Advanced Gynecology-abnormal uterine bleeding, endometriosis, sexual dysfunction, Infertility-assisted reproduction.
- Oncology, Breast health-breastfeeding, mastitis, cancer, Pelvic health-vulvar, vaginal, cervical and uterine cancers,
 Gestational trophoblastic disorders, therapeutic procedures.
- Contemporary Issues-Legal issues/Women's rights-Abortion, Intimate Partner Violence, Ethics, Eating Disorders, Psychology-Postpartum Depression, Premenstral Syndrome, Premenstral Dysphoric Disorder

NURS 8200: Child and Adolescent

(Peds)

Preceptor Qualifications: Minimum 90 Clinical Hours.

Clinical preceptors must be one of the following: Nurse Practitioner (PNP or FNP with a aaster's degree or higher), Pediatrician or Family Medicine (MD or DO).

Practice Qualifications:

The course focuses on the primary care of children and adolescents. Therefore, clinical sites should be in a pediatric primary care office (a pediatric office that provides care of the well-child care and immunizations), preferably with a Master's prepared nurse practitioner. A pediatrician is also an acceptable preceptor. Half of the clinical hours can be in an Acute Care OR Pediatric Sub-Specialty. Acute care practices such as Minute Clinic or a Pediatric ER are acceptable for approximately 50% (45 hours) of the clinical hours. A pediatric specialty clinic (ex: pediatric cardiology, pediatric orthopedics, pediatric neurology, pediatric GI) is not an acceptable clinical site for the majority of the clinical hours.

A signed preceptor agreement must be submitted before student begins clinical hours.

*List your name and provide the preceptor information in full."

NURS 8210/8211: Adult Nursing

Preceptor Qualifications: Minimum 90 Clinical Hours (3 hours will be designated as simulation but count toward the minimum 90 hours required)

Clinical preceptors must be one of the following: Family Practice MD or DO, Family Nurse Practitioner (FNP Degree or higher), or certified CNS for CNS students. .

Practice Qualifications:

Primary Care, Internal Medicine, Free Clinics, Minute Clinics, Urgent Care Centers, Fast Track ED.

Classroom Topics

- Typhon Overview, Role of the NP, Presenting a case.
- <u>Oropharnyx Disorders:</u> Dental abscess, Diseases of salivary glands, Epiglottitis, Oral infections, Parotitis, Peritonsillar abscess, Pharyngitis & Tonsillitis.
- <u>Ear Disorders</u>: Auricular disorders, Cerumen impaction, Cholesteatoma, Impaired hearing, Inner ear disturbances, Otitis externa, Otitis media, TM perforation.
- <u>Pulmonary</u>: Bronchitis, Asthma, Noncardiac Chest pain, Dyspnea, Hemoptysis, Pleural Effusions, Pleurisy, Pneumonia, Pneumothroax.
- <u>Neurologic</u>: Neuropsychological Examination, Bell's Palsy, CVAs, Delirium, Dizziness & Vertigo, Headache, Infections of CNS, MS, Seizures, Trigeminal neuralgia.
- <u>Gastrointestinal:</u> Abdominal pain & infections, Anorectal complaints, Cholelithiasis & cholecystitis, Constipation, Diarrhea, Diverticular disease, GI hemorrhage, Nausea & Vomiting, Dysphagia, Pancreatitis, Peptic Ulcer disease.
- <u>Musculoskeletal & Arthritic Disorders</u>: Ankle & foot pain, Bursitis, Elbow pain, Gout, Hand & wrist pain, Hip pain, Infectious arthritis, Knee pain, Low back pain, Neck pain, OA, Osteomyelitis, Shoulder pain, & Sprain, strains, & fractures
- <u>Cardiovascular</u>: Cardiac Diagnostic Testing, Abdominal Aortic Aneurysm, Cardiac Arrhythmias, Carotid Artery Disease, Chest pain, Infective endocarditis, Heart failure, Myocarditis, HTN, Peripheral arterial insufficiency, Valvular Heart Disease & Cardiac Murmurs.
- <u>Skin Disorders</u>: Examination of the Skin, Principles of Dermatologic therapy, Acne Vulgaris, Alopecia, Animal & Human bites, Burns (minor), Cellulitis, Contact Dermatitis, Cutaneous Herpes, Dermatitis Medicamentosa, Atopic Dermatitis, Fungal Infections, Herpes Zoster, Pruritus, Purpura, Scabies, Warts, Urticaria
- Nose Disorders: Epistaxis, Nasal Trauma, Rhinitis, Sinusitis
- <u>Eye Disorders:</u> Evaluation of eyes, Chalazion, Hordeolum, & Blepharitis, Conjunctivitis, Corneal surface defects, Orbital & periorbital cellulitis, Traumatic ocular disorders.
- <u>Genitourinary Disorders</u>: Male sexual dysfunction, Hypokalemia & Hyperkalemia, Incontinence, UTIs, Prostate disorders, Proteinuria & Hematuria, Obstructive Uropathies & Tumors, Urinary Calculi
- Infectious Diseases: Fever, Influenza, Infectious, Diarrhea, Infectious Mononucleosis, Tick-Borne Illnesses

NURS 8220/8221: Gerontology Nursing

Minimum 90 Clinical Hours. Clinical preceptors must be one of the following: MD, DO, NP

What are the clinical requirements for this course?

There are 90 clinical hours required in Nursing 8220. The course focuses on care of the elderly (over 60 years) and chronic conditions that affect elders.

What clinical sites are appropriate?

Clinical sites should have a large population of elderly clients. Family practice settings with an established population of elderly clients, geriatric practices, internal medicine sites, nursing homes, retirement facilities, and assisted living facilities are appropriate clinical sites. Precepting in the hospital with a hospitalist <u>is not</u> an appropriate site for this experience.

What should I do after I identify a potential preceptor?

Once you identify a potential preceptor, have some discussion about the focus of the course, your goals for your experience, and what will be expected of you. Preceptors should allow you to take the lead in the history taking and preliminary evaluation (with their guidance). Experiences where you solely "shadow" a preceptor are not appropriate for this experience.

Can I begin my clinical as soon as I identify a preceptor?

You <u>may not</u> begin your clinical rotation until after our first class and you <u>may not</u> begin until your <u>preceptor agreement</u> has been submitted.

What should I do if I have additional questions?

Please contact the faculty if you have any questions. Please do not wait until the last minute to try to get a preceptor. It is urgent that you start working on this immediately. There are several schools (nursing and medical) with students vying for the same sites.

NURS 8820/8821: Primary Care for Elders

Faculty will provide information on the first day of class. Preferred clinical sites are nursing homes. Minimum 90 Clinical Hours.

NURS 8840/8841: Mental Health and Illness of Adults

Minimum 90 Clinical Hours. Clinical preceptors must be one of the following: MD, DO, NP

Course Description: Psychosocial, developmental, spiritual and cultural theories and concepts synthesized and applied to the analysis of mental health and illness in adulthood. Roles and functions of advanced practice nurses in promoting the mental health of individuals and their families are examined. Clinical practice in the community is incorporated.

Classroom:

- Hybrid course
 - O Lectures will be delivered in an online format with voiceover
 - Orientation will be held in the classroom
 - Syllabus and classroom requirements will be discussed during orientation
 - All exams will be proctored and held in the classroom

Clinical:

- 90 total clinical hours required
 - 45 hours will be completed with the preceptor you are using for your adult course (NURS 8210)
 - These 45 hours are not part of the required hours for NURS 8210, but 45 additional hours.
 - When you are completing the 45 hours for 884 in the primary care setting, your focus will be on seeing patients that are there for their mental illness or those who have a history of mental illness.
 - If you are not enrolled in NURS 821, the 45 hours can be completed with the preceptor of your choice in a primary care setting.
 - The remaining 45 hours completed will be by shadowing a variety of mental health providers in various settings including, but not limited to, outpatient mental health clinics, inpatient psychiatric hospitals, and assisted livings.
 - Arrangements for this will be made by the 884 faculty.

Guidelines for Nurse Practitioner Practicum Experiences

Clinical preceptors must be one of the following: MD, DO, NP (CNS-for CNS students)

- 1. The practicums involves 8-12 hours per week over a 15-week period. One hour is allotted to the seminar component. <u>Any experience, including observation, in an agency (hospital or health department) must be preceded by agency approval.</u>
- 1. The "hands on" direct patient care hours should be spent with your primary preceptor. Any time you wish to count with anyone else must be approved in advance. FNP students who select an internal medicine specialist as a preceptor will be expected to arrange 5 days (40 hours) in a pediatric office for management of children. Students who have not completed a rotation with a nurse practitioner preceptor should select a NP preceptor or a physician preceptor with a NP in the practice. Any practice other than general internal medicine or family practice must be approved in advance by the faculty.
- 2. Latino Clinic The clinical experience requirement for spring semester includes a minimum of one day at the Hispanic Clinic in Walhalla. This clinical site exists to assist with care of this community and in large part is offered to enrich the clinical experience for advanced practice graduate students. This should be your second experience at this clinic to allow for more autonomy on your part. The experience offers a variety of unique opportunities including NP managed clinic, Independent decision making influenced by remote resources, Collaborative efforts with other health disciplines and community involvement and Holistic approach with aspects of complementary health management
- 3. **Preceptor vacation/illness.** You may schedule an additional day over several weeks to account for preceptor unavailability (vacation/illness), however you may not "book" extra hours to complete the practicum more than one week before the semester is over.
- 4. A schedule for your clinical days should be submitted at the first class meeting. A revised schedule may be submitted if changes occur.
- 5. The faculty may need to meet with you during the site visit to evaluate your care for one client via direct observation each visit. For the initial visit, please be prepared with the following:
 - A. Review of course logs from your prior clinical courses/ clinical notes to determine any primary care deficit areas. Use Clinical Guidelines (text) to evaluate practice sites. Evaluation of current practice sites (top 4 in each of the 4 areas):
 - a. Most common (1) acute and (2) chronic problems encountered
 - b. Most common (3) pediatric (FNP) and (4) adult problems encountered
 - B. Ideas about the incorporation of health promotion into the practice in addition to teaching/counseling included in office visits
 - C. Evidence based practice assignment -see handout presented in first class meeting for details
 - D. As an advanced nursing practice provider, your practice should be theory based, begin thinking about the appropriate theory (theories) for your practice.

Observational experiences are limited to the first day in your clinical setting and your specialty practice days (15 total hours) unless you are observing a specialty procedure for the first time.

During the practicum you should be meeting the patient, completing the full assessment, determining differential diagnoses with a preliminary plan of treatment including any recommended diagnostic tests. This should all be summarized for your preceptor. Be sure that your preceptor also sees the patient, completing partial exam as appropriate for preliminary diagnoses.

This is your final practicum to prepare you for advanced practice. Be sure you are allotting time to review references regarding cases you have seen at the end of your clinical days. The time you invest this semester will increase your confidence and competence as an APRN/FNP/AGNP.

Education Specialty Option Lab Experiences

Education students will meet with faculty for course requirements.

Nursing Research

AnMed Health

- Please contact Andrea Franks, <u>andrea.franks@anmedhealth.org</u> or <u>864-512-8551</u> in order to notify the Nursing Research/EBP Council that you have potential project.
- 2. Schedule time to present project to Research/EBP Council for approval.
- 3. Upon approval by council, notify Kerri Shiflett, IRB Coordinator, kerri.shiflett@anmedhealth.org or 864-512-3813 that study/project has been approved and is ready to begin IRB process.
- 4. IRB process and approval
- 5. Conduct research/project
- 6. Upon completion of research/project, formal report to BOTH IRB and Nursing Research/EBP Council is required.

Prisma Health

Information on conducting research at Prisma Health can be found at: https://hsc.Prisma Health.org/research/

Typhon

Typhon is a requirement for the clinical portion of <u>all</u> clinical labs. Typhon is the system used by The School of Nursing to verify that students have met the requirements for the clinical portion of a course. Typhon is also used to clear students to take the national certification examinations. Failure to submit the completed Typhon logs by the due dates will result in an <u>unsuccessful grade</u> for the clinical portion of the course. <u>An unsuccessful grade will require a student to repeat the entire course and not being able to progress to the next semester.</u> All Typhon logs are due by the Friday before grades are due at 5pm to be counted for the semester. The faculty must have time to grade them and post grades to iRoar by the due date.

Typhon has a <u>30-day lockout</u>. If a student does not complete logs within the 30-day period, hours will not count and must be repeated. <u>The 30-day lock-out will not be extended for those missing the deadline</u>. Expedient documentation is required in a practice. Otherwise, the facility is not paid by the insurance company and there is a loss of revenue. Loss of revenue means loss of jobs!

If a preceptor or clinical site is not found in Typhon, students may follow the directions below:

- Complete preceptor request in Typhon.
- When looking at the drop-down list of preceptors in Typhon, students will need to click request addition next to the drop menu. This will allow the student to fill in the required information. Students will receive an email when their preceptor is added.
- Students may not request a preceptor or site to be added unless they have submitted the Preceptor Agreement to their lead faculty. This will be confirmed before the preceptor or site is added.
- Have patience as the preceptor information is not automatically entered. All are aware of the 30-day lock-out so don't wait until the last minute to submit this request.

Typhon Tracking Logs - Information and FAQs

<u>All</u> hours need to be logged in the shift hours. These are the hours at the clinic whether seeing a patient, charting, discussing cases with preceptor, or completing other activities. Logs should then indicate number of simulation and observation hours. See course syllabi for required minimum clinical shifts hours (90- 270/course). Course required hours totaling a minimum of 675 hours must be completed before being cleared for graduation. Simulation and observation hours are included in the shift hours. All patients seen during the clinical rotation should be correlated with a Typhon case entry.

1. Is Typhon Database log required in each clinical course?

Yes. The following clinical courses require TYPHON - N8210, N8190, N8200, N8220, and N8230.

2. What is the URL for the LOGIN screen?

https://www3.typhongroup.net/np/data/login.asp?facility=

3. What is the Account Number for Student Data Entry Login?

The account number is 3029.

4. Are the log in user name & password case sensitive?

Yes. The username & passwords are case sensitive.

5. Which ICD & CPT codes are used in Typhon?

2016 ICD-10 & CPT codes are now in use with Typhon. You can also include up to 3 digits after the decimal for ICD-10 codes.

6. Do I log my clinical time as well as patient data into Typhon?

Yes, you do log your clinical hours (shift hours) into Typhon. You access "My Time Logs" under "Other Activities & Reports."

7. Is there a blank case worksheet that I can print off and take to clinical?

Yes, there is a blank case worksheet that you can print off to take to clinical. Under the Information & Setup Section, you will see Downloads – Blank Case Log Worksheet.

8. What is the first step I should take if entering a new patient into the system?

Go to "1 – Case Log Management" and click on Add New Case Log to start a new patient data entry. After clicking on the link, you will be prompted to select the Date of Encounter – Please use the date of your clinical.

9. What is the Case ID#?

The ID # is a distinct number given to each patient data entry that is logged.

10. Can I just log in a brief entry of the patient and go back to the Case ID # to complete the rest of the items later? Yes, you can place some partial information into Typhon and return to the Case ID# to complete documentation. You have 90 days from the index entry to place the remaining information. However, some of the APRN courses require you to document into Typhon weekly. Check the syllabus for individual course requirements.

11. I do not understand ICD-10 and CPT-Codes well enough to list into Typhon. Is there a resource available in Typhon that would be helpful?

Yes, there is a link within the Information & Setup called – Most Common ICD/CPT Codes that breaks down the list into specialties, such as FNP/ACNP/etc. However, the list is still very robust, but this is the nature of ICD-10s & CPT Codes. Be patient with yourself and work with your clinical preceptor to become familiar with these codes.

12. Do I log my simulation deliberate practice hours into Typhon? Do I log my simulation check off into Typhon? Do I log my time with Harvey into Typhon?

Yes, you will log your simulation deliberate practice hours into Typhon. No, you do not log the time allotted for simulation check off into Typhon.

13. How can I delete a case log if I made an error?

At the lower right-hand side of the Case Log screen, there is "DELETE THIS CASE LOG". Once the faculty member has reviewed your case and approved, you will not be able to delete the case.

14. What do I add in the Clinical Notes?

The Clinical Notes portion of the patient case log will vary by APRN Course. This information is evolving and forthcoming as our program becomes more comfort with the robustness of Typhon.

Section VIII: Additional Resources

Scholarly Writing Resources

This resource is intended to aid you in writing scholarly papers. It is intended as a guide to help you with course assignments and publications. Further information can be found in the current edition of *The Publication Manual of the American Psychological Association* and on the Clemson University Cooper Library website.

Writing for Publication:

Select 1 to 2 journals that you would like to submit your paper to so that you have an idea of the citation format the journal uses, the page limits, and the accepted writing style. It is recommended that you write the paper in APA format then change to AMA or MLA before submission to journals requiring these formats. You may only submit to one journal at a time.

The following are examples only and are intended as a guide:

Title Page, Running Head and Page Numbers

The title page should have a running header (3-5 words), be double-spaced, have 1" margins and be 12 font. Information includes: Title of the paper, author's name, and the institution.

Running Header: THE ART OF NURSING

Citations Types

APA 7th ed. citations:

Journal or Magazine Article:

- One Author:
 - o Wilson, J. M. (2014). Shifting roles in nurse practitioner practice. *American Journal of Nursing*, 13(2), 53-65.
- Two Authors:
 - o Wilson, J. M., & Smith, A.C. (2014). Shifting roles in nurse practitioner practice. American Journal of Nursing, 13(2), 53-65.
- Three to Seven Authors:
 - o Wilson, J. M., Smith, A.C, Brown, J. A, Morris, M.D, Kane, P.I., Clark, B.D., and Owens, K.L. (2014). Shifting roles in nurse practitioner practice. *American Journal of Nursing*, 13(2), 53-65.
- More than Seven Authors:
 - Wilson, J. M., Smith, A.C, Brown, J. A, Morris, M.D, Kane, P.I., Clark, B.D., ... Owens, K.L (2014). Shifting roles in nurse practitioner practice. *American Journal of Nursing*, 13(2), 53-65.

Book

• Mouse, M., & Pluto, D. (2013). The best of OR nursing. New York: Pocket Books.

Book Article or Chapter

 Bacon, N. T. (2009). Two sides of a coin. In P. Dumbo (Ed.), Spectrum of a great nurse (pp. 2119- 2223). New York, NY: Springer.

Encyclopedia Article

• Stenson, O. (2010). Nursing fiction. In The Encyclopedia Americana (Vol. 17, pp. 400-412). Anderson, SC: Hopson.

Website: (for more details, see the American Psychological Association's official site)

• Clark, T. (1998). Mickey and Minnie Discuss Diabetes. Retrieved November 12, 2014, from Walt Disney World. Web site: http://www.disneyrus.com

Purdue Online Writing Lab (OWL): https://owl.purdue.edu/owl/purdue owl.html

APA Style: https://apastyle.apa.org/

Citation Machine: https://www.citationmachine.net/apa/cite-a-book

Literature Sources and Strength of Evidence

Primary Sources:

A primary source is a document or physical object which was written or created by the original author. Primary sources are original objects or documents.

Some types of primary sources include:

- Original documents (excerpts or translations acceptable): Diaries, speeches, manuscripts, letters, interviews, news film footage, autobiographies, official records
- Creative works: Poetry, drama, novels, music, art
- Reports of scientific discoveries
- Results of experiments or clinical trials
- Primary sources are factual and not interpretive

Elements of a Research Article: Primary research articles can be identified by a commonly used format. They typically include the following sections:

- Methods (sometimes with variations, such as Materials and Methods).
- Include: Purpose, Research question(s). Many also include a theoretical model.
- o Results (usually followed with charts and statistical tables), and discussion

Secondary Sources:

A secondary source interprets and analyzes primary sources. A **secondary source** is something written about a primary source. These sources are one or more steps removed from the event. Secondary sources may have pictures, quotes or graphics of primary sources in them. Some types of secondary sources include:

Examples of secondary sources include:

- A journal/magazine article which interprets or reviews previous findings
- Textbooks
- Analyzes and interprets research results or interprets scientific discoveries
- Histories
- Criticisms or reviews
- Commentaries
- Encyclopedias
- Biographies
- Literary criticism

Use secondary sources as a guide to find primary sources. Use reputable sites like Mayo, WebMD, and Cleveland Clinic). On these sites look for the resources they used and go to those primary sources before citing.

Materials that are Appropriate to Cite:

- Peer-reviewed journals. They usually have "Journal of..." In the title.
- Webpages that end in .org, .gov., or .edu.

Materials that are Inappropriate to Cite:

- Newspapers and popular magazines such as: RN Magazine, Natural History, National Geographic, Discover Magazine, Time, Newsweek, etc. <u>are not</u> appropriate to cite in research papers!
- Wikis (like Wikipedia). Wikis can be edited by anyone.
- Webpages that end in .com

APA Headers

```
Level 1: Centered, boldface, uppercase and lowercase
Level 2: Left-aligned, boldface, upper and lowercase
Level 3: Indented, boldface, lowercase heading
Level 4: Indented, boldface, italicized with punctuation
Level 5: Indented. Italicized, lowercase heading with punctuation
(Rarely do you see Level 5)
```

Example of Headers:

Domains of Nursing

```
Person
Education
Nursing School
BS:
traditional.
accelerated second degree.
MS:
PhD:
New Graduate Education
Health
Environment
```

Evidence Rating Scale

When evaluating the appropriateness of studies, it is important to examine the strength of the evidence they present.

Strength of the Evidence:

http://www.innovations.ahrq.gov/evidencerating.aspx http://www.aafp.org/journals/afp/authors/ebm-toolkit/strength.html http://archive.ahrq.gov/clinic/epcsums/strenfact.htm

Quality of the Evidence

http://www.support-collaboration.org/summaries/grade.htm http://sophia.smith.edu/~jdrisko/rating_the_evidence.htm

Clemson University IRB

The Clemson IRB contact is Nalinee Patin, npatin@clemson.edu, phone: 864-656-0636. If submitting only to Clemson IRB, the PI will be your committee chair and letters of approval will go to the committee chair. You can request to be copied on this communication.

If you are submitting to an outside IRB (e.g., Prisma Health, AnMed, Spartanburg Regional) and Clemson accepts their approval, you will need to send a copy of the approval letter from the outside IRB to Clemson IRB, along with the name of your chair who will be listed as your PI of record for Clemson IRB purposes. Communication regarding Clemson IRB approval will go to your chair and copied to you.

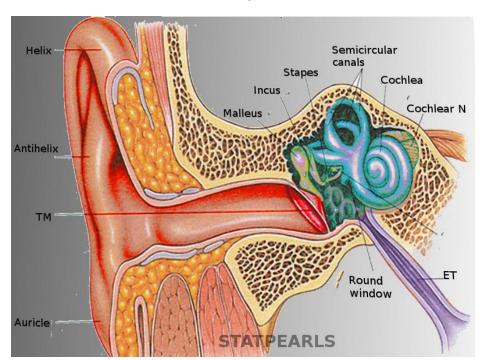
For those submitting only to Clemson, full IRB review generally takes approximately one month before feedback/approval will be received. The expedited review process is usually less than one month. For those who need Clemson IRB to acknowledge/approve from a non-Clemson site, the process takes approximately one week after submitting the facility's IRB Approval Letter but, continued follow up is needed by the student. All students must have IRB approval from Clemson and all sites where data collect is to take place before beginning to implement the DNP Project.

A link to Clemson's Institutional Review Board is found here.

Anatomy

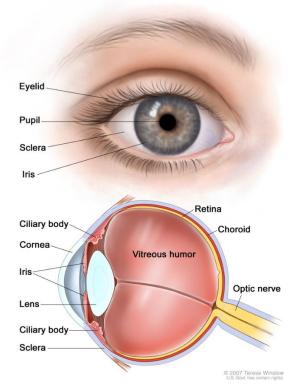
This Basic Anatomy of organs and systems provides a review of information learned in undergraduate studies

Ear

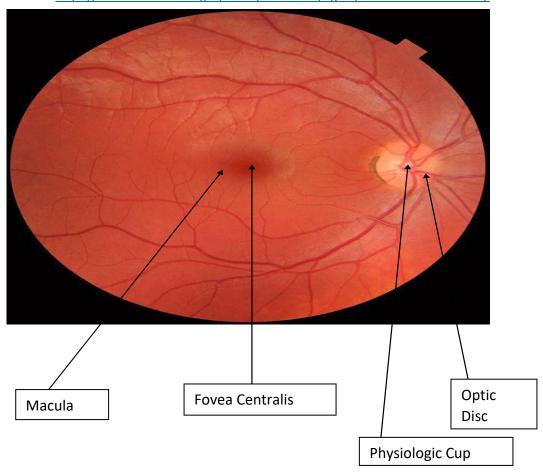


https://www.ncbi.nlm.nih.gov/books/NBK540992/figure/article-20838.image.f1/

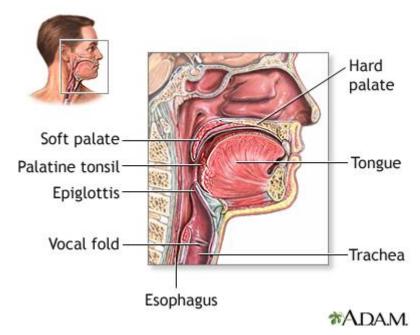




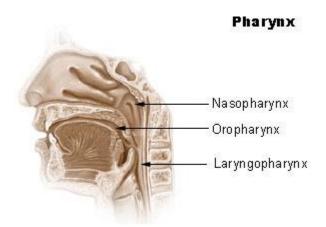
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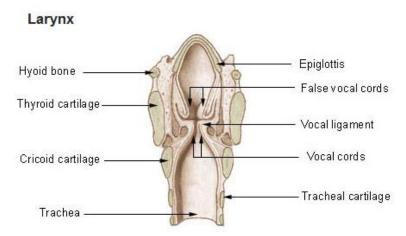
Throat



https://medlineplus.gov/ency/article/000655.htm

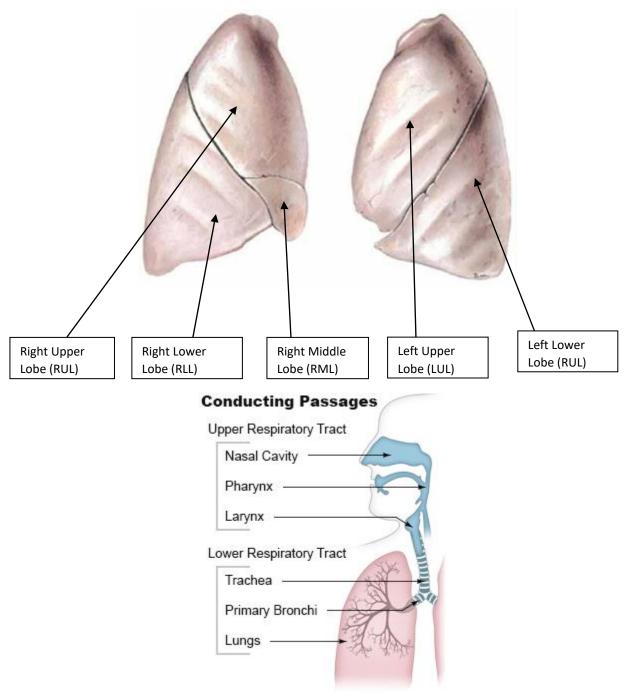


https://training.seer.cancer.gov/anatomy/respiratory/passages/pharynx.html



https://training.seer.cancer.gov/anatomy/respiratory/passages/larynx.html

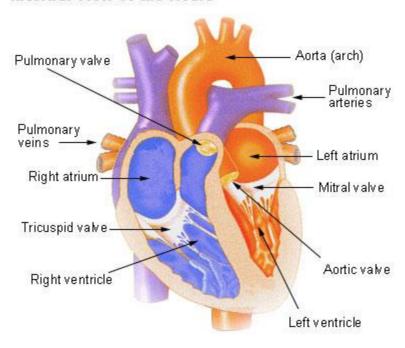
Lungs



https://training.seer.cancer.gov/anatomy/respiratory/passages/

Heart Chambers and Valves

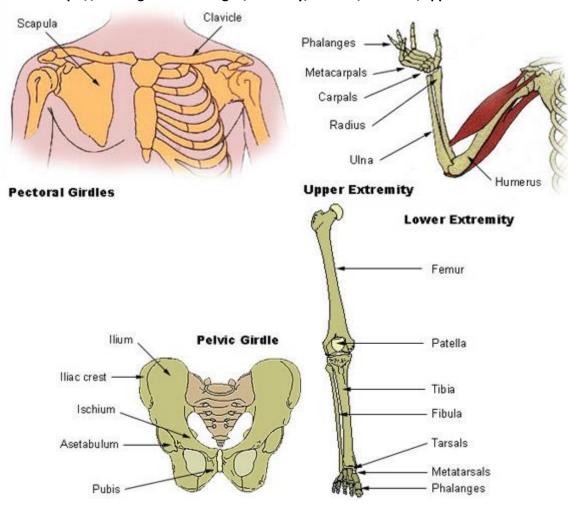
Internal View of the Heart

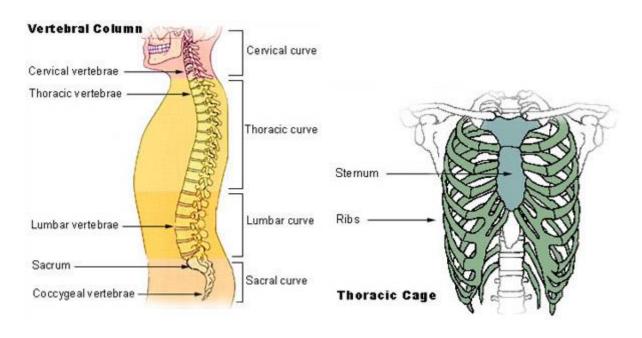


https://training.seer.cancer.gov/anatomy/cardiovascular/heart/structure.html

Bones of the body

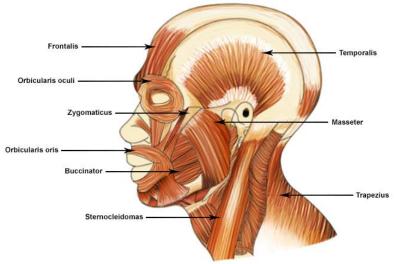
https://training.seer.cancer.gov/anatomy/skeletal/divisions/appendicular.html





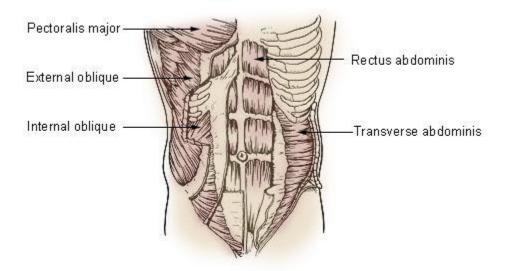
Muscles





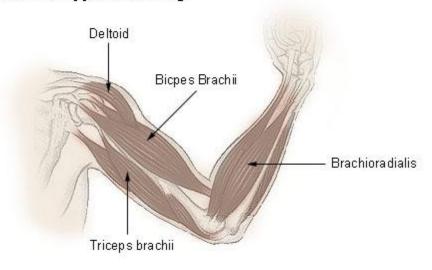
https://training.seer.cancer.gov/anatomy/muscular/groups/head_neck.html

Muscles of the Trunk



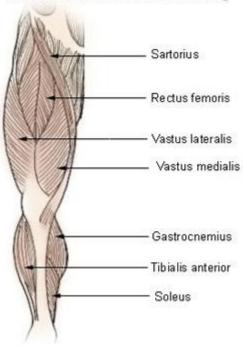
 $\underline{https://training.seer.cancer.gov/anatomy/muscular/groups/trunk.html}$

Muscles of the Upper Extremity

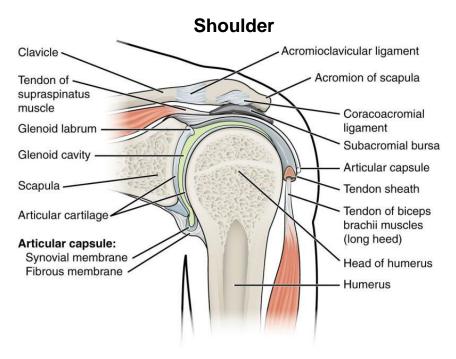


https://training.seer.cancer.gov/anatomy/muscular/groups/upper.html

Muscles of the Lower Extremity



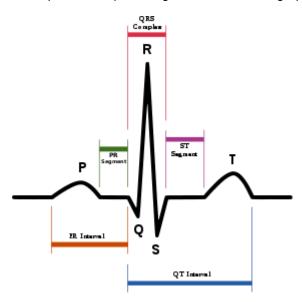
https://training.seer.cancer.gov/anatomy/muscular/groups/lower.html



https://www.ncbi.nlm.nih.gov/books/NBK448196/figure/article-28991.image.f4/

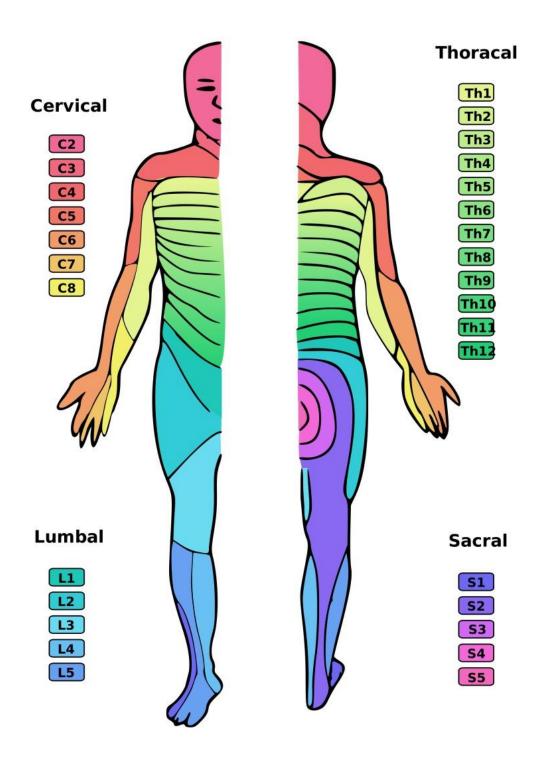
EKG Components

https://en.wikipedia.org/wiki/Electrocardiography

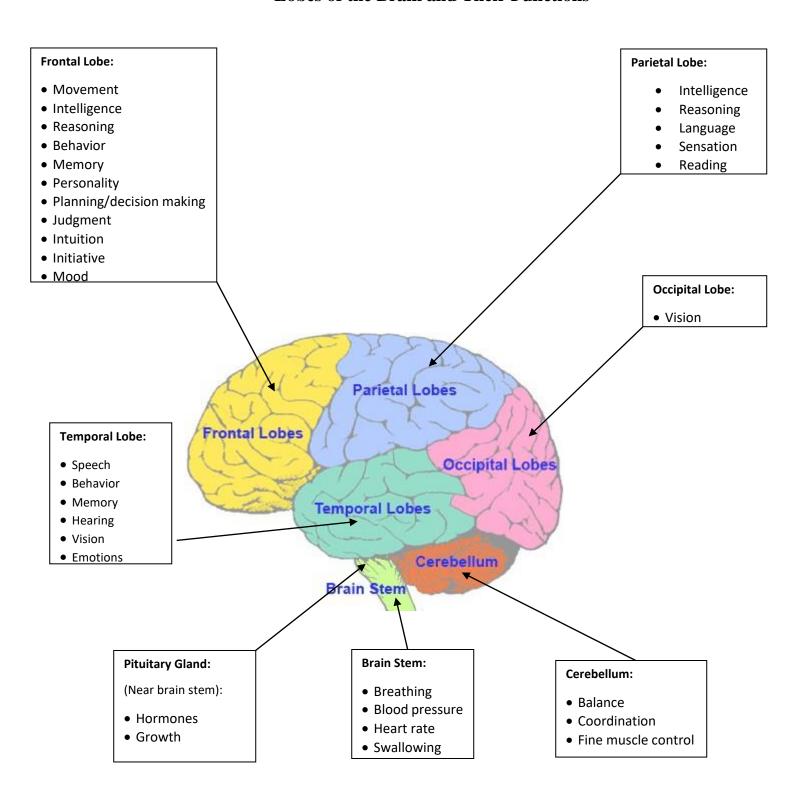


Dermatomes

https://www.ncbi.nlm.nih.gov/books/NBK535401/figure/article-29335.image.f1/



Lobes of the Brain and Their Functions



Adapted from: https://www.health.qld.gov.au/abios/asp/brain

Laboratory Tests

It is important to know the following diagnostic tests.

- Components of a CBC with differential
 - o CBC: White blood cell, red blood cells, hematocrit, hemoglobin, platelet (thrombocyte) count, mean platelet volume (MPV)
 - o Differentials: Neutrophils, lymphocytes, monocytes, eosinophils, basophils (know the action of each also)
- Components of a Basic Metabolic Panel (BMP)
 - o Glucose, Calcium, Sodium, Potassium, carbon dioxide, Chloride, BUN, Creatinine
- Components of a Comprehensive Metabolic Panel (CMP)
 - o Glucose, Calcium, Albumin, Total Protein, Sodium, Potassium, carbon dioxide, Chloride, BUN, Creatinine, Alp, ALT, AST, Bilirubin,