

 FLORIDA ATLANTIC UNIVERSITY	COURSE CHANGE REQUEST Graduate Programs		UGPC Approval _____ UFS Approval _____ SCNS Submittal _____ Confirmed _____ Banner _____ Catalog _____
	Department Nursing College Nursing		
Current Course Prefix and Number NGR 6200L		Current Course Title Primary 1 Practicum: Foundations of Advanced Nursing Practice	
<i>Syllabus must be attached for ANY changes to current course details. See <u>Template</u>. Please consult and list departments that may be affected by the changes; attach documentation.</i>			
Change title to: Change prefix From: _____ To: _____ Change course number From: _____ To: _____ Change credits* From: 3 To: 2 or 3 Change grading From: _____ To: _____ Academic Service Learning (ASL) ** Add <input type="checkbox"/> Remove <input type="checkbox"/>		Change description to: Change prerequisites/minimum grades to: add NGR 6200 (summer) Change corequisites to: Change registration controls to: Please list existing and new pre/corequisites, specify AND or OR and include minimum passing grade.	
Effective Term/Year for Changes: Spring 2025		Terminate course? Effective Term/Year for Termination:	
Faculty Contact/Email/Phone Katherine Chadwell, kchadwel@health.fau.edu 561-297-2535			
Approved by Department Chair _____ College Curriculum Chair _____ College Dean _____ UGPC Chair _____ UGC Chair _____ Graduate College Dean _____ UFS President _____ Provost _____		Date 3/12/2024 3/14/2024 3/14/24 03/21/2024 03/21/2024 03/21/2024 _____ _____	

Email this form and syllabus to UGPC@fau.edu 10 days before the UGPC meeting.

**FLORIDA ATLANTIC UNIVERSITY
CHRISTINE E. LYNN COLLEGE OF NURSING
COURSE SYLLABUS**

SEMESTER: Spring, Summer

COURSE NUMBER: NGR 6200L

COURSE TITLE: Primary Care 1 Practicum: Foundations of Advanced Nursing Practice

COURSE FORMAT: Practicum and virtual clinical conferences

CREDIT HOURS: 5 (3 credits spring, 2 credits summer)

COURSE SCHEDULE: 180 clinical hours throughout the spring semester and 120 clinical hours throughout the summer semester. Dates and times to be arranged by students with preceptors.

PREREQUISITES: NGR 6002L, 6141, 6172, 6110, 6811, 6200 (summer)

COREQUISITES: NGR 6200

FACULTY:

OFFICE HOURS:

COURSE DESCRIPTION: Allows students to integrate the foundational concepts of primary care in the practice settings to diagnose and manage common conditions across the lifespan. Development of the advanced practice nursing role utilizes nursing situations grounded in caring science and includes health promotion, disease prevention, ethical- and evidenced-based practice.

COURSE OBJECTIVES: Upon completion of NGR6200L, the student will be able to create caring nursing responses in: *

Becoming competent

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Becoming competent

1. Apply foundational knowledge from nursing and related disciplines to assess, diagnose, and treat common conditions. (Essential I)
2. Utilize selected caring and developmental theories and concepts from biological, behavioral, and nursing sciences to assess the well-being of individuals across the lifespan. (Essential I, VIII)
3. Demonstrate patient-centered and culturally responsive strategies in the delivery of clinical prevention and health promotion interventions related to the primary care of persons. (Essential VIII)
4. Begin to apply research findings, identify clinical guidelines from national organizations, and apply evidence-based practice to improve the health and well-being of persons in the primary care setting. (Essential IV)
5. Begin to utilize informatics and health technologies to evaluate, integrate, coordinate, and improve healthcare for persons. (Essential V)
6. Demonstrate a beginning understanding of the advanced practice nursing profession based on reflective practices and continue to develop their own plans for lifelong learning and professional development as a clinician in the primary care setting. (Essential IX)

Becoming compassionate

7. Identify appropriate nursing theories and complex patterns of knowing in the design of compassionate care in the primary care setting. (Essential IX)
8. Choose caring strategies in advanced nursing situations which reflect appreciation of the persons' and families' cultural and spiritual beliefs. (Essential IX)

Demonstrating comportment

9. Identify effective communications strategies in the clinical setting that foster interprofessional partnerships to improve health outcomes for persons. (Essential VII)
10. Discuss the impact of ethical, legal, political, cultural, global, and socioeconomic issues in providing safe and accountable primary care for common conditions in the primary care setting. (Essential II)

Becoming confident

11. Develop a beginning sense of self as a caring person in relation to others within the advanced practice clinical setting. (Essential IX)
12. Demonstrate beginning clinical confidence, through critical thinking by applying advanced nursing knowledge in the practice setting.

Attending to conscience

13. Begin to comprehend how health policy impacts the care of persons in diverse situations. (Essential VI)
14. Discuss measures to improve care through advocacy at state and local levels. (Essential VI)
15. Discuss morally sensitive issues affecting advanced practice. (Essential VI)

Affirming commitment

16. Discuss the role and scope of practice of the nurse practitioner in providing safe, ethical, efficient, cost effective, quality care in the primary care setting. (Essential II, III)
17. Begin to integrate anticipatory guidance in the clinical setting, based on an understanding of developmental theory and current evidence. (Essential I, IV)
18. Discuss the importance of becoming professionally active in national organizations improving health of persons in the primary care setting. (Essential III and VI)

**The 6 subjectives based on Roach's (2002) work organize the course objectives.*

TEACHING LEARNING STRATEGIES:

1. Guided practice experiences with FAU clinical faculty and community preceptors.
2. Evaluation of documentation (SOAP notes), E-Log entries, clinical conferences, nursing situation presentation, discussion of practicum experiences and related issues, modeling, coaching, self-evaluation and reflective journals.

GRADING AND EVALUATIONS:

Knowledge, Management Skills, & Role Development

(Grading rubrics are provided for all assignments and posted on the canvas site)

Site Visit Evaluation by Clinical Faculty	30 %
Preceptor Evaluation of Student	10 %
Student Self-Evaluation/Faculty Review Midterm and End of Term	10 %
SOAP Notes (2)	20 %
Reflective Weekly Journal (10 entries 2 points/journal)	20 %
Professionalism	10 %
Total	100%

GRADING SCALE: Grade below C is not passing in the Graduate Program.

94 - 100 = A
90 - 93 = A-
87 - 89 = B+
84 - 86 = B
80 - 83 = B-
77 - 79 = C+
74 - 76 = C
70 - 73 = C-
67 - 69 = D+
64 - 66 = D
61 - 63 = D-
0 - 60 = F

REQUIRED TEXTS:

Same textbooks as companion course.

RECOMMENDED TEXTS:

Same as for companion course

TOPICAL OUTLINE:

I. Scientific foundation applied to clinical practice: (Essential I)

a. Critical decision-making and diagnostic reasoning required for the treatment of common conditions that builds on previous knowledge in related sciences such as anatomy, physiology, chemistry, microbiology, and genetics and integrates advanced knowledge of pharmacology, pathophysiology, health assessment, research, and theory.

II. Application in clinical practice of health promotion, health protection, disease prevention and treatment include: (Essential VIII)

- a. Ecological, global, and social determinants of health
- b. Illness prevention health promotion and wellness
- c. Healthy People 2020
- d. Environmental and population- based health
- e. Genetic causes of common diseases and screening
- f. Age based incidence of common disorders
- g. Epidemiology-incidence and prevalence
- h. Sensitivity and specificity

III. Nurse practitioner patient relationship in clinical practice grounded in caring including:

(Essential III and VIII)

- a. Authentic presence, relationship of mutual trust, and patient centered care
- b. Patient counseling – including genetic counseling, family counseling.
- c. Principles of learning, motivational interviewing
- d. Health literacy
- e. Cultural and ethnic considerations
- f. Becoming an advocate for patients, families, caregivers, communities, and members of the healthcare team
- g. Ethical principles in decision making

IV. Professional role, leadership, interprofessional communication, health policy applied to clinical practice including: (Essential II, VI, and VII)

- a. Professional organizations
- b. Collaborating in planning for transitions across the continuum of care
- c. Systems leadership
- d. Scope of practice
- e. Legislative issues

V. Quality improvement and clinical practice inquiry in: (Essential IV)

- a. Implementation of evidenced based practice
- b. Use of informatics to gather, document, and analyze outcomes
- c. Standards and guidelines to improve practice and assure safety
- d. Implementation of evidenced based practice
- e. Population based information
- f. Cost effective care
- g. Dissemination of evidence from inquiry

VI. Technology and information literacy in clinical practice: (Essential V)

- a. Use of informatics to gather, document, analyze, and evaluate outcomes
- b. Application of research to the clinical setting
- c. Critique of databases

- d. Meaningful use of EHR
- e. ICD-10 coding and CPT coding for reimbursement

COURSE ASSIGNMENTS:

Site Visit Evaluation (30%)

Faculty Evaluation of Student Nurse Practitioner Site Visit Performance is completed by FAU clinical faculty when they come to your clinical site during the semester. These clinical site visits need to be arranged early in the semester. During a clinical site visit, the faculty will observe and discuss your clinical assessments and management plans for one or more clients in the clinic and briefly speak to your preceptor. In addition, they may ask you to write a SOAP on the spot. This is especially important when students are minimally allowed to use the EHR. It is the student's responsibility to advise the clinical preceptor of the date and purpose of these visits. Please review the "Site Visit Evaluation" form used to assess student performance located on the CON website with all other forms. This form is also posted on the Canvas site in the clinical information tab. There is a Lab rubric posted to help students understand how the grade is assigned.

Preceptor Evaluation of Student (10%)

This form should be given to the preceptor at the beginning the term. Preceptors complete this form at midterm and at the end of term. Preceptors can review the evaluation with the student or mail it to the clinical faculty if they choose. Your clinical faculty will supply an addressed envelope for your preceptor if they prefer to mail it.

Student Self-Evaluation (10%)

This form is completed by the student at midterm and at the end of term. Students should provide typed comments and examples of how they are meeting the objectives of the course. Faculty will review this with students at midterm and end of term.

Professionalism (10%)

Professionalism is expected in the clinical setting such as arriving on time on expected days with white lab coat and FAU name badge. Students are expected to comply with clinical policies and procedures and to submit paperwork on time and attend all the clinical conferences. Communication skills with faculty and preceptors and proper and timely documentation in E-Logs is also considered in evaluation of professionalism. Students should be dressed in business casual attire for all clinical rotation. **NO JEANS, SNEAKER OR T-SHIRT.**

Reflective Journal (20%)

Each student is required to keep a clinical journal during this semester. This journal will be a reflection of the clinical experience each week. Please remember not to include any identifying

information regarding any specific patient. These weekly journals should be posted on the lab canvas site.

About Reflection: The purpose of the reflective journal is to help students reflect on their learning experiences in clinical, with specific application of nursing situations, current evidence, personal reflection, insight and clinical hour tracking. Reflection is a valuable tool for learning and retaining new information. When we reflect on new information, we consider its practical implications and think critically about how we will use the information personally and professionally. This is an informal journal to help your faculty know what is going on at your clinical site. Journal entries will be graded (20 % of grade) based on completeness, accuracy of writing, and depth of personal reflection.

Please use proper grammar and be very brief. It is not necessary to have a title page or references. Each journal entry must contain the following 2 elements:

1. **Tracking of weekly and total clinical hours for the course.**
2. Briefly discuss in one short paragraph a conflict or something that bothered you or simply something important that you learned from a clinical situation. If you encountered a challenging nursing situation, try to describe it from a lens of "caring" or "from the perspective of caring." What did you learn from the situation and how did you grow as a result of the situation?

ALL CLINICAL JOURNALS MUST BE COMPLETED BY 11:59 PM on SUNDAY. There are 10 postings required. See the schedule for dates.

SOAP NOTES (20%)

Each student must submit (2) SOAP notes during the course. Each one is graded for 10 points. These must be submitted to the lab canvas assignment tab. Clinical faculty may request that the SOAP be written on the patient seen during the clinical site visit and be written at the time of the site visit. Clinical faculty may also require a clinical presentation rather than a SOAP note. Faculty may require rewriting of SOAP notes or additional notes to be written. It is expected that the quality of the written SOAP note will progress over the semester.

Each SOAP note should be of an interesting or atypical situation, clear, concise, complete and should be posted on the lab canvas site. A rubric is provided on the canvas site for grading.

Content of SOAP note:

1).	Date of visit
2).	Biographical Data
	a Patient's initial (no names please)
	b. gender, race, age
	c. marital status
	d. insurance
	e. informant and reliability
3).	Subjective Data
	a. Chief Complaint ("cc")

	b. History of Present Illness (HPI) analysis of symptoms, pertinent positives and negatives
	c. Past Medical History (PMH)
	d. Family History (FH)
	e. Social History (SH)
	f. Review of Systems (ROS) This should be a limited or “red flag” ROS with crucial information regarding each system
4).	Objective Data
	a. vital signs BMI
	b. physical findings
	c. confirmed laboratory findings
5).	Assessment (diagnosis, ICD-10) Please read and follow the format for documenting a confirmed and an unconfirmed diagnosis or symptom from the article posted on the Canvas site: Structure and Synchronicity for Better Charting. For chronic problems such as HTN, DM, and asthma, include the 6 elements suggested. When a problem is unconfirmed, document the suspected diagnosis, rationale, evaluation to confirm, and management. List less likely diagnoses and rationale for ruling out and disposition. The assessment should reflect your medical decision making. Dr. Palma posted a video to help student understand the element needed to include in the assessment.
6).	Plan (include the following)
	a. pharmacologic
	b. non-pharmacologic
	c. education/teaching
	d. diagnostic
	e. anticipatory guidance/ counseling
	f. return to clinic (RTC) date
	g. level of visit – CPT code (see handout posted on canvas)
7).	On occasion, your approach to a problem may be different from the one suggested by your preceptor. Be sure to include any comments regarding this.
8).	Cite references used in developing this SOAP. Include at least 2 professional journal references and or guidelines as well as course textbooks. The SOAP should be no more than 2 pages excluding references. Single spacing is appropriate for the body of the note. Use Times New Roman font size 12 in MS Word. If the SOAP is written “on site” it is only necessary to note the general sources used for the plan.

The assessment and plan should be addressed together for each problem:

Example of confirmed diagnoses. See article for example of unconfirmed diagnoses.

1. **HTN (poorly controlled) ICD-10 (I16.0)** Home BP monitoring consistently 150/90.
Goal is 130/80. In clinic 158/90.
 - a. Start HCTZ 12.5 mg every AM, advised of side effects
 - b. Therapeutic lifestyle changes-discussed DASH
 - c. EKG, CMP and lipids
2. **Diabetes (well controlled) ICD10 (E11)** Last A1c 1/9/2023 6.9%
 - a. Continue present medications/see med list

Follow up with diabetes educator

1. Health promotion/anticipatory guidance

- a. PAP/mammogram/BSE
- b. Yearly influenza vaccine
- c. Include other recommendations appropriate for condition, age and gender

<http://epss.ahrq.gov/PDA/index.jsp> RTC in 2 weeks

Level of Visit 99213

The second note can be the Nursing Situation

NURSING SITUATION/CASE PRESENTATION (10% of total grade if faculty chooses)

The nursing situation/case presentation provides the student the opportunity to communicate and present a nursing situation from practice. In addition, student colleagues are able to learn collaborative practice. You should choose a nursing situation that has an interesting "take home message". You are required to include 5 references and they should come from recent journal articles.

CLINICAL CONFERENCES (required-Zoom)

Clinical conferences (4) will be held during the semester. Attendance is mandatory. See the course schedule for the dates. The first clinical conference takes place during the first week of class. Faculty will provide dates. Clinical conferences will be set up using ZOOM during the semester. The last conference is usually held on a one-to-one basis with each student to discuss overall course work.

BIBLIOGRAPHY:

COURSE SPECIFIC LITERATURE:

Essential Literature on Caring

Boykin, A. & Schoenhofer, S. (2001). *Nursing as caring: A model for transforming practice*. Mississauga, Ontario: Jones & Bartlett.

Buber, M. (1970). *I and thou*. New York: Scribner

- Davidson, A., Ray, M. & Turkel, M. (Eds.). (2011). *Nursing, caring, and complexity science*. New York: Springer Publishing Company
- Johns, C. (2013). *Becoming a reflective practitioner* (4th ed). Hoboken, N.J.: Wiley Blackwell. ISBN: 978-0470674260
- Leininger, M. & McFarlane, M.R. (2002). *Transcultural nursing: Concepts, theories, research, and practice*. New York: McGraw-Hill, Medical Publishing Division.
- Locsin, R.C. (2005). *Technological competency as caring in nursing: A model for practice*. Indianapolis, Indiana, USA: Sigma Theta Tau International Honor Society of Nursing.
- Mayeroff, M. (1971). *On caring*. New York: HarperCollins.
- Paterson, J. & Zderad, L.T. (1988). *Humanistic nursing*. New York: National League for Nursing.
- Roach, M.S. (1984). *Caring: The human mode of being: Implications for nursing*. Toronto: Faculty of Nursing, University of Toronto.
- Roach, M.S. (1987). *The human act of caring: A blueprint for the health professions*. Ottawa: Canadian Hospital Association.
- Smith, M.C., Turkel, M.C., & Wolf, Z.R. (2012). *Caring in nursing classics: An essential resource*. New York: Springer Publishing Company.
- Watson, J. (2009). *Assessing and measuring caring in nursing and health sciences*. New York: Springer Publishing Company.
- Watson, J. (2008). *The philosophy and science of caring*. Revised edition. Boulder: University Press of Colorado.

ESSENTIAL LITERATURE ON CARING SCIENCE (Revised 2017)

- Barry, C. D., Gordon, S. C. & King, B. M. (2015). *Nursing Case Studies in Caring: Across the Practice Spectrum*. Springer. ISBN: 978-0-8261-7178-8
- Boykin, A. & Schoenhofer, S. (2001). *Nursing as caring: A model for transforming practice*. Jones & Bartlett.
- Boykin, A. & Schoenhofer, S. & Valentine, K. (2014). *Health care system transformation for nursing and health care leaders: Implementing a culture of caring*. Springer.
- Buber, M. (1970). *I and thou*. Scribner.
- Davidson, A., Ray, M. & Turkel, M. (Eds.). (2011). *Nursing, caring, and complexity science*. Springer.

- Duffy, J.R. (2013). *Quality caring in nursing and health systems: Implications for clinicians, educators, and leaders*. Springer.
- Locsin, R.C (2016). *Technological competency as caring in nursing: A model for practice (2nd ed.)*. Silliman University Press.
- Mayeroff, M. (1971). *On caring*. HarperCollins.
- McFarland, M.R. & Wehbe-Alamah, H. (2017). *Leininger's Culture Care diversity and universality: A worldwide theory of nursing (3rd Ed.)*. Jones & Bartlett.
- Paterson, J. & Zderad, L.T. (1988). *Humanistic nursing*. National League for Nursing.
- Ray, M.A. (2016). *Transcultural caring dynamics in nursing and health care (2nd ed.)*. FA Davis.
- Roach, M.S. (1987). *The human act of caring: A blueprint for the health professions*. Canadian Hospital Association.
- Rosa, W., Horton-Deutsch, S, & Watson, J. (2019). *A handbook for caring science: Expanding the paradigm*. Springer.
- Smith, M.C., Turkel, M.C., & Wolf, Z.R. (2012). *Caring in nursing classics: An essential resource*. Springer.
- Watson, J. (2009). *Assessing and measuring caring in nursing and health sciences*. Springer.
- Watson, J. (2018). *Unitary caring science philosophy and praxis of nursing*. University Press of Colorado.

Approved by CON Faculty Assembly, 9/25/2017; Revised Committee on Programs 10/ 8/2018; Presented for Action to CON Faculty Assembly 10/22/2018, Approved CON Faculty Assembly 10/22/18

COURSE POLICIES & GUIDELINES

1. Student Credentials:

Student credentials must be up to date in order to practice in the clinical setting. The college of nursing uses Complio to track all background checks and health requirements. **Students must provide a copy of the clinical requirements summary for clinical faculty at the beginning of the semester.** The student cannot begin the clinical rotation until this is completed. Please contact Colleen Alcantara-Slocombe by e-mail Slocombe@fau.edu 561-297-6261 or by phone if you need assistance or Janice Miller by email janicemiller@health.fau.edu.

Beginning of Term Checklist for Students

1. Complio summary sheet with all areas “approved”
2. Contact information for all clinical sites: Name of agency, preceptor, address, and phone
3. Submit electronic copies of clinical site information signed (the Preceptor Credentialing/agreement form is now uploaded with the Clinical Arrangements Form).
4. Preceptor Agreement Form to be signed by preceptor on the first day of clinical (form is provided in the course under clinical forms. Clinical Faculty must provide their contact information on this sheet.)
5. The form must have the Preceptor’s e-mail for Beginning and End of Term Letters

1. Assignment to a Clinical Site:

The NP coordinator and the clinical coordinator will arrange for students to be placed in an appropriate clinical practice site. Each student will receive a verification form for their assigned site/preceptor. The student must follow the instructions provided (example: text preceptor for schedule, set-up interview with preceptor) and sign and return the form within 72 hours. Failure to return the form in a timely manner or follow through with instructions provided may result in the loss of placement. Students must go to the assigned clinical site. Students that change sites with faculty and the NP and coordinator permission will be administratively dropped from the course.

Primary care 1 clinical experience should be in a primary care setting. **Urgent care facilities, emergency rooms, retail clinics, and hospital rounding may not meet curricular objectives for primary care and these experiences may not be permitted during this semester.** Plan on spending 2 eight-hour days in the clinical setting for a total of 180 hours in the Spring and 1 to 2 days for a total of 120 hours in the summer. The practicum experience must extend over the entire semester. Students may not complete all of the clinical hours (minimum 180 hours spring, minimum 120 hours summer) before the midterm as course objectives may not be met within this timeframe.

It is recommended that FNP students will need 50-100 hours of pediatrics (ages 0-21) and 100 hours in women’s health (WH) during the MSN program. Most of these hours should be completed during Primary 2 in the fall after the didactic is covered. There are no clinical hours during the summer when the pediatric and women’s health content is covered.

Make sure you keep your Summary of Clinical Hours from each semester to document the peds and WH hours

1. Preceptor Credentials:

Preceptor must board/nationally certified in the area of practice and have a minimum of 1-year experience. The preceptor must be a nurse practitioner or physician (MD/DO). **Physician Assistants may not precept NP students.** The clinical hours will be with nurse practitioners and physicians (MD/DO). For students who have more than one preceptor, or clinical site, an

electronic clinical arrangement form for EACH clinical site must be submitted. If the preceptor is new to the site, the name can be added at this time.

3. **Expectations of the Preceptor and Clinical Experience:**

Preceptors are advised and aware that students must have the opportunity to actually carry out ("hands-on") complete and episodic histories and physical examinations, present the patients to the preceptor, discuss the options for diagnostic tests and management including follow-up of the patients. Students should be involved in the decision-making process to some degree and have opportunities for in-depth discussions about patients with the preceptor to gain insights into appropriate management. In addition, opportunities for recording the patient information, understanding certain financial influences in the practice site, etc. are important. Students are responsible for supplying a copy of the syllabus and evaluation forms for the preceptor.

If there are any issues at the clinical site, students must notify their faculty. The clinical faculty will then discuss the issues with the NP coordinator and alternative placement will be found if warranted. A change in preceptor/sites cannot be made without the approval of the clinical faculty and NP coordinator.

Preceptors will receive a Preceptor Packet explaining their role with students.

Students are responsible for having their preceptor fill out and sign the Preceptor Agreement Form that must be returned to didactic faculty the second week of class. This form is now uploaded onto the data center when the student fills out the electronic Clinical Arrangements form. Preceptors may apply for a certificate of participation after 300 hours of precepting. This will allow waiver of tuition for six credits at any state college or university. For the Preceptor certificate of participation information and forms, please click on the, "**For Preceptors**" under our "**Go To**" menu on the left side of the CON website.

1. **Professionalism:**

Professionalism is expected in the clinical setting such as arriving on time on expected days with white lab coat and FAU name badge. Inquire about dress code and need for closed-toe shoes. Please don't miss clinical when a test is scheduled in the didactic class. Preceptors expect you to be there are the specified days. Students are not allowed to be in the clinical setting when the University is closed.

Professional Statement:

<https://nursing.fau.edu/academics/student-resources/graduate/policies-regulations/professional-statement.php>

Due to SIP regulations, students are not allowed to be in the clinical setting when the University is closed.

2. **Documentation of Clinical Hours:**

Students will be required to use NP Student Clinical Experience Documentation and Tracking System provided by eLogs. The web site is www.elogs.org and instructions are provided in the course. There is no charge to the student. Make sure in the supplemental notes that you include the specific drugs and dosages. Mobile applications are available for a charge of \$75. All clinical hours are to be verified by the preceptor. **Falsified clinical hours are considered plagiarism.** It is difficult to monitor the time spent with each patient. For this reason, divide the hours spent by the number of patients in minutes and record this as you time per patient. For example, if you were on site for 10 hours or (600 minutes) and saw 9 patients, you would log in 66.6 minutes for each patient regardless of how much time was spend with each patient. If you have lunch, don't count that time unless you are eating while reviewing charts which is the norm.

3. **Documentation in the Clinical Setting:**

Documentation in the medical record is sometimes restricted in some clinical sites. Students are required to use the "Office Note" form provided if they are not allowed to document. It is recommended that even if you are recording in the medical record, that you use this form for the assessment and plan to present your patient to your preceptor. In addition, this form has all of the information needed for eLogs. Students should be assertive and commit to a diagnosis and plan prior to presenting to the preceptor. The Office Note form is post in the course under course forms.

4. **FAU Faculty Responsibility:**

Faculty will make visits to your clinical sites. These clinical visits need to be arranged early in the semester. During a clinical site visit, the faculty will observe and discuss your clinical assessments and management plans for one or more clients in the clinic and briefly speak to your preceptor. It is the student's responsibility to advise the clinical preceptor of the date and purpose of these visits.

Please review the "Site Visit Evaluation" form used to assess student performance located in the course under clinical forms.

Please note that: If a mutual time cannot be found for a clinical site visit, the student may have to go to the faculty's practice site.

3. **Evaluations:**

Both preceptor evaluations and student self-evaluations must be completed at midterm and at the end of the term. The evaluation forms are posted in the course under clinical forms. On your midterm self-evaluation, list your goals or plans to increase your knowledge and management skills by the completion of the course. **Keep the original and submit a copy** of the midterm evaluations (preceptor and self). **Save the original so that it may be used for your final course evaluations.**

It is important to note, that you will not lose points for self or preceptor evaluations that are below “excellent.” It is rare that a student is excellent in every category. Self-evaluations provide an opportunity for self-reflection and planning. On completion of the course, you must complete and submit an evaluation of the preceptor and clinical site on e-value/eLogs. Print the form prior to submitting it to e-value/eLogs.

End of Term Checklist for Students

1. Summary of Clinical Hours (must be signed by clinical faculty)
2. Preceptor Verification of Student’s Clinical Hours-**Must be signed by preceptor**
3. Student Self Evaluation (midterm and final evaluation)
4. Preceptor Evaluation of Student (midterm and final evaluation)
5. Student Evaluation of Site/Preceptor on e-value/eLogs (provide copy)
6. Print the form BEFORE submitting it in e-Logs Final
7. Clinical Report from e/value/eLogs (Nurse Practitioner Clinical Portfolio) #20

COLLEGE OF NURSING POLICIES

The faculty reserves the right to make changes in course content and requirements.

Policies below may be found in:

- a). The Christine E. Lynn College of Nursing Graduate Handbook located at:
<https://nursing.fau.edu/academics/student-resources/graduate/index.php>
- b). Florida Atlantic University’s Academic Policies and Regulations
<http://www.fau.edu/academic/registrar/FAUcatalog/academics.php> and
<http://www.fau.edu/regulations>

CODE OF ACADEMIC INTEGRITY:

Students at Florida Atlantic University are expected to maintain the highest ethical standards. Academic dishonesty is considered a serious breach of these ethical standards, because it interferes with the university mission to provide a high quality education in which no student enjoys an unfair advantage over any other. Academic dishonesty is also destructive of the university community, which is grounded in a system of mutual trust and places high value on personal integrity and individual responsibility. Harsh penalties are associated with academic dishonesty. For more information, see University Regulation 4.001. If your college has particular policies relating to cheating and plagiarism, state so here or provide a link to the full policy—but be sure the college policy does not conflict with the University Regulation. For more information, see: <https://www.fau.edu/regulations/documents/chapter4/reg4-001-6-7-22.pdf>

CON Academic Integrity: <http://nursing.fau.edu/academics/student-resources/graduate/policiesregulations/academic-integrity-policy.php>

The College of Nursing regards adherence to the Code of Academic Integrity as a professional competency and an expectation of all students. **ANY** act of dishonesty that violates the code of academic integrity and misrepresents your efforts or ability is grounds for immediate failure of the course.

DISABILITY STATEMENT:

In compliance with the Americans with Disabilities Act Amendments Act (ADAAA), students who require reasonable accommodations due to a disability to properly execute coursework must register with Student Accessibility Services (SAS) and follow all SAS procedures. SAS has offices across three of FAU's campuses – Boca Raton, Davie and Jupiter – however disability services are available for students on all campuses. For more information, please visit the SAS website at <http://www.fau.edu/sas/>

To apply for SAS accommodations: <http://www.fau.edu/sas/>

COUNSELING AND PSYCHOLOGICAL SERVICES (CAPS) CENTER

Life as a university student can be challenging physically, mentally and emotionally. Students who find stress negatively affecting their ability to achieve academic or personal goals may wish to consider utilizing FAU's Counseling and Psychological Services (CAPS) Center. CAPS provides FAU students a range of services – individual counseling, support meetings, and psychiatric services, to name a few – offered to help improve and maintain emotional well-being. For more information, go to <http://www.fau.edu/counseling/>

INCOMPLETE POLICY:

The Incomplete Grade Policy is enforced. A student who registers for a course but fails to complete the course requirements, without dropping the course, will normally receive a grade of "F" from the course instructor. A student who is passing a course but has not completed all the required work because of exceptional circumstances may, with the approval of the instructor, temporarily receive a grade of "I" (incomplete). This must be changed to a grade other than "I" within a specified time frame, not to exceed one calendar year from the end of the semester during which the course was taken.

ATTENDANCE POLICY:

Students are expected to attend all of their scheduled University classes and to satisfy all academic objectives as outlined by the instructor. The effect of absences upon grades is determined by the instructor, and the University reserves the right to deal at any time with individual cases of non-attendance. Students are responsible for arranging to make up work missed because of legitimate class absence, such as illness, family emergencies, military obligation, court-imposed legal obligations or participation in University approved activities. Examples of University-approved reasons for absences include participating on an athletic or scholastic team, musical and theatrical performances and debate activities. It is the student's responsibility to give the instructor notice prior to any anticipated absences and within a reasonable amount of time after an unanticipated absence, ordinarily by the next scheduled class meeting. Instructors must allow each student who is absent for a University-approved reason the

opportunity to make up work missed without any reduction in the student's final course grade as a direct result of such absence.

POLICY ON THE RECORDING OF LECTURES (OPTIONAL)

Because of a new Florida Statute in 2021, the following model language is suggested for inclusion in course syllabi, at the discretion of individual faculty:

Students enrolled in this course may record video or audio of class lectures for their own personal educational use. A class lecture is defined as a formal or methodical oral presentation as part of a university course intended to present information or teach students about a particular subject. Recording class activities other than class lectures, including but not limited to student presentations (whether individually or as part of a group), class discussion (except when incidental to and incorporated within a class lecture), labs, clinical presentations such as patient history, academic exercises involving student participation, test or examination administrations, field trips, and private conversations between students in the class or between a student and the lecturer, is prohibited. Recordings may not be used as a substitute for class participation or class attendance and may not be published or shared without the written consent of the faculty member. Failure to adhere to these requirements may constitute a violation of the University's Student Code of Conduct and/or the Code of Academic Integrity.

RELIGIOUS ACCOMMODATION:

In accordance with rules of the Florida Board of Education and Florida law, students have the right to reasonable accommodations from the University in order to observe religious practices and beliefs with regard to admissions, registration, class attendance, and the scheduling of examinations and work assignments. Students who wish to be excused from coursework, class activities, or examinations must notify the instructor in advance of their intention to participate in religious observation and request an excused absence. The instructor will provide a reasonable opportunity to make up such excused absences. Any student who feels aggrieved regarding religious accommodations may present a grievance to the director of Equal Opportunity Programs. Any such grievances will follow Florida Atlantic University's established grievance procedure regarding alleged discrimination. For more information, see: <https://www.fau.edu/provost/resources/files/religiousaccommodations-students-and-faculty-8-21-15.pdf>

CON Religious Accommodation: <http://www.fau.edu/sas/New.php>

USE OF STUDENT COURSE MATERIAL

The Christine E. Lynn College of Nursing may use students' course-related materials for legitimate institutional purposes, such as accreditation, university review process, or state board of nursing review process, etc. In such cases, materials will be used within the college and university.

FACE COVERINGS and PPE in Laboratory

Persons are required to wear a face mask and a face shield over the face mask when in the laboratory areas, maintain social distancing of 6 feet when possible, wash hands and use hand sanitizer.

COURSE SCHEDULE

The course schedule will vary based on the Spring or summer semester.

DATE	CLINICAL CONFERENCES & ASSIGNMENTS	SOAP NOTES	JOURNALS
	# 1 Clinical Conference Meet with Clinical Faculty STUDENTS MUST BRING: <ol style="list-style-type: none"> 1. Clinical site information with preceptor's email 2. Complio Background Report with health requirements all areas approved. 		
			Journal # 1 Due by 12 midnight e-value/E-Logs documentation of clinical encounters must be submitted weekly
			Journal # 2 Due by 12 midnight

		SOAP #1	SOAP # 1 Due by 12 midnight
			Journal # 3 Due by 12 midnight

	# 2 Clinical Conference Prior to or following lecture. Mid Term Evaluations are due: (Student Self Evaluation and Preceptor Evaluation of Student) This conference may be done at the time of the site visit if appropriate		Times to be announced by each clinical faculty
			Journal # 4 Due by 12 midnight
			Journal # 5 Due by 12 midnight
		SOAP #2	SOAP #2 Due by 12 midnight Journal # 6 Due by 12 midnight
			Journal # 7 Due by 12 midnight
			Journal # 8 Due by 12 midnight
			Journal # 9 Due by 12 midnight
			Journal # 10 Due by 12 midnight
	# 3 Clinical Conference Last day to hand in clinical paperwork		Sign up to meet individually with clinical faculty (times TBA)

Due to SIP regulations, students are not allowed to be in the clinical setting when the University is closed.

PROFESSIONAL STATEMENT

<http://nursing.fau.edu/academics/student-resources/undergraduate/policies-regulations/professional-statement.php>

When students of nursing begin their course of study, they enter into an implied professional agreement-agreeing to abide by the American Nurses Association (ANA) Code of Nursing Ethics and to conduct themselves in all aspects of their lives in a manner becoming a professional nurse. The College of Nursing faculty holds a professional ethic of caring and healing, recognizing that each person's environment includes everything that surrounds an individual. Similarly, the College creates an environment that preserves the wholeness and dignity of self and others. The faculty requires self and socially responsible behavior and will not accept actions that can be perceived as hostile, threatening or unsafe to others. It is the College's expectation that students promote a positive public image of nursing. It is the College's goal, as a professional college, to build an expanding community of nursing scholars and leaders within the context of its' caring-based philosophy. Safety of the person being nursed and accountability for individual actions are priorities and/or critical components/elements of a professional nursing education. Students who do not abide by this policy will be subject to appropriate academic sanctions which may include disciplinary action, dismissal from the College of Nursing, and/or suspension or expulsion from the University.

Approved in Faculty Assembly 11/28/2016



CHRISTINE E. LYNN COLLEGE OF NURSING

STATEMENT OF PHILOSOPHY

Nursing is a discipline of knowledge and professional practice grounded in caring. Nursing makes a unique contribution to society by nurturing the wholeness of persons and environment in caring. Caring in nursing is an intentional mutual human process in which the nurse artistically responds with authentic presence to calls from persons to enhance well-being. Nursing occurs in nursing situations: co-created lived experiences in which the caring between nurses and persons enhance well-being. Nursing is both science and art. Nursing science is the evolving body of distinctive nursing knowledge developed through systematic inquiry and research. The art of nursing is the creative use of nursing knowledge in practice. Knowledge development and practice in nursing require the complex integration of multiple patterns of knowing. Nurses collaborate and lead interprofessional research and practice to support the health and well-being of persons inextricably connected within a diverse global society.

Persons as participant in the co-created nursing situation, refers to individual, families or communities. Person is unique and irreducible, dynamically interconnected with others and the environment in caring relationships. The nature of being human is to be caring. Humans choose values that give meaning to living and enhance well-being. Well-being is creating and living the meaning of life. Persons are nurtured in their wholeness and well-being through caring relationships.

Beliefs about learning and environments that foster learning are grounded in our view of person, the nature of nursing and nursing knowledge and the mission of the University. Learning involves the lifelong creation of understanding through the integration of knowledge within a context of value and meaning. A supportive environment for learning is a caring environment. A caring environment is one in which all aspects of the person are respected, nurtured and celebrated. The learning environment supports faculty-student relationships that honor and value the contributions of all and the shared learning and growth.

The above fundamental beliefs concerning Nursing, Person and Learning express our values and guides the actions of Faculty as they pursue the missions of teaching, research/scholarship and service shared by the Christine E. Lynn College of Nursing and Florida Atlantic University.

'revised April, 2012.'