



Olivet Nazarene University

School of Nursing

Traditional BSN Student Handbook

Spring 2026

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**Olivet Nazarene University
School of Nursing
Handbook Agreement**

I, the undersigned, agree to the use of my course work and/or exam scores for the purpose of evaluation during my academic tenure at Olivet Nazarene University. I understand the information will be aggregated data solely for the purpose of enhancing the overall quality of the nursing program.

I understand I am responsible for monitoring my ONU email, as this is how the Nursing Faculty and Administration will be communicating with me. I also understand that nothing will be acknowledged or accepted by ONU unless it is through the Olivet email. I will only use my Olivet email for all Elsevier resources.

In addition, I have reviewed the *current Olivet Nazarene University BSN Nursing Student Handbook*. I accept responsibility for knowledge of the handbook contents and the standards and academic policies found herein. This receipt needs to be submitted to the ABSN program director - Oak Brook, Olivet Nazarene University and will be filed with your student records. I give the university permission to release my social security number and birth date to university healthcare partners for clinical placement and Continental Testing Company upon graduation to take the NCLEX.

Print Name _____

Signature _____

Date _____ (month/day/year) Semester _____

Please sign below to indicate your permission and use of photography taken at the University.

PHOTOGRAPHY PERMISSION AND USE

_____ grants Olivet Nazarene University permission to use photographs of me in publications produced by the organization, web sites owned by the organization, or public relations activities conducted by the organization for the purpose of promoting Olivet Nazarene University.

Signature _____

Permission given this _____ day of _____, _____.

PERMISSION FORM*

I _____ give permission to my nursing advisor(s), nursing professors, clinical instructor(s), program director, and Associate Dean of nursing at ONU, to discuss my:

_____ Assignment grades

_____ Clinical Performance

_____ Test grades

_____ Standardized Test Scores

_____ Course grades

_____ Other academic measures

_____ Grade Point Average

Those individuals who may contact members of the ONU School of Nursing Faculty include:

Mother (name) _____

Father (name) _____

Guardian (name) _____

Spouse (name) _____

Other (name) _____ Relationship _____

I understand that the individual(s) listed within this release will need to supply my student ID number to receive the information listed above. I also understand that I may revoke this permission by submitting a written request to the BSN program director.

I understand that no information will be conveyed by email or US Postal Service. I request to be included in any phone conversation or face-to-face discussions regarding my academic status. [OBJ]

_____ No _____ Yes (I may be reached by phone at: _____)

Student Signature

Student ID #

Date

* The permission form only needs to be completed once for the program and will remain in effect until revoked by the student.

History of the Nursing Program

As early as 1959, the possibility of initiating a baccalaureate nursing program was considered by Olivet Nazarene (then) College administrative members who did not find it feasible to initiate a program at that time. However, recognition of the need for nurses and the discontinuance of St. Mary's hospital diploma program in Kankakee prompted reconsideration early in 1966. At the May 1966 meeting of the Olivet Board of Trustees, approval was given for the development of a baccalaureate degree program in nursing.

Assistance in planning the program was given by the Department Chair at Northern Illinois University and a nurse coordinator of the Illinois Department of Registration and Education. By September of 1966, the first chair, Faye Riley was employed to develop and lead the newly organized Department of Nursing. The first students to enroll in the nursing program started in the fall of 1967. The Dedication program on October 1968 indicates there were 34 students continuing in the course.

Classes met in various buildings of the campus. The first Department of Nursing office was located in Reed Hall of Science. Also, the lecture hall of Reed was used for classes requiring demonstrations. Rooms of Wellman Hall as well as in a college-owned building on Marseilles Street were used for teaching other classes. Later, the office of the Department of Nursing was located in Burke Hall. A generous gift from Mr. and Mrs. Gerett M. Wisner and a federal grant made it possible to construct a free-standing building dedicated for the nursing program.

Groundbreaking for the Wisner Hall for Nursing Education was in February 1970 and was first used in 1971. Wisner Hall provided four classrooms, a student lounge, a resource center with 24 carrels (each equipped with tape and viewing machines), the Evelyn Witthoff - Geraldine Chappell auditorium (respectively named for a Physician – RN missionary team to India) capable of seating 150 students, office space for 20 faculty members, and a faculty lounge. Originally the Audio-Visual Department of the college occupied a large area in Wisner Hall. That space was made available to the nursing department when the audio-visual equipment was moved to Benner Library in 1976. Other departments and offices have shared the building space through the years as well.

The building remains a beautiful testament to the faithfulness and generosity of the Wisner's. Wisner has been updated with a Virtual Hospital, high fidelity simulation manikins, 50 computer stations for study, standardized testing, and interactive learning.

The Department of Nursing was designated a Division of Nursing in the spring of 1977 by the college administration. The Division of Nursing received full approval from the National League for Nursing in 1979, lasting through June 2002. The nursing program made application to the Commission for Collegiate Nursing Education (CCNE) and received preliminary approval in 1997, and full approval in 2002. In 1990, the Division of Nursing established a non-traditional track of the program of nursing for registered nurses with an associate degree or a three-year diploma desiring the Bachelor of Science Degree in Nursing (RN-BSN). The first class began in January 1991.

Kappa Sigma Chapter, Sigma Theta Tau, International Nursing Honor Society was established here on May 12, 1984, through the hard work and dedication of the first Chapter President, Sue Davison, and the Executive Board Members, VP-Margaret Frogge, Treasurer-Marvina Eckert, Secretary-Brenda Johnson, and Faculty Advisors-Leann Eaton and Amy Golyshko. The Nursing Students in Action joined the National Student Nurses Association in 2008.

In October 2000, a Master's in Nursing Program was established to prepare nurses for the advanced practice role; the first cohort of MSN students graduated in May 2003. In May 2005, the MSN program's Continuous Improvement Progress Report was approved. In November 2006, the MSN program was reviewed for accreditation by CCNE and accreditation was awarded by AACN. In 2007, an expanded MSN offering was launched to include tracks in Nursing Leadership/Manager, Nursing Education, and Emergency Preparedness-Disaster Response. Due to low enrollment in the Emergency Preparedness-Disaster Response Track, it was dissolved and made way for a new track. In June 2011, the Family Nurse Practitioner, and May 2013 the Post-Graduate APRN Certificate tracks were launched. Olivet Nazarene University's nursing programs are fully accredited by the Commission on Collegiate Nursing Education.

With the 2006 restructuring of the University, the Division of Nursing became the Department of Nursing within the School of Professional Studies. However, a new restructuring was announced in May of 2014, and the Department of Nursing became the School of Nursing and Health Sciences, effective July 2014. In July 2015, with a new restructuring the School of Nursing and Health Sciences became a Department of Nursing in the School of Life and Health Sciences.

In October 2012 an accelerated BSN (ABSN) track was started. Coursework is online with on-ground lab and clinical. The first cohort finished in February 2014. The ABSN track is located in Oakbrook. This site provides multiple classrooms, two computer labs, and a fully equipped Virtual Learning Center.

In Summer 2016, a combined BSN-MSN track was created (RN-MSN/FNP). The first cohort started in January 2017. The didactic program is online with practicum hours for each track.

In April 2020, the Post Master's Nursing Education Certificate track (PMC-E) was approved and began on January 2021. On July 1, 2020, the Department of Nursing was designated as the School of Nursing under the direction of the Associate Dean, Tiffany Greer, as a part of the College of Professional Studies. In October 2020, the Post-Master's Transformational Leadership (PMC-TL) Certificate track was approved and began in January 2021.



The baccalaureate degree program in nursing at Olivet Nazarene University is accredited by the Commission on Collegiate Nursing Education, (<http://www.ccneaccreditation.org>).

NURSING PROGRAM FOUNDATION

Mission

The mission of the School of Nursing is to provide Christian nursing education designed to prepare each graduate for a life of service to God and humanity. In this endeavor, students integrate faith and learning as they investigate concepts inherent in personal, professional, and spiritual growth through life-long learning and leadership.

Philosophy

The philosophy of the Olivet Nazarene University School of Nursing encompasses spiritual, personal, and professional concepts that include the roles of leader, change agent, life-long learner, and service guided by ethical and moral standards.

Program Goals

1. Transform students personally, professionally, and spiritually to serve God and humanity.
2. Provide education utilizing interprofessional experiences, didactic and online learning, and evidence-based research to prepare students to successfully pass the NCLEX exam and become competent nurses.
3. Foster a stimulating atmosphere that promotes intellectual curiosity to further develop critical thinking through the exploration of cultural, ethical, moral, professional, and spiritual concepts.

Program Outcomes

(Mapped to AACN Essentials)

Graduates are prepared to enter the profession of nursing as contributing members of the discipline to promote, maintain, and restore the health of clients in a variety of settings. The outcomes of the traditional nursing major are to prepare graduates to:

- I. Serve God and humanity in diverse roles and settings with respect and compassion. (E- VII, VIII, IX)
- II. Integrate Christian faith through ethical nursing practice. (E-VIII, IX)
- III. Articulate the value of professional development and evidence-based practice while preparing to be lifelong learner. (E-III, VII)
- IV. Assimilate knowledge, skills, and attitudes from the liberal arts into nursing practice to competently care for diverse populations. (E-I, V, VI, VII, IX)
- V. Demonstrate the development of leadership skills as a professional, accountable, collaborative change agent within a multifaceted healthcare environment. (E-II, VI, IX)
- VI. Utilize clinical judgment to prioritize safe nursing care. (E-VI, VII, IX)
- VII. Communicate effectively through verbal and written modalities, using current and innovative technologies. (E-IV, VI, IX)

Program Outcomes (PO) to Level Outcomes

PO		Level 1	Level 2	Level 3	Level 4
II, VI, VII	A.	Recognize and implement appropriate nursing care, through excellent communication, that protects the client and health care personnel.	Anticipate and demonstrate appropriate nursing care, through excellent communication, that protects the client and health care personnel in diverse populations.	Differentiate and apply appropriate nursing care, through excellent communication, that protects the client and health care personnel in a variety of clinical settings.	Evaluate, intervene, and promote change in appropriate nursing care, through excellent communication, that protects the client and health care personnel in clients with complex needs.
I, II, VI, VII	B.	Recognize and implement basic principles of safety and infection control for self and others.	Anticipate and demonstrate safety and infection control practices for self and diverse populations.	Differentiate and apply principles of safety and infection control for self and others in a variety of clinical settings.	Evaluate, intervene, and promote change regarding principles of safety and infection control for self and others with complex needs.
I, II, IV, VI, VII	C.	Recognize and implement nursing care that prevents and detects health concerns in order to achieve optimal health.	Anticipate and demonstrate nursing care that prevents and detects health concerns across the life span to achieve optimal health in diverse populations.	Differentiate and apply nursing care that prevents and detects health concerns across the life span to achieve optimal health in a variety of clinical settings.	Evaluate, intervene, and promote change in nursing care that prevents and detects health concerns across the life span to achieve optimal health in clients with complex needs.
I, II, V, VI, VII	D.	Recognize and implement holistic care that supports the cultural, emotional, mental, social, and spiritual well-being of clients.	Anticipate and provide holistic care that supports the cultural, emotional, mental, social, and spiritual well-being in diverse populations.	Differentiate and apply holistic care that supports the cultural, emotional, mental, social, and spiritual well-being in a variety of clinical settings.	Evaluate, intervene, and promote change while providing holistic care that supports the cultural, emotional, mental, social, and spiritual well-being of clients with complex needs.
I, II, IV, VI	E.	Recognize and implement care and comfort while assisting with performance of Activities of Daily Living (ADLs).	Anticipate and demonstrate care and comfort while assisting with ADLs in diverse populations.	Differentiate and apply principles of care and comfort while assisting with ADLs in a variety of clinical settings.	Evaluate, intervene, and promote change by providing care and comfort while assisting with ADLs in clients with complex needs.

I, II, IV, V, VI, VII	F.	Determine appropriateness of, safely administer, and accurately evaluate the client response to medications and parenteral therapies.	Determine appropriateness of, safely administer, and accurately evaluate the client response to medications and parenteral therapies in diverse populations.	Determine appropriateness of, safely administer, and accurately evaluate the client response to medications and parenteral therapies in a variety of clinical settings.	Determine appropriateness of, safely administer, and accurately evaluate the client response to medications and parenteral therapies in clients with complex needs.
I, II, IV, V, VI	G.	Recognize and implement ways to reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments, or procedures.	Anticipate and demonstrate ways to reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments, or procedures in diverse populations.	Differentiate and apply ways to reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments, or procedures in a variety of clinical settings.	Evaluate, intervene, and promote change to reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments, or procedures in clients with complex needs.
I, II, IV, V, VI, VII	H.	Recognize and implement ways to manage and provide care for clients with acute or chronic health conditions.	Anticipate and demonstrate ways to manage and provide care for clients with acute, chronic, or life-threatening health conditions in diverse populations.	Differentiate and apply methods to manage and provide care for clients with acute, chronic, or life-threatening health conditions in a variety of clinical settings.	Evaluate, intervene, and promote change to manage and provide care for clients with acute, chronic, or life-threatening health conditions in clients with complex needs.
I, II, III, IV, V, VI, VII	I.	Recognize and implement ways to demonstrate core values and the use of evidence-based practice in the care of clients with acute or chronic physical health conditions.	Anticipate and demonstrate ways to integrate core values and the use of evidence-based practice in the care of clients from diverse populations.	Differentiate and apply methods to integrate core values and the use of evidence-based practice in the care of clients with acute or chronic physical health conditions.	Evaluate, intervene, and promote change to integrate core values and the use of evidence-based practice in the care of clients with complex needs.

OLIVET NAZARENE UNIVERSITY
BSN CORE VALUES

Core Values	Definitions
Collaboration	A collaborative nurse works together interprofessionally within nursing or across disciplines, fostering open communication, mutual respect, and shared decision-making to define and achieve a common purpose.
Competence	A competent nurse combines knowledge, skills, attitudes, experience, and appropriate clinical judgment to perform safe care.
Communication	Exchange of verbal and nonverbal information, ideas, and feelings in an effective, thorough, clear, concise, and timely manner.
Cultural Competence	Cultural competence encompasses awareness and sensitivity with diverse individuals, which include all types of backgrounds, expectations, and experiences. Cultural awareness and sensitivity identify and address unconscious biases through knowledge, skills, and openness to improve health, reduce disparities, and promote health equity.
Ethical Nursing Practice	The principle of ethics describes what is expected in terms of right and/or wrong behavior. Ethical nursing practice utilizes a personal philosophy grounded in the ethical values of the profession and consistent with the beliefs and values of the Christian faith. However, there is a willingness to consider alternate views on ethical issues and personal values from diverse populations.
Evidence-Based Practice	Nursing practice integrates current research and practice guidelines which are critically appraised and scientifically proven for the delivery of quality healthcare and improved outcomes.
Facilitating Change	A change agent identifies and responds to the need for change by using evidence-based practice to motivate, inspire, and promote innovative change within the complex healthcare system.
Leader	A nurse leader is one who understands the complexities of the healthcare system, including the impact of power, politics, policy, and regulatory guidelines on the system. Leaders, through their vision, creativity, and ability can create change and manage transition moving the profession of nursing forward.
Life-long Learning	The life-long learner engages in continuous self-reflection, curiosity and evaluation for personal, professional, and spiritual growth.
Professionalism	Being a professional means, the student demonstrates personal and professional accountability, maintains a professional appearance, is trustworthy, has integrity, takes initiative, and uses problem-solving skills and ethical considerations to guide decisions and actions. A professional treats others with dignity, kindness, respect, and compassion.
Service	Nurses contribute meaningful time and dedication in service to God and mankind to meet the needs of diverse populations.

TRADITIONAL RN - LEARNING OUTCOME EVIDENCE- BENCHMARKS

COURSE	EVIDENCE	MATCHED TO PROGRAM OUTCOMES
NUR 207 Fundamentals of Nursing	Spirituality Paper Care Plan	PO: I, II, VII PO: IV, VI
NUR 335 Community Health & Population Focused Care	Community Project	PO: III, V, VII
NUR 456 Leadership/Trends in Nursing	Ethical Dilemma Paper	PO: I, II, V, VII
NUR 449 Adult Health III	Second/2 nd HESI RN Exit (graded attempt) End of Program (EOP) survey with Learner outcomes Skills list	PO: All
NUR 478 Nursing Capstone	Care Plan	PO: IV, VI

**Olivet Nazarene University
School of Nursing**

Four-Year Plan

FRESHMAN	Credits	Grade	FRESHMAN	Credits	Grade
CHEM 101/103 Intro to Chemistry	4		BIOL 125 Biology <i>Pre-req for BIOL 356 if taken at ONU</i>	3	
BIOL 246 A & P I*	4		BIOL 247 A & P II*	4	
ENGL 109 College Writing I	3		ENGL 210 College Writing II (APA)	3	
<u>THEO 110 Intro to Christianity</u>	3		PSYC 200 Life Span Development	3	
GNST 115 First-Year Seminar	1		<u>HIST 200 Western Civilization</u>	3	
	15			16	
SOPHOMORE	Credits	Grade	SOPHOMORE NURSING LEVEL 0	Credits	Grade
SOCY 120 Sociology	3		NURS 330 Pathophysiology for Nursing <i>Pre-Reg:: BIOL 211, BIOL 246, BIOL 247, CHEM 101/103, Pre/Co-Req: ENGL 210; CHEM 101/103, PSYC 200, SOCY 120, FACS 126, MATH 120, BIOL 356, COMM 105, NURS 202 UG</i>	3	
BIOL 211 Medical Terminology	2		Math 120 Statistics	3	
COMM 105 Fundamentals of Communication	3		FACS 126 Nutrition, Health, & Fitness	3	
<u>ART 100 Fine Arts/MULTI 100 Fine Arts</u> (OR choose from other Humanities courses on back page)	1.5/1.5		<u>LIT 105 Literature Appreciation</u> (OR choose from other Humanities courses on back page)	3	
<u>BLIT 210 Christian Scriptures</u>	3				
BIOL 356 Microbiology* <i>Pre-Req: BIOL 125 and 4 hours of Chemistry (if taken at ONU)</i>	4		NURS 202 Introduction to Professional Nursing <i>Pre-Req: BIOL 211, BIOL 246, BIOL 247, CHEM 101/103, passing score on HESI A2 exam, and a cumulative GPA of ≥2.75. Pre/Co-Req: ENGL 210; PSYC 200, SOCY 120, FACS 126, MATH 120, BIOL 356, COMM 105, and NURS 330 UG</i>	3(2/1)	
	18		45 clinical hours	15	
JUNIOR NURSING LEVEL I	Credits	Grade	JUNIOR NURSING LEVEL II	Credits	Grade
NURS 206 Health Assessment ** <i>Pre-Req: NURS 202/Admit to Nursing program Co-Req: NURS 180, 207, 227, 388</i>	3(2/1)		NURS 349 Adult Health Nursing I <i>Pre-Req: NURS 180, 206, 207, 227, 388 Co-Req: NURS 280, 342, 445, 466</i>	5(3/2)	
NURS 207 Fundamentals of Nursing ** <i>Pre-Req: NURS 202/ Admit to Nursing program Co-Req: NURS 180, 206, 227, 388</i>	5(3/2)		NURS 342 Mental Health Nursing** <i>Pre-Req: NURS 180, 206, 207, 227, 388 Co-Req: NURS 280, 349, 445, 466</i>	4(3/1)	
NURS 227 - Introduction to Pharmacology <i>Pre-Req: NURS 202/ Admit to Nursing program Co-Req: NURS 180, 206, 207, 388</i>	3		NURS 445 Transcultural Nursing <i>Pre-Req: NURS 180, 206, 207, 227, 388 Co-Req: NURS 280, 342, 349, 466</i>	3	
NURS 388 Gerontology and Palliative Care <i>Pre-Req: NURS 202/ Admit to Nursing program Co-Req: NURS 180, 206, 207, 227</i>	2		NURS 466 Nursing Research <i>Pre-Req: NURS 180, 206, 207, 227, 388 Co-Req: NURS 280, 342, 349, 445</i>	3	
NURS 180 Nursing Seminar I <i>Pre-Req: NURS 202/ Admit to Nursing program Co-Req: NURS 206, 207, 227, 388</i>	1		NURS 280 Nursing Seminar II <i>Pre-Req: NURS 180, 206, 207, 227, 388 Co-Req: NURS 342, 349, 445, 466</i>	1	
<u>CMIN 310 Christian Living</u>	3		Elective NURS 470 Self Care <i>Pre-Req: NURS 180, 206, 207, 227, 388 Co-Req: NURS 466</i>	(1)	
135 clinical hours	17		135 clinical hours	16	
			(Grad check recommended)		

SENIOR NURSING LEVEL III	Credits	Grade	SENIOR NURSING LEVEL IV	Credits	Grade
NURS 439 Adult Health Nursing II** <i>Pre-Req: NURS 280, 342, 349, 445, 466</i> <i>Co-Req: NURS 380, 378, 415</i>	5(3/2)		NURS 449 Adult Health Nursing III** <i>Pre-Req: NURS 378, 380, 415, 439</i> <i>Co-Req: NURS 335, 456, 478, 480</i>	3	
NURS 378 Childbearing Family Health Nursing** <i>Pre-Req: NURS 280, 342, 349, 445, 466</i> <i>Co-Req: NURS 380, 415, 439</i>	4(3/1)		NURS 335 Community Health and Population Focused Care** <i>Pre-Req: NURS 378, 380, 415, 439</i> <i>Co-Req: NURS 456, 449, 478, 480</i>	3(2/1)	
NURS 415 Child Health Nursing** <i>Pre-Req: NURS 280, 342, 349, 445, 466</i> <i>Co-Req: NURS 378, 380, 439</i>	4(3/1)		NURS 456 Leadership and Trends in Nursing** <i>Pre-Req: NURS 378, 380, 415, 439</i> <i>Co-Req: NURS 335, 449, 478, 480</i>	3	
NURS 380 Nursing Seminar III <i>Pre-Req: NURS 280, 342, 349, 445, 466</i> <i>Co-Req: NURS 378, 415, 439</i>	1		NURS 478 Nursing Capstone <i>Pre-Req: NURS 378, 380, 415, 439</i> <i>Co-Req: NURS 335, 449, 456, 480</i>	4(0/4)	
			NURS 480 Nursing Seminar IV <i>Pre-Req: NURS 378, 380, 415, 439</i> <i>Co-Req: NURS 335, 449, 456, 478</i>	1	
180 clinical hours	14		225 clinical hours	14	
1 credit hour of clinical = 45 clock hours			Total clinical hours = 720 clock hours		

(*) = Only offered once a year
courses

(**) = Courses with a HESI assessment associated with them

BOLD = support

*** Students must maintain a 2.75 GPA and no less than a grade of C in all support courses (bolded on schedule) to remain in good standing in the nursing program.**

Approved Humanities Courses (may look different for Transfer Students)

Select ONE 3 credit hour class from TWO different areas (Fine Arts, Literature, Philosophy, and Modern Language)

Fine Arts: Art 100/Mult 100

Literature: LIT 105 Literature Appreciation
LIT 242 The Short Story
LIT 244 The Novel
LIT 246 Poetry
LIT 248 Drama
LIT 340 Classical Literature

Philosophy PHIL 201 Introduction to Philosophy

*****This 4-year plan is tentative and we reserve the right to modify it.*****

Four-Year Plan, Fall 2026

FRESHMAN	Credits	Grade	FRESHMAN	Credits	Grade
CHEM 101/103: Intro to Chemistry	4		BIOL 125: Biology <i>Pre-req for BIOL 356 if taken at ONU</i>	3	
BIOL 246: A & P I*	4		BIOL 247: A & P II*	4	
ENGL 109: College Writing I	3		ENGL 210: College Writing II (APA)	3	
THEO 110: Intro to Christianity	3		PSYC 200: Life Span Development	3	
GNST 115: First-Year Seminar	1		HIST 200: Western Civilization	3	
	15			16	
SOPHOMORE	Credits	Grade	SOPHOMORE	Credits	Grade
SOCY 120: Sociology	3		CMIN 310: Christian Living	3	
BIOL 211: Medical Terminology	2		Math 120: Statistics	3	
BIOL 356: Microbiology* <i>Pre-Req: BIOL 125 & 4 hours of Chemistry (if taken at ONU)</i>	4		LIT 105: Literature Appreciation (OR choose from other Humanities courses on back page)	3	
COMM 105: Fundamentals of Communication	3		NURSING LEVEL 0	Credits	Grade
ART 100: Art Appreciation/ MULT 100: Music Appreciation (OR choose from other Humanities courses on back page)	1.5/1.5		NURS 203: Introduction to Nursing Pathophysiology <i>Pre-Req: BIOL 211, BIOL 246, BIOL 247, CHEM 101/103; Pre/Co-Req: ENGL 210; PSYC 200, SOCY 120, MATH 120, BIOL 356, COMM 105; Co-Req: NURS 201</i>	3	
BLIT 210: Christian Scriptures	3		NURS 201: Principles of Nursing (45 clinical hours) <i>Pre-Req: BIOL 211, BIOL 246, BIOL 247, CHEM 101/103, passing score on HESI A2 exam, and a cumulative GPA of ≥2.75. Pre/Co-Req: ENGL 210; PSYC 200, SOCY 120, MATH 120, BIOL 356, COMM 105; Co-Req: NURS 203</i>	4 (3/1)	
	18		Total clinical hours = 45 hours 1 credit hour = 45 clinical or lab hours	16	
JUNIOR NURSING LEVEL I	Credits	Grade	JUNIOR NURSING LEVEL II	Credits	Grade
NURS 220: Health & Wellness Across the Lifespan (45 clinical hours)	7 (6/1)		NURS 250: Alterations of Health Across the Lifespan (135 clinical hours)	7 (4/3)	
NURS 219: Introduction to Pharmacology	1		NURS 249: Pharmacology II: Chronic Conditions Across the Lifespan	1	
NURS 224: Introduction to Self-Care	1		NURS 254: Self-Care for the Nurse and Diverse Populations (Online course)	1	
NURS 221: Introduction to Evidence-Based Practice	1		NURS 251: Scholarship in Nursing Practice	1	
NURS 222: Immersion I: Bridging Theory and Practice (135 lab hours)	5 (2/3)		NURS 252: Immersion II: Bridging Theory and Practice (135 lab hours)	5 (2/3)	
NURS 223: Foundations of Leadership	1		NURS 253: Leadership In Healthcare Environments	1	
Total clinical/lab hours = 180 hours 1 credit hour = 45 clinical or lab hours	16		Total clinical/lab hours = 270 hours 1 credit hour = 45 clinical or lab hours	16	
SENIOR NURSING LEVEL III	Credits	Grade	SENIOR NURSING LEVEL IV	Credits	Grade
			BLOCK I	BLOCK II	
NURS 310: Acute & Complex Health Conditions Across the Lifespan (135 clinical hours)	8 (5/3)		NURS 474: End of life and Specialty Topics in Nursing (45 clinical hours)	4 (3/1)	
NURS 311: Translating Evidence into Practice	1		NURS 471: Population Health (45 clinical hours) (Online - 7 weeks)	4 (3/1)	
NURS 309: Pharmacology III: Acute and Complex Health Conditions Across the Lifespan	1		NURS 478: Nursing Capstone & EBP Project Dissemination (90 clinical hours)	0/2	
NURS 313: Leading Others	1		NURS 473: Practice Ready Leadership	1	
NURS 312: Immersion III: Bridging Theory and Practice (90 lab hours)	4 (2/2)		NURS 472: Immersion IV: Bridging Theory and Practice (90 lab hours)	4 (2/2)	
Total clinical/lab hours = 225 hours 1 credit hour = 45 clinical or lab hours	15		Total clinical/lab hours = 270 hours 1 credit hour = 45 clinical or lab hours	15	
540 hrs total clinical + 495 total lab hours = Total: 1035 hours overall hands-on					

(*) = Only offered once a year (**) = Courses with a HESI assessment associated with them BOLD = support courses * Students must maintain a 2.75 GPA and no less than a grade of C in all support courses (bolded on schedule) to remain in good standing in the nursing program. Approved Humanities Courses (may look different for Transfer Students) **Select ONE 3 credit hour class from TWO different areas** (Fine Arts, Literature, Philosophy, and Modern Language) **Fine Arts:** Art 100/Mult 100; **Literature:** LIT 105: Literature Appreciation, LIT 242: The Short Story, LIT 244: The Novel, LIT 246: Poetry, LIT 248: Drama, LIT 340: Classical Literature; **Philosophy** PHIL 201: Introduction to Philosophy

***This 4-year plan is tentative and we reserve the right to modify it.

BSN ADMISSION, PROGRESSION, AND RETENTION POLICIES

The nursing curriculum builds on a broad liberal arts foundation and is supported by behavioral and life science courses. Nursing students progress from wellness emphasis to life-threatening situations and address individuals, families, and communities as clients. Admission to nursing can be accomplished in either the fall or the spring semester.

ADMISSION TO THE NURSING PROGRAM (BSN)

Students will not be admitted into the nursing program if any of the following courses are taken more than twice at any university: Chemistry, Anatomy and Physiology I and II, Microbiology, Pathophysiology, and Medical Terminology. Students may not retake more than two science courses.

All applicants must first apply to the university. As a freshman or sophomore declaring nursing as your major, you will be considered a pre-nursing student. Students must pass the HESI A2 prior to entering NURS 202. During NURS 202, Introduction to Professional Nursing, you will be given information about the application process for entering the nursing program in the junior year. Students with a 2.75 GPA and completed freshman and sophomore general education courses will be notified of the steps to apply to the nursing program. Applicants are notified in writing of their status at the conclusion of NURS 202 course. *Additional information and evaluative data may be requested by the School of Nursing to more fully evaluate the applicants' credentials.*

Students enrolled in the nursing program may not transfer nursing courses into their transcript. The Admission, Progression, and Retention Policies regarding the failure of nursing courses apply to nursing courses taken in other nursing programs.

Requirements for Admission to the Nursing Major

- A cumulative 2.75 GPA before admission to NURS 202.
- Successful completion of NURS 202 and supporting courses through Level 0.
- Successful completion of the HESI A2 exam.
- Successful completion with a grade of C or higher in all nursing and support courses.
- All required academic prerequisites have been completed.
- Cleared federal criminal background check.
- Negative drug screen.
- Physical/Health Examination Record (no older than a year).
- Hepatitis B vaccine titer or waiver.
- Two prior MMR vaccines or titer showing immunity.
- Two prior Varicella vaccines or titer showing immunity.
- Negative Double Mantoux TB test. If there is verification of a previous positive TB testing, a waiver must be obtained, signed, and submitted to the School of Nursing office.
- Current seasonal influenza immunization.
- Other health requirements per agency request (including Covid-19 requirements).
- CPR certification-American Heart Association (BLS) (Healthcare Provider) CPR only with successful hands-on demonstration.

HESI ADMISSION EXAM POLICY

Passing the HESI A2 entrance exam is required prior to enrolling in Olivet's first nursing course, NUR-202: Introduction to Professional Nursing. ONU will offer this exam several times each semester for your convenience.

The HESI A2 can be taken a total of three times. After the second failed attempt at the HESI A2, we strongly recommend you wait one semester to take it a third time. Different versions of the test will be used for repeated attempts.

To pass the HESI A2 exam, you must meet or exceed the following scores from all four categories on the same test: **Cumulative (Composite) Score – 75%, Math, – 75%, Anatomy & Physiology – 64%, English Language Composite Score (Reading Comprehension, Grammar, & Vocabulary) – 75%.** If you have taken the HESI A2 at another institution within the last 18 months, please send your results to your transfer advisor and the ABSN Nursing team will determine if your results are transferable. Note: Each HESI exam you take has an expiration date of 18 months. HESI scores older than 18 months, passing or not passing, must be retaken.

CRITERIA FOR SELECTION OF TRANSFER STUDENTS

General Policy: “Transfer students are accepted after all qualified Olivet students have been placed. Students wishing to transfer must meet the same criteria as students who began their college work at Olivet” (*Catalog, Olivet Nazarene University*).

To be considered for Sophomore standing as a nursing transfer student, the following are required:

- All lower division support courses at a “C” or above
- *Successful* completion of the HESI A2
- Cumulative GPA of 2.75

If these requirements are met, the decision for admission will be made based on:

- ONU student or graduate from the past
- Cumulative GPA
- Standardized exam results

PROGRESSION REQUIREMENTS

There is an expectation of normal course progression in the nursing program at Olivet. Normal course progression requires passing all nursing courses at each level before progressing to the next level. Prerequisite course requirements are closely adhered to by the nursing program.

Nursing Course Progression Policy:

A student is limited to withdrawing (dropping) or failing a total of 2 courses with a NUR prefix, excluding NURS 202 and NURS 330. A student may not enroll in any nursing course more than two times *including* NURS 202 and NURS 330.

Additionally, a student cannot fail more than one clinical/lab course in the core nursing program, *excluding* NURS 202.

In the event a student passes NURS 207: Fundamentals of Nursing and has a course withdrawal or failure of NURS 206: Health Assessment, the student will re-enroll in the clinical component of NURS 207: Fundamentals of Nursing (NURS 007) concurrently with the repetition of Health Assessment to ensure the optimal retention and application of acquired knowledge and skills. For successful completion of the clinical component of NURS 207 (NURS 007), the student must earn a 77% on all clinical paperwork assigned and meet the successful evaluation criteria in the clinical setting according to the Daily Clinical Evaluation tool.

Students repeating any courses within a level are required to repeat the skills and VLC skills practice hours associated with the corresponding level to maintain skills proficiency. Students must also

concurrently audit the corresponding Nursing Seminar course (NURS 180, 280, 380, or 480). Successful completion of the audited Nursing Seminar course requires the student to fulfill all required assignments, including community service hours. (Effective starting January 2025)

Non-Progression Due to Seminar Course Failure: In the event a student fails a nursing seminar course, the student may be required to retake the failed seminar course in its entirety before advancing to the next semester/level.

To progress to the next level, all students must receive a grade of C or higher in each nursing course and in each of the supporting courses. To enroll in the nursing program, a student must have a 2.75 grade point average (GPA). This GPA of 2.75 must be maintained to progress in the nursing curriculum.

A visual of this policy in action for Levels 1-4:

Clinical Course Failure	Non-Clinical Course Failure	Withdrawal (Excluding Math)
XX		
X	X	X
X	XX	
X		XX
	X	XX
	XX	X
	XXX	
		XXX

Students who withdraw or fail and need to repeat NURS 478: Nursing Capstone, must repeat all capstone hours and also audit NURS 449: Adult Health Nursing III. If a student fails NURS 449: Adult Health Nursing III, the student will be required to repeat the class and half of their required clinical hours for capstone. NURS 449: Adult Health III, although not directly tied to clinical hours, is still considered a clinical course because it is a mandatory co-requisite with NURS 478: Nursing Capstone.

If a student is not compliant with the site's orientation by the assigned due dates, the student will be administratively withdrawn from all level clinical courses in that semester. Two unsatisfactory clinical/lab or simulation days in one course will result in automatic failure of that clinical course and necessitate the repetition of that course to progress in the nursing program. The removal of a student per site request will result in immediate failure of the course. Additionally, review of the site incident may result in dismissal from the nursing program.

Level I-III NURS

Composite GPA 2.75
 Courses passed at 77%
 Final clinical evaluations satisfactory for all criteria
 Exams at an average of 77% for all nursing courses

Level IV - NURS

Composite GPA 2.75
Courses passed at 77%
Final clinical evaluations satisfactory for all criteria
HESI Exit Exam B, Exam score of 900 or above
Exams at an average of 77% for all nursing courses
HESI Review Course

Research, Transcultural, Leadership, and Gerontology courses do not need a 77% average on exams, but students must pass the course with a 77%.

Math Policy

Students may be administratively withdrawn per the math failure policy prior to the start of clinical. Students are limited to an administrative withdrawal for math failure policy twice in the program. Upon a third math policy failure, the student will be withdrawn from the program without the opportunity to reapply. See the Math Policy below for further information.

RETURN TO THE NURSING MAJOR

Students in good standing seeking to return to the nursing program after an absence of more than two semesters must submit a letter to the BSN Program Director documenting the reason for desiring a return to the program. The case will be reviewed by the Associate Dean and Pre-Licensure Program Director. The letter should be received no less than 30 days prior to the start of the targeted semester.

APPEALS/GRIEVANCE PROCEDURE

The university has Grade Appeal, Academic Policy Appeal, and Grievance Policies. Full policies are located in the University Catalog. The following are definitions of each policy:

Grade Appeals

An appeal of a grade occurs at the conclusion of a course and is based on a student's belief that their final grade is incorrect. Students may not appeal grades for individual assignments while a course is in progress but should contact the instructor if they believe a grade for any assignment is incorrect.

Academic Policy Appeals

Students have the right to petition for exceptions to any academic policy. The Academic Standards Committee is chaired by the University Registrar and includes four faculty appointed by the Steering Committee and two students appointed by the Associated Student Council. Most requests for exception are institutional in nature such as requests to overload, requests for substitutions, and similar items. The committee's responsibility is to balance the academic integrity of the institution with legitimate hardships students face. All requests for exceptions to institutional policy are made in writing at the Office of the Registrar.

In some cases, departments have internal policies unique to their programs. Students may request an exception to those policies through whatever internal process is in place in that department. If those requests are not approved, students may appeal to the Academic Standards Committee. In reviewing such cases it is essential to have faculty from the department involved in making decisions about exceptions; it is also necessary to have faculty from outside the department to ensure consistency across the university and to prevent conflicts of interest.

Grievance Policy

Students may file a grievance when they believe their student rights, as outlined in written university policy, were violated or there was a lack of due process as defined by university policy. Students must file their grievance within 30 calendar days of the alleged incident. If the concern is regarding a final grade, the student should follow the grade appeal process. If the student is requesting an exception, they should follow the process for exceptions to departmental policy. If the student is alleging sexual discrimination or harassment, they should file an incident report with the Title IX coordinator.

School of Nursing Procedure

Grade appeals and Grievances will follow the university policy from the beginning. Academic policy appeals will start with the School of Nursing through our own informal process: If a student wishes to appeal a nursing policy, the informal process is the first mechanism for resolution. This process involves documented conferences progressing sequentially between:

1. The student(s) and involved instructor.
2. The student and a shared meeting with the Pre-Licensure Program Director and the Associate Dean of Nursing

The informal process should be initiated by the student no later than 10 school* days after the policy was applied to the student. (See the Pre-Licensure Program Director for forms). If a satisfactory conclusion is not attained by the completion of step 2 of the informal process, the student may then initiate the formal process by appealing to the Academic Standards Committee as outlined in the Academic Policy Appeals procedure. *School = days when the university is in session and excludes all holidays, weekends, and designated breaks.

RETENTION

Students who are struggling in their courses should reach out to their didactic professor for help. If a student is having difficulty with one or more of their courses (e.g., attendance, exam scores, behavior, missing assignments), a retention alert may be submitted to the Accessibility and Disability Resources (ADR) for documentation. The student may be contacted by a member of the (ADR) team to discuss the situation.

The nursing faculty strives to reasonably support students who are experiencing learning difficulties. The goal of the School of Nursing is to produce knowledgeable nursing graduates capable of successful completion of the NCLEX-RN and with the ability to function in a variety of settings. Students who are deemed at risk by the nursing faculty may be referred for additional support, though the ultimate responsibility for learning resides with the student.

ACADEMIC PROBLEM-SOLVING CHAIN OF COMMAND

Problems are best resolved at the level at which they occur. If you have a problem in one of your courses, please contact the course instructor to arrange a meeting with them. The instructor will want to hear your views and concerns and will welcome the opportunity to talk with you. Most academic problems can be resolved at this level. If the problem cannot be resolved with the instructor, then the problem should be taken to the Level Coordinator. Should the problem remain unresolved after meeting with the Level Coordinator, the student can then contact the Pre-Licensure Program Director. It is important to follow this chain of command procedure in resolving problems.

It is important to respect the organizational structure so that problems can be resolved at the level at which they occur.

ACADEMIC INTEGRITY AND PROFESSIONAL BEHAVIOR

Please see the University Catalog for the [Statement of Academic Integrity](#)

The University has an exclusive proprietary trademark interest in its name, logos, and branding. The University must ensure the continued viability of its valuable trademark rights and will not permit unauthorized use of its name or logos to dilute these rights. No one may, without prior permission from the Office of Marketing, use the University's name or logos for commercial purposes, on social media posts, or in any way that might confuse or mislead observers to attribute the use to the University.

ETHICS/ PLAGIARISM

Preparation for a professional career includes responsibility and accountability for one's work and decisions. Assignments are expected to reflect the effort and thoughts of the individual student, except as indicated using proper documentation. Failure to properly credit the work of another will result in a grade of zero (0) for the assignment. Plagiarism is defined as the use of intellectual material produced by another person without acknowledging the source. For example:

- Wholesale copying of passages from works of others into an assignment, paper, posting, or thesis without acknowledgement.
- Using the views, opinions, or insights of another without acknowledgement.
- Paraphrasing another person's characteristic or original phraseology, metaphor, or other literary device without acknowledgment.
 - A final Turnitin score of over 25% is evidence of using too many resources other than your own thoughts and ideas, excluding journal, care plan, or concept map templates, and will result in a (0) zero for the assignment. Students can submit to Turnitin multiple times prior to the final submission to ensure a score of 25% or less is achieved. Note that a score higher than 25% can be a strong indication of plagiarism. However, a lower score does not mean the student doesn't have any plagiarism within the assignment. The Final Turnitin report will be assessed for plagiarism.
- Using previously submitted work without self-citing.
- The APA title page must be included with all written assignments, excluding journals, care plans, and concept maps. The APA title page is not considered part of the exclusionary templates listed above.

STUDENT USE OF ARTIFICIAL INTELLIGENCE (AI)

Didactic

Artificial intelligence (AI) tools may be used to help generate topics, ideas, and outlines and to revise the learner's original work in this course. Any other use of AI to generate content is prohibited. Note that the use of AI tools may impact on the quality and accuracy of the assignment. It is the learner's responsibility to disclose and/or document any use of AI; failure to do so and/or the use of generative AI tools to create content are violations of academic integrity. [See <https://catalog.olivet.edu> > [Academic Regulations](#) > [Academic Integrity](#).

Clinical

The use of Artificial Intelligence (AI) tools in clinical documentation, clinical assignments, or any work related to patient care or clinical experiences is strictly prohibited and could result in an unsatisfactory clinical day and potential failure of the course. This includes, but is not limited to, care plans, clinical reflections, and any documentation submitted for clinical evaluation.

CODE OF PROFESSIONAL CONDUCT

All students at the university are required to comply with the ONU student handbook. Additionally, students seeking to enter and successfully complete the ONU nursing degree must also comply with the following school of nursing - code of interpersonal professional agreement.

PROFESSIONAL CONDUCT AND EXPECTATIONS

Professionalism is essential for success in the Olivet Nazarene University nursing program. Students must demonstrate respect, accountability, and empathy in all settings, including classrooms, labs, and clinical environments. This includes listening respectfully, refraining from disruptive behaviors, and taking responsibility for one's actions.

While clinical skills are vital, professional behavior is equally important. Incidents of unprofessional conduct may result in course failure, clinical removal, or loss of honors, such as leadership roles or society invitations. Faculty and clinical supervisors (e.g., instructors and preceptors) hold the discretion to assess and address professional conduct on an individual basis.

Students must embody the values of respect, compassion, and integrity as they represent both the university and the nursing profession.

Nursing students should check with each instructor to see if their lecture can be audio taped; otherwise, no cell phones, beepers, or other electronic devices are allowed in the classroom without faculty approval ahead of time. In the case of an emergency, students may have a cellphone on vibrating mode.

PREAMBLE

Students of nursing have a responsibility to society in learning the academic theory, technical knowledge and clinical skills needed to provide nursing care. The clinical setting presents unique challenges and responsibilities while caring for human beings in a variety of health care environments. Along with this knowledge, students are expected to develop and demonstrate interpersonal skills consistent with the profession for interaction with patients, colleagues, faculty, other health care professionals and the public.

This Code is based on the understanding that, to practice nursing as a student, agreement is made to uphold the trust with which society has placed in the profession and to present ourselves according to those standards. The statements of the Code establish the contract between the nursing student and the School of Nursing whereby students agree to adhere to civility standards of the profession as formally set forth in this Code of Interpersonal Professionalism.

School of Nursing - Students' Responsibilities

Failure to comply with the requirements of any of the following items or other policies in the School of Nursing Student Handbook may result in a conference with the appropriate instructor/professor and follow the chain of command thereafter. Repeated violations, showing a lack of improvement either in one area or in overall behavior, may be referred to the Prelicensure Program Director to discuss the difficulty. More than one referral to the Director may lead to a recommendation to the Associate Dean of

the School of Nursing that the student be dismissed from the School of Nursing program. See Appendix B for the Student Bill of Rights.

Attentiveness – The student regularly attends class/clinical/simulations. All extended absences are for relevant and serious reasons and approved, where applicable, by the appropriate authority. The student is consistently on time for class/clinical/simulation and stays until the end. The student is alert and demonstrates attentiveness by taking notes when appropriate and asking appropriate questions.

Demeanor – The student has a positive, open attitude towards peers, teachers, and others during the course of nursing studies. The student maintains a professional bearing in interpersonal relations. The student functions in a supportive and constructive fashion in group situations and makes good use of feedback and evaluations.

Maturity – The student functions as a responsible, ethical, law-abiding adult.

Cooperation – The student demonstrates their ability to work effectively in large and small groups and with other members of the health team, giving and accepting freely in the interchange of information.

Inquisitiveness – The student acquires an interest in his/her courses and curricular subjects, demonstrating individual pursuit of further knowledge.

Responsibility – The student has nursing school performance as his/her primary commitment. Student/student and student/faculty academic interchanges are carried out in a reliable and trustworthy manner. Students are expected to maintain professional behavior which includes no loitering, no use of cell phones, no use of social media, no studying for other courses while in class, preconference, clinical, or post conference unless asked to perform additional research on a topic.

Authority – A student shows appropriate respect for those placed in authority over him/her both within the University and society.

Personal Appearance – The student's personal hygiene and dress reflect the high standards expected of a professional nurse. Please note compliance of student uniform is an expectation for clinical/simulation.

Communication – The student demonstrates an ability to communicate effectively, verbally, nonverbally, and in writing with peers, teachers, patients, and others.

Professional Role – The student conducts self as a professional role model at all times and in compliance with Standards of Practice Relative to Registered Nurses (OAC Chapter 4723-4) and the ANA Code of Ethics for Nurses with Interpretive Statements. The student demonstrates the personal, intellectual, and motivational qualifications of a professional nurse. See Appendix B.

Judgment – The student shows an ability to think critically regarding options, reflecting his/her ability to make intelligent decisions in his/her personal and academic life.

Ethics – The student conducts self in compliance with the ANA Code of Ethics.

Moral Standards – The student respects the rights and privacy of other individuals and does not violate the laws of our society.

The Olivet Nazarene School of Nursing reserves the right to dismiss a student at any time based on actions or behaviors the University may deem inappropriate. Each student, by admission to the BSN program track in the School of Nursing, recognizes this right of the University. Please refer to the University Life Handbook for additional information regarding expected behaviors.

The continuance of any student on the roster of the School of Nursing, the receipt of academic credit, graduation, and the granting of a degree rests solely within the powers of the University and School of Nursing.

CONFIDENTIALITY

Confidentiality of patients and information concerning patients is critical. Clinical agencies have guidelines for confidentiality as well as consequences of failure to comply. Students may be sent home from the clinical setting if compliance is not maintained and will not be eligible to return to the clinical setting. This will result in failure of the clinical component and subsequent failure of the course.

PRIVACY AND CONFIDENTIALITY UNDER THE HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1995 (HIPAA)

To ensure your written course assignments comply with the 1996 *Health Insurance Portability and Accountability Act*, please never name:

- Your employer
- A patient
- A co-worker

Breaking a HIPAA privacy rule may jeopardize the clinical affiliation agreement between ONU and the health care institution and may result in the student's removal from the clinical site and/or nursing program. Criminal penalties for wrongful disclosure can include not only large fines but also prison time. The criminal penalties increase as the seriousness of the offense increases. These penalties can be as high as fines of \$250,000 or prison sentences of up to 10 years. A modification to HIPAA is the HITECH (Health Information Technology) Act.

To be eligible for American Recovery and Reinvestment Act (2009) funding, healthcare facilities must prove they are HIPAA compliant. The HITECH Act defines and enforces compliance standards, rules, and penalties related to the electronic exchange of the electronic medical or health record (EMR, EHR) programs and Patient Health Information (PHI). In gross summary, HITECH requires:

1. **Enforced HIPAA compliance** — willful neglect may result in up to a fine of \$250,000 for a single violation and repeated violations may be fined up to \$1.5 million. Anyone can initiate a complaint regarding non-compliance.
2. **Access to EMR** — all health records must be available as an EMR and/or shared (by patient permission) as an encrypted PHI (ePHI) record.
2. **Accountability of Business Associates** — health care business associates and providers must ALL adhere to privacy/security requirements, or EVERYONE is culpable (Compliance Compatibility Security Rule).
3. **Notification of Data Breach** — it is mandatory to notify a patient of a data breach of any unsecured information, meaning that it was shared with a business associate using an unencrypted format or without patient permission.
5. **Additional Requirements** — HITECH defines additional requirements to address patient privacy in electronic marketing and accounting practices.

For the latest information regarding HIPAA, go to <https://www.hhs.gov/hipaa/for-professionals/index.html>.

ACADEMIC SUPPORT SERVICES

BENNER LIBRARY

Benner Library makes numerous resources available for nursing students. In addition to a full complement of nursing books, Benner provides a substantial number of nursing periodicals, both in print and in electronic format. Nursing students have access to several health-related online article databases. Articles not available in full text may be ordered through Benner's Interlibrary Loan service. The nursing home page can be accessed at <https://library.olivet.edu/subject-guides/nursing/index.php>.

Should other library resources be needed, Olivet students can request materials from any other library in CARLI, a consortium of 76 Illinois academic libraries. In addition, ONU nursing students have access to libraries at many of the clinical agencies.

Access Benner Library's home page at <https://library.olivet.edu/index.php> for the most current information about the library's resources and services, including specific information for off-campus students. For additional assistance, contact the Interlibrary Loan Department at (815) 928-5439 or the Reference Desk at (815) 939-5355, or ill@olivet.edu.

LEARNING ASSISTANCE

Learning assistance is available to all students requesting support. The following active learning modalities may be available to ALL students, peer tutoring through the academic coaching center, computer tutorials, and audiovisual learning.

CENTER FOR ACADEMIC EXCELLENCE

The Center for Academic Excellence (CAE) contributes to the academic success and career readiness of Olivet's traditional, undergraduate students. A variety of academic supports are available through the CAE such as writing and tutoring support. Appointments with the Writing Center and Academic Coaching Center can be made through Olivet.mywconline.net or by logging into My.Olivet.edu and searching under the student support tab. Visit the CAE on the 2nd floor of Benner to learn more about all the programs and services available.

LEARNING SUPPORT SERVICES/DISABILITY SUPPORT SERVICES

It is the policy of Olivet Nazarene University to accommodate students with disabilities in accordance with federal and state laws. BSN students with documented disabilities should contact the online accommodations support coordinator. Please send inquiries to adr@olivet.edu.

GUIDELINES FOR ACCOMMODATING STUDENTS WITH DISABILITY

In accordance with the National Council of State Board of Nursing (NCSBN) the following competencies are necessary for the professional practice of nursing:

1. The ability to see, hear, touch, smell, and distinguish colors.
2. Oral and writing ability with accuracy, clarity, and efficiency.
3. Manual dexterity, gross, and fine movements.
4. Ability to learn, think critically, analyze, assess, solve problems, and reach judgment.
 - a. Students must be able to establish cause and effect relationships.
 - b. Students must be able to prioritize data and tasks.
 - c. Emotional stability and ability to accept responsibility and accountability.

American Association of Colleges of Nursing (AACN, 2001)

If a student or potential student has difficulty in meeting any of the above competencies it is his responsibility to identify himself as needing accommodation. Any requests made for accommodation to

meet these competencies must be made in writing. The request can be submitted to ADR@olivet.edu, and will be reviewed by the Director of Accessibility and Disability Resources.

The School of Nursing faculty strives to reasonably accommodate students who are experiencing learning difficulties. The goal of the Department is to produce knowledgeable nursing graduates capable of successful completion of the NCLEX- RN and with the ability to function in a variety of settings. Faculty tracks students who do not maintain established standards via the Student Progression Committee. Faculty believe that all students who feel called into nursing should have an opportunity to plan for their own success.

BSN ACADEMIC INFORMATION AND POLICIES

ORIENTATION DAY POLICY

Orientation day for each semester begins prior to the first official day of classes. The actual orientation day will be announced prior to the semester. All day attendance at the orientation day is mandatory.

REQUIRED BOOKS AND RESOURCES

The required textbooks and learning resources for each course will be listed in each course syllabus. The course syllabi will be available prior to the start of the semester.

DIDACTIC ATTENDANCE POLICY

It's the student's professional responsibility to attend all classroom settings. Students missing two or more class sessions will be submitted to the retention alert system. A student who has two unexcused absences from didactic class sessions will receive incremental lowering (i.e., A to A-, A- to B+, etc.) of their current overall letter grade. To be considered excused, faculty must be contacted via email and/or office phone call/voicemail prior to the missed class. The faculty recognizes that mitigating circumstances occur. In the event of personal and/or immediate family member illness, accident, or serious need, faculty will determine the applicability of this policy.

TARDINESS

Students are also expected to be in class on time. This applies to didactic courses, seminars, * clinical rotations, simulations, and laboratories. Tardiness will be recorded for each class session. Three tardy notations of greater than five (5) minutes will count as one absence.

*Please see clinical expectations for tardiness in clinical, simulation, and laboratories.

STUDENT FOCUS GROUPS

A student focus group is held twice every semester. Elected student representatives from each level will meet to share ideas for ensuring the quality and integrity of the nursing program. The focus groups' discussions will provide an assessment feedback forum for the student input into program improvement. Minutes are taken and action responses are provided when appropriate. The student suggestions may be taken to the faculty for discussion. The forum is for the purpose of improving the learning community.

GRADE SCALE *Grades are not rounded*

95 – 100	A
92 – 94.9	A-
89 – 91.9	B+
86 – 88.9	B
83 – 85.9	B-
80 – 82.9	C+
77 – 79.9	C
74 – 76.9	C- Non-passing scores

71 – 73.9	D+
68 – 70.9	D
65 – 67.9	D-
< 65	F

MATH POLICY

Math is an essential component in calculating medication dosages in the clinical setting. All students in levels 0-4 will take math exams at the end of their semester to prepare for their clinical entry into their next level. The math test must be passed with 100% proficiency before beginning the clinical courses. All non-clinical courses will not be held to the math policy. Math remediation will be available for students who are unsuccessful. Further remediation is the student's responsibility and is strongly encouraged. A total of three (3) opportunities will be permitted before the student is administratively withdrawn from all current nursing clinical courses. Math tests must be taken as scheduled. Any missed math tests will be scored as a zero and count as one attempt toward passing the math test for that semester. Calculators are provided through the SafeMedicate program. Two minutes per question will be the time set for taking of the math exam. Ten additional minutes are allotted for final review of the test prior to submission for a total of 50 minutes.

Please see SafeMedicate for rounding guidelines.

Please also note, as stated within the Admissions, Progression, and Retention policies, *“Students may be administratively withdrawn per the math failure policy prior to the start of clinical. Students are limited to an administrative withdrawal for math failure policy twice in the program. **Upon a third math policy failure, the student will be withdrawn from the program without the opportunity to reapply.**”*

COURSE ACTIVITIES

All components of the course (except for the discussion board), Evolve assignments, and quizzes, must be completed no later than 11:59 p.m. CST on the last course day to pass the course. Students must receive a satisfactory/complete for non-graded assignments/projects.

Only one submission of assignments is allowed to the Final Submission area and must be turned in by the due date. Resubmission of assignments for regrading is not permitted. All written assignments, including discussion postings, should utilize the 6th or 7th edition Publication Manual of the American Psychological Association.

Using TURNITIN

After completing the draft of a written assignment with Turnitin, the submission to the Canvas FINAL submission site is considered the FINAL submission of the written assignment and no further revisions will be allowed. This FINAL submission will be the only grade for that assignment.

Students who are repeating a course must complete all course activities for the course they are repeating and submit new work for all assignments unless otherwise documented by the course professor. Please note: the Pathophysiology HESI, taken in NURS 439, and the Community HESI, taken in NURS 335,

can only be taken one time. If a student is repeating either NURS 439 or NURS 335, the grade from the first attempt will be entered into the gradebook.

LATE WORK POLICY

Late course or clinical work is highly discouraged; however, in the event you choose to turn in an assignment past the due date and time, 10% per day will be deducted from your assignment grade. After the third day you will receive a zero for your assignment grade. Evolve graded assignments not submitted on time will receive a zero. **All work must be completed by the last course day by 11:59 p.m. CST even if it is too late to receive credit towards the course** – see comments under course activities. Refer to the discussion requirements for the policy on late discussion board postings.

EXTRA CREDIT

No extra credit will be offered.

EXAMINATION POLICY

Examinations in all nursing courses must be passed with a cumulative total of 77% to pass the course (this mandated average does not apply to Gerontology, Transcultural Nursing, Nursing Research, and Leadership in Nursing). Students who achieve less than a 77% cumulative exam grade must contact the instructor for assistance. If a student does not meet the 77% exam average, the final grade entered for the course will be the student's exam average grade, not the overall course grade.

Bringing in ear plugs to the exam would be beneficial if noise disturbs your concentration. Any computer difficulties while taking an exam should be reported immediately to the person proctoring the exam.

Remember that exams are an individual effort. There should not be discussion about questions during or after the exam. Other students may have an alternate exam time. Discussing exam items can jeopardize exam integrity when discussed with students who have not taken the exam.

Students must notify their didactic instructor prior to any absence. Excused absence may include death of immediate family member, documented illness, sanctioned university events, or extenuating circumstances. Students may be asked to provide proof of the reason for absence. Request for an excused absence **MUST** occur by voice mail or Olivet email directly to the course instructor before the start of the exam. It is the professor's decision whether to grant an excused absence or not. A student who fails to attend a scheduled examination/quiz without prior notification will receive a grade of zero for the examination/quiz.

OLIVET NAZARENE UNIVERSITY SCHOOL OF NURSING COMPUTER TESTING POLICY

1. Cheating is subjective. If the proctor suspects a student of cheating, their exam will end, and the student will receive a zero.
2. If the room allows, students should sit in every other seat. The proctor may ask students to change seats.
3. Students must keep their eyes on their own computer.
4. During exam times, the computers are only used for taking the exam.
5. Use of other programs, sites, or tools while taking exams is prohibited.

6. Students will be provided with a dry-erase board, an eraser, and a calculator. The dry-erase board must be blank and free from all markings until the start of the exam and be blank and free from all markings once the exam is submitted. Students may not bring their own calculators. Calculators within the testing platform may also be used.
7. Students may not cut and paste or retype exam questions into an email, word document, or any other format at any time.
8. Students should not be loitering in front of the computer lab after completing the exam. The students should not discuss the exam with other students waiting to take the exam. Discussion or giving exam questions to other levels is prohibited. Sharing information about the exam is considered an infraction of this policy.
9. No restroom breaks are allowed during an exam unless you have medical documentation from a healthcare provider, except for the HESI EXIT or CAT (the exam timer will continue running during the restroom break).
10. All personal belongings (backpacks, book bags, all types of watches, Google glasses, cell phones, etc.) must be stored in a designated area away from the testing area, without exception.
11. If students need earplugs, they must bring them to the exam.
12. No food near the computers.
13. No head apparel unless culturally appropriate.
14. No questions regarding exam question content will be allowed during the exam.
15. No student will take an exam alone in a room.
16. All answers on answer sheets or saved in Exam Soft are final.
17. Infractions to the above policy will result in the student's exam computer being turned off and a grade of zero for the exam. The student will be requested to leave the exam room, and the Pre-licensure Program Director will be notified.
18. Late testing: Students are expected to arrive and be seated prior to the scheduled exam start time, ensuring they are ready to begin promptly when the exam commences. Late arrivals disrupt the focus and concentration of peers, as well as the integrity of the testing environment. Once the exam has begun, entry will not be permitted. Students who arrive after the start of the exam will need to follow the exam rescheduling policy. Additionally, any student who disrupts the testing environment, whether by arriving late or through other behaviors, may be asked to leave immediately. Extenuating circumstances may be considered, provided they are communicated to the instructor in advance. Approval of such circumstances is solely at the discretion of the instructor, who will determine if accommodation can be arranged.

NOTIFICATION OF EXAM GRADES

When you take an exam in any nursing course the grades will be posted in a timely manner after an analysis of the exam has been completed. Grades will not be emailed, provided via phone, or posted on any faculty door to ensure confidentiality. Students who have less than a 77% exam grade must contact the course instructor for assistance.

An item analysis of each exam will be completed by the didactic instructor within 48 hours (excluding holidays, weekends, and breaks). Missed exam concepts will be provided, if requested by the student, within one week after the exam. If the student would like to review incorrect questions on their exam, they must contact the didactic instructor for an exam review appointment. Professional behavior is expected during the review. Students may not take pictures or screen shots during the review. Recording during the review is prohibited.

EXAM MAKE-UP PROCEDURE

Make up examinations will be given near or during mid-term and final exam week unless exams are missed due to educational leniency. The format for the make-up examination will differ from the original examination (maybe short answer or essay). If the exam is not made up, a score of zero will be

recorded. To be allowed to make up a missed exam, proof of the reason for the absence must be submitted to the course instructor upon return to class.

In the event of an emergency where the student is unable to attend a scheduled exam:

1. The student notifies the instructor prior to the exam time.
2. If the make-up exam is approved by the instructor, the instructor will notify the student of the makeup date and time. Exams scheduled before mid-term week will generally be rescheduled for mid-term week. Exams scheduled after mid-terms will generally be rescheduled for finals week. Any exam missed during finals week will require acceptable documentation to be submitted to the BSN Program Director. No more than two exams per semester will be allowed unless appropriate documentation is approved by the Pre-Licensure Program Director.

HESI STANDARDIZED EXAM POLICY

- Faculty will administer HESI exams throughout the nursing program. The HESI exams will be recorded as an assignment, a unit exam, or a final exam grade depending on the course. All HESI exams given as a unit exam or final exam are included in the 77% exam policy and will be worth no more than 10% of the course grade. The conversion score will be the final grade. The individual conversion score can be found on the HESI student report.
- For courses with a HESI exam, students will complete the exam to determine their level of content mastery.
- All students are encouraged to review missed content regardless of the score obtained.
- The table below depicts the courses which have a related HESI exam and required remediation; however, the related HESI exam may be given at later date.
- Students take financial responsibility for HESI exams and will be charged a HESI fee for each semester of the nursing program.
- The HESI Exit Exam B and HESI RN-NCLEX Review Course are mandatory for any students graduating. These requirements prepare students for the NCLEX exam. For any student who will be returning the following semester, the HESI RN-NCLEX Review Course is optional (providing seating is available).

Nursing Program Levels and Course(s) HESIs for the current 4-year plan	
Nursing Level 0	Nursing Level III
NURS 202 Introduction to Professional Nursing: <input type="checkbox"/> Pre-Req: HESI A2 with critical thinking NURS 330 Pathophysiology for Nursing <input type="checkbox"/> Pathophysiology (Transfer students who did not take this course at Olivet Nazarene University will be required to take the pathophysiology HESI at the end of NURS 202)	NURS 378 Childbearing Family Health: <input type="checkbox"/> Maternity Nursing NURS 415 Child Health Nursing <input type="checkbox"/> Pediatric NURS 439 Adult Health Nursing II <input type="checkbox"/> Pathophysiology
Nursing Level I	Nursing Level IV
NURS 206 Health Assessment Health Assessment NURS 207 Fundamentals of Nursing <input type="checkbox"/> Fundamentals <input type="checkbox"/> Pathophysiology Used throughout program: <input type="checkbox"/> Online HESI review <input type="checkbox"/> Drug Calculations Online	NURS 335 Community Health Nursing: <input type="checkbox"/> Community Health NURS 456 Leadership in Nursing: <input type="checkbox"/> Management <input type="checkbox"/> HESI CAT (taken in Level IV only) NURS 449 Adult Health Nursing III: <input type="checkbox"/> Pharmacology <input type="checkbox"/> Medical-Surgical <input type="checkbox"/> HESI Exit Exam B (taken only if graduating) <input type="checkbox"/> HESI RN-NCLEX Review Course
Nursing Level II	
NURS 342 Mental Health Nursing: <input type="checkbox"/> Psychiatric/ Mental Health	

DISCUSSION BOARD AND FORUM

CONDUCT IN DISCUSSION FORUMS AND OTHER FORMS OF COMMUNICATION

Discussion forums are vital for effective, online learning. Demeaning comments are not permitted. Inappropriate or derogatory language, ethnic, racial, or gender-based comments, suggestions, or undercurrents are not tolerated. Students are expected to project a scholastic demeanor and to interactively respond to class activities. Students, at all times, are expected to be respectful of their peers, the institution, its facilities, and its personnel. Discussions in the classrooms and online are totally independent of the work environment. Discussion should remain in the correct arena. This is a time of professional, not personal, communication. Plagiarism is something that ONU and the School of Nursing take very seriously. The School of Nursing follows the Policy that is established with the Graduate and Continuing Studies

DISCUSSION REQUIREMENTS AND RUBRIC

Requirements: You are required to submit your discussion posts for this course as instructed per course syllabus. All posts must follow APA format. Each post needs to have a citation and reference to help support what you are discussing. Weekly discussions begin on Monday, Day 1, 12:00 a.m. and end Sunday, Day 7, 11:59 p.m. Initial postings are due by Day 3, 11:59 p.m. and all peer response(s) are due

by Day 7, 11:59 p.m., unless otherwise stated in the course syllabus. Discussions posted after the week is completed will receive a zero. See the Discussion Rubric below for requirements.

OLIVET NAZARENE UNIVERSITY BSN PROGRAM (Based on 35 pts) DISCUSSION RUBRIC						
Criteria	Ratings					
	Exemplary 5 points	Proficient 4 points	Sufficient 3 points	Developing 2 points	Basic 1 point	Inadequate 0 points
Application of Course Knowledge: <i>Initial Post</i>	Addresses all aspects of the initial discussion question(s) with thorough application of experiences, knowledge, and understanding, using relevant examples	Addresses most aspects of the initial discussion question(s) with clear application of experiences, knowledge, and understanding, using relevant examples.	Addresses some aspects of the initial discussion question(s) applying experiences, knowledge, and understanding, using relevant examples.	Addresses question(s) demonstrating a minimal understanding, using relevant examples.	Not all questions address and/or main idea/s not supported by experiences, knowledge, and understanding, and/or uses relevant examples.	Does not address the initial question(s).
Integration of Relevant Research: <i>Initial Post</i>	Thoroughly synthesizes and integrates relevant research.	Synthesizes and integrates relevant research.	Synthesizes or integrates relevant research.	Minimally synthesizes and integrates relevant research.	Poorly synthesizes and integrates relevant research.	Does not synthesize and/or integrate relevant research.
Engagement with Peers & Faculty: <i>Feedback Post</i>	Responses significantly contribute to the quality of interaction by providing rich and relevant examples, synthesis, comments and ideas, applicable research support, discerning ideas, and/or stimulating thoughts/probes to peer postings.	Responses provide evidence that the student has considered peer postings and synthesizes key comments and ideas, as applicable by providing relevant examples, applicable research support, discerning ideas, and/or stimulating thoughts/probes.	Responses add some contribution to the quality of interaction; provide examples, research support, discerning ideas, and/or stimulating thoughts/probes.	Responses contribute minimally to the quality of interaction.	Responses display no depth.	Does not engage with peers and faculty in discussion.
Written Communication: <i>Demonstrates personal growth through written communication by effectively conveying ideas and analyzing information.</i>	Always conveys ideas and analyzes information in a clear and concise, and organized manner. Respectfully offers suggestions, constructive feedback, or opposing viewpoints.	Consistently conveys ideas and analyzes information in a clear and concise, and organized manner. Respectfully offers suggestions, constructive feedback, or opposing viewpoints. Most	Adequately conveys ideas and analyzes information using understandable language; information is not organized. Respectfully offers suggestions, constructive feedback, or opposing viewpoints. Some	Minimally conveys ideas and analyzes information using understandable language; information is not organized. Respectfully offers suggestions, constructive feedback, or opposing	Conveys ideas and/or analyzes information using language that is not clear, logical, or organized to the point that the reader has difficulty understanding. Respectfully offers suggestions, constructive	Poorly demonstrate s written communication; Does not express one's own thoughts and/or ideas and/or is unprofessional in one's communication.

	Majority of thoughts and ideas are one's own.	thoughts and ideas are one's own.	thoughts and ideas are one's own.	viewpoints. Few thoughts and ideas are one's own.	feedback, or opposing viewpoints. Thoughts and ideas express are rarely one's own.	
Written Communication: <i>Demonstrates personal growth through effective written communication through proper use of mechanics and proper use of APA.</i>	0 to 2 error(s) in APA, sentence structure, grammar, spelling, syntax, and/or punctuation noted in written communication. A repeated error is equal to one error.	3-4 errors noted in APA, sentence structure, grammar, spelling, syntax, and/or punctuation. A repeated error is equal to one error.	5-6 errors noted in APA, sentence structure, grammar, spelling, syntax, and/or punctuation. A repeated error is equal to one error.	7-8 errors noted in APA, sentence structure, grammar, spelling, syntax, and/or punctuation. A repeated error is equal to one error.	9 or more errors noted in APA, sentence structure, grammar, spelling, syntax, and/or punctuation. A repeated error is equal to one error.	Poorly demonstrates APA, writing skills in sentence structure, grammar, spelling, syntax, and/or punctuation. A repeated error is equal to one error.
Participation & Instructions: <i>Initial Post</i>	Initial post response consists of a minimum of 175 –words, including a minimum of two cited references; one from a course textbook and one other scholarly nursing reference and submitted on or before Day 3 by 11:59 p.m.	Not applicable	Meets either reference requirements or 175-word count but not both.	Submitted Late (Day 4-7) but meets reference requirements and 175-word count.	Not applicable	Submitted late (Day 4-7) but does not meet the 175 minimum word requirement ; and does not utilize required references.
Participation & Instructions: <i>Feedback Posts</i>	Provides feedback to at least two peer initial posts with a minimum of 75 words, including at least one scholarly nursing reference per reply and submitted on or before Day 7 by 11:59 p.m. Posts on a different day from initial post AND replies to any or all faculty questions.	Not applicable	Meets 75-word count to <u>one</u> peer initial post OR does not respond on two different days, OR, responded to peer post(s) without references.	Not applicable	Not applicable	Submitted late (after Day 7) or posts do not meet the post requirements: 75-word minimum, two peer posts, evidence of scholarly integration.

MODIFICATION OF THE SYLLABUS

The course syllabus is tentative. The instructor reserves the right to modify the syllabus based on unforeseen circumstances. If it becomes necessary to modify the syllabus the faculty will provide notification as quickly as possible

FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA)

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. FERPA gives parents certain rights with respect to their children's education records. These rights are transferred to the student when he or she reaches the age of 18 or attends a school beyond the high school level. Students to whom the rights have transferred are "eligible students."

- Parents or eligible students have the right to inspect and review the student's education records maintained by the school. Schools are not required to provide copies of records unless, for reasons such as great distance, it is impossible for parents or eligible students to review the records. Schools may charge a fee for copies.
- Parents or eligible students have the right to request that a school corrects records which they believe to be inaccurate or misleading. If the school decides not to amend the record, the parent or eligible student then has the right to a formal hearing. After the hearing, if the school still decides not to amend the record, the parent or eligible student has the right to place a statement with the record setting forth his or her view about the contested information.
- Generally, schools must have written permission from the parent or eligible student in order to release any information from a student's education record. However, FERPA allows schools to disclose those records, without consent, to the following parties or under the following conditions (34 CFR § 99.31): • School officials with legitimate educational interest; Other schools to which a student is transferring; Specified officials for audit or evaluation purposes.
- Appropriate parties in connection with financial aid to a student; Organizations conducting certain studies for or on behalf of the school; Accrediting organizations.
- To comply with a judicial order or lawfully issued subpoena; Appropriate officials in cases of health and safety emergencies; and
- State and local authorities, within a juvenile justice system, pursuant to specific State law.

Schools may disclose, without consent, "directory" information such as a student's name, address, telephone number, date and place of birth, honors and awards, and dates of attendance. However, schools must tell parents and eligible students about directory information and allow parents and eligible students a reasonable amount of time to request that the school not disclose directory information about them. Schools must notify parents and eligible students annually of their rights under FERPA. The actual means of notification (special letter, inclusion in a PTA bulletin, student handbook, or newspaper article) is left to the discretion of each school.

For additional information or technical assistance, you may call (202) 260-3887 (voice). Individuals who use TDD may call the Federal Information Relay Service at 1-800-877-8339.

Or you may contact us at the following address:

Family Policy Compliance Office
U.S. Department of Education 400

CLINICAL/VIRTUAL LEARNING CENTER (VLC) POLICIES AND EXPECTATIONS

STATEMENT: The nursing department provides hands-on learning opportunities and in certain classes, the student will be assessed by another student or play a role in active learning. The clinical experience allows students to practice and grow in the professional setting. The faculty recognizes the challenges students may encounter while meeting the time commitment required of such personal investment; however, there is little flexibility in addressing the needs of students who are unable to meet the required clinical hours. Students are expected to attend all clinical and laboratory sessions, be on time, prepared, and actively participate.

The following policies and information apply:

- Professional appearance and equipment are required as defined in the Student Uniform Policy. Failure to meet this requirement will result in an unsatisfactory day. Students could be sent home when not in compliance, at which time an alternate assignment will be assigned by the didactic instructor.
- Per clinical site policy, cell phones/electronic communication devices (e.g., smartwatches, ear buds, etc.) are strictly prohibited in all patient-facing areas, including nurses' stations, patient rooms, and unit hallways. Students may use their phones during breaks or in pre/post conferences, but only with the explicit approval of the clinical instructor or capstone preceptor. Failure to comply with this policy will result in the student being asked to leave the clinical site and will result in an unsatisfactory clinical day.
- No invasive procedures should be performed on peers or faculty.

VLC Student Expectations (Revised)

1. **On-time arrival is expected.** Please try to arrive a few minutes early, as VLC starts on the hour and lasts for 50 minutes. Signing in indicates you are present and ready to go - do not sign in and then leave. If you arrive more than five minutes late, your VLC time will need to be rescheduled.
2. **Come prepared for class.** Since this is a skills class, you should arrive with a stethoscope, blood pressure cuff, penlight, pen, and any other items you might bring to clinical.
3. **Physical assessment skills may be practiced at any time in VLC for students at all levels.** Since assessment usually involves touching, auscultation, and palpation, students must always come prepared to be assessed. This means tops, socks, and shoes will need to be removed. Wearing something appropriate underneath facilitates the process—sports bras or snug tank tops work for women, and light T-shirts for men. Heart and lung sounds must be auscultated with the stethoscope directly against skin; abdominal assessments require an exposed abdomen; and pedal pulses must be assessed directly (not through socks!). VLC assessments are not simulations - they are real and meant to give everyone authentic experience. The more lungs, hearts, and bellies one listens to, the more proficient one becomes!
4. **If there is a skill you feel you need to practice, please inform the VLC coach.**
5. **Electronic devices are not permitted in VLC.** (Cell phones and laptops should be put away. If you need to use a phone or computer to access information, please check with the instructor first.)

6. **Scheduled VLC times are not flexible.** If you need to attend a session different from the one for which you are scheduled, contact the BSN Program Director in advance for approval. Life happens, so this may occasionally be necessary; however, this should not be a frequent event, and changes can only be made if approved by the BSN Program Director. If permission has not been granted and you show up anyway, your attendance will not count, and the session will need to be made up at another time.
7. **Food is not allowed in the VLC.** Drinks are allowed but must remain only at the designated area and in a covered/sealed container.
8. **VLC time is scheduled time.** Please do not schedule remediation, advising, or any other appointments during this time.

CLINICAL PLACEMENT/ASSIGNMENTS/GUIDELINES INFORMATION

Students are assigned to clinical groups. Such assignments are based on maximum learning opportunities, available section and sites, size, and facility constraints. Students may not get the clinical placement they desire. Other constraints include clinical agencies that change service areas available to students. Students should be prepared to go to a different clinical agency during different hours than they originally requested or planned.

Multiple clinical facilities are used for the application of the nursing process across the spectrum of healthcare agencies, settings, and populations. The BSN director and faculty determine clinical placements and assignments, which may occur between 5:00 a.m. and 11:00 p.m. six days a week. Evening clinicals are a possibility. Capstone clinicals follow the schedule of assigned preceptors and may vary. Clinical placements (days, times, locations) are subject to change based on the availability of clinical sites and instructors. If there is a shortage of anticipated patients on an assigned clinical unit, alternative clinical placement, observations, and/or activities on-site will be scheduled based on facility policy. If a facility cancels the clinical day, the hours will be completed in the VLC. These hours may need to be completed on a different day. A make-up day will be assigned if a clinical day is canceled due to weather or other circumstances.

An observation experience is considered a clinical day. Students receiving a 1 in any category on their observation performance form or a notification from the facility regarding unsatisfactory performance will result in the student receiving an unsatisfactory clinical day.

OBTAINING A CAPSTONE EXPERIENCE

Students contacting sites/potential preceptors is strictly prohibited. Capstone assignments are made by the NURS 449/478 didactic professor or BSN Director of Nursing. Capstone assignments are not allowed on the unit where a student works. Failure to follow this policy will result in the loss of the opportunity to choose your capstone site.

ROTC-NSTP Capstone Hours

Students attending the Reserve Officers' Training Corps (ROTC) and Nurse Summer Training Program (NSTP) will receive credit for NURS 478: Nursing Capstone clinical hours as follows:

- Prior to NSTP attendance, notification should be provided to the faculty ROTC liaison.
- Cadets must have completed their junior academic year of nursing.
- Cadets will be able to receive credit for 108 hours of NURS 478: Nursing Capstone clinical time through NSTP.

- Skills validated at NSTP will be reviewed and included in the 80% sign-off expectation.
- Cadets must achieve an “Outstanding” or “Excellent” rating noted on Part IV of the ROTC Performance Evaluation for NSTP.
- Cadets must provide documentation of their completed NSTP experience to both the faculty ROTC liaison and the Nursing Capstone faculty member.
- Cadets will still be required to complete three Nursing Capstone 12-hour clinical days, totaling 36 hours.
- Cadets must complete the Nursing Capstone 12-hour ER rotation.
- Cadets must complete the Nursing Capstone 12-hour ICU rotation.

HEALTH POLICIES/COMPLIANCE

Physical Exam/Immunization Requirements for Nursing Students

VACCINATION COMPLIANCE

Documented exceptions for refusal of vaccines are allowed only for medical reasons and religious objections. If a student seeks an exemption from vaccination requirements on religious grounds, the student must present a signed statement that he or she objects to immunizations on religious grounds. If a student is unable to receive any vaccination for medical reasons or obtains a religious exemption for any vaccination, the student may be denied access to clinical facilities at which required clinical experiences must be completed and therefore may not be able to complete their program of study. The University urges all prospective and current students to consider this carefully when deciding whether to apply or enroll in the program.

1. Physical examination and necessary immunizations must be completed on all students when admitted to Olivet Nazarene University. Transfer students must also complete the same requirements. All nursing students' records will be verified by the School of Nursing and must be on file before admission into the nursing program. A repeat physical exam must be completed before admission to the nursing program. The ONU freshman admission physical does not apply to nursing students entering the nursing program.
2. All nursing students are required to have a yearly influenza vaccine. Documentation of the vaccine is required and kept on file in the School of Nursing. Documentation of the vaccine will be sent to clinical sites as needed per facility requirements. Refusal to receive the flu vaccine must be documented using the Medical or Religious Exemption form no later than the semester prior to the first clinical rotation. Specific clinical sites may require additional information and requirements as per their facility. Facilities have the final decision on whether the exemption form will be accepted, and if the student will be able to attend clinical during the flu season using the facility's guidelines.
3. In the State of Illinois, a tuberculosis skin test with an INITIAL DOUBLE MANTOUX must be verified (two tests, one week apart and each read three days later) before the student can participate in any clinical experience. Therefore, all nursing students who enter the nursing program must have met this requirement with documentation on file in the School of Nursing prior to beginning Level I nursing courses.
4. The State of Illinois and clinical agencies require a single Mantoux skin test administered and verified each year before clinical experiences begin. Therefore, Level III and Level IV nursing students may be required to submit proof of a single Mantoux skin test before the start of clinical courses. Any student with a positive TB skin test history should contact the

Health Services to fill out a questionnaire. There must be documentation of hepatitis B immunization (series of three doses) or a signed waiver completed by the start of Level I nursing courses. This documentation must be on file in the clinical compliance documentation platform, prior to the beginning of the Level I semester.

5. Students must submit evidence of two previous MMR vaccines or titer showing immunity and two previous Varicella vaccines or titer showing immunity. The documentation must be on file in the clinical compliance documentation platform prior to the beginning of Level I semester.
6. A drug screen will be completed once upon entering Level I and annually thereafter. A urine sample will be required. A break in nursing course enrollment will necessitate a repeat drug screen.
7. Any changes in your health status that would have implications for your safety while in clinical must be shared with your clinical instructor.
8. A criminal background check is required upon admission to the nursing program and annually thereafter. See further information under the background check heading below.

All required health documentation above must be completed and proof on file in the appropriate departments BEFORE ENTRY into each course level. Students will be restricted from clinical for failure to meet the requirements resulting in unsatisfactory for each clinical day missed.

IMMUNIZATION RECORDS FOR NURSING STUDENTS

Immunization forms are available in the nursing department or the University Health Center. Students entering Level I nursing courses will be provided immunization forms and instructions in the application packet.

CPR CERTIFICATION

All students are required to have current CPR through the American Heart Association. The course must be BLS and be good for two years. The CPR certification cannot expire during the academic year. Students are required to pay the cost associated with CPR certification and recertification as needed including successful completion of the hands-on demonstration. Students are required to provide an updated copy of the certification to the nursing administrative assistant.

CRIMINAL BACKGROUND CHECK

All students are required to obtain a criminal background check. A clear background check must be completed with the admission process and annually thereafter, or you will be administratively dropped from your clinical courses. Students should go to the clinical compliance documentation platform, to begin their criminal background check.

DRUG SCREENING POLICY

In compliance with both federal and Illinois law, the use, possession, and distribution of alcohol or illegal drugs, including marijuana which remains illegal under federal law, or the misuse of prescription drugs, on Olivet's campus (or other Olivet property) or as any part of its activities, including in the classroom, Clinical, Capstone, or laboratory setting, is strictly prohibited.

Nursing students must have a cleared drug screen on file in the clinical compliance documentation platform by the assigned date for Level I students and then annually by the assigned date; this drug

screen includes a screen for marijuana (THC). Drug testing is done at the student's expense upon entering the program and annually throughout the program. If the drug screen is positive, the student will be immediately withdrawn from all courses and must follow the readmission process.

Readmission following a positive drug screening - Positive drug screen results prohibit students from practicing in the clinical environment for six months from the drug screen date, thus you are hereby disenrolled from your nursing courses.

In six months, you may reapply by submitting a letter requesting consideration for readmission into the nursing program to the BSN Program Director, pending approval by the director of nursing programs. Readmission into the program will be effective at the start of the next semester. Your request will be forwarded to the Admission, Progression, and Retention Committee Chair for consideration. Your readmission application will require you to submit:

1. Drug screen results to the ONU Department of Nursing.
2. Documentation from a therapist specializing in addiction behaviors indicating a status of recovery and rehabilitation related to the substance used or abused.
3. If readmitted, the student will be subjected to random drug screening and/or to "for cause" drug screening at the student's expense for the duration of his or her studies in the nursing program.
4. If the student has positive results on a drug screening after readmission to the nursing program, the student will be dismissed from the nursing program with no option for readmission to the program.

"For Cause" Drug Screening

1. Olivet Nazarene University reserves the right to require that any student submit to a physical examination or clinical testing designated to detect the presence of drugs or alcohol, to include but not limited to blood, urine, or hair follicle, when reasonable suspicion exists that the student is under the influence of or is improperly using drugs or alcohol in violation of this policy. Reasonable suspicion for testing is to be determined by the sole discretion of university officials.
2. If faculty observes a student behaving in a manner that is consistent with the use or misuse of alcohol, illegal drugs, or drugs which impair judgment, affecting either the classroom, clinical or laboratory setting, the student will be removed from the educational setting and required to submit to an appropriate screening immediately.
3. If the behavior is noted in the clinical setting, the student will be removed from patient care. The student will have to submit to the agencies' and/or department's drug screening and results will be shared with the director of nursing programs.
4. If the behavior is noted on campus in either the classroom or laboratory setting the university's campus policy will be followed.
5. If the drug screening result is negative, the student shall meet with the director of nursing programs to discuss the circumstances surrounding the impaired behavior. Based on the information provided and further medical evaluation, if warranted, the director of nursing programs will decide regarding return to the clinical, classroom and laboratory setting.
6. If the drug screen is positive, the director of nursing programs will withdraw the student from all nursing courses. The student will pay the costs associated with the "for cause" drug screening.
7. A student's failure to comply with any aspect of the "For Cause" Drug Screening Requirement will result in the student's withdrawal from the Nursing Program without option for readmission.

INCIDENT OCCURRENCE

This policy is in accordance with the seriousness involved when responsible for patient care and preparing/administering medications.

- The Clinical Incident Report Form should be completed when any unusual occurrence takes place where there is Revised 05-25 36 actual or potential harm to a patient, a student, or an instructor. The form will be sent to the Pre-Licensure Program Director for placement in the student's folder. An incident report form may be obtained from the Pre-Licensure Program Director.
- In addition to the Clinical Incident Report Form, the facility incident report should be filled out and the charge nurse notified.

MEDICATION ERROR/NEAR MISS

An actual medication error will be considered an incident. A medication error is defined as an error in one of the rights of medication administration that reaches the patient. The student will work with the clinical professor to complete the required paperwork. At the professor's discretion, the student will be required to remediate as assigned. For a medication error, the student will receive an unsatisfactory clinical day and may be sent home for the day. Actual or potential life-threatening errors or safety violations may result in dismissal from the program. A meeting will occur between the clinical professor, level coordinator, and student(s) involved in any medication error or near miss.

Documentation will be placed in the student's file. The student will be required to complete a 3-5-page APA-formatted paper describing the error or near miss, the process for documentation of the error, and the evidenced-based process for safe medication administration. The paper must also include the medication, action, interactions, routes, adverse effects, and therapeutic effects of the medication. Lastly, the student should self-reflect on the error in a holistic manner.

HEALTH INSURANCE

Proof of coverage is mandatory and must be uploaded to Viewpoint by the deadline provided. Failure to submit proof of insurance may result in removal from the clinical rotation until documentation is received. Students are required to maintain current medical insurance throughout the clinical experience.

LIABILITY INSURANCE

The responsibility for the student is assumed by the University for all full-time students.

SAFETY GUIDELINES FOR CLINICAL SETTINGS

- Listen to your intuition. If you perceive that you are in an unsafe environment, leave that environment as soon as possible and seek safety.
- Report any unusual occurrences to your instructor immediately.
- Park in the institution's parking facility and in well-lit areas.
- Before entering an elevator or stairwell, evaluate the area. Don't enter if you feel it is unsafe.
- Carry phone numbers with you, instructor's contact number and the School of Nursing phone number.

STUDENT EXPECTATIONS IN THE CLINICAL SETTING

1. Completion of OLIE and Specific Clinical Site Requirements

If OLIE or any clinical site requirement is not completed by the deadline established by the clinical coordinator. This may result in an unsatisfactory clinical day. Failure to meet these requirements may result in removal from the clinical rotation until all obligations are fulfilled. Timely completion of OLIE and site-specific requirements is essential for patient safety, compliance with institutional policies, and

progression in the nursing program. Students are strongly encouraged to monitor deadlines closely and communicate proactively with the clinical coordinator if challenges arise.

2. All nursing students are able to perform medication administration according to their clinical course level after successful skills validation in the Virtual Learning Center (VLC). Please see updated skills card in Appendix E. **RNs/Clinical Instructors: Please quiz your students on the medications before they pass them to ensure competency.**

- Facilities with a medication machine: the RN and/or clinical instructor is responsible for pulling the medications from the Medication Pyxis since the student will not have a code to get in. Students are not allowed to remove medications from any locked device, such as the medication machine, drawers, or cabinets.
 - Facilities with medication scanners: the RN and/or clinical instructor (or per facility policy) is responsible for scanning and charting the medication(s). The RN and/or clinical faculty must always oversee and assist with drawing up IM, SC, or IVP drugs; they must be with the student while administering all medications, hanging new IV bags, and converting IV sites to saline flushes!
 - Exception: (Depending on facility student medication administration policy) students may or may not be allowed to use a scanner to administer and document medications with the instructor.
1. The nursing student **is allowed** to perform procedures **with supervision** only if the skill has been demonstrated successfully in the Virtual Learning Center in accordance with level requirement (refer to the ONU Traditional Skills Competency Sheet By Level).
 - Each Olivet student has a skills card.
 - The skills are signed off in the VLC each semester by Olivet faculty.
 - Only skills signed off in the VLC column can be completed by the student in the clinical setting and still must be completed with direct supervision.
 - Although a skill may be permissible per the skills card, please exercise extreme caution when assisting students with any invasive procedures or IV medication administration as patient safety is of utmost importance.
 - As the student appropriately performs these skills the instructor will sign and initial their skills competency cards. (*This is a benchmark that the students must have 80% completed upon completion of our program.*) They are not allowed to do any of these skills by themselves; only when there is an RN present in the room unless the skill has been signed off in the IND (individually) column. Skills that may never be done individually have an X in that column on the skills card.
 2. The nursing student is **not allowed** to do any of the following:
 - Hang blood/products (they are allowed to monitor/maintain transfusion with RN)
 - Take physician orders (transcribe, repeat, or enter physician orders)
 - Witness Informed consents or DNR orders of any kind.
 - Enter negative pressure rooms for any reason. (Students from Olivet have not been fit-tested and are prohibited from entering negative pressure rooms for any reason, even if they have been fit tested at their place of employment).
 - Administer vasoactive medications unless under direct supervision in Capstone.
 - Administer chemotherapeutic medications.
 - Any other actions/procedures not allowed per facility policies.
 3. On the nursing units, the nursing students are to assist:
 - Capstone students:
 - Assist their RN preceptor with care of all assigned patients.
 - Utilizes the nursing process for providing safe care (e.g. assessments, interventions, evaluation, medications, documentation)

- All Levels:
 - Students are responsible for obtaining report, performing assessments, passing medications, and charting.
 - Students MUST be quizzed and know their medications prior to administration.
 - Charting must be reviewed by clinical instructor.
 - Students are to answer call lights for all patients not just their assigned patient but must immediately report the needs of the patient to the primary nurse.
 - **No students should be sitting down at the nurses' station** unless they are documenting or collaborating with the clinical staff.
4. If any of these expectations are not in line with the facility, then the facility policies and procedures will overrule any of the above expectations.
 5. Food and beverages are never allowed at the nurses' station or in any patient care location. Eating and drinking is only to be done in designated locations.
 6. Students can care for COVID-19 patients or patients under investigation (PUI) only with the permission of the hospital/site.

Clinical Assignment Policy

1. Daily Assignment

- One hour at the end of each clinical day will be designated exclusively for completion of the daily assignment.
- Students will use physical reference materials to complete the assignment, including the lab manual, drug reference book, and nursing diagnosis book. Limited online resources (e.g., Micromedex and Evolve) may be used only when deemed necessary by the clinical instructor.
- The daily assignment must be completed on the day of clinical and submitted at the beginning of the post-conference session.
- All assignments must be handwritten and turned into the clinical instructor prior to leaving for the day.
- Graded assignments will be returned prior to the next clinical day. Students are responsible for uploading the graded copy to Canvas. If the graded assignment is not uploaded within 24 hours of return, it will count as a zero for the assignment.

2. Comprehensive Care Plan (CCP)

- The Comprehensive Care Plan must be completed and submitted according to instructor direction.
- The expectation is that the Comprehensive Care Plan will be completed by the end of the clinical day chosen per your clinical level. You will be allotted approximately 3 hours to work on the care plan throughout the day and/or by the end of the day (prior to post-conference).
- Failure to meet established submission deadlines may result in an unsatisfactory clinical evaluation.

Level 4 Capstone Clinical Assignment Policy

Level 4 represents a capstone clinical experience and does not involve direct on-site faculty supervision. Accordingly, assignment submission shall adhere to the following requirements:

Daily Evaluations

- Capstone students are not required to complete daily written clinical assignments. Instead, performance is evaluated each shift by the designated clinical preceptor.
- Each evaluation must bear the signature of the clinical preceptor to confirm completion of the shift.
- Students are responsible for uploading scanned copies of all completed and signed Capstone documentation to Canvas within the timeframe specified by the course faculty.

Comprehensive Care Plan (CCP)

- The Comprehensive Care Plan will be assigned and due on a completion date determined by the Level IV Clinical Coordinator.
- The CCP must be prepared in accordance with faculty instructions and submitted electronically via Canvas by the deadline established by the instructor.

GUIDELINES FOR USING PATIENT INFORMATION IN THE CLINICAL SETTING

In compliance with HIPPA regulations, no Electronic Medical Records (EMR) may be removed from the clinical setting. Records may be generated by the clinical instructor for use by students in the clinical setting only and must be placed in the appropriate receptacle for shredding before leaving the premises. Use only the patient's initials on the clinical papers.

UNSATISFACTORY SKILLS WITHIN THE CLINICAL SETTING

Skills performed unsatisfactorily in the clinical setting require the student to remediate in the VLC within the time set by the clinical instructor. Failure to comply with the remediation will result in an unsatisfactory clinical day for that course. It is the student's responsibility to make an appointment with an adjunct faculty VLC lab coach for the remediation.

EVALUATION OF STUDENTS IN THE CLINICAL SETTING

See Appendix C for the RATING SCALE FOR CLINICAL EVALUATION

Two unsatisfactory ratings in any one category row on the Daily Clinical Evaluation tool results in an unsatisfactory clinical day. Two unsatisfactory ratings in different categories (same column on evaluation tool) on one day also would result in an unsatisfactory clinical day.

If a student receives a "Needs Improvement" in a category row on the daily clinical evaluation tool and the instructor determines the student has not improved in that category on a subsequent day, the student will receive an unsatisfactory rating in that category for that day. NOTE: If there is already another unsatisfactory rating in a category for that day, the student will receive an unsatisfactory clinical day as outlined above.

Two unsatisfactory clinical days will result in automatic failure of that clinical course and necessitate the repetition of that course in order to progress in the nursing program.

CLINICAL, LAB, AND SIMULATION ATTENDANCE POLICY

The following policies apply:

- All missed clinical, laboratory, and simulation hours must be made up within the term that the course is being offered unless arrangements are made and approved by the level coordinator.
- Students must maintain professional appearance, Olivet name badge, and required equipment as defined in the Student Uniform Policy. Failure to meet this requirement may result in an unsatisfactory day.
- Students must notify their didactic and clinical instructor prior to any absence. An unexcused absence may result in an unsatisfactory clinical day.
- For scheduled observation assignments, the student must notify the didactic and clinical instructor as well as the observation point person prior to any absence. An unexcused absence may result in an unsatisfactory clinical day.
- Punctual attendance at all clinicals, lab, and simulations is mandatory. Students arriving late or leaving early for any reason, unless for extenuating circumstances, need approval from the instructor.
- Tardiness is defined as five (5) minutes late. If a tardy occurs for lab the student must meet with the course/clinical faculty for counseling of professional behaviors; documentation of the

tardiness will be placed in the student's permanent file. If tardy in clinical or observation, students will receive an unsatisfactory rating under professional behavior. If more than five minutes tardy for clinical, under the discretion of the clinical instructor, the student may be sent home from clinical. Clinical, observation, simulation, or lab missed due to administrative closure and/or inclement weather is made up at the discretion of the faculty and/or the Pre-Licensure Program Director

- If a student is sent home or sent for a medical evaluation from clinical/simulation, the student may not return to clinical/simulation for that day.
- Students may not attend clinical with any restrictions or limitations except for approved accommodation from Accessibility and Disability Resources (ADR).
- Any student returning to clinical after illness, injury, surgical procedures, etc. must be medically cleared without restrictions to participate in complete patient care. This is subject to further review based on individual facility disability policies and procedures.
- Simulations fall under all policies that apply to clinical. Two unsatisfactory clinical/simulation days will result in automatic failure of that clinical course and necessitate the repetition of that course to progress in the nursing program.
- If a clinical day/lab/simulation is missed, the time must be made up as assigned and additional course work will be given. For example, a research paper on a topic assigned by the level coordinator or a full care plan on the patient scenario of the day would be possible assignments required. The student must contact the course instructor and arrange a time for the lab session. The clinical and laboratory hours must be made up within the term that the course is being offered unless arrangements are made and approved by the level coordinator.
- For each clinical hour missed, the same amount of time must be completed (hour-for-hour). Any make-up clinicals that are not attended count as an unsatisfactory day and may result in course failure.
- Students will receive an incomplete grade for the course until all required clinical and simulation hours are completed.

Student Evaluation in the Clinical/Practicum Setting

In instances where preceptors facilitate students' clinical learning experiences, faculty may seek input from preceptors regarding student performance, but ultimately faculty are responsible for evaluation of individual student outcomes. The requirement for evaluation of student clinical performance by qualified faculty applies to all students in all programs. Faculty evaluation of student clinical performance may be accomplished through a variety of mechanisms. Evidence includes documentation that faculty are responsible for grading all courses and clinical experiences

VIRTUAL LEARNING CENTER (VLC)

The purpose of the VLC is to facilitate learning. Users are expected to promote a quiet, calm atmosphere and maintain neat, effective work areas. Professional behavior is expected at all times. Non-nursing students are not permitted in the VLC.

Guidelines for use of facilities and equipment

1. Food and beverages are not allowed in the VLC.
2. Lab computers are for viewing Nursing Department videos; personal videos are prohibited.
3. Notify the Nursing Department Secretary if supplies need to be replenished or if equipment malfunctions.
4. Before leaving the VLC, please leave all areas clean and tidy and return equipment.

5. Models/simulation tools must be appropriately covered for modesty.
6. If injury occurs, immediately notify the VLC coordinator, lab coach, or instructor.

SKILLS

Nursing skills require practice. Students will be provided with the opportunity to learn and practice those skills in a lab setting. Nursing students must then pass required skill return demonstrations before they utilize those skills in a clinical experience.

SKILLS CHECK-OFFS IN VLC PRIOR TO THE FIRST DAY OF CLINICAL

The required skills for the level must be passed successfully through return demonstrations. If the student fails the first VLC validation, they will need to remediate with a VLC coach, prior to their 2nd attempt. The second attempt may be evaluated by a different faculty member. If this attempt is unsuccessful, the student will attend the first day of clinical (excluding level 1) yet will receive an unsatisfactory clinical day for the course with which the skill is associated. Only one scheduled make-up skills demonstration will be completed prior to the first day of clinical (and on a separate day from the original check-off). The third and final attempt will be evaluated by a different faculty member and, if unsuccessful, this will result in failure of the clinical course in the course with which the skill is associated. Please see the unsatisfactory clinical day policy.

VLC SKILLS PRACTICE HOURS

Weekly skills practice in the VLC is mandatory for every level. Attendance and practice can only be signed off by an adjunct faculty, VLC coach or faculty professor. No peer initials are allowed; however, it is an expectation students practice all skills with peers regularly. This will allow students time to increase their confidence in clinical skills, increase their understanding of the theory behind the skills, reduce the time of executing the skill, and improve their technique. The time is to be spent specifically with hands-on skills practice (skills videos are acceptable but may be viewed for no more than 20 minutes of the hour). The specific hours the VLC coaches are available are posted on the bulletin board within the VLC. Level 1 students will sign up for two hours of mandatory practice. Levels 2,3, and 4 students will sign up for one hour of mandatory practice. Students will sign up utilizing the document sent out by Dr. Dillinger the first week of school. You will choose a day and time, and keep that time slot throughout the semester.

A student who misses a week of the VLC skills practice will have the following consequences:

1. First offense requires four additional lab hours to be completed the next week to equal a total of five hours of practice time. Counseling with the level coordinator will also be required.
2. Second offense requires four additional lab hours to be completed the next week to equal a total of five hours of practice time and an incremental lowering of the current course letter grade (e.g., B to B-). Educational leniency does not exclude students from completing the required VLC hour and may necessitate an additional hour of practice.
3. Third offense requires nine additional lab hours to be completed the next week to equal a total of ten hours of practice time and results in an additional incremental lowering of the letter grade lowering of the student's medical-surgical course (e.g., B- to C+). If the student is not in a medical-surgical course, the clinical course(s) the student is enrolled in will be examined by the didactic instructor(s) at the beginning of the semester to determine which clinical course will be affected by the lowering of the letter grade.

Failure to comply with the skills practice and make-up hours will result in course failure.

VLC Expectations:

1. On time arrival is expected. Please try to arrive a few minutes early, since VLC starts on the hour and lasts for 50 minutes. Signing in indicates you are present and ready to go – no signing in and then leaving. If you arrive more than five minutes late, your VLC time will need to be rescheduled.
2. Come prepared for class. Since this is a skills class, you should arrive with a stethoscope, blood pressure cuff, penlight, pen, and any other items you might bring to clinical.
3. Physical assessment skills may be practiced at any time in VLC, for students in all levels. Since assessment usually involves touching, auscultation, and palpation, students must always be prepared to be assessed. That means tops will need to be removed as well as socks and shoes. Wearing something appropriate underneath facilitates the process – sports bras/snug tank top work for women, and light tee shirts for men. Heart and lung sounds must be auscultated with the stethoscope directly against skin, abdominal assessments must be made of an exposed abdomen, and pedal pulses must be assessed directly (not through a pair of socks!). VLC assessments are not simulations; they are real and are meant to give everyone a real experience. The more lungs, hearts, and bellies one listens to, the more proficient one becomes!
4. If there is a skill you feel you need to practice, please advise the VLC coach.
5. Electronic devices are not permitted in VLC. (Cell phones and laptops should be put away. If you need to use a phone or computer to access information, please check with the instructor FIRST.)
6. Scheduled VLC times are not flexible. If you need to attend a session different than the one for which you are scheduled, contact Dr. Dillinger in advance for her approval. Life happens, so this may occasionally be necessary; this should not be a frequent event, and changes can only be made if approved by Dr. Dillinger.
7. If permission has not been granted, and you show up anyway, your attendance will not count, and the session will need to be made up at another time.
8. Food is not allowed in the VLC. Drinks are allowed but must remain only at the long table and in a covered/sealed container.
9. VLC time is scheduled time. Please do not schedule remediation, advising or any other appointments during this time.

STUDENT UNIFORM

General Professional Clinical/Simulation Appearance:

Specific Appearance Considerations:

Your uniform must be of proportionate fit (not too loose or tight), clean and pressed without wrinkles, and without frays, holes, or tears. Pants must not drag on the floor. White socks or hose are required.

ONU approved purple top and bottom purchased through ONU Nursing Department approved sites.

Lab Coat: A white lab coat will be needed. Everyone will purchase their consultation lab coat per required length through ONU Nursing Department site.

ONU-Approved Uniform Jacket: Capstone students are permitted to wear the ONU-approved uniform jacket on the clinical unit for warmth when necessary. The jacket is not a substitute for the lab coat and must not be worn during presentations, community projects, or any other formal activities. No other sweatshirts or outerwear are permitted in the clinical setting. If the Capstone student is found wearing other attire as outerwear, this privilege will be revoked immediately, and for the entirety of the remaining Capstone hours.

Patches and Name Pins: The ONU patch will be embroidered on the front right side of the uniform scrub top, and one will be embroidered on the right sleeve of your lab coat. ONU picture ID must be worn and visible at all times.

ONU picture ID will be provided to you by the IT department. If it needs to be replaced it will be at your expense.

Footwear: Clean all-white leather or leather-like shoes with clean white laces are to be worn along with white socks. Shoes must have enclosed heels (no clogs) and toes, heels no higher than 1 ½ inches, and be white.

Hair: Neatly secured, away from face, and off the collar in a professional-looking manner (no messy buns). large, brightly colored hair clips, ribbons, head bands, hair wraps or any other distracting hair ornaments. Hair needs to be clean and of a natural color.

Beards/Mustaches: Clean, short, and neatly trimmed. Males without full beards must be clean-shaven (no “five o’clock shadow”) when in the clinical/simulation/lab area. In the event a student has a mustache and/or goatee, the remainder of facial hair should be clean-shaven.

Nails: Nails are to be clipped to fingertip length. The wearing of acrylic/gel overlay, or “false nails” is not permitted during clinical. No nail polish is allowed.

False Lashes: False eyelashes are strictly prohibited in clinical settings.

Jewelry: Acceptable jewelry includes a wedding band, unless restricted by hospital policy. No other jewelry is permitted.

Tattoos: All tattoos must be covered with band aids or tattoo concealer makeup during all clinical experiences.

Community Service Hours and Community Health Practicum Attire: For all community service hours and community health projects, students are required to wear the approved clinical attire, which includes a clean, wrinkle-free purple uniform and a clean, wrinkle-free white lab coat. A name tag must be worn, and hair must be neatly secured away from the face and off the collar in a professional-looking manner. One pair of small stud earring is permitted, and no nail polish is allowed. Unless otherwise specified by the didactic instructor or department head, this attire is mandatory. Based on the nature of the activity or location (such as community clean-ups, blood drives, or other service events), the student should seek permission from the instructor or department head for any expectations to the standard uniform requirements.

Equipment Required: Watch with ability to count minutes and seconds (neutral color, preferably waterproof), bandage scissors, pen light, and stethoscope. No smart watches are allowed at clinical.

Skills Card: Skills cards must be brought to all clinicals. Students cannot perform any skills within the clinical setting without their skills card. The professor initials are required for any bolded, non-italicized skill.

Pre-clinical visits: Must wear full clinical uniform with or without lab coat.

General Dress Requirement: Must abide by the dress policy outlined by the Olivet University Life Handbook.

Pinning Ceremony: Male students are required to wear black pants with a white shirt and black shoes; neckties are optional but must be appropriate. Female students must wear black pants with a modest white top with appropriate shoes. There will be three styles of shirts voted on by the Pinning Committee. All students are required to wear their ONU lab coats, which must be clean, pressed, and wrinkle-free. All attire must be professional, modest, not tight, and not revealing.

In addition, the Associate Dean will pin all nursing graduates.

If at any point the student needs to purchase an additional uniform, they should contact the Administrative Assistant.

UNSATISFACTORY CLINICAL DAY

It is impossible for every behavior that is unsatisfactory in the clinical setting to be listed in the handbook. Students must use critical thinking skills and the knowledge they have gained from instruction to guide their behavior. Two unsatisfactory clinical days will result in automatic failure of that clinical course and necessitate the repetition of that course in order to progress in the nursing program.

Students will be scheduled for *clinical/lab/simulation* in each of the following nursing courses:

NUR 206	Health Assessment
NUR 207	Fundamentals of Nursing
NUR 342	Mental Health Nursing
NUR 378	Childbearing Family Nursing
NUR 349	Adult Health Nursing I
NUR 415	Child Health Nursing
NUR 439	Adult Health Nursing II
NUR 449	Adult Health Nursing III
NUR 335	Community Health/Population Care
NUR 478	Nursing Capstone

A satisfactory clinical experience is required to pass the above courses. Frequent formative evaluations will be given, and a summative evaluation is given at the end. Evaluation of student behavior in clinical is a unique situation based on patient needs, safety issues, standards of practice, and the practice area. Therefore, each situation will be evaluated uniquely by the clinical professor and will result in an individualized clinical evaluation. A situation may be deemed unsatisfactory in a category, unsatisfactory for the day, or even serious enough to warrant failure of the course. Safety issues could warrant failure of the course. If the student is unprepared for clinical, he/she will be sent home and receive an unsatisfactory for the day.

Students are expected to attend all clinical, laboratory, and simulation sessions, be on time, be prepared, and to actively participate. Failure to comply with these expectations will result in an unsatisfactory clinical day.

Students must comply with the immunization, CPR, cleared background check, skills checkoffs, and complete all required clinical orientation, training, and paperwork to attend clinical/laboratory, and simulation days. Failure to comply will result in an unsatisfactory day for each clinical course. Two unsatisfactory ratings in any one category row on the Daily Clinical Evaluation tool results in an unsatisfactory clinical day.

Two unsatisfactory ratings in different categories (same column on evaluation tool) on one day also would result in an unsatisfactory clinical day.

SUPPLEMENTAL INFORMATION

TRANSPORTATION AND MOTOR VEHICLE

Most courses in nursing involve practicum assignments to agencies off campus. Because of this, its recommended students have use of a car. Many students carpool and share expenses.

INCLEMENT WEATHER POLICY

In the case of inclement weather, the University will follow the practice of closing the campus. There will be radio announcements on WKAN, Shine 89, and WVLI. As soon as the decision is made, students and faculty are notified via Olivet email. If students opted into the text alert system, then students will also receive a text alert.

GUIDELINES FOR COMMUNITY ACTIVITIES

The faculty believes that service is an important part of the overall mission of academic preparation. Therefore, “service to God and humanity” is a component woven into the nursing program through community assignments.

GRADUATION REQUIREMENTS

Baccalaureate degrees offered by the university are awarded upon completion of the appropriate curriculum and upon recommendation of the faculty. The following requirements apply to the BSN degree:

1. A minimum grade point average of 2.75.
2. A minimum of 40 hours of credit in upper-division courses (courses numbered 300 or above).
3. Completion of the General Education studies as required by the University.
4. Completion of the nursing major's program of study as specified by the nursing department.
5. Completion of supporting courses as specified by the nursing department.
6. The student must file an application for the degree with the Registrar six months prior to the expected date of graduation.
7. Students may participate in commencement as August graduates only if they are within 12 hours of graduation by the end of the spring semester and have filed a plan of studies with the Registrar by April 1.
8. Completion of the HESI Computer adaptive Test (CAT)
9. Completion of the three-day HESI NCLEX review
10. Other University requirements.
11. Successfully demonstrating achieved competency on the HESI Exit Exam B Assessment, which is a score of 900 or above.
 - a. If the student does not pass the HESI Exit Exam B, the student will be required to take an NCLEX-RN review course at the student's expense before the director of nursing programs will release the student to take the NCLEX. This is in addition to the HESI NCLEX review course provided at the end of the final semester. If the student must sign up for an additional review course because of failing the Exit, the student will be required to:
 - i. Submit proof of official documentation of having completed an NCLEX review course, including the names of the corporation and the student, upon completion.

- ii. The student will not be released to sign up for the NCLEX exam until this documentation has been received and approved by the Associate Dean of Nursing.

Following graduation, Olivet Nursing Students from the Traditional Program are eligible to sit for the NCLEX-RN exam for licensure. Applications for this exam are available online from the Illinois Department of Financial and Professional Regulation website. Senior students will be advised regarding the NCLEX-RN application process.

FEES FOR STATE BOARDS

The student will be responsible for paying their own state license application fees and for fingerprinting prior to taking the examination for state boards.

POST GRADUATION ALUMNI SURVEY

Graduates can expect to receive a nursing alumni survey form one year and five years post-graduation. Information obtained will be used in program evaluation and to update files. Participation is encouraged.

LICENSURE REQUIREMENTS

The Division of Professional Regulation for the state of Illinois requires that all students preparing themselves to take the licensing exam to be registered nurse in Illinois must complete the following or similar personal history form as a part of the application process.

PART VI: Personal History Information (This part must be completed by all Applicants)	YES	NO
1. Have you been convicted of any criminal offense in any state or federal court (other than minor traffic violations)? <i>If yes, attach a statement for each conviction including date and place of conviction, nature of the offense and if applicable, the date of discharge from any penalty imposed.</i>		
2. Do you now suffer, have you suffered from, been diagnosed as having, or been treated for any disease or condition which is generally regarded by the medical community as chronic, i.e., (1) mental or emotional disease or condition; (2) alcohol or other substance abuse; (3) physical disease or condition that presently interferes with your ability to practice your profession? <i>If yes, attach a detailed statement, including an explanation of whether or not you are currently under treatment.</i>		
3. Have you been denied a professional license or permit, or privilege of taking an examination, or had a professional license or permit disciplined in any way by any licensing authority in Illinois or elsewhere? <i>If yes, attach a detailed explanation.</i>		
4. Have you ever been discharged other than honorably from the armed service or from a city, county, state or federal position? <i>If yes, attach a detailed explanation.</i>		
5. Are you a U.S. citizen OR a lawfully admitted alien of the United States?		

CRIMINAL BACKGROUND CHECK

Students applying for initial licensure in Illinois as registered nurses must submit to a criminal background check and provide evidence of fingerprinting process from the Illinois State police, or its designated agent. Fingerprints must be taken within 60 days prior to submission of the application for licensure. Information regarding licensure application will be presented to senior level nursing students in the last semester prior to graduation by the director of nursing programs.

PROGRAM EVALUATION

Assessment is an integral part of student learning. The assessment process involves observation and judgment of each student's academic performance on the basis of explicit criteria established in the course syllabi. In the assessment process feedback is also essential. Faculty feedback provides the student with information that can be used to reflect on one's personal and professional growth and development within the teaching-learning environment. Program assessment illustrates program effectiveness to the faculty and larger community. The achievement of program outcomes is determined by multiple assessments, the HESI exam scores, and the student's evaluation of course learning. Outcomes are analyzed and the aggregate data is used to develop, maintain, and revise the curriculum.

SHARED GOVERNANCE AND STUDENT ORGANIZATIONS

All students at ONU have the privilege of joining any organization on ONU campus for which they are eligible. Of special interest to students in nursing are Kappa Sigma and Nursing Students in Action.

THE HONOR SOCIETY OF NURSING, SIGMA THETA TAU INTERNATIONAL, KAPPA SIGMA CHAPTER

The Kappa Sigma Chapter of Sigma Theta Tau International invites nursing juniors and seniors with a grade point average of at least 3.0 or higher who demonstrate academic excellence, potential for leadership, and a desire to advance the profession of nursing. The top 35% of each class maybe eligible for membership into Sigma. Invitations to be inducted are extended from the chapter faculty counselors in the spring. Sigma's mission is advancing world health and celebrating nursing excellence in scholarship, leadership, and service. Sigma's vision is to be the global organization of choice for nursing.

If a student chooses to join the student may purchase their cords or stole from the [Sigma Marketplace](#) which may be worn at commencement. Olivet does not have a separate graduate nursing honors recognition during graduation.

NURSING STUDENTS IN ACTION (NSA)

All nursing students are automatically members of Olivet's Nursing Students in Action. The Executive Committee is composed of the President, Vice President, Treasurer and Events chair. In addition, two representatives are elected from each level to be representatives and are invited to executive meetings. All student nominations must be approved by the faculty prior to the election.

SHALOM PROJECT

Olivet Nazarene University encourages students to participate in one or more of the many local and international mission trips and projects offered throughout the year. Students must apply and meet the

criteria outlined by either the University or Department of Nursing to be eligible to be chosen for the team.

CEREMONY AND AWARDS

HONORS

Graduating seniors in nursing are eligible for faculty nomination to Who's Who in American Graduating seniors in nursing are eligible for faculty nomination to Who's Who in American Universities. Selection is made by a general faculty and student vote.

Phi Delta Lambda, a National Nazarene Honor Society, inducts high-ranking graduates into membership upon election by the faculty.

Sigma Theta Tau International, Kappa Sigma Chapter annually invites students who meet eligibility requirements to apply for induction.

AWARDS AND SCHOLARSHIPS

The School of Nursing nominates nursing students for the purpose of receiving various awards. If the proctor observes any violation of the exam rules, as listed under General Exam Rules section, the exam will be turned

The Charlotte Shugart Keck Nursing Scholarship was originated by family and friends of Charlotte Shugart Keck who served on the nursing faculty for many years prior to her death in 1995. This is an Olivet Nazarene University Foundation scholarship. The scholarship is awarded to a Level III nursing student each spring. The student selected by the nursing faculty and approved by the Vice President for Academic Affairs, must have achieved at least a 3.00 GPA. Other selection criteria include evidence of Christian character, demonstration of caring behaviors, excellence in clinical performance, and positive personal qualities.

The Kappa Sigma Chapter of Olivet Nazarene University awards a scholarship to one Level III student for their senior year. The student must have an overall grade point average of at least 3.00 and be eligible for membership into The Honor Society of Nursing, Sigma Theta Tau International. The nursing faculty recommends students from the group of possible inductees who are eligible for membership. The selection is made by the Kappa Sigma Scholarship Award Committee and approved by the Kappa Sigma Chapter Board of Directors.

Appendix A

AMERICAN NURSES ASSOCIATION CODE FOR NURSES

Code of Ethics for Nurses

The steering committee drafted a revised code. This draft was made available to the public for comments. After the comments were reviewed the *Code of Ethics for Nurses with Interpretive Statements* was revised in 2015.

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

American Nurses Association. (2015). *Code of ethics for nurses with interpretive statements*. Silver Spring, MD: Author. <https://www.nursingworld.org/codeofethics>

APPENDIX B

BILL OF RIGHTS AND CODE OF ETHICS

BILL OF RIGHTS AND RESPONSIBILITIES FOR STUDENTS OF NURSING

The NSNA Student Bill of Rights and Responsibilities was initially adopted in 1975. The document was updated by the NSNA House of Delegates in San Antonio, Texas (1991); and item #4 was revised by the NSNA House of Delegates in Baltimore, Maryland (2006). This document was updated by the NSNA House of Delegates in (2017).

1. Students should be encouraged to develop the capacity for critical judgment and engage in a sustained and independent search for truth.
2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom: students should exercise their freedom in a responsible manner.
3. Each institution has a duty to develop policies and procedures which provide and safeguard the students' freedom to learn.
4. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, color, creed, national origin, ethnicity, age, gender, marital status, life style, disability, or economic status.
5. Students should be free to take reasoned exception to the data or views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.
6. Students should have protection through orderly procedures against prejudiced or capricious academic evaluation, but they are responsible for maintaining standards of academic performance established for each course in which they are enrolled.

7. Information about student views, beliefs, political ideation, or sexual orientation which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as a basis of evaluation.
8. The student should have the right to have a responsible voice in the determination of his/her curriculum.
9. Institutions should have a carefully considered policy as to the information which should be a part of a student's permanent educational record and as to the conditions of this disclosure.
10. Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions publicly and privately.
11. Students should be allowed to invite and to hear any person of their own choosing within the institution's acceptable realm, thereby taking the responsibility of furthering their education.
12. The student body should have clearly defined means to participate in the formulation and application of institutional policy affecting academic and student affairs, e.g., through a faculty-student council, student membership or representation on faculty committees.
13. The institution has an obligation to clarify those standards of behavior which it considers essential to its educational mission, its community life, or its outcomes and philosophy.
14. Disciplinary proceedings should be instituted only for violations of standards of conduct formulated with significant student participation and published in advance through such means as a student handbook or a generally available set of institutional regulations. It is the responsibility of the student to know these regulations. Grievance procedures should be available for every student.
15. As citizens and members of an academic community, students are subject to the obligations which accrue to them by virtue of this membership and should enjoy the same freedoms of citizenship.
16. Students have the right to belong or refuse to belong to any organization of their choice.
17. Students have the right to personal privacy in their living space to the extent that the welfare and property of others are respected.
18. Adequate safety precautions should be provided by nursing programs, for example, adequate street lighting, locks, and other safety measures deemed necessary by the environment.
19. Dress code, if present in school, should be established with student input in conjunction with the school chair and faculty, so the highest professional standards are maintained, but also taking into consideration points of comfort and practicality for the student.
20. Grading systems should be carefully reviewed periodically with students and faculty for clarification and better student-faculty understanding.
21. Students should have a clear mechanism for input into the evaluation of nursing faculty.

From: <https://www.dropbox.com/sc/fi/9gclyp7hh3fexebrfqopc/Code-of-Ethics.pdf?rlkey=kqvgudd2ykwz6z17equh714vj&e=1&dl=0>

Appendix C

RATING SCALE FOR CLINICAL EVALUATION

OUTSTANDING (O):

Consistently superior in clinical performance, skill, synthesis of learning and application of nursing principles. Functions above expectations of student at this level.

1. Is able to function safely and effectively with minimal guidance in a relaxed and confident manner.
2. Demonstrates superior ability to make alert and informed observations.

3. Demonstrates superior ability to synthesize KNOWLEDGE; clinical performance is beyond expectations, making appropriate nursing judgments and intervening with minimal guidance.
4. Seeks out and assumes responsibility beyond that required, consistently seeking learning experiences.
5. Consistently demonstrates expected professional conduct.

SATISFACTORY (S):

Safe clinical performance; demonstrates expected skills, synthesis of learning and application of nursing principles at expected level.

1. Functions safely and accurately with guidance from the instructor.
2. Makes expected observations, demonstrating ability to relate and apply KNOWLEDGE.
3. Assumes responsibility for assignments; usually seeks out learning experiences.
4. Makes appropriate nursing judgments and intervenes with guidance.
5. Adequately demonstrates expected professional conduct.

NEEDS IMPROVEMENT (NI)

Clinical performance is not necessarily inadequate, however further assessment of knowledge, understanding, problem solving, technical skills, attitudes, and/or ethics/professionalism is needed to determine clinical competence (Rafiee et al., 2014).

UNSATISFACTORY (U)

Clinical performance inadequate; indicates lack of skill, unsafe nursing practice, inadequate depth of KNOWLEDGE, or application of nursing principles. Functions well below expectations.

1. Does not function safely even with guidance.
2. Does not demonstrate ability to make expected, obvious observations related to patient care.
3. Does not demonstrate ability to relate KNOWLEDGE to clinical situation at expected level.
4. Has difficulty accepting responsibility, seldom seeks learning experience.
5. Does not initiate nursing intervention without maximum guidance.
6. Demonstrates unprofessional clinical conduct.

If a student receives a “Needs Improvement” in a category row on the daily clinical evaluation tool and the instructor determines the student has not improved in that category on a subsequent day, the student will receive an unsatisfactory rating in that category for that day. NOTE: If there is already another unsatisfactory rating in a category for that day, the student will receive an unsatisfactory clinical day as outlined above.

Two unsatisfactory ratings in any one category row on the Daily Clinical Evaluation tool results in an unsatisfactory clinical day. Two unsatisfactory ratings in different categories (same column on evaluation tool) on one day also would result in an unsatisfactory clinical day.

Two unsatisfactory clinical days will result in automatic failure of that clinical course and necessitate the repetition of that course in order to progress in the nursing program.

Rafiee, G., Moattari, M., Nikbakht, A. N., Kojuri, J., & Mousavinasab, M. (2014). Problems and challenges of nursing students' clinical evaluation: A qualitative study. *Iranian Journal of Nursing and Midwifery Research*, 19(1), 41–49.

Appendix D

Drug list for Program

Please use this core list of drugs to study. It is based on the categories you learned in Introduction to Pharmacology.
You may also learn additional drugs in your courses and clinical.

Level 1	Level 2	Level 3	Level 4
Fundamentals Acetylsalicylic acid (Aspirin) Ibuprofen (Motrin) Ibuprofen/NSAID (Advil) Hydrocodone- Acetaminophen (Hydrocodone) Dicyclomine (Bentyl) Hypromellose (Artificial tears) Neomycin/Polymyxin B/Hydrocortisone (Cortisporin ear gtt) Corticosteroid (Prednisone) Influenza vaccine Albuterol (Proventil) Ipratropium bromide (Atrovent, Ventolin) Methylprednisolone (Solu- Medrol) Warfarin (Coumadin) Heparin sodium (Heparin) Enoxaparin (Lovenox) Vit K Potassium Sodium Chloride Furosemide (Lasix) Metronidazole (Flagyl) GaviLyte-G (Golytely) Bisacodyl (Dulcolax) Pepto Bismul, Diphenoxylate/atropine (Lomotil) Docusate sodium (Colace) Docusate sodium (Senekot) Magnesium hydroxide (MOM) Ciprofloxacin (Cipro) Levofloxacin (Levaquin) Oxybutynin (Ditropan) Tamsulosin (Flomax) Phenazopyridine (Pyridium) Zovirax (Acyclovir) Ferrous Sulfate Acetaminophen (Tylenol) water & fat soluble vitamins	Adult Health I Antibiotics - Amoxicillin (Amoxil), Azithromycin (Zithromax), Cefazolin (Ancef), Ceftriaxone (Rocephin), Cephalexin (Keflex), Erythromycin, Sulfamethoxazole/trimethoprim (Bactrim), Ampicillin/Sulbactam (Unasyn), Piperacillin/tazobactam (Zosyn). Antibiotics II Ciprofloxacin (Cipro), Gentamycin, Levofloxacin (Levaquin), Metronidazole (Flagyl), Pyridium (Phenazopyridine), Vancomycin (Vancocin). Antivirals Acyclovir (Zovirax), Fluconazole (Diflucan), Nystatin (Mycostatin). Antiinflammatory Allopurinol (Zyloprim), Celecoxib (Celebrex), Ketorolac (Toradol). Antihypertensives Captopril (Capoten), Carvedilol (Coreg), Clonidine (Catapres), Enalapril (Vasotec), Losartan (Cozaar), Valsartan (Diovan), Verapamil (Calan), Lisinopril (Prinivil). Diuretics Furosemide (Lasix), Hydrochlorothiazide (HydroDIURIL), Spironolactone (Aldactone). Respiratory Methylprednisolone (Medrol, Solu-Medrol) Fluids and Electrolytes Dextran, Fresh Frozen Plasma (FFP), Packed Red Blood Cells (PRBC's), Potassium, Sodium Chloride (NaCl) Antithyroid Levothyroxine (Synthroid, Levothyroid, Levoxyl) Antidiabetics Glipizide(Glucotrol), Insulin glargine (Lantus), Insulin detemir (Levemir), Insulin NPH, Insulin Lispro (Humalog), Metformin (Glucophage), Regular Insulin	Adult Health II Acid Controlling Drugs - Ranitidine (Zantac), Omeprazole (Prilosec), Adrenal Drugs - Dexamethasone (Decadron), Hydrocortisone (Cortisol), Deltasone (Prednisone), Fludrocortisone (Florinef), Dexamethasone (Decadron) Adrenergic Drugs – Epinephrine (Epi) Adrenergic-Blocking Drugs - Phenoxylbenzamine (Dibenzylamine) Analgesic Drugs - Acetaminophen (Tylenol), Bortezomib (Velcade), Hydromorphone (Dilaudid), Tramadol (Ultram) Anti-Emetic and Anti-Nausea Drugs - Ondansetron (Zofran) Antiepileptics Drugs - Capecitabine (Xeloda), Phenytoin (Dilantin), Fosphenytoin (Cerebyx), Carbamazepine (Tegretol), Oxcarbazepine (Trileptal) Lamotrigine (Lamictal), Valproic Acid (Depakote), Primidone (Mysoline) Gabapentin (Neurontin), Pregabalin (Lyrica), Levetiracetam (Keppra), Topiramate (Topamax), Ezogabine (Potiga), Diazepam (Valium), Lorazepam (Ativan) Antifungal Drugs – Ketoconazole (Nizoral), Fluororacil (5 FU) Antigout Drugs - Allopurinol (Zyloprim), Coagulation Modifier Drugs – Argatroban (Acova), Factor VIII (Octocog alfa), Blood products, - Albumin, Coagulation factors, Immunoglobulins, Antihistamines, Decongestants, Antitussives, and Expectorants - Cyproheptadine (Periactin), Diphenhydramine (Benadryl)	Adult Health III All previous drugs plus Anticoagulants Fibrinolytics Heparin drips ADRENERGIC DRUGS- Levophed (Norepinephrine) Epinephrine Dobutamine (Dobutrex) Milrinone (Primacor)

	<p>(Humulin R, Novolin R), Sitagliptin (Januvia).</p> <p>GI Meds Acid Controlling Prevacid, Cimetidine (Tagamet), Famotidine (Pepcid), Omeprazole (Prilosec), Pantoprazole (Protonix), Sucralfate (Carafate)</p> <p>GI Meds Antiemetic and Antinausea Metoclopramide (Reglan), Ondasetron (Zofran)</p> <p>GI Meds Bowel Disorder Drugs Docusate Sodium (Colace), Magnesium Hydroxide (MOM). Analgesics Acetaminophen (Tylenol), Codeine Sulfate, Dilaudid, Fentanyl, Lidocaine, Morphine Sulfate, Naloxone HCL (Narcan), Oxycodone HCL (Oxycontin), Tramadol (Ultram)</p> <p>CNS Depressants and Muscle Relaxants Diazepam (Valium), Midazolam (Versed), Flumazenil, Dantrolene AED's Topiramate (Topamax)</p> <p>General and Local Anesthetics Dexmedetomcholine (Precedex), Ketamine (Ketalar), Lidocaine (Xylocaine), Nitrous Oxide, Propofol (Diprivan), Rocuronium (Zemuron), Sevoflurane (Ultane)</p> <p>Analgesics Fentanyl (Duragesic), Meperidine HCL (Demerol), Methadone HCL (Dolophine), Morphine Sulfate, Naloxone HCL (Narcan), Oxycodone HCL (OxyContin)</p> <p>Pharmacology for Mental Health: Alprazolam (Xanax) Amitriptyline (Elavil) Aripiprazole (Abilify) Bupropion (Wellbutrin)- Buspirone (BuSpar) Citalopram (Celexa) Clozapine (Clozaril) - - Diazepam (Valium) Duloxetine (Cymbalta) Fluoxetine (Prozac) Haloperidol (Haldol) Lithium Lorazepam (Ativan) Mirtazapine (Remeron)</p>	<p>Antineoplastic Drugs part one: Paclitaxel (Taxol), Paclitaxel (Taxol), Etoposide (VP16), Docetaxel (Taxotere), Fluorouracil (5FU). Vincristine (Vincasar PFS) Antineoplastic Drugs part two: Carboplatin (Paraplatin), Cisplatin (Platinol), Doxorubicin (Adriamycin) Carmustine (Gliadel wafers)</p> <p>Targeted therapy: Tarceva, Bevacizumab (Avastin), Mitotane (Lysodren), Doxorubicin, (Adriamycin), Cyclophosphamide (Cytoxan), Blenoxane (Bleomycin), Carboplatin (Paraplatin), Cisplatin (Platinol), Imatinib (Gleevec), Biologic Response Modifying and Antirheumatic Drugs - Rituximab (Rituxan), Trastuzumab (Herceptin), Cetuximab (Erbix), Methotrexate (Trexall) Epoetin Alfa (Epogen), Filgrastim (Neupogen), Aranesp (Neupogen), Lenalidomide (Revlimid), Azacitidine (Vidaza), Decitabine (Dacogen),</p> <p>Antitubercular Drugs - Rifadin (Rifampin), Pyrazinamide (PZA), Ethambutol (Myambutol)</p> <p>Antiviral Drugs - Zoledronic acid (Zometa), Pamidronate (Aredia), Lamivudine (Epivir), Zidovudine (Retrovir), Raltegravir (Isentress), Efavirenz/Emtricitabine/Tenofovir (Atripla), Lamivudine/Zidovudine (Combivir), emtricitabine, rilpivirine, and tenofovir disoproxil fumarate (Complera), emtricitabine/tenofovir disoproxil fumarate (Truvada) Acyclovir (Zovirax)</p> <p>Central Nervous System Depressants and Muscle Relaxants - Baclofen (Lioresal)</p> <p>Coagulation Modifier Drugs – Antithrombotics - Alteplase (Activase), Clopidogrel (Plavix), Aspirin (ASA), Temozolomide (Temodar)</p> <p>Chemotherapy: multiagent</p> <p>Dermatologic Drugs/ Adrenal Drugs - corticosteroids Methylprednisolone (Solumedrol), Deltasone (Prednisone)</p>	
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	<p>Risperidone (Risperdal)</p> <p>Selegiline transdermal patch (Emsam)</p> <p>Trazodone (Desyrel, Oleptro)</p>	<p>Fluid and Electrolytes - Tolvaptan (Samsca), Conivaptan (Vaprisol), Furosemide (Lasix), Bumetanide (Bumex) hypertonic saline (3% NaCl), Metopirone (Metyrapone), Aminoglutethimide (Elipten)</p> <p>General and Local Anesthetics – Morphine Sulfate (Morphine)</p> <p>GI meds: Radiation Tx, Brachytherapy, Targeted therapy growth factor</p> <p>Men's Health Drugs - Leuporelin (Lupron), Goserelin (Zoladex), Finasteride (Proscar), Sildenafil (Viagra), Tadalafil (Cialis) Vardenafil (Levitra), Flutamide (Eulexin), Bicalutamide (Casodex)</p> <p>Psychotherapeutic Drugs - Amitriptyline (Elavil), Duloxetine (Cymbalta), Trazadone (Desyrel)</p> <p>Respiratory Drugs Tiotropium bromide (Spiriva) , Fluticasone furoate and vilanterol (Breo Ellipta) , Fluticasone propionate and salmeterol (Advair), Budesonide and formoterol (Symbicort), Formoterol and mometasone (Dulera), Albuterol (Ventolin or Proventil) , Salmeterol (Serevent), Ipratropium (Atrovent), Umeclidinium (Incruse Ellipta), Theophylline(Theo Dur), Aminophylline, Montelukast (Singulair), Zafirlukast (Accolate), Fluticasone propionate (Flovent), Methylprednisolone (Solumedrol) Morphine Sulfate (Morphine), - Deltasone (Prednisone)</p> <p>Cardiac Drugs:</p> <p>Adrenergic -Blocking Drugs - Labetalol (Trandate) ,Carvedilol (Coreg),Metoprolol (Toprol),</p> <p>Coagulation Modifier Drugs - Warfarin Sodium (Coumadin), Fondaparinux (Arixtra), Rivaroxaban (Xarelto), Apixaban (Eliquis), Dabigatran (Pradaxa), Enoxaparin (Lovenox) ,Clopidogrel (Plavix), Heparin, Alteplase (Activase), Protamine Sulfate, Vitamin K,</p> <p>Antihypertensive Drugs - Enalapril (Vasotec), Losartan (Cozaar),Valsartan (Diovan),</p> <p>Anti Dysrhythmic Drugs - Fosinopril (Monopril), Dofetilide</p>	
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		<p>(Tikosyn), Amiodarone (Cordarone),</p> <p>Heart Failure Drugs</p> <p>Digoxin (Lanoxin), Diltiazem (Cardizem),</p> <p>Diuretic Drugs - Furosemide (Lasix), Hydrochlorothiazide (Hydrodiuril),</p> <p>Statins -Simvastatin (Zocor), Atorvastatin (Lipitor),</p> <p>Calcium channel blocker - Verapamil (Calan),</p> <p>Electrolytes:</p> <p>Potassium, Magnesium</p> <p>TPN (Total parenteral nutrition)</p> <p>Women's Health Drugs -</p> <p>Calcitonin, Tamoxifen (Soltamox), Anastrozole (Arimidex), oral contraceptives, Mifepristone (Korlym), hormone replacement therapy</p> <p>OB</p> <p>Antihypertensives:</p> <p>Hydralazine (Apresoline)</p> <p>Labetalol</p> <p>Methyldopa (Aldomet)</p> <p>Nifedipine (Procardia)</p> <p>Ophthalmic</p> <p>Erythromycin</p> <p>MMR</p> <p>RhO (D) immunoglobulin (RhoGAM)</p> <p>Clomiphene (Clomid)</p> <p>Contraceptive drugs:</p> <p>Dinoprostone (Cervidil)</p> <p>Medroxyprogesterone (Depo-Provera)</p> <p>Methylergonovine (Methergine)</p> <p>Oxytocin (Pitocin)</p> <p>In addition:</p> <p>Misoprostol (Cytotec)</p> <p>Hemabate</p> <p>Terbutaline (Brethine)</p> <p>Indomethacin (Indocin)</p> <p>Butorphanol (Stadol)</p> <p>Nubain</p> <p></p> <p>Peds</p> <p>Ceftriaxone (Rocephin),</p> <p>cephalexin (Kelfex),</p> <p>sulfamethoxazole/trimethoprim (Bactrim),</p> <p>Amoxicillin/clavulanic acid (augmentin), Gentamycin Sulfate (gentamycin), Nitrofurantoin</p>	
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		(Macrobid), Diphenhydramine (Benadryl), Loratadine (Claritin), Baclofen (Lioresal), Methylphenidate (Ritalin), Methylphenidate (Concerta), Amphetamine; Dextroamphetamine (Adderall), Lisdexamfetamine (Vyvanse), Atomoxetine (Strattera), Diphtheria and tetanus toxoids and acellular pertussis vaccine tetanus (Tripedia, Daptacel, Infanrix), Haemophilus influenza type b conjugate vaccine (Hib), Hepatitis B virus vaccine (recombivax HB, Engerix-B), Human papillomavirus vaccine (HPV), Influenza virus vaccine (Fluzone, Fluvirin, FluMist), Meningococcal vaccine (Menactra, Menveo), Pneumococcal vaccine (Pneumovax and thirteen valent (PV13, Prevnar 13), Poliovirus vaccine (OPV), varicella virus vaccine (Varivax)	
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Appendix E Skill Cards

All Level 0 Skills MUST be Validated in the VLC (Virtual Learning Center) Prior to performing in Clinical												
Level	Validated Skills		Peer Initial & Date		Peer Initial & Date		VLC Validation		1st Time in Clinical		Independently	
Level 0	Abdominal Binder											
Level 0	Active/Passive Range of Motion											
Level 0	Backrub											
Level 0	Bed Occupied	Unoccupied										
Level 0	Bed bath	Shower										
Level 0	Bedpan											
Level 0	Body Mechanics											
Level 0	Facial Shaving	Feeding										
Level 0	Handwashing											
Level 0	Isolation PPE											
Level 0	Oral Care	Peri Care										
Level 0	Positioning/ Turning											
Level 0	Ted hose	Dressing a client										
Level 0	Transferring (1 and 2 person)											
Level 0	Vital Signs	Blood Pressure										
Level 0		Radial/Apical pulse										
Level 0		Respirations										
Level 0		Pulse Oximeter										
Level 0			Axillary									
Level 0			Oral									
Level 0			Tympanic									
Level 0			Rectal									
KEY: Students need 2 peers to sign off each skill prior to validation or performance in clinical. Validated skills need a professor to sign-off skills done appropriately prior to performance in clinical. 1st Time in Clinical = 1st time student performs skill on a client in clinical setting. Individual = student has completed the 1st time in clinical and other demonstrations of this skill, and is able to do the skill independent of a prof/preceptor (<u>does not apply to</u> those items with an "X" in the column/row). NOTE: No skill will be performed in the clinical setting without two peer initials and VLC validation where applicable.												
Non Validated Skills Below												
Level 1	Assessment: Genitalia						X					

Level 1	Doppler				X		
Level 1	Glucoscan				X		
Level 1	Medication Administration	Intranasal			X		X
Level 1	Oxygen: Nasal Cannula				X		
Level 1	Post mortem care				X		
Level 1	SCD's (Sequential Compression Device)				X		
Level 1	Stool specimen				X		
Level 1	Strain urine				X		
Level 1	Telemetry monitor application				X		
Level 2	Bladder scanner		X	X	X		X
Level 2	Blood transfusion: observation/maintenance				X		X
Level 2	Cast care				X		
Level 2	Drains: Care, I&O, removal				X		
Level 2	IV site care				X		
Level 2	Ostomy care/irrigation				X		
Level 2	Oxygen	Non-Rebreather			X		
Level 2		Simple Mask			X		
Level 2	Pin care				X		
Level 2	Staple/ suture removal				X		X
Level 2	Traction		X	X	X		X
Level 2	TPN/PPN		X	X	X		X
Level 3	Peritoneal dialysis		X	X	X		X
Level 3	Mother Baby	Circumcision care			X		
Level 4	Ambu bag/ Crash cart check				X		

All Skills MUST be Validated in the VLC (Virtual Learning Center) Prior to performing in Clinical

Level	Validated Skills			Peer Initial & Date		Peer Initial & Date		VLC Validation		1st Time in Clinical		Independently	
Level 1	Catheterization	Male	Female									X	X
Level 1	Foley Care / Removal												X
Level 1	Dressings (dry/aseptic)												
Level 1	Enema												
Level 1	Oral suctioning (Yankauer)												X
Level 1	Donning Sterile gloves/ Sterile Field												
Level 1	Medication Admin	Eye drops											X
Level 1		Ointment											X
Level 1		Ear drops											X
Level 1		IM (intramuscular injection)											X
Level 1		Patches											X
Level 1		PO (oral) / Sublingual										X	X
Level 1		SQ (subcutaneous injection)											X
Level 1		Suppository											X
Level 1	Health Assessment Skills	Abdomen											
Level 1		Chest/Lungs											
Level 1		Ears/Eyes											
Level 1		Head/Neck/Throat											
Level 1		Head/Neck/Lymph											
Level 1		Head/Neck/Vascular											
Level 1		Musculoskeletal											
Level 1		Neurological											
Level 1		Skin/Hair/Nails											
Level 2		Medication Administration SQ (subcutaneous) Insulin											X
Level 2	Catheter irrigation	Continuous											X
Level 2		Intermittent											X
Level 2	Intravenous	IV Insertion											X
Level 2		IV bag hang/change											X
Level 2		IV discontinue											
Level 2		IV lock/flush											X

Level 2		IV pump meds					X
Level 2		Convert to saline lock					X
Level 2		IV push meds					X
Level 2		Insertion					X
Level 2	NG tube (Nasogastric) or G tube (Gastric)	Removal					X
Level 2		Feeding/care					X
Level 2		Medications					X
Level 2							
Level 3	Central Line Care	Blood draw					X
Level 3		Dressing change					X
Level 3		Central line flush					X
Level 3		Medications					X
Level 3	Dressing change (complex) (wet to dry)						X
Level 3	Port a cath access						X
Level 3	Suctioning	Nasopharyngeal /Oropharyngeal					
Level 3	Tracheal	Suctioning (sterile)					X
Level 3		Trach care/inner cannula change					X
Level 3	Pediatric / Newborn Medication Administration		PO				X
Level 3			IM				X
Level 3	Pediatric assessment						X
Level 3	Pediatric / Newborn Vital Signs						
Level 3	Mother / Baby	Newborn Assessment					
Level 3		Postpartum Assessment					X
Level 4	Chest Tube set-up						X
Level 4	EKG 12 lead application						
Level 4	Suctioning - Inline ET						

Peer & Faculty/Nurse/Preceptor Initials, Signature & Credentials: