D’Youville College
School of Nursing

Manual for APRN Clinical Preceptors
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Overview of the School of Nursing

D’Youville College was founded in 1908 by the Grey Nuns of the Sacred Heart led by St. Marguerite d’Youville. The first nursing students enrolled in 1942 and D’Youville’s is the oldest continuously enrolling Bachelor of Science nursing program in Western New York. In 2016, the School of Nursing is the largest school at the college with 260 graduate students among the nursing student body with just over 900 students. The Family Nurse Practitioner (FNP) program began in 1997 and the newly approved Psychiatric-Mental Health Nurse Practitioner (PMHNP) program enrolled the first cohort of students in fall 2016.

Mission of the School of Nursing

The mission of the D’Youville College School of Nursing is to educate competent, compassionate, knowledgeable, professional nurses who provide patient directed healthcare to a culturally and spiritually diverse population in a variety of settings in the community. Graduates will be leaders in the healthcare setting: responsible, ethical and accountable members of the nursing profession, committed to the pursuit of excellence in practice, communication, innovation, research and lifelong learning.

Recognition of Preceptors

Thank you for agreeing to precept a nurse practitioner student from D’Youville College. The School of Nursing seeks to provide excellence in graduate nursing education and recognizes that this is only possible because of collaborative relationships with community preceptors and stakeholders. In recognition of your efforts, the School of Nursing offers the following benefits:

- Verification of NP Precepting for recertification by American Nurses Credentialing Center
- Tuition voucher to be used by preceptor, family member or business associate of preceptor
- Certificate of Appreciation for service to the School of Nursing – awarded annually.
NONPF Core Competencies for Nurse Practitioner Students (2012)

The National Organization of Nurse Practitioner Faculties publishes expected core competencies for all nurse practitioner students to enter practice regardless of specialty area. These competencies or expected behaviors are organized by domains and include:

**Scientific Foundation Competencies**
- Critically analyzes data and evidence for improving advanced nursing practice.
- Integrates knowledge from the humanities and sciences within the context of nursing science.
- Translates research and other forms of knowledge to improve practice processes and outcomes.
- Develops new practice approaches based on the integration of research, theory, and practice knowledge

**Leadership Competencies**
- Assumes complex and advanced leadership roles to initiate and guide change.
- Provides leadership to foster collaboration with multiple stakeholders (e.g. patients, community, integrated health care teams, and policy makers) to improve health care.
- Demonstrates leadership that uses critical and reflective thinking.
- Advocates for improved access, quality and cost effective health care.
- Advances practice through the development and implementation of innovations incorporating principles of change.
- Communicates practice knowledge effectively both orally and in writing.
- Participates in professional organizations and activities that influence advanced practice nursing and/or health outcomes of a population focus.

**Quality Competencies**
- Uses best available evidence to continuously improve quality of clinical practice.
- Evaluates the relationships among access, cost, quality, and safety and their influence on health care.
- Evaluates how organizational structure, care processes, financing, marketing and policy decisions impact the quality of health care.
- Applies skills in peer review to promote a culture of excellence.
- Anticipates variations in practice and is proactive in implementing interventions to ensure quality.

**Practice Inquiry Competencies**
- Provides leadership in the translation of new knowledge into practice.
- Generates knowledge from clinical practice to improve practice and patient outcomes.
- Applies clinical investigative skills to improve health outcomes.
- Leads practice inquiry, individually or in partnership with others.
- Disseminates evidence from inquiry to diverse audiences using multiple modalities.
- Analyzes clinical guidelines for individualized application into practice

**Technology and Information Literacy Competencies**
- Integrates appropriate technologies for knowledge management to improve health care.
- Translates technical and scientific health information appropriate for various users’ needs.
- Assesses patient’s and caregiver’s educational needs to provide effective, personalized care.
• Coaches the patient and caregiver for positive behavioral change.
• Demonstrates information literacy skills in complex decision making.
• Contributes to design of clinical information systems to promote safe, quality effective care.
• Uses technology systems that capture data on variables for the evaluation of nursing care.

**Policy Competencies**

• Demonstrates an understanding of the interdependence of policy and practice.
• Advocates for ethical policies that promote access, equity, quality, and cost.
  Analyses ethical, legal, and social factors influencing policy development.
  Contributes in the development of health policy.
• Analyzes the implications of health policy across disciplines.
  Evaluates the impact of globalization on health care policy development.

**Health Delivery System Competencies**

• Applies knowledge of organizational practices and complex systems to improve care delivery.
• Effects health care change using broad based skills including negotiating, consensus-building, and partnering.
• Minimizes risk to patients and providers at the individual and systems level.
• Facilitates the development of health care systems that address the needs of culturally diverse populations, providers, and other stakeholders.
• Evaluates the impact of health care delivery on patients, providers, other stakeholders, and the environment.
• Analyzes organizational structure, functions and resources to improve the delivery of care.

7. Collaborates in planning for transitions across the continuum of care.

**Ethics Competencies**

• Integrates ethical principles in decision making.
• Evaluates the ethical consequences of decisions.
• Applies ethically sound solutions to complex issues related to individuals, populations and systems of care.

**Independent Practice Competencies**

• Functions as a licensed independent practitioner.
  Demonstrates the highest level of accountability for professional practice.
  Practices independently managing previously diagnosed and undiagnosed patients.
• Provides the full spectrum of health care services to include health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative, and end of life care.
• Uses advanced health assessment skills to differentiate between normal, variations of normal and abnormal findings.
• Employs screening and diagnostic strategies in the development of diagnoses.
• Prescribes medications within scope of practice.
  Manages the health/illness status of patients and families over time.
• Provides patient-centered care recognizing cultural diversity and the patient or designee as a full partner in decision-making.
• Works to establish relationship with patient characterized by mutual respect, empathy, and collaboration.
• Creates a climate of patient-centered care to include confidentiality, privacy, comfort, emotional support, mutual trust, and respect.
• Incorporates the patient’s cultural/spiritual preferences, values, and beliefs into health care.
• Preserves patient control over decision-making negotiating a mutually acceptable care plan

**Specific Clinical Course Objectives**

Prior to beginning the clinical phase of their NP program, students successfully complete foundational preparation with Advanced Health Assessment and Lab, Advanced Pathophysiology, Advanced Pharmacology and the required pre-requisite didactic courses in pediatrics, women’s health and adult/older adult health. Each clinical course has specific outcomes and objectives and are listed at the end of this manual. Students also develop skills in assessment of evidence-based practice during their research sequence.

**Selection Criteria for Preceptors**

The National Organization of Nurse Practitioner Faculties (NONPF) and the Commission on Collegiate Nursing Education (CCNE) dictate standards for selecting preceptors which include:
1. Preceptors must hold an active, unrestricted professional or provincial license
2. Preceptors must have a minimum of 1-year of professional practice in his or her specialty
3. Preceptors must be certified in his or her specialty
4. Nurse practitioner preceptors should hold a masters or doctoral degree from CCNE or ACEN accredited institution (*in certain circumstances preceptors, such as midwives, may not hold terminal degrees; the program director will determine if those preceptors meet standards).

**Process for Students Requesting Clinical Preceptors and Sites**

Students are responsible to identify potential preceptors and sites. During their acceptance interview with the director of the Family Nurse Practitioner program, students are informed of this responsibility and encouraged to begin thinking about future preceptors and clinical settings. Suggested avenues to identify preceptors include current professional colleagues in the work environment, community contacts and professional organizations such as the Nurse Practitioner Association of New York State which students may join. Students are encouraged to consider arranging clinical rotations at least one semester prior to beginning the experience.

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Students submit the name and professional contact information of potential preceptors to the Graduate Clinical Placement Liaison – this can be done in person by completing a “blue sheet” and putting it in the mailbox of the Clinical Placement Liaison. Students may also complete the fillable PDF on the Graduate Student Forum posted on the LMS and the form is delivered electronically to the Clinical Placement Liaison. If the preceptor has agreed to this clinical request and the college already has a contract with that organization, the contract process is generally accomplished in 4-6 weeks. New contracts will take longer. The Graduate Clinical Placement Liaison will notify all students when they may begin their rotations. NO rotations may begin before a contract is in place.

Organizations may ask for additional health records such as immunizations. Certain health care providers (such as the VAMC) require completion of online learning and security clearance in advance of considering students for placements. Some preceptors require students to send in their CV and interview with the organization before beginning the rotation. Students should be prepared to articulate their skills in a succinct manner and have their CV updated.

**Student Responsibilities before and during Clinical Rotations:**

- Students must provide any additional information requested by a clinical agency prior to beginning each rotation.
- License and CPR must be up to date and a hard copy must be in the student file in the SON.
- It is crucial that students are prepared for clinical rotations. Reviewing common health problems in standard texts and pocket references is essential to be prepared for clinical rotations.
- FNP Students will complete 200 hours in pediatrics, 200 hours in womens’ health and 300 hours in an adult health setting for a total of 700 clinical hours throughout the program.
- PMHNP students will complete a total of 540 clinical hours throughout the program.
- Students will deliver a copy of the Clinical Evaluation Form to the preceptor to complete. Any rotation of more than 40 hours will require a Clinical Evaluation to be complete by the preceptor.
- Students will log all encounters on the Clinical Log and have the preceptor initial the logs for each clinical day. The preceptor’s signature should be on one of the pages.
• All NP students are adult learners and expected to critique their learning needs, strengths and weaknesses.

• Students must coordinate their clinical site visit with the college faculty and clinical site.

• Preceptors should not be expected alter their schedules on the day of the clinical site visit – faculty can see students in any setting and with any patient type.

• Students should notify the assigned clinical faculty of any issues that arise in the clinical setting.

• No more than 100 subspecialty hours may be done throughout the entire program and the subspecialty hours are generally done during the adult rotation. With permission of clinical faculty, 50 subspecialty hours may be done in either pediatrics or womens health. Again, the total number of subspecialty hours may not be more than 100 for the entire program.

• Complete an Evaluation of the Site and Evaluation of Preceptor for each rotation.

**Preceptor Responsibilities during Clinical Rotations:**

• Agree to precept the student in the clinical setting – this role involves serving as a clinical expert and role model for the student.

• Preceptors (or an associate) will provide a brief orientation to the clinical site and provide space for the student’s clinical experience.

• Provide the student with feedback on performance of their evolving clinical skills including history taking, physical examination, assessments, refining differential diagnoses and discussion of treatment plans (with medication management, prescribing, referrals, diagnostics, coding).

• Preceptors mentor NP students on their journey from novice to expert into a new role.

• Communicate with clinical faculty any clinical or professional concerns or issues that arise.

• Agree to a site visit by clinical faculty member at the setting. The site visit is generally no longer than one hour and should not interfere with the normal work flow of the office.
Faculty Responsibilities during Clinical Rotations:

- Collaborate with preceptor to maximize student learning during the clinical experience
- Monitors student’s progress to assure meeting benchmarks for evaluation
- Arranges and completes site visit/s as necessary
- Evaluates student’s overall clinical performance and provides constructive feedback.
- Awards final grade for each rotation.

Expectations for Professional Conduct for Students in the NP Programs

Students are expected to conduct themselves as professionals at all times. Serious violations of accepted standards in professional conduct are grounds for immediate withdrawal from class, failure of the class (with F grade) and dismissal from the program.

General guideline for class/seminar: behavior and professional conduct:

1. In class, professional behavior is expected from all students when interacting with professors, ancillary department personnel (secretaries), guest speakers and classmates.
   a. Professional behaviors include focusing upon pertinent topics for clinical discussion and refraining from personal and unrelated conversation during class.
   b. Chronic tardiness interferes with quality classroom learning. Students who are frequently tardy may be penalized with points deducted from the final grade.
   c. Students are expected to remain in attendance for the entire classroom lecture or seminar. If circumstances warrant leaving class early, notify the instructor.
   d. Students are responsible for obtaining materials including lecture notes or handouts for any time they are absent. Each 1-hour of seminar absence requires 4 additional hours of clinical time.

General guideline for behavior and professional conduct during clinical rotations:

2. In the clinical setting, you represent D’Youville College and are a guest in each setting. Respect toward the preceptor as well as their staff is expected. Appearance, dress, hygiene, behavior and preparation should reflect professional standards. (See Standards for Professional Appearance for NP Students for additional details).

3. Unprofessional clinical behavior of any kind, that is reported by the community preceptor or is observed by the college faculty, will result in class failure (grade of F) and dismissal from the program regardless of grades for other course requirements.

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4. Lab coats are required – the coat may be short or long. The DYC logo must be sewn on either sleeve.

5. Professional dress is required for all clinical rotations.

6. Hair is neatly groomed for all students and be pulled back if it falls into the exam field.

7. NO artificial nails will be allowed. Nails should be short and if nail polish is used, only solid, clear polish is allowed and no nail designs will be permitted.

8. Students are expected to remain in clinical for the entire shift. If circumstances warrant leaving clinical early, this must be communicated to the preceptor.

9. At the completion of each clinical practicum, every student is expected to thank his/her preceptor and office staff in writing.

10. Cell phones and pagers must be turned off during classes AND in clinical settings. In the clinical setting, Smartphone usage should only be related to the clinical practicum. Texting is not appropriate in clinical. No ear phone devices are to be worn in class or in the clinical setting. If you must return an emergency call, you should leave the classroom or clinical setting without disrupting others.

   a. Students will follow the institution’s policy regarding the appropriate area for cell phone usage if phone calls must be placed. Sending and receiving personal texts and other media messages while in clinical will be deemed unprofessional behavior.

11. Violations of the School of Nursing Social Media Policy will be deemed unprofessional behavior. References that identify students as attending D’Youville College and contain profanity, images of drug or alcohol abuse, explicit sexual conversation, comments that defame faculty or comments that are detrimental to the college or the School of Nursing will result in a grade of “F” for the course.

12. Health care facilities are smoke free. NP students are not permitted to smoke on the campus of any clinical site.

**Standards for Professional Appearance and Clinical Dress Code for NP Students**

Nurse practitioners must exhibit professionalism during interactions with the public, patients and their colleagues. Nurse practitioner students should begin to model professional behaviors during their education in preparation for their new role. This preparation includes professional dress. The following guidelines have been developed to assure that FNP students at D’Youville
College adhere to the standards required for their evolving role in clinical practice. The requirements for clinical practice include:

1. Lab coats (short or long) with the D’Youville College patch sewn onto either the front placard or either arm must be worn unless otherwise directed by preceptors.
2. Official D’Youville College Student Name Tags must be worn and be visible.
3. Women are to wear generally accepted business clothing. This may include slacks – no shorts, jeans or Capris are to be worn in clinical. Skirts or dresses must be knee length.
4. Men are to wear pants, shirts, ties and shoes. No T-shirts, jeans or sneakers are appropriate for clinical rotations.
5. Nails should be well groomed and no longer than ¼ inch from the tip in length and without decoration. Polish, if used, should be solid, pale and clear in color. NO artificial nails or nail tips are allowed. This requirement begins upon first course attendance. A student with artificial nails will not be allowed in clinical until the nails are removed.
6. All tattoos must be covered.
7. Beards and mustaches must be kept short, neat and trimmed.
8. Hair color, hair style and ornamentation must be professional. No facial rings or metal body art may be worn in clinical. Hair color should be natural. Any hair dyes including but not limited to pink, green, red, blue, orange and yellow are not appropriate for clinical practice settings during rotations for nurse practitioner students.
9. Opaque or dark sunglasses are not to be worn in class or clinical areas.
10. Cosmetics and fragrances should be conservative.
SON Nurse Practitioner Faculty and Staff

- DeLaOkuira (Lea) Smith  Clinical Placement Liaison  smithde@dyce.edu
- Patricia Quinn  Graduate Secretary  quinnnp@dyce.edu
- Nissa Morin  Exec. Asst to Dean  morinl@dyce.edu
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- Dr. Kathleen Mariano  marianok@dyce.edu
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- Professor Linda Bush  bushl@dyce.edu
- Professor Paul Violanti  violanti@dyce.edu

Additional Resources:


www.nonpf.org Preceptor Portal
Specific Clinical Course Rotation Descriptions and Expected Objectives

TITLE: NUR 638 Family Clinical Practicum in Pediatrics

LEVEL: Graduate

PREREQUISITES: NUR 631 & 631L, NUR 632, NUR 633, NUR 634

COURSE DESCRIPTION: The student will complete 200 hours of guided clinical experiences providing health care to pediatric patients in a primary care setting. Client assessment and medical management skills will be stressed. Health promotion through patient education and collaboration with other allied health professionals will be developed.

COURSE OBJECTIVES: At the completion of this course the student will be able to:

[American Association of Colleges of Nursing (AACN) Masters' Essentials in parentheses]

1. Establish a therapeutic nursing relationship with children and families needing primary care health services. (Essentials IV, VIII, IX)
2. Apply the theories of nursing, health assessment, pathophysiology, and pharmaco-therapeutics when providing comprehensive primary care to children and families. (Essentials I, IV)
3. Apply current research and epidemiological concepts to the plan of primary care. (Essential IV)
4. Provide primary care in a manner consistent with ethical principles. (Essentials I)
5. Collaborate appropriately with other members of the health care team to provide comprehensive care to children and families. (Essentials II, IV, VII)
6. Develop comprehensive, holistic plans of primary care that address health promotion of client/family populations. (Essential VIII)
7. Consider cultural background in child’s plan of primary care. (Essentials I, VII, VIII)
8. Advocate for needed changes within the health care system (especially among the medically underserved and poor). (Essentials VI)
9. Examine ethical issues in the provision of primary care to children and families with diverse care needs. (Essentials I, IV)
10. Assume the role of a safe, competent, independent nurse practitioner when caring for children and their families. (Essentials II, IV, VII, IX)

RATIONALE:
Family NP students need extensive clinical experiences with children of different ages/cultural groups to develop into safe and skilled health providers.

FORMAT
There will be required on campus seminars throughout the semester. Students will present self-directed research, case studies and discuss patient care issues under the direction of NP Faculty. Each student will be assigned to one or more clinical sites where they will develop NP skills under the direction of qualified community preceptors.
TILE: NUR 639 Clinical Practicum in Women's Health Care

LEVEL: Graduate

PREREQUISITES: NUR 631 & 631L, NUR 632, NUR 633, NUR 635

COURSE DESCRIPTION: The student will complete 200 hours of guided clinical experiences providing primary health care to women of all ages. The childbearing cycle will be included in this practicum. Client assessment and management skills will be stressed. Health promotion of underserved populations through patient education and collaboration with other health professionals will be developed.

COURSE OBJECTIVES: Upon completion of the course the student will:
[American Association of Colleges of Nursing (AACN) Masters' Essentials in parentheses]
1. Establish a therapeutic nurse practitioner relationship with women and families needing health care services (VIII, IX).
2. Apply theoretical foundations from nursing, health assessment, pathophysiology, and pharmaco-therapeutics which impact delivery of comprehensive care to women and families experiencing health needs, including pregnancy (I, IV, VII, and IX).
3. Integrate current research and epidemiological findings when developing plans of care for women and families (III, IV, and VIII).
4. Deliver advanced nursing care in a manner consistent with ethical principles (IV, VI).
5. Collaborate with members of an interdisciplinary health care team to provide comprehensive primary care services to women and families (VII, VIII, and IX).
6. Develop and evaluate comprehensive, holistic plans of care that address health promotion in client/family populations (I, V, VIII, and IX).
7. Analyze the effect of cultural background in the woman's plan of care (I, IV, VI).
8. Advocate for needed changes within the health care system (VI).
9. Analyze ethical issues in the provision of primary care to women and families with diverse care needs and abilities (I, II, III, and VI).
10. Assume the role of a safe, competent, independent nurse practitioner (III, VIII, and IX).

RATIONALE: Family NP students need extensive clinical experiences with women of different ages/cultural groups to develop into safe and skilled healthcare providers.

FORMAT: There will be on campus classroom seminars throughout the semester. Students will present self-directed research, case studies and discuss patient care issues under the direction of NP faculty. Students will be assigned to one or more clinical sites where they will develop NP skills under the direct supervision of qualified community preceptors.
NUR 640 CL Clinical Practicum in Adult and Aging Adult Health

LEVEL: Graduate

PRE-REQUISITES: Graduate standing and completion of NUR 631, NUR 631L, NUR 632, NUR 633, NUR 637.

COURSE DESCRIPTION: Advanced practice nursing students will complete 300 hours of guided clinical experience with adult patients. Client assessment and management skills will be stressed. Health promotion for all populations will be accomplished through direct care, patient education and collaboration with other health professionals.

COURSE OBJECTIVES: At the completion of this course, the student will be able to:

1. Establish a therapeutic relationship with adult patients and their families needing health care services (VII, VIII, IX).
2. Apply the theories of health assessment, pathophysiology and pharmaco-therapeutics to provide comprehensive care to patients experiencing health needs/concerns (I, IX).
3. Apply current research and epidemiological concepts to the plan of care (IV, VII, IX).
4. Provide advanced nursing care in a manner consistent with ethical principles (VI).
5. Collaborate appropriately with other members of the health care team to provide comprehensive health services to patients and families (VII, IX).
6. Develop comprehensive, holistic plans of care that address health promotion in patients, including older adults and their families or support systems (VII, VIII).
7. Consider the cultural background in the patient’s plan of care (VI, IX).
8. Advocate for needed changes within the health care system (VI).
9. Examine ethical issues in provision of care to patients with diverse care needs (IV)
10. Assume the role of a safe, competent, independent nurse practitioner (III, IX).

RATIONALE: Family nurse practitioner students need extensive clinical experience with adult patients at different life stages and from diverse cultures to develop into skilled practitioners.

FORMAT: Students are assigned to one or more clinical sites where they will develop NP skills under the direct supervision of qualified community preceptors and will complete 300 hours in clinical settings. Seminar topics will be presented in on-campus meetings on assigned dates throughout the summer and fall semesters. Students will have the opportunity to discuss and share patient care issues in this interactive setting.
CLINICAL FORMS

Clinical Practicum Evaluation Tool
Example of Clinical Log
Example of Student Evaluation of Preceptor
Example of Student Evaluation of Site
<table>
<thead>
<tr>
<th>G. Independence</th>
<th>3.5</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.25</td>
<td>Requires minimal prompting to achieve behavior with indirect supervision. Observations relevant to outcomes.</td>
</tr>
<tr>
<td>3.0</td>
<td>Requires minimal prompting: Is developing competence with frequent, indirect supervision. Observations relevant to outcomes. Data 90% of the time.</td>
</tr>
<tr>
<td>2.5</td>
<td>Requires moderate prompting to achieve behavior with close supervision. Observations relevant to outcomes. Data 70% of the time.</td>
</tr>
<tr>
<td>2.0</td>
<td>Requires significant prompting to achieve behavior under direct supervision. Observations relevant to outcomes. Data 40% of the time.</td>
</tr>
<tr>
<td>1.0</td>
<td>Requires much prompting to achieve behavior with direct supervision. Observations relevant to outcomes. Data 20% of the time.</td>
</tr>
<tr>
<td>0.0</td>
<td>Unsafe, Not meeting critical elements of history, physical or management.</td>
</tr>
</tbody>
</table>

**Coding Key:**
- **G**: Independence
- **D**: Dependence
- **N**: Not Applicable

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**Instructor:** Students in the BSN/BSN-BSN Nurse Practitioner Program are expected to demonstrate increasing independence, complex problem-solving, and leadership.

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**Evaluation:** Milestone: Final

**Preceptor/Clinical Faculty/Location:**

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<table>
<thead>
<tr>
<th>ADULT</th>
<th>WOMEN</th>
<th>PEDIATRIC</th>
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</thead>
<tbody>
<tr>
<td>NUR 640</td>
<td>NUR 639</td>
<td>NUR 638</td>
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**School of Nursing**

**Duvalle College**
<table>
<thead>
<tr>
<th>Objective</th>
<th>Comments</th>
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<tbody>
<tr>
<td>E. Written pediatric assessment questions in promotion measures as appropriate.</td>
<td></td>
</tr>
<tr>
<td>D. Inquires about relevant preventive and health process from those due to normal development.</td>
<td></td>
</tr>
<tr>
<td>C. Differentiates symptoms due to abnormal physiology.</td>
<td></td>
</tr>
<tr>
<td>B. Obtains appropriate problem focused history (chief concern/chief complaint).</td>
<td></td>
</tr>
<tr>
<td>A. Collects comprehensive health history including FH.</td>
<td></td>
</tr>
<tr>
<td>II. Objective</td>
<td>Comments</td>
</tr>
<tr>
<td>E. Maintains client safety and privacy during the exam.</td>
<td></td>
</tr>
<tr>
<td>D. Reviews laboratory test diagnostic results.</td>
<td></td>
</tr>
<tr>
<td>C. Differentiates between normal/abnormal findings on physical examination for acute and episodic illness.</td>
<td></td>
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<tr>
<td>B. Conducts an organized and accurate focused physical examination.</td>
<td></td>
</tr>
<tr>
<td>A. Conducts an organized and accurate complete physical exam.</td>
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</tr>
<tr>
<td>III. Assessment</td>
<td>Comments</td>
</tr>
<tr>
<td>D. Independently manages acute, episodic health problems.</td>
<td></td>
</tr>
<tr>
<td>C. Accurately manages chronic, episodic health problems.</td>
<td></td>
</tr>
<tr>
<td>B. Accurately manages acute, episodic health problems.</td>
<td></td>
</tr>
<tr>
<td>A. Independently manages the care of well clients.</td>
<td></td>
</tr>
<tr>
<td>I/ V. Plan/Management</td>
<td>Comments</td>
</tr>
<tr>
<td>D. Able to prioritize plan of care.</td>
<td></td>
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<tr>
<td>E. Identifies/assigns appropriate differential diagnoses.</td>
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<tr>
<td>Comments</td>
<td>Comments</td>
</tr>
<tr>
<td>Comments</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>A. Assumes responsibility for evaluating own progress and is able to define the areas that need improvement.</td>
<td></td>
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<tr>
<td>B. Utilizes EHR template appropriately or SOAP format correctly if using paper record at agency.</td>
<td></td>
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<tr>
<td>C. Assumes a professional attitude, behavior, and seeks appropriate guidance when necessary.</td>
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<tr>
<td>D. Appropriately communicates with clients/family, staff, colleagues, and other members of health care team.</td>
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<tr>
<td>E. Consistently maintains in knowledge and practice in accordance with current evidence-based practice.</td>
<td></td>
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<tr>
<td>F. Includes current or previous abnormal laboratory/diagnostic findings.</td>
<td></td>
</tr>
<tr>
<td>G. Monitors current or previous abnormal laboratory/diagnostic findings.</td>
<td></td>
</tr>
<tr>
<td>H. Other applicable laboratory/diagnostic studies and documentation.</td>
<td></td>
</tr>
<tr>
<td>I. Therapeutic plan of care reflects knowledge of drugs.</td>
<td></td>
</tr>
<tr>
<td>J. Communicates skill and confidence with oral presentation.</td>
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</tr>
<tr>
<td>K. Utilizes appropriate consultation and referrals to electronically transmitted prescriptions with site's external, collaborating, and referring physicians.</td>
<td></td>
</tr>
<tr>
<td>L. Appropriately determines the need and time for follow-up visits and referrals (includes VNA referrals).</td>
<td></td>
</tr>
<tr>
<td>V. Professional Conduct/Role</td>
<td></td>
</tr>
</tbody>
</table>

**V. Communication Skills**
Clinical Grade:

__________________________________________________________
Date

Student’s Signature

__________________________________________________________
Date

Preceptor/Clinical Faculty Signature

Student’s Comments:

(Will be determined by clinical faculty incorporating your assessment and comments)

Preceptor/Clinical Faculty Comments: Briefly describe student’s clinical strengths and state any recommended future learning needs. Final Grades:
<table>
<thead>
<tr>
<th>Additional Comments</th>
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</thead>
<tbody>
<tr>
<td>12. Encourages student to assume increasing role in care.</td>
</tr>
<tr>
<td>11. Encourages questions and offers constructive feedback.</td>
</tr>
<tr>
<td>10. Discusses alternate management strategies and diagnostic medications.</td>
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<tr>
<td>9. Allows student to suggest treatment plans.</td>
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<tr>
<td>8. Guides students in selecting treatment plans.</td>
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<tr>
<td>7. Thoughtfully reviews differential diagnoses.</td>
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<tr>
<td>6. Suggests additional learning experiences such as conferences.</td>
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<tr>
<td>5. Provides alternative learning experiences if patient volume low.</td>
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<tr>
<td>4. Utilizes evidence-based research in decision making.</td>
</tr>
<tr>
<td>3. Commits to clinical knowledge well.</td>
</tr>
<tr>
<td>2. Sees as a professional role model.</td>
</tr>
<tr>
<td>1. Clearly understands the professional role.</td>
</tr>
</tbody>
</table>

**Evaluation of Preceptor**

Please mark the section that most closely describes your agreement with each statement on the left.

**Student:**

**Preceptor:**

**Date:**

**Site Name:**

**Preceptor's Name:**

**Students Name:**
<table>
<thead>
<tr>
<th>Evaluation of Clinical Site</th>
<th>Agree</th>
<th>Strongly Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Provides an adequate number and variety of...</td>
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<td></td>
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<tr>
<td>2. Has support staff members that are helpful and...</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>3. Has institutional resources that facilitate accepting of...</td>
<td></td>
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<tr>
<td>4. Is easily accessible from the campus and/or...</td>
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<tr>
<td>5. Uses a health-information system that is user-friendly...</td>
<td></td>
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<tr>
<td>6. Would be an excellent learning experience for...</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Students...</td>
<td></td>
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</tbody>
</table>
Technical Standards
According to the New York State Department of Education, a nurse practitioner (NP) is a registered professional nurse who has earned a separate license as an NP through advanced clinical education, usually a masters’ degree. Nurse practitioners are independent practitioners who may diagnose, treat, and prescribe patient conditions that fall within their specialty area/s of practice. During their graduate programs, nurse practitioner students must develop professional behaviors, skills and standards that prepare them for entry level to future independent practice. Certain fundamental skills are essential for nurse practitioner students to deliver safe, competent, ethical and compassionate care. This skillset includes but is not limited to the following:

**Intellectual skills:** Nurse practitioner students must be able to independently engage in problem solving including the ability to read (exam questions, case studies, assignments) and interpret complex information related to patient scenarios in order to choose treatment plans that are consistent with professional standards. Students must be able to read, recall, reason, analyze, synthesize and draw conclusions using assigned health care and foundational science material. Students must be able to access information in texts and electronic references, including EMRs to make appropriate clinical decisions; students should be prepared to discuss the logic of their decision-making and support treatment decisions they propose.

**Communication skills:** Nurse practitioner students must be able to read, write and speak in English at a level of proficiency required to safely obtain a detailed history and collaborate with patients on the most appropriate course of action. Students must be able to communicate clearly with other members of the health care team who are involved in patient care plans.

**Sensory skills:** Students must possess the visual acuity and distance vision to observe patient attributes which are important to formulating differential diagnoses. Students must have the hearing acuity to discern whispered voice and adequate sense of smell.
Behavioral and professional skills: Nurse practitioner students are expected to display professional behaviors at all times including situations that are stressful. Students must exhibit good judgment and intellectually sound decision-making skills under difficult conditions. The School of Nursing expects that students adhere to standards of ethical behavior.

Psychomotor skills: Students must be able to engage in a spectrum of clinical activities required in various practice settings. Nurse practitioner students must possess the ability to independently conduct full physical examinations including skills to observe, palpate, percuss and auscultate. Students must possess fine and gross motor movement to complete all clinical skills including diagnostic testing techniques. Students must be able to stand for long periods of time and walk independently in clinical settings. Clinical motor skills also include the ability to bend, lift over the head, reach across an examination table, lift at least 25#, push and pull when necessary to achieve safe patient outcomes.

*Clinical partners (hospitals, clinics, private practitioner offices) who precept students are assured by clinical contract language that the college has checked that students meet the minimum standards for placement such as immunizations, licensure, CPR and a physical examination showing they are fit for duty. Students with a permanent or temporary disability that restricts their ability to fully and safely engage in clinical practice, including the ability to meet Infection Control measures, will not be allowed in a clinical setting until such restrictions are removed. Temporary disabilities can include situations such as surgery, childbirth, accidents, casts, splints and braces which may pose safety hazards to patients, staff or students. To return to clinical practice following disability, students must submit written documentation to the program director from a medical professional stating “the student can return to full duty without restriction”. Professional resources used to develop these technical standards include:

1. AANP Standards of Practice for Nurse Practitioners
2. NONPF Core Competencies and Family Competencies
3. CCNE Masters’ Essentials
4. Technical Standards in Nursing – Drexel University
5. Technical Standards in Nursing – Georgetown University
6. Technical Standards in Medical Practice – Stanford University
7. Family Nurse Practitioner Technical Standards – Samuel Merritt College