

Student Handbook Supplement 2017

FAMILY NURSE PRACTITIONER PROGRAM



GEORGETOWN UNIVERSITY

*School of Nursing & Health Studies
Department of Nursing*

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FAMILY NURSE PRACTITIONER PROGRAM OVERVIEW

Philosophy and Mission of Specialty Program

The Family Nurse Practitioner (FNP) Program at Georgetown University School of Nursing & Health Studies was started in 1991 by a grant supported by the National Institutes of Health, Division of Nursing. The philosophy and mission of the FNP program is consistent with the philosophy of the University and incorporates common major threads that make up the conceptual nursing framework of the School of Nursing & Health Studies. These threads include: human flourishing, social justice, common good, professional care, compassion, and individual and collective excellence.

The FNP program curriculum is based on the guidelines for program standards and outcomes as compiled and edited by the National Organization of Nurse Practitioner Faculties (NONPF). The program is accredited by the Commission on Collegiate Nursing Education (CCNE).

There are four clinical courses in the FNP program, which are sequential and build on the knowledge and skills learned in previous courses to implement therapeutic regimens in health promotion, disease prevention, and assessment and management of common and chronic medical conditions. FNP students will learn to assess, plan, and evaluate care. Students will learn how to order and interpret laboratory and diagnostic data and to incorporate non-pharmacologic and pharmacologic therapeutics into their treatment plan. In addition, a seminar course entitled Families In Crisis provides the opportunity to develop advanced competency as a FNP working with families in crisis. Upon completion of the program, students will be prepared to care for families and family members of all ages in primary care settings.

Incorporation of the knowledge and skills needed to care for families of diverse cultural backgrounds and clients from underserved areas is an important component of the curriculum, reflected by the placement of students with preceptors serving communities with broad ranging ethnic and socioeconomic backgrounds. Students are placed in primary care settings throughout the United States as well as the Washington DC metropolitan area including FQHCs, retail clinics, private practices, community health centers, nurse managed clinics, and health departments.

The Georgetown University School of Nursing & Health Studies and the FNP program continues to build excellence through the use of new and innovative teaching methods, diverse clinical experiences, and state-of-the-art technology.

Certifying Exams

After successful graduation from the FNP program, students will be eligible to take a national certifying examination. The examinations are offered by the American Nurses Credentialing Center (ANCC) and the American Academy of Nurse Practitioners Certification Program (AANPCP).

GU Graduate Bulletin and Online Graduate Student Handbook

Students are responsible for the content in this Handbook, in addition to referencing the Georgetown University Graduate Bulletin <https://sites.google.com/a/georgetown.edu/gsas-graduate-bulletin/> and Online Graduate Student Handbook <http://nhs.georgetown.edu/students/graduate/forms> for more information.

Goals of the Georgetown University FNP program are to:

- Prepare nurses to become caring and competent nurse practitioners in primary family healthcare settings.
- Prepare students to provide care to populations that are uninsured, underserved, minorities, and bicultural/bilingual.
- Provide students with clinical sites to promote expertise in diverse patient populations.
- Inspire students to cultivate a personal responsibility for health and seek ways of improving health in themselves and in their clients.
- Establish partnerships in education, research, and practice with local, national, and international communities.
- Encourage ongoing clinical education and contribution to the advancement of knowledge in primary health care and nursing science.

Family/Across the Lifespan Nurse Practitioner Competencies

Integration of Core and Family/Across the Lifespan Nurse Practitioner Competencies (Appendix A) developed by The National Organization of Nurse Practitioner Faculties (NONPF) guide the entry-level competency expectations of the Georgetown University FNP graduates. The population in primary care family practice includes newborns, infants, children, adolescents, adults, pregnant and postpartum women, and older adults. The focus of care is the family unit, as well as the individuals belonging to the family, however the family chooses to define itself. The FNP is a specialist in family nursing, in the context of community, with broad knowledge and experience with people of all ages. FNPs demonstrate a commitment to family-centered care. FNPs practice in a variety of primary care settings.

CURRICULUM OVERVIEW

The program requires the completion of 44 credits of core and clinical courses, and prepares the advanced practice nurse to function in the role of the FNP, providing care for families in primary care settings. The program can be completed in 18-20 months of full-time study or up to three years of part-time study. The clinical/didactic courses are taken sequentially, and in addition, focus on the family, special consideration is given to community, cultural, and environmental health.

Prior to each clinical semester, clinical experiences are arranged in primary care sites. Faculty and preceptors supervise clinical experiences in public, private and community based primary care settings. Placement of students in inner city clinics or rural clinics are given special priority.

In addition to the graduate and program goals, course objectives, progression requirements, and evaluation criteria are listed in each of the four clinical courses. Requirements for texts, course resources, and readings are specific to each course. Attendance is required at all scheduled lectures, seminars, labs and conferences. Each course has established clinical hours that must be completed satisfactorily in order to progress to the next course.

To find a list of core courses and their descriptions, please refer to the Nursing Graduate Student Handbook: <http://nhs.georgetown.edu/students/graduate/forms>.

Primary Health Care of the Family I (NURO 687)

This course introduces the student to the role of the nurse practitioner in the primary health care management of individuals and families across the lifespan. Students explore family concepts and theories relevant to the advanced practice nursing role. Emphasis is placed on the application of advanced health assessment skills, preventive health care practices, the promotion of health and the clinical application of research. Concepts including family systems, developmental theories, cultural considerations, environmental factors, spiritual concerns, genetic influences, learning styles and the objectives of Healthy People 2020 are integrated. Experiences are provided in clinical decision making and in the implementation of evidence based practice in a variety of primary care settings.

Clinical Expectations (NURO 687)

100 clinical hours minimum

The first clinical semester focuses on history taking, physical exam, diagnostic reasoning, and assessment. Students may participate in the diagnosis and plan of patients and families care with guidance of preceptor.

Primary Health Care of the Family II (NURO 691)

This course focuses on the theoretical and clinical foundations of advanced practice nursing management of health care problems common to individuals and families across the lifespan. Emphasis is placed on the diagnosis and management of acute episodic and chronic conditions of families in the context of the primary care setting and community.

Inter-disciplinary collaboration among healthcare providers is promoted. Clinical experiences are provided in a variety of primary care settings.

Clinical Expectations (NURO 691)

150 clinical hours minimum

The second clinical semester focuses on episodic visits and follow up visits for chronic disease across the lifespan. Students will begin developing evidence based management plans with the guidance of preceptors.

Primary Health Care of the Family III (NURO 714)

This course focuses on the progressive development of the FNP in health promotion, disease prevention, and diagnosis and management of acute episodic and chronic conditions common to individuals and families across the lifespan. Emphasis is placed on advanced competency in the formation and evaluation of comprehensive evidence based plans of care for complex and multisystem disorders. Student clinical experiences are provided in a variety of primary care settings, with emphasis on collaborative partnerships among individuals, families, and other healthcare professionals.

Clinical Expectations (NURO 714)

150 clinical hours minimum

The third clinical semester focuses on complex chronic disease management. Students are expected to see patients more independently, in consultation with the preceptor.

Primary Health Care of the Family IV (NURO 752)

This course is the final synthesis of the theoretical and clinical foundation of advanced practice nursing in the primary care management of individuals and families across the lifespan. Emphasis is placed on professional, ethical, and legal aspects of advanced clinical practice. Updates on legislation and health policy are incorporated utilizing multidimensional clinical case studies. Extensive clinical experiences prepare the student to assume the role and professional responsibilities of the entry level family nurse practitioner (FNP).

Clinical Expectations (NURO 752)

250 clinical hours minimum

Extensive clinical experiences prepare the student to assume the role and professional responsibilities of the entry level FNP. Students should see patients independently this semester and develop plans of care in consultation with the preceptor.

Care of the Family in Crisis (NURO 710)

This seminar course provides the opportunity to develop advanced competency as an advanced practice nurse working with family systems in crisis. Emphasis will be on crisis management, specifically management of psychological/behavioral problems within the family. Current psychological, social, and ethical issues pertinent to families in crisis will be explored. Particular attention will be given to interdisciplinary collaboration to ensure

continuous and reliable care for families in crisis, as well as how APNs can utilize community resources for their patients.

Additionally, this class will discuss how providers can provide professional and compassionate care and maintain professionalism and prevent provider fatigue and burnout.

FNP FULL-TIME PROGRAM OF STUDY

COURSES		F	SP	SU	F	SP	SU	F	SP
N518 Healthcare Ethics	(2)	X							
N528 Advanced Health Assessment	(3)	X							
N548 Advanced Physiology & Pathophysiology	(4)	X							
N544 Advanced Concepts in Pharmacology	(3)		X						
N624 Foundations of Health Systems and Policy	(3)		X						
N687 Primary Health Care of the Family I <i>Class + 100 clinical hours with preceptor</i>	(4)		X						
N530 Research Methods & Biostatistics for Health Care Providers	(4)			X					
N691 Primary Health Care of the Family II <i>Class + 150 clinical hours with preceptor</i>	(5)			X					
N540 Research Evidence and Best Practices in Health Care	(3)				X				
N710 Care of the Family in Crisis	(1)				X				
N714 Primary Health Care of the Family III <i>Class + 150 clinical hours with preceptor</i>	(5)				X				
N539 Professional Role of the Advanced Practice Nurse (APRN)	(2)					X			
N752 Primary Health Care of the Family IV <i>Class + 250 clinical hours with a preceptor</i>	(5)					X			
Total Credits	44								
Total Clinical Hours	650								

FNP PART-TIME PROGRAM OF STUDY

COURSES		F	SP	SU	F	SP	SU	F	SP
N518 Health Care Ethics	(2)	X							
N548 Advanced Physiology & Pathophysiology	(4)	X							
N530 Research Methods & Biostatistics for Health Care Providers	(4)		X						
N544 Advanced Concepts in Pharmacology	(3)		X						
N528 Advanced Health Assessment	(3)			X					
N540 Research Evidence & Best Practices in Health Care	(3)			X					
N624 Foundations of Health Systems and Policy	(3)				X				
N687 Primary Health Care of Family I Class + 100 clinical hours with preceptor	(4)				X				
N691 Primary Health Care of the Family II Class + 150 clinical hours with a preceptor	(5)					X			
N710 Care of the Family in Crisis	(1)					X			
N539 Professional Role of the Advanced Practice Nurse (APRN)	(2)						X		
N714 Primary Health Care of the Family III Class + 150 clinical hours with preceptor	(5)						X		
N752 Primary Health Care of the Family IV Class + 250 clinical hours with a preceptor	(5)							X	
Total Credits	44								
Total Clinical Hours	650								

ONLINE FNP FULL-TIME PROGRAM OF STUDY

H O Y A S	Semester 1	AHA OCI	Semester 2	Semester 3	FNP OCI	Semester 4	Semester 5
	N518 Health Care Ethics (2)	Health Assessment On-Campus Intensive	N544 Advanced Concepts in Pharmacology (3)	N530 Research Methods & Biostatistics for Healthcare Providers (4)	Family Nurse Practitioner Objective Clinical Intensive	N540 Research Evidence and Best Practices in Health Care (3)	N539 Professional Role of the Advanced Practice Nurse (2)
	N528 Advanced Health Assessment (3)		N624 Health Policy (3)	N691 Primary Health Care of the Family II (5)		N710 Care of the Family in Crisis (1)	N752 Primary Health Care of the Family IV (5)
	N548 Advanced Concepts in Physiology & Pathophysiology (4)		N687 Primary Health Care of the Family I (4)			N714 Primary Health Care of the Family III (5)	
FNP: 650 total clinical hours							

Primary Health Care of the Family I: 100 hours
 Primary Health Care of the Family II: 150 hours
 Primary Health Care of the Family III: 150 hours
 Primary Health Care of the Family IV: 250 hours
 Clinical placements specific to primary care often operate on a Monday-Friday, 9am-5pm schedule.

ONLINE FNP PART-TIME PROGRAM OF STUDY

H O Y A S	Semester 1	Semester 2	Semester 3	AHA OCI	Semester 4	Semester 5	FNP OCI	Semester 6	Semester 7
	N518 Health Care Ethics (2)	N530 Research Methods & Biostatistics for Healthcare Providers (4)	N528 Advanced Health Assessment (3)	Health Assessment On-Campus Intensive	N624 Health Policy (3)	N691 Primary Health Care of the Family II (5)	Family Nurse Practitioner Objective Clinical Intensive	N539 Professional Role of the APRN (2)	N752 Primary Health Care of the Family IV (5)
	N548 Advanced Concepts in Physiology & Pathophysiology (4)	N544 Advanced Concepts in Pharmacology (3)	N540 Research Evidence & Best Practices in Health Care (3)		N687 Primary Health Care of the Family I (4)	N710 Care of the Family in Crisis (1)		N714 Primary Health Care of the Family III (5)	

FNP: 650 total clinical hours

Primary Health Care of the Family I: 100 hours

Primary Health Care of the Family II: 150 hours

Primary Health Care of the Family III: 150 hours

Primary Health Care of the Family IV: 250 hours

Clinical placements specific to primary care often operate on a Monday-Friday, 9am-5pm schedule.

ACADEMIC EXPECTATIONS AND POLICIES

Academic Integrity

Graduate students at Georgetown University are expected to maintain high standards of integrity in the pursuit of their educational and professional goals. This includes an expectation to abide by the University Honor Pledge:

“In pursuit of the high ideals and rigorous standards of academic and professional life, I commit myself to respect and uphold the Georgetown University Honor System: to be honest in every academic endeavor, and to conduct myself honorably as a responsible member of the Georgetown community, as we live and work together.”

Please refer to the Graduate Bulletin at <https://sites.google.com/a/georgetown.edu/gsas-graduate-bulletin/> for the full content of policies regarding violations of academic integrity.

Plagiarism is a serious violation of academic integrity. Plagiarism includes intentional and unintentional use of the work of others, without appropriate citation. Faculty expect you to cite references using the current APA format, unless otherwise instructed.

Review of Quizzes/Examinations

Students who perform poorly on an exam may be required to meet individually with course faculty to review concepts and test-taking strategies. Students may request to schedule an appointment with their synch faculty to discuss specific quiz/exam items after all sections of the course have completed the exam, the course coordinator has addressed any exam items of concern, and examination grades have been posted.

The U.S. Department of Education and Georgetown University requires strict exam security. To comply, students in the FNP Program are not allowed to see their actual exam for review. Students who want to review exam information must request an individual appointment with their synch faculty. Exam content questions may **not** be discussed in email.

CLINICAL EXPECTATIONS AND POLICIES

Clinical placements are secured through partnership with faculty, students, and the clinical placement team. Students are encouraged to actively partner with their clinical placement specialist and to make referrals of primary care providers within their community that may serve as a preceptor. Faculty review and approve all placements for ability to meet course objectives. Placement information will be provided to students *no sooner* than four weeks prior to the start of the semester. Students will receive correspondence from the placement team/clinical coordinator with information about their assigned clinical site and preceptor before the start of the term.

FNP Placement Principles

Students will have a placement plan developed in conjunction with the placement team and approved by faculty. This plan will map out the planned placement of the student through the entire course of study. Development of the placement plan should be initiated at the initial welcome call and approached with thoughtful sequencing to begin with the first placement.

Clinical hours will, optimally, be with a nurse practitioner (NP) in a primary care setting with a focus on family practice.

All clinical placements will occur in a primary care setting, with the exception of Employee Health Departments, Occupational Health Clinics, and Pre-Op Testing Centers, which can be used in FNP I (NURO 687).

- All NP preceptors will hold certification from either AANP or ANCC as a Nurse Practitioner.
- Pediatric hours should be completed in one semester, ideally FNP II (NURO 691).
- Students may be placed with a NP or a pediatrician.
- Preceptors will have a minimum of two years of clinical experience.
- Ideally, students will be placed at sites where the preceptor to student ratio is 1:1.

Physician preceptors may be considered on a case-by-case basis for clinical rotations in the event that their population-focused area of practice is family medicine or pediatrics.

- Physician Assistants are not to be used as clinical preceptors.

Clinical courses and rotations:

- *FNP 1 (NURO 687), minimum 100 clinical hours* – sites need to incorporate wellness, prevention, and the ability to perform comprehensive head to toe physical exams. Examples include: family practice sites, community health centers, NP owned practices, retail clinics, corporate wellness clinics, school based health clinics, employee health departments, public health sites (health departments), and pre-op testing centers. (Internal medicine sites are not appropriate for FNP 1).
- *FNP 2 (NURO 691), minimum 150 clinical hours*– sites need to

incorporate episodic care and basic chronic care. Examples include: family practice clinics, pediatric practices, retail medicine clinics, and community health centers. Ideally this is a pediatric semester.

- *FNP 3 (NURO 714), minimum 150 clinical hours* – sites need to incorporate management of chronic disease. Examples include: family practice clinics, community health centers, and internal medicine clinics.
- *FNP 4 (NURO 752), minimum 250 clinical hours*– sites need to integrate the NP role and provide full scope of care. Examples include: family practice sites, community health centers. Ideally, students should be placed with a nurse practitioner in FNP IV.

Placement Timeline/Late Placements

In order to begin a clinical course, students must be placed two weeks prior to the start of the term. When students are not placed two weeks prior to the start of the term, a student will be required to decelerate their plan of study, ***and in some cases, a relocation or additional travel distance may be involved.*** While every effort is made to achieve 100 percent successful placement, on-time placement is not guaranteed. As active participants in the placement process, students are expected to actively engage in the clinical placement process and provide all available information they may have regarding referrals, contacts, or potential sites/preceptors. The clinical placement team will regularly communicate with students regarding the status of various placement rotations.

4 weeks prior to clinical course: Students will be notified as early as 4 weeks prior to the start of the clinical course if a placement has been secured. The placement team will continue to notify students as soon as placements are secured.

2 weeks prior to clinical course: Students who do not have a clinical placement secured will not be able to progress into the clinical course and will be contacted by academic affairs regarding their program of study.

Clinical Placement Expectations

Finding clinical/practicum placements requires the combined efforts of the student, placement team, faculty, and the site/preceptor. With multiple clinical/practicum rotations, the goal is to have a consistent placement site and preceptor, and supplement the experience as needed with additional sites. There are several things you need to know as an active participant in the process:

Communication Expectations: Throughout your placement process, you will have consistent communication with the placement team. Your patience is requested as the team explores site/preceptor leads. Please allow at least 48-

business hours for follow-up for any communication when you contact the team, or any communication related to leads or referrals that you provide to the team.

Providing Referrals: As an active participant in the process, the placement team and faculty rely on your knowledge of local resources within and around your community. It is often helpful for you to provide leads (i.e. site names or preceptor names) in your community for the placement team to contact as part of the placement search process. All leads must be provided in writing in the Clinical Placement Survey and during any follow-up placement communication. Referrals must be requested at least 14 weeks prior to the start of the. Students are not required to reach out directly to sites or preceptors. However, if you wish to make contact with any sites or preceptors, you are expected to inform your clinical placement coordinator prior to making contact with the site.

Placement Site/Location Expectations: While placement is ideally within a 100-mile radius of your home, some locations may require additional travel time and costs to secure appropriate clinical/practicum placements. If there are significantly limited or lacking resources for sites in the area, relocation may need to be considered for the clinical/practicum sequence. Early conversation should be had with your Clinical Faculty Advisor and the clinical placement team regarding your residence and potential resources available.

Clinical/Practicum Hours Expectations: While in the clinical/practicum course sequence, students should expect to spend several full days per week in the clinical environment. If a student maintains employment during the clinical sequence, flexibility with scheduling is necessary to fulfill clinical and academic requirements. Most clinical sites operate between the hours of 8am-5pm M-F, with some providers having a more limited schedule.

Clinical Site Selection

As a graduate of the Georgetown University FNP program, you will be prepared to care for individuals and families across the lifespan with a focus on delivering family centered care. Clinical placement sites will be in the **primary care setting**. Clinical placements in acute care settings, such as with a hospitalist are not appropriate.

Faculty approves clinical placement sites based on the specific learning objectives of the course, site characteristics, and site/preceptor availability. Students need to be prepared to travel and to have flexible schedules to accommodate clinical experiences.

Students will complete 90-150 clinical hours that are pediatric focused. The duration of the pediatric rotation will be determined by the student's needs, ability to meet pediatric clinical competencies, and availability of a pediatric preceptor. Ideally the pediatric rotation will be during the second clinical semester (FNP II); however, it may be placed later in the sequence of clinical experiences depending upon availability of clinical sites.

Notification of Clinical Placements

Clinical placement information will be provided to students no sooner than four weeks prior to the start of a term if a site is confirmed. Students will receive correspondence from the placement team/clinical coordinator with information about their assigned clinical site and preceptor. After being notified of the clinical site selection, it is the responsibility of the student to reach out to the site in a timely manner and arrange an initial meeting.

Occasionally, a site may request to interview a student prior to agreeing to accept a student. If a request is made for a student to meet with a preceptor, this should be treated as a job interview and scheduled promptly. The student should arrive 15 minutes early, wear professional attire, and take a resume. It is important to remember that you are representing the University and the APRN profession when you participate in these interviews. Professionalism should be of highest priority.

Clinical Site Affiliation Agreements

Each clinical site requires an active affiliation agreement between the site and Georgetown University. The clinical placement team facilitates this process. This agreement must be in place prior to a student beginning a clinical rotation at the site. You may NOT attend clinical at a site that does not have an active affiliation agreement. Obtaining the agreement can be a lengthy legal process and the outcome is not guaranteed.

Students cannot enter into a clinical site where an active affiliation agreement does not exist. While preceptors may travel between different clinics, this does not guarantee that the University has affiliation agreements with all sites where a preceptor may work. Prior to engaging in clinical experiences at any site other than the assigned/primary clinical site, it is the student's responsibility to ensure that an affiliation agreement exists at the new location.

Affiliation agreements are obtained with the site rather than the specific preceptor. Students may work with multiple providers who work at one site. For example, if the preceptor is going on vacation, the student may work with another NP or MD at the site. However, the student should not leave the site to assist with hospital rounds or nursing home assessments without verifying that an affiliation agreement is in place.

Clinical Site Problem-Solving

Each clinical site will have particular strengths and limitations, and has been selected by Georgetown because of our recognition that the site will contribute to your overall learning experience. Should unexpected problems arise during your clinical practicum or related to your clinical site, your CFA should be your first point of contact. Your CFA will help you to problem solve issues related to your clinical.

After being assigned a CFA, you must copy your CFA on any correspondence that you have with the clinical placement team.

Students may **NOT** attend clinical after the course has ended unless the student has taken an “incomplete” that has been approved by the FNP program director and academic affairs. Students may not attend clinical prior to the start of the term.

Students are not permitted to initiate care for patients in the clinical setting without the direct supervision of the clinical preceptor. If the preceptor is not physically present in the clinic, students may not perform any patient care under any circumstances. If there are any concerns during the clinical rotation, the student’s CFA and the Clinical Faculty Director should be contacted immediately.

Requesting a Change of Clinical Site

Any request to change a clinical site after the clinical placement team has secured a site will require a written explanation of why the site will not provide experiences needed to meet the course competencies. Your CFA, Clinical Faculty Director, and the FNP Program Director must approve the appeal.

If it is determined that a site may not meet the course competencies, granting an appeal to change clinical sites does not guarantee replacement during the term and may necessitate a deceleration in the program of study. Changes in placement will not be considered when the request is made due to travel distance when the site is within a 100-mile radius from the student’s home.

Clinical Orientation

Orientation to clinical is located within the FNP 1 course. Your CFA is available to answer questions after you review the material.

Clinical Conferences

CFAs will hold scheduled clinical conferences in lieu of regularly scheduled office hours. These conferences are not mandatory, but highly encouraged and provide students the opportunity to engage with faculty and participate in clinical mentoring.

In addition to clinical conferences, CFAs are available to meet by appointment as necessary.

Site Visits

Your CFA, or another course faculty, will perform an in-person site visit at least once during your clinical progression. The purpose of this visit is to evaluate the learning experience, the clinical site, the ability of the site to meet program objectives and goals, and to assess student performance. During semesters when your CFA does not evaluate your clinic in person, evaluations of the site and student performance will be conducted remotely.

Objective Clinical Intensive (OCI) Code of Conduct

FNP students are required to participate in an Objective Clinical Intensive (OCI). Currently, the OCI experience is after NURO 691 and is held in Norfolk, VA on the Eastern Virginia Medical Center Campus.

While on the campuses of Georgetown University and Eastern Virginia Medical School, students are expected to conduct themselves with professionalism and in a manner consistent with the School of Nursing & Health Studies (SNHS) shared values of excellence, respect and diversity, value of the common good, and social justice. Students are expected to conduct themselves as ambassadors of the Family Nurse Practitioner Program and the discipline of advanced practice nursing. Unprofessional behavior will result in disciplinary action in the form of a verbal warning and written Memorandum of Understanding (MOU). Unprofessional behavior may also result in dismissal from the FNP Program at Georgetown University. Spouses, partners, friends, and/or children are not permitted to attend academic events scheduled during OCI.

Clinical and OCI Dress Code

Students are expected to present a professional appearance that reflects the standards of Georgetown University. Unless otherwise specified by faculty, students are expected to dress professionally for all clinical encounters and for OCIs. Students are expected to wear white, knee-length lab coats during all patient and “Standardized Patient” (SP) encounters while at OCI. Lab coats during the clinical rotations will be worn per clinical site-specific policy and you will need to discuss expectations with your preceptor before attending clinical to verify if lab coats are required. If lab coats are required, they should be white and three-quarter length.

GU GoCard identification should be visible at all times. Closed toed shoes are required. Male students are not required to wear a necktie. Long hair should be pulled back for all patient or SP encounters.

Please refer to the Graduate Student Handbook
<https://nhs.georgetown.edu/nursing/resources> for dress code guidelines.

Clinical Grade

The clinical courses in the FNP program at Georgetown University are structured as an integrated curriculum. You must pass **both** the didactic and clinical portions of the course in order to be successful in the course, progress through the plan of study and to remain in good standing with the University.

Meeting the minimum clinical hours is a threshold for consideration for passing the clinical component of the course. Students must also complete all clinical assignments, demonstrate meeting clinical competencies, and perform satisfactorily on evaluation by both the preceptor and faculty.

Completion of Clinical Experience

Students must meet the minimum required number of clinical hours and complete the following items by the end of the clinical semester.

- Evaluation of Clinical Site
- Evaluation of Clinical Preceptor(s)
- Evaluation of Clinical Faculty Advisor
- Typhon Case Logs
- Time Logs
- Clinical Attendance Roster (which must be initialed each week and then signed by your preceptor)

A final grade cannot be awarded until you have completed the Student Clinical Checklist (SCC) and this has been validated by your CFA. The SCC will be submitted in 2GU.

Clinical Evaluation

Preceptors, students, and CFAs will complete evaluations each semester. Both midterm and final evaluations of your clinical performance is required.

Your preceptor will receive an email with a link prompting them to complete the evaluation. The expectation is that you will participate in these evaluations and your preceptor will submit them electronically through Typhon. It is your responsibility to ensure that your preceptor completes and submits your evaluations.

Students will enter their evaluations directly into Typhon. The evaluation of your CFA is anonymous.

Completed evaluations are required in order to pass clinical and it is the student's responsibility to obtain the following:

Evaluations completed by Preceptors:

- Agency/Preceptor Evaluation of FNP Program
- Evaluation of Student Performance (midterm and final)

Evaluations completed by Students:

- Evaluation of Clinical Site
- Evaluation of Clinical Preceptor(s)
- Evaluation of Clinical Faculty Advisor

Please see the Appendix for text of the Evaluation of Student Performance.

Clinical Hours

The minimum required number of clinical hours for each clinical course is outlined in each course syllabus. These hours reflect the minimum number of hours required for passing the course. Students may benefit from obtaining additional clinical hours.

Hours counted toward the course total must involve direct patient care. Continuing education, EMR training, grand rounds, commute time, and scheduled breaks during the clinical day are not clinical hours.

Hours must be obtained during the semester. Students may not “carry over” hours from a prior course or attend clinical in between semesters to “bank” hours. In order for clinical hours to be counted toward the course total, they must be verified by your preceptor on the Clinical Attendance Roster and entered into the Typhon Clinical Hours Log. In order to count your clinical time, you must do each of the following:

- Log clinical experiences on the Clinical Attendance Roster and you must have your preceptor sign this each day that you are in clinical.
- Log clinical hours in the Typhon Clinical Hours Log.
- Enter patient experiences in Typhon per Typhon Documentation Policy.

Any clinical time that does not meet all three of the above noted methods will not be counted toward the minimum hours requirement of the course.

Distribution of Clinical Hours

Clinical hours must be equally distributed weekly over the entire semester. Students may not “cluster” the clinical hours at any point during the semester. It is expected that students will be in clinical each week while in a clinical course. Students may not start hours at the clinical site prior to the start of the term.

Students may NOT do clinical hours when the course has ended unless there is an “incomplete” approved by the FNP program director and academic affairs.

Clinical Schedule

Students are responsible for arranging their clinical schedule with their preceptor. Students must create a word document of their schedule by week two of the course. This needs to be uploaded in the documents section in Typhon. The schedule must include the date for each day that you plan to attend clinical as well as the hours that you will be present. This schedule will be used to track progress toward meeting clinical hours and will also serve as a basis for the CFA to schedule site visits.

Clinical Attendance

Punctual and regular attendance is a professional performance expectation during all clinical rotations. Students must present to clinical on time, prepared, and ready to begin patient care. Students are expected to remain at the clinical site for the duration of the scheduled

clinical day. Students will be held accountable for adhering to their clinical schedule that was established during the first week of the semester. In the event a student is unable to meet this expectation, he/she must obtain approval from their CFA and preceptor in advance of any requested schedule changes.

Absence from Clinical

Students who face emergencies, such as a death in the family, serious illness of a family member, court appearances, hazardous weather conditions, or other such situations beyond the student's control should notify their preceptor and CFA immediately. Frequent unexcused absences from clinical may result in being removed from the clinical setting, and subsequent deceleration in the program.

Contact Information

Exchange preferred method of contact information with your preceptor at your initial meeting. In the event of an emergency, you will need to know how to contact your preceptor during non-business hours.

Clinical Documentation Policy

Students need to discuss with their preceptors the documentation policy used by the agency and comply with the policy. Students are expected to document patient encounters in the patient record whenever they are actively involved in the patient's care.

Documentation provided must demonstrate to any reviewer that the billing provider performed the service and the student participated in the delivery of care.

Preceptors must validate student findings and co-sign the documentation. A standard template may be used and the student may enter the statement for the preceptor's signature. The following language options are suggested:

Option 1: —I was present and participated in the exam, assessment of the patient, and the plan of care.

Option 2: —Dr. _____ was present and participated in the exam, assessment of the patient, and the plan of care.

If a student is unable to document patient encounters in the EHR due to agency policy, the student must maintain a **shadow chart** for each patient encounter that consists of a SOAP note without patient identifiers. Feedback from the preceptor on the charting in the shadow chart should be regularly obtained. The shadow chart must be retained in the clinical site.

All students are to sign their names legibly as follows:

First Name (no initials) and Last Name, RN, FNP Student

LIBRARY RESOURCES

Dahlgren Memorial Library (DML) is the Graduate Health & Life Sciences Research Library at Georgetown University Medical Center. Dahlgren's resources are 99% electronic, ideal for serving distance learners enrolled in Nursing@Georgetown courses.

Through DML you will have access to:

- More than 135 databases and clinical care tools, three of which are solely dedicated to nursing (CINAHL, ClinicalKey Nursing and Nursing & Allied Health Collection).
- More than 4,500 eBooks, many of which are nursing focused.
- More than 6,500 ejournals, hundreds of which are nursing titles.

Accessing Resources

Accessing this extensive list of resources requires starting at the library's homepage (<http://dml.georgetown.edu>), selecting a resource, and logging in with your Georgetown NetID and password when prompted. For those resources not owned by DML, an interlibrary loan request (ILL) can be placed and DML will attempt to obtain the material from another library on your behalf. Please note ILL requests can take 2-5 business days and are prioritized by the "Not wanted after" date entry in the request form. The ILL service is available at no charge to patrons as DML subsidizes the cost of request fulfillment.

Problems Logging In?

As library and NetID accounts are activated when you begin the N@G program, any log-in issues are most likely due to your NetID and password. To troubleshoot any NetID issues, go to <https://uis.georgetown.edu/netid-passwords> and follow the links to the NetID Password Management System. The first password you are issued is a temporary password, so you will need to change it to avoid access issues. In addition, you may contact Georgetown University Information Services at help@georgetown.edu or (202) 687-4949.

Getting Started on a Research Project

As you begin to work on research assignments, review the tutorials, particularly the Dahlgren101 tutorial, along with the other information found on the Graduate and Advanced Practice Nursing Research Guide <http://guides.dml.georgetown.edu/GraduateNursing>. Librarians created this and other research guides (<http://guides.dml.georgetown.edu/>) to help you with the research process and the use of library resources.

Mobile Device Application Support

To facilitate use of medical apps DML librarians have created a guide: <http://researchguides.dml.georgetown.edu/med-apps>. This guide includes download and informational links for many medical apps and usage tips.

Further Assistance

Librarians and library staff are available during the workweek to assist you with your research and information needs. Please email dmlreference@georgetown.edu, log into the

instant messaging system available from 11:00 AM to 3:00 PM or telephone DML at 202-687-1448. Availability and contact information can be found on the Ask a DML Librarian page <https://dml.georgetown.edu/help>.

Getting Help:

- **In person or by phone:** Stop by or call the Information Services Desk Monday through Friday from 8:00am to 8:00pm at 202-687-1448.
- **Email:** Send an email to: dmlreference@georgetown.edu
- **Instant Message:** Chat with a DML librarian, Monday through Friday 9:00am to 5:00pm: <http://dml.georgetown.edu/74260.html>
- **Website:** <https://dml.georgetown.edu/help>

TYPHON

Typhon Overview

Typhon is a clinical data management system used by the FNP Program. Students pay a one-time fee to register for Typhon and must use the system through the clinical courses and can continue to access the database up to 3 years after graduation.

Typhon will be used to log clinical experiences, create an electronic student portfolio, manage external documents (resume, clinical schedule), generate reports of clinical experiences, administer evaluations, and store site and preceptor information. This electronic logging system becomes part of the student's permanent file and substantiates the Director's recommendation of the student in applying for certification upon graduation.

Typhon Instructions

Account Information

- You will receive an email from the Typhon system with your account information. You must set up your account within 24 hours of receiving this email.
- The first time you log in, you will be prompted to pay the site fee and complete your account information. At this time, change your password from the default as well. You will also need to accept the end-user license agreement.
- When completing your account information, you will need to select "Sample, Preceptor" and "Sample Clinical Site" as the "Required Defaults" the first time so you are able to move to the main menu. Once you get to the main menu you will be able to add your preceptor and clinical site (this is explained in section "Adding a Preceptor/Clinical Site") and go back in and change your preceptor and clinical site defaults.

Adding a Preceptor/Clinical Site

- Please note that you must submit a separate request for your preceptor and clinical site.
- Go to "Setup Default Choices" under "Your Account" on the main menu. Under the "Required Defaults" you will notice a link to the side of the preceptor and clinical site drop down menus that says "REQUEST ADDITION." Click this link and enter in the required information.
- Requests are approved in 1-2 business days. Once the addition is verified and approved, you will receive an email notifying you that your preceptor and/or clinical site have been added to the directory. At this point you will be able to select the preceptor/clinical site as your default setting or when inputting a case log.

Note: you will need the preceptor/clinical site contact information including an address, phone number, and email address.

Entering a Case Log

- Go to “Add New Case Log” from the main menu. Input the “Date of Encounter” by clicking on the calendar icon or by clicking the “TODAY” link, which will input the current date for you automatically. Then click “Save Data.”
- Input all relevant and required information and then click “Save Data” located in the center of the screen.
- At any point, you can delete the case. That option is located in the bottom right hand corner. You can also save the case and begin a new one or go to the next case in your case log list by clicking on those options in the bottom left hand corner.

Reviewing CFA Case Log Comments

- Go to “Case Log Highlights (by Day/Week/Month)” under “Case Log Reports” on the main menu. Input the “Date of Case Logs” by clicking on the calendar icon or by clicking the “TODAY” link, which will input the current date for you automatically. You may also select the option to see the week, month, or daily totals incorporating that date by checking the corresponding box below. Then click “Apply Filters.” Any CFA comments will appear in the first column in red next to the case log number.

Entering a Time Log

- Go to “My Time Logs” from the main menu. Click on “Add a Daily Time Log” and input the “Date of Time Log” by clicking on the calendar icon or by clicking the “TODAY” link, which will input the current date for you automatically. Make sure your “Course” is listed correctly, then click “Save Data.”
- Input the number of hours and/or minutes for your clinical shift that day and click “Save Data.”
- You may also check the box “Display patient, consult & conference time” if you would like those totals made available on the screen. If you want to see your shift time parallel to your patient time, go to “My Hours by Course” under the “Other Activities & Reports” heading. You may also go into “My Time Logs” and select a date range and check the “Display patient, consult & conference time,” box in the top left corner, then hit "Apply Filters."

Completing an Evaluation

- Go to “My Evaluations & Surveys” under “Other Activities & Reports” on the main menu. Click on the appropriate link to complete the evaluation. Make sure you hit the “Submit Evaluation” button when finished. Preceptors and clinical sites do not have access and do not receive this feedback provided by the student. FNP Leadership reviews this information for future placement decisions. CFA faculty evaluations are anonymous.

Viewing Evaluations Completed About You

- Go to “My Evaluations & Surveys” under “Other Activities & Reports” on the main menu. Evaluations completed about you are listed on the bottom portion of the page.

Uploading External Documents

- Go to “My External Documents” under “Other Activities & Reports” on the main menu. Then click “Add a Document.” When choosing the category, you are to choose either *pdf* or *word* so that your file is viewable by your CFA.

NOTE: The category of ‘My Portfolio’ documents will not appear to faculty members when they view your list of External Documents.

Typhon Documentation

Students must enter a clinical summary for every patient seen in the clinical setting.

Weekly log entries should include the following components:

1. The following five pieces of demographic information must be entered for each patient encounter:

- Demographic information (age, sex, race)
- Chief complaint
- ICD-10 Code
- CPT Code
- Level of student participation

2. For all encounters, include a Clinical Summary containing 1-2 sentences in the “Clinical Notes” section detailing the following information:

- Presenting Complaint
- Assessment(s)/Diagnosis(es) List
- Plan

Example: 52 yo white female patient presented with complaints of lower abdominal pain and dysuria. Dx with UTI, prescribed Bactrim DS 1 PO Q12 x 3 days.

APPENDIX

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APPENDIX A

NONPF: Nurse Practitioner Core Competencies

I. Scientific Foundation Competencies

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

II. Leadership Competencies

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

III. Quality Competencies

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

IV. Practice Inquiry Competencies

- a. Provides leadership in the translation of new knowledge into practice.
- b. Generates knowledge from clinical practice to improve practice and patient outcomes.
- c. Applies clinical investigative skills to improve health outcomes.
- d. Leads practice inquiry, individually or in partnership with others.
- e. Disseminates evidence from inquiry to diverse audiences using multiple modalities.

- f. Analyzes clinical guidelines for individualized application into practice.

V. Technology and Information Literacy Competencies

- a. Integrates appropriate technologies for knowledge management to improve healthcare.
- b. Translates technical and scientific health information appropriate for various users' needs.
 - a. Assesses the patient's and caregiver's educational needs to provide effective, personalized healthcare.
 - b. Coaches the patient and caregiver for positive behavioral change.
- c. Demonstrates information literacy skills in complex decision making.
- d. Contributes to the design of clinical information systems that promote safe, quality and cost-effective care.
- e. Uses technology systems that capture data on variables for the evaluation of nursing care.

VI. Policy Competencies

- a. Demonstrates an understanding of the interdependence of policy and practice.
- b. Advocates for ethical policies that promote access, equality, quality, and cost.
- c. Analyzes ethical, legal, and social factors influencing policy development.
- d. Contributes in the development of health policy.
- e. Analyzes the implications of health policy across disciplines.
- f. Evaluates the impact of globalization on health care policy development.
- g. Advocates for policies for safe and healthy practice environments.

VII. Health Delivery System Competencies

- a. Applies knowledge of organizational practices and complex systems to improve healthcare delivery.
- b. Effects health care change using broad based skills including negotiating, consensus-building, and partnering.
- c. Minimizes risk to patients and providers at the individual and systems level.
- d. Facilitates the development of health care systems that address the needs of culturally diverse populations, providers, and other stakeholders.
- e. Evaluates the impact of health care delivery on patients, providers, other stakeholders, and the environment.
- f. Analyzes organizational structure, functions and resources to improve the delivery of care.
- g. Collaborates in planning for transitions across the continuum of care.

VIII. Ethics Competencies

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

IX. Independent Practice Competencies

- a. Functions as a licensed independent practitioner.
- b. Demonstrates the highest level of accountability for professional practice.
- c. Practices independently managing previously diagnosed and undiagnosed patients.
 - i. 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.
 - ii. Uses advanced health assessment skills to differentiate between normal, variations of normal and abnormal findings.
 - iii. Employs screening and diagnostic strategies in the development of diagnoses.
 - iv. Prescribes medications within scope of practice.
 - v. Manages the health/illness status of patients and families over time.
- d. Provides patient-centered care recognizing cultural diversity and the patient or designee as a full partner in decision-making.
 - a. Works to establish a relationship with the patient characterized by mutual respect, empathy, and collaboration.
 - b. Creates a climate of patient-centered care to include confidentiality, privacy, comfort, emotional support, mutual trust, and respect.
 - c. Incorporates the patient's cultural and spiritual preferences, values, and beliefs into health care.
 - d. Preserves the patient's control over decision making by negotiating a mutually acceptable plan of care.
 - i. Develops strategies to prevent one's own personal biases from interfering with delivery of quality care.
 - ii. Addresses cultural, spiritual, and ethnic influences that potentially create conflict among individuals, families, staff and caregivers.
- e. Educates professional and lay caregivers to provide culturally and spiritually sensitive, appropriate care.
- f. Collaborates with both professional and other caregivers to achieve optimal care outcomes.
- g. Coordinates transitional care services in and across care settings.
- h. Participates in the development, use, and evaluation of professional standards and evidence-based care.

Population-Focused Nurse Practitioner Competencies, (2017). Prepared for: Department of Health and Human Services. Submitted by: The National Organization of Nurse Practitioner Faculties(NONPF). www.nonpf.org. The American Association of Colleges of Nursing(AACN).

Student Clinical Checklist(SCC)

For each clinical course, this complete document must be submitted to the 2GU Gradebook by the last day of face-to-face synch class.

Name:	Date:
Course:	CFA:
Clinical Site/Preceptor:	
Checklist:	
<input type="checkbox"/> Send resume to preceptor and CFA	
<input type="checkbox"/> Arrange schedule with preceptor	
<input type="checkbox"/> Enter clinical schedule into Typhon	
Objectives Assignment 1, 2, and 3	
<input type="checkbox"/> Objectives 1 <input type="checkbox"/> Objectives 2 <input type="checkbox"/> Objectives 3	
<input type="checkbox"/> Preceptor midterm evaluation submitted on Typhon	
<input type="checkbox"/> Portfolio	
<input type="checkbox"/> Case logs completed/approved	
Complete evaluations on Typhon:	
<input type="checkbox"/> Preceptor <input type="checkbox"/> Clinic Site <input type="checkbox"/> Clinical Faculty Advisor	
<input type="checkbox"/> Preceptor final evaluation submitted on Typhon <input type="checkbox"/> Review final evaluation with preceptor	Percentage:
<input type="checkbox"/> Upload completed and signed Clinical Attendance Roster to Typhon	
<input type="checkbox"/> Complete minimum number of clinical hours <input type="checkbox"/> Hours are listed in Typhon time log	Number of hours:

Information on Clearance for Graduation

As you prepare for graduation, the following information is required. Please ensure that you:

Confirm that all information in Typhon is complete and fully updated for each term. This includes:

Preceptor Evaluation of Student Performance

Completed evaluations can be viewed through the “My Evaluations and Surveys” link in Typhon

Student Evaluation of Clinical Site, Clinical Preceptor, and CFA

Faculty Evaluation of Student Performance

Case Logs

Time Logs

Clinical Attendance Roster

Submit your Application to Graduate: Applications should be submitted via MyAccess by the first business day of the month prior to the one that you intend to graduate. For example, if you intend to graduate in the month of August, you should submit by July 1. Please note, Georgetown does not confer graduation in June. If you expect to graduate prior to May and are attending Commencement, you must apply to graduate by February 1 in order to have adequate time for the ordering of your diploma.

Submit the Clinical Experience Profile during NURO752. Please consult your CFA if you have any questions about this.

Complete the Georgetown Program Exit Survey. A link to complete this anonymous survey will be emailed to you near the end of the term. We appreciate your response to this survey.

National Certification Examination

In addition, after successful graduation from the FNP program you will be eligible to take a national certifying examination. The examinations are offered by the:

1. American Academy of Nurse Practitioners Certification Program (AANPCP)

<http://www.aanpcert.org/ptistore/control/index>

2. American Nurses Credentialing Center (ANCC)

<http://www.nursecredentialing.org/default.aspx>

- Those of you taking the ANCC exam must submit the Validation of Advanced Practice Nursing Education Form to ANCC. The process to prepare this form is:
 - Request a form that is pre-completed by the FNP Program information by emailing fnponline@georgetown.edu.
 1. Complete the top portion of the form, including the date that your degree was conferred and the total number of faculty supervised clinical hours.
 2. Send the form to fnponline@georgetown.edu to receive the signature of the FNP Program Director.

3. The form will be returned to you with the signature of the FNP Program Director. *Please note* that it is then your responsibility to submit the completed form to ANCC.

We ask that you notify us which exam you will be taking prior to registering for the exam by completing the online form, <http://tinyurl.com/gufnpexam>. Registration for these exams can be completed through the websites for ANCC or AANPCP.

Official transcripts must be requested through the Registrar. Information on how to request an official transcript can be found here: <http://registrar.georgetown.edu/records/transcripts>.

If you have any questions, please do not hesitate to contact us at fnponline@georgetown.edu.

Final Preceptor Evaluation of Student

Using the scale below, please indicate the student's capacity to meet the following Family Nurse Practitioner (FNP) competencies:

Scale:

- Does not meet expectations (1)
- Inconsistently meets expectations (2)
- Meets expectations (3)
- Sometimes exceeds expectations (4)
- Always exceeds expectations (5)
- Not Applicable/Not Assessed (N/A)

1. The student critically analyzes data and evidence to improve advance practice nursing, patient care, and promotion of evidenced based practice.
2. The student integrates the FNP role into their multi-disciplinary team, maximizing the attributes of a FNP.
3. The student seeks opportunities to assume increasing levels of independence in the clinical setting.
4. The student maintains professional demeanor and performance.
5. The student utilizes evidenced based resources to facilitate the identification of the best plan of care for the patient.
6. The student considers the patient's access to care, cost, quality and safety in their provision of care.
7. The student is able to translate new knowledge into practice to improve patient outcomes across the lifespan.
8. The student utilizes appropriate technologies for clinical learning, patient management and improving health care outcomes.
9. The student is able to assess the health literacy of the patient and their family when discussing diagnoses and treatment options related to the plan of care.
10. The student maintains a safe practice environment.
Yes No
If you answered no, please explain in the space provided below and contact the CFA:
11. The student is able to work within the culture of the health care delivery system when making referrals to specialists and ordering diagnostics tests related to acute and chronic conditions.

12. The student is able to understand the role of the health care delivery system and utilize all of the available resources within the system related to patient care across the lifespan.
13. The student integrates the Georgetown University Values Based Model (human flourishing, social justice, the common good, professional care-compassion, individual-collective excellence) into his/her care of culturally diverse patients, families, and communities.
14. The student assesses access to care, equity, quality, and cost-effective health care.
15. The student utilizes effective verbal and non-verbal communication skills during patient encounters and communicates with the interdisciplinary team.
16. The student collects relevant and appropriate subjective data related to the chief complaint.
17. The student integrates advanced health assessment skills to differentiate between normal, variations of normal and abnormal findings.
18. The student develops appropriate differential diagnosis and assessment of problems/needs based on history, physical exam and the interpretation of diagnostic data. *(For FNP I students please select N/A).*
19. The student integrates health promotion and disease prevention into patient care management that is mutually agreed upon by the patient and the practitioner.
20. The student creates plans of care that utilize appropriate diagnostic testing, pharmacological interventions, and non-pharmacological therapies. *(For FNPI students please select N/A)*
21. The student maintains a climate of patient-centered care to include confidentiality, privacy, comfort, emotional support, mutual trust and respect.
22. The student incorporates the patient's cultural and spiritual preferences, values, and beliefs into the plan of care.
23. The student records data in a complete, concise and well-organized format.
24. The time the student spends with the patient is consistent with level of experience. The student utilizes his/her time effectively when not seeing patients.
25. The student's verbal patient presentation to the preceptor is organized and inclusive of appropriate data.
26. The student requests the preceptor's assistance when encountering new, unfamiliar, and complicated situations.
27. The student accepts constructive criticism.

28. The student evaluates and revises objectives with preceptor.
29. The student takes initiative to schedule mid-term and final evaluation review with preceptor, and secure a written evaluation.
30. The student arrives on time and is present for the entire scheduled clinical day.
31. The student notifies the preceptor/agency and CFA within an appropriate time frame with anticipated tardiness or absence from the clinical site.
32. Your overall satisfaction with this student's ability to meet FNP competencies.

If you answered (1) Does not meet expectations or (2) Inconsistently meets expectations, for any of the above items, please explain in the space provided below.