Saint Mary's University of Minnesota
Schools of Graduate and Professional Programs
Twin Cities Campus
Graduate Program in Nurse Anesthesia
www.smumn.edu/anesthesia

Student Handbook / Administrative Manual 2016 - 2018

Facebook Page

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INTRODUCTION

Saint Mary’s University of Minnesota Graduate Program in Nurse Anesthesia ("the Program") reserves the right to change or revise all of its policies and procedures at any time without prior notice to the student. This handbook and the policies, procedures, and rules contained herein supersede any and all prior oral or written representations or statements regarding the terms and conditions applicable to students accepted into the nurse anesthesia program.

This program handbook is in addition to the policies and procedures set forth in the Saint Mary's University of Minnesota Schools of Graduate and Professional Programs Catalog and Student Handbook. In cases where the Graduate Nurse Anesthesia Program Handbook and the University Catalog and Student Handbook have differing policies and/or procedures, the Graduate Nurse Anesthesia Program Catalog and Student Handbook takes precedence.

The information, descriptions, policies and procedures contained in this manual are reviewed each year.

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March, 2016
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Program Organizational Chart
AFFILIATIONS
Students enrolled in the Saint Mary’s University of Minnesota Graduate Program in Nurse Anesthesia affiliate with other health care facilities to enrich their clinical training and/or meet certain graduation requirements.

PRACTICUM SITES:
Abbott Northwestern Hospital, Minneapolis, MN
Amery Regional Medical Center, Amery, WI
Aspirus Medford Hospital, Medford, WI
CentraCare Surgery Center, St. Cloud, MN
Children's Hospital and Clinics, Minneapolis, MN
Essentia Health-Duluth (Miller-Dwan Building), Duluth, MN
Essentia Health-St. Mary's Medical Center, Duluth, MN
Gillette Children's Specialty Healthcare, Saint Paul, MN
Glencoe Regional Health Services, Glencoe, MN
Hayward Area Memorial Hospital, Hayward, WI
Lakewood Health System, Staples, MN
Lakeview Medical Center, Rice Lake, WI
Marshfield Clinic Ambulatory Surgery Center, Eau Claire Center, WI
Marshfield Clinic Ambulatory Surgery Center, Marshfield Center, WI
Marshfield Clinic Ambulatory Surgery Center, Minocqua Center, WI
Marshfield Clinic Ambulatory Surgery Center, Wausau Center, WI
Mayo Clinic Health System New Prague, New Prague, MN
Memorial Medical Center, Neillsville, WI
Mercy Hospital, Coon Rapids, MN
Ministry Saint Mary's Hospital, Rhinelander, WI
Northfield Hospital, Northfield, MN
Owatonna Hospital, Owatonna, MN
Phillips Eye Institute, Minneapolis, MN
Regions Hospital, Saint Paul, MN
Ridgeview Medical Center, Waconia, MN
River Falls Area Hospital, River Falls, WI
Riverwood Health Care Center, Aitkin, MN
Saint Cloud Hospital, Saint Cloud, MN
Saint Croix Falls Regional Medical Center, Saint Croix Falls, WI
Saint Elizabeth's Medical Center, Wabasha, MN
Saint Joseph's Hospital, Marshfield, WI
Saint Luke's Hospital, Duluth, MN
Shawano Medical Center, Shawano, WI
Unity Hospital, Fridley, MN
Winona Health, Winona, MN

PROGRAM OVERVIEW
This is a program offered by Saint Mary's University of Minnesota Graduate School of Health and Human Services. The qualified student is admitted to Saint Mary's University of Minnesota and is directed toward the goal of earning a Master of Science in Nurse Anesthesia. Saint Mary’s University believes in building and developing on the baccalaureate base with emphasis on a strong scientific and technical background. Graduates will be prepared to practice in a wide variety of settings and in diverse methods of administering a safe anesthetic. The graduate is eligible to write the certification examination as offered by the National Council on Certification and Recertification of Nurse Anesthetists (NBCRNA). Successful completion of the examination entitles the graduate to be known as a Certified Registered Nurse Anesthetist.
PROGRAM PHILOSOPHY
The Master of Science program in Nurse Anesthesia originated in response to the request of leaders in the health care field for graduate level education in the field of Nurse Anesthesia. With this need in mind, Saint Mary’s University of Minnesota developed this program.

With a focus on meeting the needs of adult learners, the program’s goal is to provide a positive and supportive learning environment, preparing the professional nurse in the art and science of anesthesia and meeting the societal need for safe and competent anesthesia care.

The program provides the student with a curriculum that includes formal and informal instruction in scientific principles, clinical practice and professional growth opportunities. Core values upheld by all members of this community include academic excellence, professionalism and personal integrity, responsibility and compassion. A shared sense of responsibility exists between the faculty and the student to reach the goal of becoming a Nurse Anesthetist.

ACCREDITATION AND REGISTRATION
Saint Mary’s University of Minnesota is accredited by the Higher Learning Commission.

The Higher Learning Commission
230 South LaSalle Street, Suite 7-500
Chicago, IL 60604-1411
www.hlcommission.org
312-263-0456

Saint Mary’s University of Minnesota is registered as a private institution with the Minnesota Office of Higher Education pursuant to sections 136A.61 to 136A.71. Registration is not an endorsement of the institution. Credits earned at the institution may not transfer to all other institutions.

The Nurse Anesthesia Program at Saint Mary’s University of Minnesota is accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA), 222 S. Prospect Ave., Park Ridge, IL 60068; (847) 655-1160, (http://home.coa.us.com). The program’s next review by the COA is scheduled for May/October 2020.

The Nurse Anesthesia Program at Saint Mary’s University of Minnesota is approved by the Minnesota Board of Nursing.

ADMISSION CRITERIA
Applicants seeking admission to this program must meet the admission requirements for Saint Mary’s University of Minnesota Schools of Graduate and Professional Programs and for the Master of Science in Nurse Anesthesia Program. Applicants must have:

1. Completed an appropriate baccalaureate degree from a regionally accredited institution. Degrees must be completed and final transcripts must be submitted by the April 1st deadline. Appropriate degrees include the areas of nursing, biophysical, biological or behavioral sciences.
2. An overall GPA of 2.75 on a 4.0 scale or higher.
3. Current unencumbered licensure as a Professional Registered Nurse in the State of Minnesota, or eligible for reciprocity.
4. A minimum of one year of experience in a critical care setting.
5. A completed application submitted by the application deadline.
All students are required to have a physical examination prior to starting the program. Documented immunity to communicable disease is also required prior to the student’s involvement in hospital activities. Serum titers that are required include rubella, rubeola, varicella, Hepatitis B, and mumps. Vaccination will be required in non-immune students. Proof of receiving the Tdap vaccine (protection against diphtheria, tetanus, and pertussis) that extends to the date of the student’s graduation from the program is also required.

A TB test is also required each year. Students must have a negative 2-step TB test or have evidence that she/he has received treatment for a positive test. Proof of a negative chest x-ray must be submitted to the Clinical Director for all students who have positive TB tests.

All students must submit proof, to the Clinical Director, that they receive flu vaccinations annually.

Forms and documents pertaining to this policy can be found through this [LINK](#).

These requirements meet or exceed the Standards and Guidelines set by the Council on Accreditation of Nurse Anesthesia Educational Programs.

**APPLICATION PROCESS**

Persons applying to the nurse anesthesia program must submit:

1. A completed on-line application. The process can be found on the [Saint Mary’s On-line Application System](#). The application process MUST be completed by April 1st.

2. Official transcripts, issued to Saint Mary’s University of Minnesota, from the school that conferred your degree in nursing, your Bachelor’s degree (if granted by a different institution), and the required chemistry prerequisite. Any transcript that you believe will enhance your application (i.e., additional science/math courses) will be accepted and included with your application.

3. A transcript for an organic or inorganic chemistry course completed with a letter grade of “B” or better in the last five years. Entry level community or junior college level courses will not be accepted.

4. A completed Professional Goal Statement. Guidance on how to prepare this can be downloaded from the [Saint Mary’s On-line Application System](#) or the “Prospective Student” section of the Saint Mary’s Nurse Anesthesia website. Once completed, this document must be loaded into the electronic application as directed by April 1st.

5. A current résumé or curriculum vitae listing educational background and work experience.

6. A completed Academic Evaluation form. Guidance on how to prepare this can be downloaded from the [Saint Mary’s On-line Application System](#) or the “Prospective Student” section of the Saint Mary’s Nurse Anesthesia website. Once completed, this document must be loaded into the electronic application as directed by April 1st.

All application materials are to be submitted through the [Saint Mary’s On-line Application System](#).

Submission of all applicable college and nursing school transcripts to be sent directly to:

Admissions Department
Saint Mary’s University of Minnesota
2500 Park Avenue
Minneapolis, MN 55404-4403

All application materials must be received by the program before April 1st for candidates to be considered. The program reviews applications once a year and accepts qualified applicants into the next available class.

**SELECTION CRITERIA**
Since the class size is limited, candidates who meet the minimum admission requirement may not be selected. The admissions committee will select the most qualified applicants based on the following criteria:

- The completed application and supporting material.
- Previous academic performance.
- Demonstrated success as a professional Registered Nurse in a critical care area.
- The ability to perform all anticipated tasks relevant to the practice of Nurse Anesthesia.

Note: Applicants will be screened and the most qualified individuals will be invited for an interview.

TRANSFER INTO THE PROGRAM
Transfer into the Nurse Anesthesia Program is handled on an individual basis and credit for previous anesthesia education is not guaranteed.

STUDENTS WITH INTERNATIONAL TRANSCRIPTS
Applying students must have a Registered Nurses license granted by one of the 50 United States. Applicants must also have at least one year of nursing experience in a United States critical care unit. Other information about non-US transcripts can be found in the Saint Mary’s Catalog under Application Criteria for Students with International Transcripts.

TUITION AND FEES

TUITION: $605 per credit, 64 credits total ($38,720)

FEES AND EXPENSES
Application fee $25.00 (non-refundable)
Registration fee $1,000
(non-refundable; payable upon acceptance to the program)
Typhon System $100/year
Graduation fee $175
Clinical fee $325 per clinical semester

OTHER EXPENSES (estimated)
Books and supplies $2000
Certification Examination $750

STIPEND: None
HOUSING: not provided
UNIFORMS: Scrub clothes are provided
MEALS: not provided

ACADEMIC AND CLINICAL GRADING POLICIES

Academic:
Students should review University grade values and points found in the Catalog and Student Handbook for graduate academic grading policies. Graduate students must maintain a minimum grade point average (GPA) of 3.0. Students whose cumulative GPA is below 3.0 are placed on academic probation. To be removed from academic probation, students must complete the next five credits to raise their cumulative GPA to 3.0 or above. Failure to achieve a 3.0 or above will result in academic dismissal.
A student who receives a grade of “NC” in any course will be dismissed from the Nurse Anesthesia Program.
Students must have a GPA of 3.0 or higher to register for Clinical Practicum 2 – 5. (NA771 Clinical Practicum 2, NA772 Clinical Practicum 3, NA773 Clinical Practicum 4, NA774 Clinical Practicum 5) Students with a GPA lower than 3.0 after the third semester may not continue in the nurse anesthesia program.

Students are reminded that the manner of grading for each course, including the means by which final grades are determined, is documented in each course syllabus.

**Clinical:**

Students receive a "Pass" or "No Credit" grade for clinical practicum. Credits earned are counted toward the total number of credits required for graduation, but are not used in determining a student's grade point average, as per University policy. The following criteria must be met in order to receive a passing grade for clinical practicum:

1. Successful completion of the clinical experiences assigned the student during that semester, as evidenced by meeting the pre-determined performance levels written on the specific course syllabus. The summary evaluation is based on the review of the student's daily clinical performance evaluation results by the on-site Clinical Coordinator, who shares the evaluation with the student. All summary evaluations are reviewed by the Clinical Director following the completion of each rotation. Conferences with students are scheduled as needed during and after the clinical rotation by the Clinical Coordinator, Clinical Director or both.

2. Timely and accurate submission of all required work in accordance with the course syllabus:
   - Record of clinical experience documenting all clinical experiences during that semester.
   - All required case studies due that semester.
   - Clinical site and clinical instructor evaluations for each clinical rotation completed that semester.
   - All post-operative round documentation for that semester.
   - All original rotation and daily clinical evaluation documentation.

**GRADUATION CRITERIA**

Students enrolled in the program must meet the graduation criteria of Saint Mary's University of Minnesota Nurse Anesthesia Program.

- A GPA of 3.0 on a 4.0 scale must be maintained by the student.
- The student must maintain the minimum level of practice for the designated period in the program in accordance with the clinical objectives.
- The student must receive a passing score, as determined annually, on the Self Evaluation Examinations (SEE) administered by the National Board on Certification and Recertification of Nurse Anesthetists (NBCRNA). (See also: Syllabus for NA782).
- The student must fulfill all requirements outlined in the University and Program Outcome Objectives.
- Complete an application for graduation and submit the graduation fee (additional requirements of the University).
CURRICULUM DESIGN

Curriculum Design – Class of 2018

| Semester I        (Summer 2016)                                                                 |
|-------------------|---------------------------------|
| NA630 Professional Aspects of Nurse Anesthesia | 3 credits |
| NA640 Chemistry & Physics for Nurse Anesthesia   | 3 credits |
| NA606 Research Design & Statistical Analysis     | 3 credits |
| NA635 Professional Writing for Nurse Anesthetists | 3 credits |
| Total                                                      | 12 credits total |

| Semester II     (Fall 2016)                                                                 |
|-------------------|---------------------------------|
| NA614 Advanced Health Assessment for Nurse Anesthesia | 2 credits |
| NA618 Principles of Anesthesia Practice I             | 4 credits |
| NA645 Advanced Physiology and Pathophysiology I       | 6 credits |
| NA651 Pharmacology for Nurse Anesthetists             | 3 credits |
| Total                                                      | 15 credits total |

| Semester III   (Spring 2017)                                                                 |
|-------------------|---------------------------------|
| NA650 Advanced Physiology and Pathophysiology II      | 6 credits |
| NA661 Pharmacology                                     | 3 credits |
| NA620 Principles of Anesthesia Practice II             | 6 credits |
| NA770 Clinical Practicum I (150 hrs)                   | 2 credits |
| Total                                                      | 17 credits total |

**Second Year - 2017**

| Semester IV (Summer 2017)                                                                 |
|-------------------|---------------------------------|
| NA795 Portfolio I                                        | 1 credit |
| NA771 Clinical Practicum II (480 hrs)                    | 2 credits |
| NA780 Clinical Integration                               | 3 credits |
| Total                                                      | 6 credits total |

| Semester V     (Fall 2017)                                                                 |
|-------------------|---------------------------------|
| NA796 Portfolio II                                       | 1 credit |
| NA772 Clinical Practicum III (600 hrs)                   | 3 credits |
| Total                                                      | 4 credits total |

| Semester VI   (Spring 2018)                                                                 |
|-------------------|---------------------------------|
| NA797 Portfolio III                                      | 1 credit |
| NA773 Clinical Practicum IV (600 hrs)                    | 3 credits |
| Total                                                      | 4 credits total |

**Third Year**

| Semester VII (Summer 2018)                                                                 |
|-------------------|---------------------------------|
| NA782 Program Comprehensive Exams                         | 1 credit |
| NA798 Portfolio IV                                        | 3 credits |
| NA774 Clinical Practicum V (480 hrs)                      | 2 credits |
| Total                                                      | 6 credits total |
| Total program                                              | 64 credits total |

Degree Requirements, Course Descriptions, and Student Learning Objectives (Click here)
GRADUATE NURSE ANESTHESIA PROGRAM OUTCOME OBJECTIVES

Program Outcomes
1. Demonstrate the ability to provide safe and competent care throughout the perianesthetic continuum.
2. Demonstrate critical thinking skills.
3. Communicate effectively.
4. Demonstrate professional behavior.
5. Continue to learn throughout their careers.

Program Outcome Objectives

Patient safety is demonstrated by the ability of the graduate to:
1. Be vigilant in the delivery of patient care and refrain from any activity that could interfere with vigilance.
2. Protect patients from iatrogenic complications.
3. Participate in the positioning of patients to prevent injury.
4. Conduct a comprehensive and appropriate equipment check.
5. Utilize standard precautions and appropriate infection control measures.

Individualized perianesthetic management is demonstrated by the ability of the graduate to:
1. Provide care throughout the perianesthetic continuum.
2. Use a variety of current anesthesia techniques, agents, adjunctive drugs, and equipment while providing anesthesia.
3. Administer general anesthesia to patients of all ages and physical conditions for a variety of surgical and medically related procedures.
4. Provide anesthesia services to all patients, including trauma and emergency cases.
5. Administer and manage a variety of regional anesthetics.
6. Function as a resource person for airway and ventilatory management of patients.
7. Possess current advanced cardiac life support (ACLS) recognition.
8. Possess current pediatric advanced life support (PALS) recognition.
9. Perform a comprehensive history and physical assessment.

Communication skills are demonstrated by the graduate's ability to:
1. Effectively communicate with individuals influencing patient care.
2. Utilize appropriate verbal, nonverbal, and written communication in the delivery of perianesthetic care.
3. Communicate effectively through case records, written reports, written correspondences, and professional papers.
4. Interact competently with diverse populations.

Critical thinking is demonstrated by the graduate's ability to:
1. Apply knowledge to practice in decision-making and problem solving.
2. Provide nurse anesthesia care based on sound principles and research evidence.
3. Perform a preanesthetic assessment and formulate an anesthesia care plan for patients to whom they are assigned to administer anesthesia.
4. Identify and take appropriate action when confronted with anesthetic equipment-related malfunctions.
5. Interpret and utilize data obtained from noninvasive and invasive monitoring modalities.
6. Calculate, initiate, and manage fluid and blood component therapy.
7. Recognize and appropriately respond to anesthetic complications that occur during the perianesthetic period.
8. Pass the Council on Certification of Nurse Anesthetists' (CCNA) certification examination in accordance with CCNA policies and procedures.
Professional responsibility is demonstrated by the graduate’s ability to:

1. Demonstrate ethical behavior when interacting with patients, affiliated health care associations, and members of the medical community.
2. Participate in activities that improve anesthesia care.
3. Function within appropriate legal requirements as a registered professional nurse, accepting responsibility and accountability for his or her practice.
4. Interact on a professional level with integrity.
5. Teach others.
6. Participate in continuing education activities to acquire new knowledge and improve his or her practice.
7. Demonstrate knowledge of wellness and chemical dependency in the anesthesia profession through completion of content in wellness and chemical dependency.

Clinical Practicum Student Performance Objectives:

1. Provides a safe patient care environment at all times. This includes conducting a comprehensive equipment check, preparing needed equipment and supplies, assuring and monitoring appropriate positioning for all patients throughout the case, protecting patients from iatrogenic complications, and applying all required infection control measures and other standard safety precautions.
2. Demonstrates vigilance while delivering patient care and refrains from any activity that could interfere with vigilance.
3. Performs a comprehensive history and physical assessment, creates a relevant care plan, and discusses it with the anesthesia care team.
4. Demonstrates dexterity while performing procedures including (but not limited to) obtaining arterial and vascular access, positioning of patients, managing the airway and using airway equipment, and administering regional anesthesia and analgesia.
5. Safely administers anesthesia to patients of all ages and physical conditions for a variety of surgical and medically related procedures, including trauma and emergency cases, using a variety of techniques.
6. Monitors patients efficiently and accurately and makes sound decisions based on the available data.
7. Recognizes and appropriately responds to changes in the patient’s condition in a timely way.
8. Provides nurse anesthesia care based on sound principles and research evidence for all phases of the anesthetic process including induction, maintenance, emergence, transport, and postoperative assessment and care.
9. Communicates effectively with all members of the patient care team including the patient and their family members.
10. Acts with regard to cultural differences.
11. Functions within appropriate standards, policies, and legal requirements.
12. Accepts responsibility and accountability for his/her practice and acts with integrity in all matters.
13. Demonstrates professional behavior appropriate to at all times.

CLINICAL EVALUATION PROCESS
Clinical competency is the essential outcome of the nurse anesthesia program. Graduates must meet the performance levels for the program’s outcome objectives that are based on the entry requirements for safe practice by the Nurse Anesthetist. These skills are sequenced in the curriculum from simple to complex and include practice in a laboratory/classroom setting prior to performance in the clinical environment.
Since clinical performance is based on the knowledge gained in the didactic portion of the program, successful completion of related classroom work is a prerequisite for clinical participation. Clinical observation of anesthesia care and instruction in basic skills takes place during Clinical Practicum I, NA770. This course ends with basic skills testing that must be successfully completed prior to participation in direct patient care.

Clinical rotations are scheduled throughout the final four semesters in courses, Clinical Practicum II - V, NA771 – NA774. As students’ progress through this clinical portion of the program, their performance is assessed using the daily evaluation form and clinical conferences between the student and the clinical instructor and/or clinical site coordinator. Written care plans and case studies are used to assess and document that integration is occurring.

The student’s performance is evaluated in accordance to the following scale:

**Level 1:** Requires continuous supportive and directional cues more than 50% of the time.  
DESCRIPTION: Identifies segments of anesthesia principles, needs direction to apply them correctly, observes or practices clinical skills, lacks manual dexterity, focuses entirely on own behavior, rarely on patient and/or procedure.

**Level 2:** Requires frequent supportive and directional cues, 21-50% of the time.  
DESCRIPTION: Identifies principles, needs direction to identify application, demonstrates partial lack of skills and/or dexterity in some areas, focuses primarily on own behavior with occasional attention to patient and procedure.

**Level 3:** Requires supportive or directional cues occasionally between 5-20% of the time.  
DESCRIPTION: Applies principles accurately with occasional supportive cues, demonstrates coordination but uses unnecessary energy to complete tasks, focuses primarily on the patient and procedure but not exclusively.

**Level 4:** Performs at a level that requires few supportive cues from instructor; less than 5% of the time.  
DESCRIPTION: Applies principles of anesthesia consistently and accurately at all times, focuses on patient and procedure while completing tasks, demonstrates integration of knowledge and skills.

A summary evaluation is conducted by the on-site Clinical Coordinator with the student at the completion of each rotation. This evaluation provides a student with a summative assessment on all applicable clinical performance objectives. The assessment is based upon daily evaluations by the supervising CRNAs, written care plans, and Clinical Coordinator observations. The summary written evaluation is submitted to the Clinical Director and reviewed by the student before being submitted to the student’s clinical portfolio. The Program Director and/or Clinical Director may be in attendance at any student conference as determined by the Program Director, Clinical Coordinator, Clinical Director and/or student.

Students may access the Clinical Director or the Program Director at any time with concerns about their clinical curriculum or clinical progress.
GRADUATE NURSE ANESTHESIA PROGRAM POLICIES AND PROCEDURES

POLICIES and PROCEDURES
These policies are in addition to the policies set forth by Saint Mary’s University of MN. In cases where there are conflicting policies between the program and the university, the program policy takes precedent. Saint Mary’s University policies and procedures can be found on – line: Schools of Graduate and Professional Programs Catalog and Student Handbook
Policies are divided into “Academic” and “Clinical” for convenience. Please note that certain policies may apply to both the academic and clinical curricula. Failure to follow these policies or procedures may result in dismissal from this program.

ACADEMIC POLICIES AND PROCEDURES

CLASS ATTENDANCE POLICY
This policy includes all academic and clinical courses and all conferences.
Students are expected to attend all scheduled classes and conferences. If the student is unable to attend a class session due to illness or a family emergency, please notify the Program Coordinator, (612) 728-5132, who will pass the message on to the instructor and the Program Director. Regardless of why a class is missed, the student is responsible for the material covered. Additional work may be assigned by the instructor. Students who miss more than two class sessions, or are late more than twice or leave early more than twice, must withdraw from the course and register to take it at a later time. (Please note, there are classes that are scheduled as two sessions, one AM and one PM, per day. Please inquire with the Program Director if you need additional information). Make-up exams are given at the instructor’s discretion. Additional work may be assigned in lieu of the exam. The student is responsible for making arrangements with the course instructor. NOTE: This policy supersedes the University policy.

COURSE EXAMS
Exams, quizzes and tests are summary evaluations designed to assess the student’s comprehension of the subject matter. Exams are not designed to be study guides. Unless indicated on specific course syllabi, exams will not be returned to students in courses unless they are intended to be used as study guides or learning tools. Actual performance on an exam should guide the student to discover their level of content knowledge and guide their study of the subject matter in preparation for clinical practice and future exams. Item analysis and exam review are conducted as per individual course syllabi.
To support learning, students are provided with course syllabi, learning objectives, assigned and supplementary reading, notes/handouts posted to Blackboard, office hours with faculty, and additional materials located in the campus library, the program webpage and NA Student Blackboard page.

Off-Campus Exams
Several courses offer exams that are administered via Blackboard or Prodigy and that are not proctored. Students wishing to take these exams off campus must be sure that they have a high speed or broadband internet access, a suitable environment, and the Respondus Lock Down software. If students are unable to attain the correct technology, exams can be taken on-campus by appointment with the Course Coordinator, Course Instructor, or Associate Director. Unless otherwise specified by the syllabus, these are considered exams and must be taken in accordance with the Academic Dishonesty Policy. This policy can be found in the Saint Mary’s University of Minnesota Catalog and Student Handbook.

DRUG AND ALCOHOL POLICY: On and Off Campus
(Please note, this policy applies to both the academic and clinical program.)
Students admitted to the Nurse Anesthesia Program are subject to all alcohol and drug use policies set forth by our affiliate hospitals in addition to the Saint Mary’s University policy. Students should review these policies prior
Students must cooperate with random drug testing required by their clinical sites. Therefore, possession of these substances may be a basis for removal from clinical and/or for termination from the program. In addition, no student may consume or be under the influence of, or be in the possession of alcohol at any time the student is in the classroom and/or performing clinical duties. Improper use of alcohol may also be a basis for removal from clinical and/or for termination from the program. Students must also comply with all local, state, or federal laws and regulations controlling the possession, manufacture, use, or distribution of controlled or illegal substances and alcohol.

There are circumstances in which students may need to take over-the-counter or prescribed medications that have the potential to impair their performance or personal behavior. As such, all students are responsible for being aware of the effect these medications may have on performance and must notify the Program Director within 72 hours prior to clinical attendance or drug testing about the use of any medication that could impair performance or has the potential to influence a drug screen.

Failure or refusal to comply with the substance abuse policy may be grounds for disciplinary action, including dismissal from the program. Any attempt to delay, hinder, or tamper with any testing or to alter the results of testing will be considered a refusal to comply with this policy.

**Procedures**
The School of Health and Human Services requires students to submit to drug and/or alcohol testing under any or all of the following circumstances:

- The start of a clinical rotation
- Random testing as required by the clinical sites
- For cause

A growing number of clinical sites now require students to have drug testing prior to placement in clinical rotations. Therefore, all students involved in clinical practice settings must undergo drug testing prior to working at clinical sites.

Clinical sites may require random testing of their staff, including students engaged in clinical rotations there. Students must cooperate with random drug testing required by their clinical sites.
A student may be required to undergo drug or alcohol testing for cause when the Program Director, in consultation with the Clinical Director or a clinical site faculty member, determines there is a reasonable suspicion that the student is impaired due to illegal or controlled substances or alcohol use or the use or misuse of prescribed or over-the-counter medications. Said suspicion may be based upon one or more of the following: unusual or aberrant behavior or patterns of abnormal or erratic behavior; physical symptoms of impairment; arrest or conviction for a drug or alcohol related offense; evidence of drug tampering, drug diversion, or misappropriation; direct observation of drug use; discrepant drug counts; alterations in student clinical and/or didactic performance that may not be attributed to other causes; a work-related injury or illness that may have been related to use of an illegal or controlled substance or alcohol; observation of poor judgment or careless acts which caused or had the potential to cause patient injury, jeopardize the safety of self or others, or result in damage to equipment.

Drug and alcohol testing required by the School of Health and Human Services will be conducted utilizing the following measures:

A. The student must be tested at a facility approved by the School.
B. The student must fully comply with the testing facility’s methods and procedures for collecting samples.
C. The test shall screen for the use of the controlled substances or any other controlled substances that are suspected of being abused or used by the student.
D. Urine, serum, hair, and saliva analysis or a combination of these may be tested.
E. The student will disclose any prescribed or over-the-counter medications, as well as any dietary habits that could modify testing results.
F. If the accuracy of a positive test is disputed by the student, the student may request a retesting of samples by the facility; however, the cost of the additional testing would be borne by the student. Testing done outside the appropriate window of time will not be considered valid.
G. Substance abuse is verified if either: (i) the positive test result is not disputed, or (ii) if the student-requested retest is positive.
H. If the test is inconclusive, the screening will be treated as positive until definitive analysis by alternate testing is accomplished. During this time the student will not be permitted to have any contact with patients and families but may be allowed to attend classes, pending the approval of the Program Director.
I. The testing facility will make a final report of the test results (positive, negative, or inconclusive) to the Program Director.
J. A student who is required to and submits to drug and alcohol screening will be expected to authorize the release of the results to the School and other relevant University offices.

A positive drug screen for any of the following substances will result in immediate dismissal from the program and the university: amphetamines or similarly acting sympathomimetics, cannabis, cocaine, hallucinogens, inhalants, phencyclidine (PCP) or similarly acting arylocyclohexylamines.

Confidentiality
All testing information, interviews, reports, statements and test results specifically related to the individual are confidential. Test results will be sent to the Program Director. Records will be maintained in a locked cabinet. While the results of testing are confidential within the University community, the information regarding substance abuse and rehabilitation must be shared with the Minnesota and Wisconsin Boards of Nursing or the Board of Nursing in the state where the student has licensure.

Approved: Academic Policy Committee March 9, 2016

GOOD NAME POLICY
(Please note, this policy applies to both the academic and clinical program.)
INTELLECTUAL PROPERTY RIGHTS / COPYRIGHT LAW
(Please note, this policy applies to both the academic and clinical program.)

It is a violation of federal law to reproduce or share copyrighted materials, print or digital, without appropriate permission. Sharing materials includes posting content online but does not include sharing links to material posted online by another party. Saint Mary's University of Minnesota considers a violation of copyright law to be academic misconduct.

The Fair Use provision of copyright law permit students to make and distribute copies of traditionally copyrighted materials without seeking permission from the copyright holder in situations related to teaching, scholarship, and research. All decisions to share copyrighted material must be determined on a case-by-case basis, using the fair use factors. Students who determine that their use of copyrighted materials meets fair use guidelines must attribute (cite) the original source. Students may contact the Twin Cities Campus Library for additional information and for a copy of the U.S. Copyright Law (17 U.S.C. § 101).

LEAVE OF ABSENCE
(Please note, this policy applies to both the academic and clinical program.)

All requests for leave of absence will be handled on an individual basis. Students must be in good academic standing to be considered for a leave. Students will not be granted a leave of absence for reasons related to their clinical or academic performance.

Military: Annual Duty, Drill Service or Training Leave

Saint Mary's University of Minnesota supports students who are members of the United States armed forces, National Guard, and reserve units. Students who are members of the National Guard or military reserves are encouraged to defer their annual duty, drill service, or training leave obligations or register for courses that fall outside of the scheduled duty. If this is not possible, a letter from the commanding officer stating that deferment is not possible must be submitted to the program director and instructor in advance of the needed annual duty, drill service or training leave. All course assignments due during the annual duty, drill service or training leave must be completed within the course dates. If additional time is needed, students must request an incomplete grade from the instructor before the course ends. See I/grade policy.

ELECTRONIC COMMUNICATIONS POLICY
(Please note, this policy applies to both the academic and clinical program.)

NURSING LICENSES

All students in the nurse anesthesia program are required to submit evidence of current and unrestricted/unencumbered licensure as a Registered Nurse in the state of Minnesota. Students are also required to submit evidence of current and unrestricted/unencumbered licensure as a Registered Nurse in the state of Wisconsin unless *Interstate Compact Licensing Rules apply and the Wisconsin nursing license requirements are met by the Compact license. Copies of both current licenses must be submitted to Typhon initially and each time the license is renewed. Copies of licenses MUST include both the issue and expiration dates. Copies of the Wisconsin Registered Nurses license must be submitted no later than the third Wednesday in September, prior to participation in NA770 Clinical Practicum I. Both licenses must remain current and unencumbered throughout the Program. Students without unrestricted/unencumbered licensure will not be permitted to participate in clinical or classroom activities. Any clinical time missed due to an expired license must be made up as designated by the Program Director.

*Interstate Compact Licensing Rules: Please note that if a student chooses to use their Interstate Compact nursing license, they must maintain legal residency in the state that issued the Interstate Compact License.

PHYSICAL EXAMINATION / IMMUNIZATIONS

Prior to starting the program: All students are required to submit a physician’s statement stating that the student is physically able to function in the role of a nurse anesthesia student. This statement must be received prior to the student starting in the Program. A record of receiving the T-dap is required within 10 years of graduation from
the program. Documented immunity to communicable disease is also required prior to the student's involvement in any hospital activities. Laboratory titers that are required include rubella, rubeola, varicella, Hepatitis B, and mumps. Forms and documents pertaining to this policy can be found through this [LINK].

(See also: CREDENTIALING OF STUDENTS AT CLINICAL SITES)

PREPARATION OF STUDENT WORK
(Please note, this policy applies to both the academic and clinical program.)
NA635, Professional Communication, is taken by every student at the beginning of the Program. The content of this course exposes the student to the standards of professional writing and communication. Students must be aware that all subsequent student work, including correspondences to program personnel, is to be prepared professionally with regard to grammar, spelling, punctuation, sentence structure, legibility and citation (where applicable). Student course work may be subject to a lower score if their work is not prepared in a professional manner.

THE ROLE OF NURSE ANESTHESIA STUDENTS
(Please note, this policy applies to both the academic and clinical program.)
Students are never permitted to represent themselves as Nurse Anesthetists by either title or function while they are enrolled in the nurse anesthesia program. Students may not be compensated for their role as a student Nurse Anesthetist. Patients have a right to know that part of their anesthesia care team includes a professional nurse enrolled in an accredited Nurse Anesthesia Program. Students must always identify themselves as such.

Students are responsible for discussing their capabilities with their instructors. If a student feels that they are placed in any situation that may result in harm to a patient, it is their responsibility to notify their supervising CRNA or anesthesiologist immediately.

Students are never to act independently as anesthesia providers. No anesthesia care can be rendered by a student without the consent of their supervising CRNA or anesthesiologist.

STATEMENT OF STUDENT RIGHTS AND RESPONSIBILITIES
(Please note, this policy applies to both the academic and clinical program.)
It is the stated policy of the program to afford the student the experience necessary to meet the graduation requirements outlined by the Council on Certification to determine eligibility to write the National Certification Examination.

Students have the right to expect:

- That they will not be exploited relative to time commitment for pay or profit.
- That enrollment in the program of study is equivalent to the signing of a contract between the student and the program.
- That the rights and responsibilities of each party of the contract are fully understood and must be adhered to.

Graduates have the right to expect:

- That an official transcript of the student’s record will be forwarded to the Council on Certification of Nurse Anesthetists in sufficient time for eligibility determination to be made for the first Certification Examination following graduation.

STUDENT RECORDS POLICY
Students enrolled in the Nurse Anesthesia Program are responsible for completion and updating required clinical and class records. Students must utilize the forms provided by the Program. All records shall be legible and accurate. All appropriate information must be included. See also: Appendix V Document Management and Appendix VI Formatting and Labeling Documents.
STUDENT WITHDRAWAL/RESIGNATION
(Please note, this policy applies to both the academic and clinical program.)
A student’s request to voluntarily withdraw or resign from the Program must be presented in writing to the Program Director prior to the effective date of the resignation. The Program Director will notify the appropriate agencies which may include, among others, the Councils on Accreditation and Certification, American Association of Nurse Anesthetists, the Veterans Administration (in case of the student receiving Veterans Education monies) and/or other student loan or financial assistance agencies. Withdrawal from individual courses must be done in accordance with the Withdrawal Policy in the Course Schedule. Tuition refunds are according to University policy.

UNCOMPLETED COURSEWORK - I/GRADE
(Please note, this policy applies to both the academic and clinical program.)
The grade of “I” (Incomplete) may or may not be given by the instructor at the student’s request when the required work is not completed. The student must submit a written request to the instructor prior to the final class session. In addition, the student must contact the instructor to ascertain exactly what work remains to be done. The instructor must report on the official grade roster the grade “I” followed by the grade that the student will receive if the coursework is not completed within 30 calendar days of the last day of the class (e.g. I/NC). If the required work is completed in the specified time, the instructor will report a single final grade to the registrar. That grade will replace the I/grade, the incomplete will be removed, and the grade point average will be recomputed accordingly.
A request for an extension beyond 30 calendar days must be submitted, in writing, to the Program Director. The Program Director, after conferring with the instructor, may or may not grant the extension. If an extension is approved, a new deadline must be established. Students receiving incompletes in courses will be administratively withdrawn from the subsequent course if the incomplete is not resolved at least one week prior to the start of the course.

VACATION / HOLIDAY TIME
(Please note, this policy applies to both the academic and clinical program.)
All students are granted 6 legal holidays off annually. All other time off is designated by the Program.

CLINICAL POLICIES AND PROCEDURES

CLINICAL ATTENDANCE POLICIES AND PROCEDURES (Courses NA770 – NA774)
A typical clinical day extends from 0630 until 1600. Students are expected to arrive in the clinical area in sufficient time to prepare all necessary drugs and equipment for the assigned clinical experiences. Initially, this may require arriving an hour or more prior to the start of the surgical schedule. On average, students can anticipate being relieved from their operating room responsibilities at approximately 1500 or 1530. Students may request, to or be asked, to finish cases which will end in a reasonable period of time. It is inappropriate for a SRNA to ask clinical instructors or clinical coordinators to leave the clinical area early. Students may be dismissed early at the discretion of their clinical instructor/coordinator. However, the clinical instructor/coordinators do not need student input in deciding when students are released from clinical.

Students are expected to remain in the operating room area until they have been relieved of their duties by the clinical coordinator or preceptor. Refusing to complete clinical assignments or leaving the operating room area without permission is grounds for academic probation and/or dismissal from the program.

Students who miss more than two clinical days (16 clock hours) per semester, or are late more than twice or leave early more than twice must withdraw from the course and register to take it at a later time.

All students are to follow an assigned clinical schedule as outlined by the clinical practicum syllabi. Any deviation from the assigned scheduled hours must be approved, in writing, by both the site Clinical Coordinator and the
Clinical Director. Additional work may be assigned by the Clinical Director. (See also: HOUSING AT CLINICAL SITES).

Sick-Time
If the student is unable to attend clinical due to illness or a family emergency, students must notify both the Clinical Director and appropriate clinical site. If the absence, due to illness, affects the student’s ability to complete the nurse anesthesia program, the leave of absence policy may apply or the student may be dismissed from the program. Regardless of why a clinical day is missed, the student is encouraged to make up the missed day. (See also: LEAVE OF ABSENCE and HOUSING AT CLINICAL SITES).

A student returning to school after an illness should report directly to his/her clinical site. Students with any of the following conditions must be screened through their physician prior to returning to clinical practice. A written note on clinic or MD letterhead is submitted to the Program Director or the Clinical Director prior to reporting to the clinical site. This includes (but may not be limited to):

- All clinical-related injuries / illnesses
- All orthopedic or back problems
- Major surgical procedures
- Health related absences greater than 2 weeks
- Infectious diseases including: Hepatitis, lice, tuberculosis, scabies, hand lesions, diarrhea over 3 days, conjunctivitis, non-allergic skin rashes, shingles or exposure to a communicable disease
- Any mental health or chemical dependency issues
- Maternity leave

Students with upper respiratory infections may work if they wear a mask when in close physical contact with other people and wash hands well after handling secretions. Students in direct contact with organ transplant, oncology or any immunosuppressed patients should be reassigned until symptoms subside.

Students enrolled in NA771 who wish to make-up time must apply, in writing, to the Clinical Director at least two weeks prior to the day proposed to be used to make up the missed time. Written approval by the Clinical Coordinator must also be submitted to the Clinical Director. Final approval is determined by the Clinical Director once all materials have been received. A new clinical schedule will be assigned by the Clinical Coordinator. Copies of all documentation, including the Application to Change Clinical Schedule form, all correspondences and the revised clinical schedule are placed in the student’s Google Docs File in a folder named “Schedule Changes.” Students are expected to fulfill their revised schedule. Students may not use class time to make up clinical time missed.

Students enrolled in NA772-NA774 may arrange to make-up time with their Clinical Coordinator. Copies of the completed Application to Change Clinical Schedule document and the revised clinical schedule are placed in the student’s Google Docs File in a folder named “Schedule Changes” after they are sent to the Clinical Director. Students are expected to fulfill their revised schedule. Students may not use class time to make up clinical time missed.

CLINICAL PROBATION / DISMISSAL
A student who has performance or interpersonal problems may be placed on clinical probation or dismissed from the Program. Depending upon the facts and circumstances of each case, the Program reserves the right, through appropriate channels, to determine which steps, if any, as set forth previously, will be applied. The facts and circumstances of a student’s situation will be shared with other faculty members and administrators in order to determine a course of action.
CLINICAL ROTATION SITES
Each clinical site is unique and presents necessary clinical experiences for nurse anesthesia students. Students are expected to rotate through a tertiary hospital, community hospital, rural hospital, and sub-specialty experiences as assigned. The length of affiliation experience ranges from five to eight weeks depending on the affiliation site. Specific educational objectives to be accomplished during these affiliations are posted on the Typhon system. Students are expected to review these along with applicable course materials prior to their clinical experience. Students are expected to submit their additional learning objectives to the respective clinical coordinators at least two weeks prior to the start of the rotation.

Orientation to clinical sites is provided by the receiving institution. Basic elements of this orientation can be found in Appendix III. (See also: APPENDIX III)

Students must be aware that they may be assigned to a clinical site that is more than 65 miles away from the University campus. Basic housing will be provided at these sites. (See also: HOUSING AT CLINICAL SITES)

CLINICAL SCHEDULES
Clinical rotation schedules are designed to provide each student with the best possible opportunities to apply classroom content to patient care and qualify to take the National Certification Examination. Clinical practicum is an important but limited resource. Each clinical practicum site has an affiliation contract with the Program that defines the terms under which a student may attend. Besides this contract, there are many other administrative factors, including university and hospital policies that affect how the schedule is planned, written, and effectuated. Schedule changes can be initiated by an affiliate at any time. Students need to realize that any schedule change will take time to process. Changes must be done in accordance with the affiliation contract(s), and the resources of the Program. Because of these facts, please note the following policies/procedures:

- The process for determining the clinical assignments is reviewed and defined annually. Students are notified as early as possible. A schedule that encompasses all of the experiences needed is prepared and presented to the students for review.
- Changes to the clinical rotation schedule are inevitable and done for many different reasons. Students are expected to comply with any changes. If the schedule is changed, as much notice as possible will be given to the student.
- Student requests to change their clinical rotation schedule will be considered in extreme circumstances only.
- The final schedule will be posted to a web server with a link made available on Blackboard. This schedule may change so students are encouraged to make sure that they have the latest version of the schedule. Students will be notified if their schedule is changed.
- Students will not be scheduled to attend practicum at any clinical site during the Christmas to New Year semester break. (No exceptions)
- All time off is designated by the Program including holidays and semester breaks.
- Schedule changes requested by students participating in NA772-NA774 must be approved by the sites Clinical Coordinator. Changes are made by using the Application to Change Clinical Schedule form. Approved changes are signed by the Clinical Coordinator, emailed to the Clinical Director, and placed in the student’s Google Drive folder in a folder named “Schedule Changes.” Students are expected to fulfill their revised schedule.
- It is the responsibility of the student to notify their Clinical Instructor, Charge CRNA, and Clinical Coordinator prior to leaving the clinical area or site for any reason.

Request to change Final Clinical Rotation Site
It may be possible to accommodate a student’s request to be scheduled at a site where the student plans to work after graduation. The stipulations include:

- The site must be one of our clinical affiliate sites.
The student is not scheduled for a rural or CRNA only practice.

The request can cover no more than the final 3-4 weeks of the clinical rotation schedule.

Any housing costs are the responsibility of the student.

A request must be made in writing to the Clinical Director and accompanied by proof that all of the student's clinical case requirements have been met.

A written request by the site's anesthesia director must accompany the student's request and state that any student already scheduled will not be displaced.

All documents must be completed and submitted to the Clinical Director at least 8 weeks in advance of the first day of the anticipated schedule change.

Request to Participate in Call Time or Off-Shift Hours

Any request to work off-shifts (between the hours of 1700 to 0600), weekends, or call will not be considered until after the first Clinical Performance Evaluation has been received and reviewed. An overall average performance score of 102 or 80% must be achieved and maintained. If the score falls below this level, students will be assigned to day (0700-1530) shifts only. Any change of hours must be approved by the Clinical Coordinator. Changes are made by using the Application to Change Clinical Schedule form. Approved changes are signed by the Clinical Coordinator, emailed to the Clinical Director, and placed in the student’s Google Drive folder in a folder named “Schedule Changes.”

(See also: EDUCATIONAL LEAVE FOR STUDENTS, CLINICAL ATTENDANCE POLICIES AND PROCEDURES (Courses NA770 – NA774), LEAVE OF ABSENCE: Clinical, STUDENT "CALL" EXPERIENCE, and VACATION / HOLIDAY TIME).

CREDENTIALING OF STUDENTS AT CLINICAL SITES

Students are responsible for providing information to the Program and to their clinical practicum sites. This information (listed below) must be submitted by the student on-demand. By enrolling in clinical practicum (NA770 Clinical Practicum I, NA771 Clinical Practicum II, NA772 Clinical Practicum III, NA773 Clinical Practicum IV and NA774 Clinical Practicum V) the student agrees to have information about them sent to the receiving clinical site. This information includes, but may not be limited to, photo of the student, WI and/or State Nursing License from a state participating in the Interstate Nursing License Compact Agreement, MN State Nursing License, WI and MN Criminal Background Study, copies of ACLS, BLS and PALS certification cards, health status and proof of immunization status documents, fitness for duty statement, drug screen results, and proof of liability insurance coverage. Certificates documenting proof of training for Health Insurance Portability and Accountability Act of 1996 (HIPAA) compliance, infection control, fire safety, electrical safety, and laser safety training may also be sent to the receiving practicum sites.

Clinical Credentialing Documents

Students starting the program are required to submit the following documents:

- A photo of the student which will be provided by the Program
- A completed Health Status Form inclusive of laboratory reports demonstrating proof of immunity to rubella, rubeola, mumps, varicella, and Hepatitis B, proof of receiving a T-DAP vaccine within the past ten years, proof of a negative 2-Step TB Test or completion of the Positive TB Test Protocol. Forms and documents pertaining to this policy can be found through this [LINK](#).
- An unencumbered MN Registered Nurses license with expiration date listed on the document.

During October of the first year, the clinical practicum credentialing documentation will be completed and the following documentation will be required:

- A copy of an unencumbered WI and/or State Nursing License from a state participating in the Interstate Nursing License Compact Agreement,
- Proof of cleared WI and MN Criminal Background Studies,
- Proof of receiving an annual flu vaccine,
- Proof of a negative 2-StepTB TST test, QuantiFERON®-TB Gold-in-Tube test (QFT-GIT), or a T-SPOT® TB or completion of the Positive TB Test Protocol,
- Proof of HIPPA training,
- Proof of liability insurance coverage.

Each time you are scheduled to rotate to a new clinical site, you must send an approved letter of introduction (Please see: NA787 Syllabus), a resume or CV, and a copy of your Typhon Passport to your Clinical Coordinator(s). The Passport will be entered into your Google Folder for you (Forms for all clinical site credentialing) and updated as needed.

Many clinical practicum sites require specific credentialing, orientation, or other on-boarding processes be completed by the student prior to arrival at the site(s). All students must complete these processes and submit all required credentialing documentation to the site. These processes must be completed at least six weeks prior to the first assigned clinical day and proof of completion placed in the student's Google Docs Folder. Proof of completion documents are labeled in accordance to the guidelines posted in Appendix VI Labeling Documents.

All students complete the credentialing process and associated computer training for Allina Health System before they start clinical practicum and as needed for their assigned placements. The Clinical Director will announce the start and due dates for completing the initial Allina Process.

Clinical time is vitally important and a limited resource. If institutional orientation or credentialing is not completed or if credentialing documentation is not renewed on time, students will not be allowed to participate in clinical practicum. Any time missed is considered “unexcused” and must be made up. This time will be scheduled at a site assigned by the Clinical Director and will be scheduled during designated program vacation time or after the student’s anticipated program completion date.

**Document Management**

All students are required to monitor and submit renewable clinical credentialing documentation to the Program Coordinator, load renewed documents to the Typhon student management system, and update their personal folder on Google Docs with updated documents. Students are responsible to make sure that copies of these documents are available to the clinical site personnel immediately upon request. Renewable documents must be submitted at least two weeks before they expire. (Please see: Appendix V, Document Management).

**Labeling Documents**

All documents must be in either Microsoft Word or Adobe PDF format and labeled in accordance to the guidelines posted as Appendix VI, Formatting and Labeling Documents.

**CRIMINAL BACKGROUND STUDIES**

Anesthesia students work with vulnerable persons as defined by the Minnesota Vulnerable Adults Act of 1995 and Wisconsin 1997, Act 27 and 1999 Act 9. In order to be in compliance with this legislation, criminal background studies must be submitted by all students once per year and as required by both Minnesota and Wisconsin statutes. Failure to be cleared by either Minnesota or Wisconsin may result in dismissal from the nurse anesthesia program.

**EDUCATIONAL LEAVE FOR STUDENTS**

Rationale: Participation in educational meetings and events adds value to the educational process of student Nurse Anesthetists. This value must be balanced with the student’s commitment to his/her educational program. Educational leave is granted twice to students beyond their first year of study only.

Policy:

Students enrolled in the Nurse Anesthesia program may petition the Program Director for educational leave to attend an anesthesia related educational meeting or event. This completed form (Application for Educational
Leave must be submitted at least six weeks prior to the first day of the leave. Forms for approved leaves must be filed in the student’s Google Docs folder. The petition must be made with the proper form that describes:

- Meeting title
- Dates expected to be absent from the student’s academic and clinical schedule.
- Program content (attached a copy of the program).
- Student’s educational objectives and goals to be attained by attending this conference.

If the educational leave is granted by the Program Director, such time will not be counted as vacation, but will be considered as part of the student’s program time commitment. All costs associated with the meeting shall be borne by the student.

Time requested to take a Certification Examination review course will be granted once during second year of the program. The time will only be granted during practicum (NA771-NA774) courses. All time taken must be made up at the institution where time was missed. A plan for making the time up must be approved by both the Clinical Coordinator and the Clinical Director and documented on the Application to Change Clinical Schedule form that must accompany the Application for Educational Leave.

HAZARDOUS MATERIALS / INFECTIOUS DISEASES
Students should be aware that working in hospitals and with patients exposes them to hazardous materials and infectious diseases. Enrollment in this Program signifies recognition and acceptance of these risks. The Program will provide training relating to infectious diseases and exposure controls. Coursework will include material related to operating room and anesthesia equipment safety and management of hazardous materials. Students will practice according to the policies and procedures taught by the Program at all times. Failure to do so may result in disciplinary action against the student.

HEALTH INSURANCE
Health insurance is available through MNSure, the healthcare marketplace for the State of Minnesota (https://www.mnsure.org/).

Please note that ALL students planning to attend either St. Cloud Hospital or CentraCare Surgery Center are required to submit proof of health insurance coverage.

HOSPITAL DOCUMENTS AND PROPERTY
All hospital generated documents and materials are confidential and are property of the hospital. No document or property may be removed or photocopied by a student from any hospital campus.

HOUSING AT CLINICAL SITES
Students must be aware that they may be assigned to a clinical site that is more than 65 miles away from the University campus. Basic housing will be provided at these sites. This housing is considered hospital property. Only the student may use off-campus housing, no pets, no other individuals, including family members or others known to the student, are permitted on these premises. Smoking or the use of alcohol is prohibited. The property must be kept clean. No furnishings are to be taken from the property or added to the property. The doors are to be kept locked when the student is away from the premises. Any damages to the property will be the responsibility of the student. Any problems with the housing are to be reported to the property manager and the Clinical Director within 24 hours.

If the program is providing the student’s housing at a clinical site that includes a reservation policy, the student will receive reservation confirmation and cancellation information. If the student does not wish to use provided housing, the Clinical Director and the Clinical Coordinator must be notified at least six weeks in advance of the first scheduled night. It is the responsibility of the student to follow any reservation cancellation policy of the hotel/motel if they are not using the housing site for any reason during their clinical rotation. The student must
notify the Program Coordinator if they change their reservation with the hotel/motel. Failure to do so may result in the student paying any reservation cancellation days and/or fees.

IDENTIFICATION BADGES
All students are required to wear a badge identifying their name and department while on duty at a clinical site. These badges will be provided by Abbott Northwestern Hospital, the university or their clinical site.

INJURY OR ILLNESS AT A CLINICAL AFFILIATE SITE
Students are prohibited from accessing the employee health services of any affiliate hospitals. If an illness or injury is incurred by a student while attending a clinical rotation site, immediate care may be rendered by the affiliate hospital at the expense of the student. Please note that any illness or injury incurred while on duty at a clinical site is not covered by the hospital affiliate site, the nurse anesthesia program or Saint Mary’s University of Minnesota. If a student receives healthcare services at any hospital affiliate site (clinic, emergency care or other hospital service), the student must arrange for payment.

LEAVE OF ABSENCE: Clinical
All requests for leave of absence will be handled on an individual basis. Students must be in good academic standing to be considered for a leave. Students will not be granted a leave of absence for reasons related to their clinical or academic performance. All time taken must be made up hour for hour missed.

If a need for a medical leave of absence from clinical practicum is anticipated, a maximum of 32 clock hours may be made up in advance of the leave, if it is safe for the student to do so. This request must be submitted in writing to the clinical director and accompanied by an authorization by the student’s attending physician covering the time period that the student wishes to work extra hours. This request is subject to approval by the clinical director, the affiliate site coordinator and the program director.

Students must be aware that the ability to alter their academic or clinical schedule, select their clinical site, or schedule extended or “call” shifts to make up time away may not be an option. The student’s return to the clinical area is subject to the availability of a clinical practicum site and requirements for student credentialing at the clinical site. Immediate return to clinical practicum may not be possible, the student’s ability to complete the program by the predetermined completion date is not guaranteed.

Military duty: Annual duty, drill service and training leave time must be made up hour for hour in the clinical area. The student’s semester break time may be used to make up the missed hours at the end of the semester in which the annual duty, drill service or training leave occurred. If the annual duty, drill service or training leave exceeds the time allotted for semester break and/or goes beyond the semester, a grade of “IP” will be granted and the student may arrange to make up the time in consultation with the Clinical Director.

PARKING
Students parking at clinical sites must follow the parking policies of that institution. All students are reminded that we exist in an urban environment and that personal safety should be concern for all of us, no matter where we park. Please be aware of your surroundings at all times, use a security escort where appropriate and report all suspicious activity to the Security Department.

POST-OPERATIVE ROUNDS
Students will visit all of their patients post-operatively. Visits are to be documented on the Post-Operative Rounds Form and submitted to the students Google folder (See also: Appendix V: Document Management). In the event that the patient reports an unanticipated event or post-anesthetic complication, the student is to notify the anesthesiologist who was in charge of the case or the anesthesiologist who is in charge for that day if the anesthesiologist who did the case is not available. The student must also follow the policy for Unanticipated Patient Events/Outcomes. The charge CRNA must be notified prior to the student leaving the OR to make rounds.
This policy is in compliance with the Standards and Guidelines for Nurse Anesthesia Educational Programs by the Council on Accreditation of the American Association of Nurse Anesthetists.

**PRIVACY RIGHTS OF HOSPITAL AFFILIATES AND PATIENTS**
This program operates in accordance with the Health Insurance Portability and Accountability Act (HIPAA). The identity of our patients must be protected. Under no circumstances should the identity of any patient be disclosed to anyone other than those rendering care to them. Students may not duplicate any part of a patient’s medical record. Patient names and/or identifying characteristics must be omitted from all student work. Students may not enter any HIPAA or other protected information on any mobile communication device. Students may not remove surgical schedules or any document that contains the names of patients or staff. Any identifying staff data must be withheld from any report, care plan, or case study. Identification of a patient or hospital staff member by either direct or indirect means may result in the student’s dismissal. The only exception to this is when reporting a possible liability claim to the insurance company. (See also: **POLICY CONCERNING UNANTICIPATED PATIENT EVENTS / OUTCOMES**)

**PROFESSIONAL LIABILITY COVERAGE**
Because of liability insurance regulations and HIPAA, the Program cannot purchase liability insurance for its students nor can it act as administrator over student liability insurance policies. Students enrolled in the Program must apply for their own liability coverage. Applications for coverage by AANA Insurance are available from the Program Director. Information will be given to students that pertain to the type of insurance coverage that will be needed, required minimum policy coverage limits, and required effective dates of the policy. The amount of the premium must be paid by the student. Copies of Proof of Coverage must be submitted to the Program Director as soon as they are received by the student. If a student is denied coverage by the AANA Insurance Company, it is the student’s responsibility to obtain coverage through a different carrier. Students are not allowed access to clinical sites until proof of insurance is provided to the Program Director.

**STUDENT "CALL" EXPERIENCE**
In order to achieve the goal of becoming a competent entry level nurse anesthesia provider, student nurse anesthetists are given the opportunity to participate in a broad range of clinical experiences. These clinical experiences include participating in clinical practicum activities outside of the regularly scheduled hours of normal operation (0700-1700). “Call time” is defined as being physically present and involved with patient care or other anesthesia department activities between the hours of 1700 and 0600 Monday through Friday or on Saturday, Sunday or legal holidays. Students must complete at least one hundred and twenty (120) hours of call time as part of their clinical curriculum. This includes participation in 12 and 16-hour shifts. The total number of hours per a seven-day period must not exceed 60 hours. Students are encouraged to review the availability of clinical experiences at each clinical site and work with the Clinical Coordinator to schedule call hours when they are available.

If the required call time has not been completed by the end of NA773 Clinical Practicum IV, the student must notify the Clinical Director with a written plan on how they intend to obtain the remaining call time hours. (See also **CLINICAL SCHEDULES**).

**Student Objectives for "Call" Experience**
- Adapts to changing situations in the operating room.
- Understands the lines of communication utilized on the off shifts.
- Responds to emergencies utilizing appropriate interpersonal skills. Utilizes anesthetic techniques appropriate to the type of cases encountered.
- Utilizes "down" time to pursue appropriate types of activities.
- Participates in cardio-pulmonary resuscitation or other emergencies.
- Develops a sense of responsibility in equipment cleaning and maintenance, restocking and set-up of rooms.
• Demonstrates knowledge of hospital and departmental policies and procedures regarding to fire or disaster drills.
• Continues to develop anesthesia care plans and participate in preoperative and post-operative evaluation of assigned patients.

SUPERVISION OF NURSE ANESTHESIA STUDENTS
Students must be supervised at all times while participating in patient care. The supervision ratio of instructor to student must not exceed two students to one instructor at any time. Students will not observe or participate in any procedure where anesthesia services are not requested unless accompanied by a CRNA or an anesthesiologist for the duration of said procedure.

TRANSPORTATION COSTS
Transportation between the school and affiliating sites is the responsibility of the student. Students must be aware that they may be asked to attend one or more clinical rotations at sites that may be more than 40 miles from the campus.

UNANTICIPATED PATIENT EVENTS / OUTCOMES
If a student becomes aware of an unexpected patient event, accident, mishap or poor outcome she / he must provide certain information to the Program as well as the sponsoring hospital. The Clinical Coordinator should also be notified and a hospital QA report should be filed with the Department of Anesthesia if deemed necessary by the Clinical Coordinator.

The student is to call or e-mail the Program Director or the Clinical Director within twenty-four hours of the event. The Program Director or the Clinical Director will determine whether or not an incident report for the Program is required. If the student is directed to complete an incident report for the Program, the report must be completed and submitted to the Program Director, via email or in-person, within five business days of the incident. (The form is located at: Incident Report Document)

It is the responsibility of the student to seek guidance from their liability insurance agent to see if documentation needs to be submitted to their liability insurance carrier.

A student who fails to report an unexpected outcome to the Program Director or Clinical Director may be dismissed from the Program.

USE OF HOSPITAL PROVIDED ATTIRE
Students are provided with hospital scrub clothing for clinical practice. This clothing is to be worn in the hospital only. Students who leave the hospital wearing, or in possession of, scrub clothing are subject to all penalties imposed by the hospital, including possible criminal charges. Students found in possession of scrub clothing on University premises are subject to dismissal.
PROGRAM EVALUATION PROCESSES

Evaluation of Student Academic Progress
Academic progress is determined in accordance with each course syllabus. Student progress in academic coursework is reviewed by the Academic Review Committee at midterm. Overall student GPA is reviewed by the Program Director at the end of each semester. Strategies to assist students in meeting academic standards are addressed with the Program Director.

Evaluation of Academic Courses and Faculty
Course evaluation forms are made available to students upon completion of each course. This evaluation addresses the course content, delivery and assessment methods, and the faculty member’s performance. These forms are collated and sent to the course instructor(s), Program Director and School Dean. Anonymity of the individual student is assured. Course evaluations are reviewed by the Program Director, discussed with individual faculty members and reviewed by the Academic Review Committee as necessary. In some multiple-instructor courses, individual faculty members may be evaluated through the Typhon system. These evaluations are shared with individual faculty members.

Evaluation of Student’s Clinical Progress (See page 16 and course syllabi)

Evaluation of Clinical Affiliate Sites and Clinical Faculty Members
The students of the Nurse Anesthesia Program evaluate the clinical faculty and the clinical affiliation sites using a standard form. The completed clinical evaluations must be submitted by each student to the Clinical Director via Typhon. Student evaluations of clinical sites are due as per the syllabus for each clinical practicum course. These evaluations are not anonymous. The results are available to the Clinical Coordinator via Typhon. Collated evaluations are discussed between the Clinical Director and the affiliates Clinical Coordinator. Review of these evaluations is conducted by the Clinical Director at the end of each semester. Distribution of these evaluations to the Program Director, Clinical Coordinators, and the Advisory Committee occurs annually, and as necessary, based on student feedback.

Final Program Evaluation
Students are required to evaluate the Nurse Anesthesia Program just prior to their graduation. On-line evaluations are made available to students during their final semester in the program. Responses from individual students are anonymous. Results are collated and reported to University administration, Program Advisory Committee, Academic Evaluations Committee, and become part of the program outcome assessment report.

Graduate and Graduate’s Employer Evaluation of the Program
An evaluation form is sent to each graduate twelve months after their graduation from the program. A similar evaluation form is sent concurrently to the employers of graduates. Results are collated and reported to University administration, Program Advisory Committee, Academic Evaluations Committee, Clinical Evaluations Committee, and become part of the program outcome assessment report.

Evaluation Forms
Copies of all evaluation forms used by the Program are included in the Appendix VII. All forms are reviewed and updated annually.

APPROVED: University Academic Policies and Procedures Committee
POLICIES REVIEWED January, 2017
PROGRAM COMMITTEE STRUCTURE

Committee Structure
The following is a listing of standing committees of the Nurse Anesthesia Program.

Program Advisory Committee
Academic Evaluations Committee
Self-Study Committee

Frequency of Committee meetings:
Advisory: Meets annually and as needed.
Academic Evaluations: Once per semester at midterm and as needed to discuss student progress.

Program Advisory Committee
The Program Advisory committee shall pursue excellence in education of nurse anesthetists through the derivation, institution and evaluation of new and pre-existing program policies and objectives. This committee reviews resources available to the program and its students in attempt to ensure that each student has the opportunity to achieve the program objectives. The committee is guided by the sponsoring institution’s mission statements, the Council on Accreditation of Nurse Anesthesia Educational Programs Standards and Guidelines, and input from the various spheres of practice in which the Program operates. Given the program design, this committee will evaluate the program and make recommendations for policy changes and program improvement.

Scope and Responsibility
Ensure compliance with the standards set forth by the Council on Accreditation of Nurse Anesthesia Educational Programs through:

- Review the academic, clinical, and program outcome objectives.
- Plan for adequate learning resources (library, audio-visual materials, and clinical areas for clinical practicum) necessary to achieve instructional goals.
- Assure that program content is arranged in a logical, sequential manner, consistent with sound educational principles, facilitating student learning.
- Conduct an annual review of requirements, policies, procedures, and standards set forth by National Board for Certification and Recertification of Nurse Anesthetists (NBCRNA), the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) and assure compliance with these requirements.
- Assist the Clinical Director in planning and evaluating the student’s clinical curriculum to help assure compliance with program outcome objectives.
- Conduct an ongoing assessment to determine what clinical resources and experiences will be needed in the future and plan for the acquisition of these resources.
- Conduct an annual review to assure that the clinical policies and procedures listed in the Saint Mary’s University of Minnesota Graduate Program in Nurse Anesthesia Program Student Handbook and Administrative Manual are relevant and in accordance with Lasallian institutional mission and values.
- In cases where decisions made by this committee impact University policy or procedure, the decisions are recommendations to be reviewed by the Program Director and recommended to appropriate University Committee(s) and/or the Dean.

Members of the Committee are:
- Administrative representatives from clinical affiliates, hospitals and practice groups
- Program faculty members
- Clinical Coordinators
Program Director-Chair
Public Member
Four Student Representatives
Alumni Representative
School Dean, Graduate School of Health and Human Services, Saint Mary’s University of Minnesota SGPP

Academic Evaluations Committee
This committee is charged with reviewing student progress through the academic curriculum. This committee is also charged with reviewing the program’s annual assessment report, academic curriculum, and course evaluations. The Committee shall pursue excellence in education of nurse anesthetists and the achievement of predetermined program outcome objectives. The committee is guided by the sponsoring institution’s mission statements, the Council on Accreditation Standards and Guidelines, published program and university policies and procedures and input from the various spheres of practice in which the Program operates.

All recommendations are to be reviewed by the Program Director. If the Director is in accordance with the committee’s recommendation they will be recommended to the Academic Dean.

In cases where academic probation, remediation or dismissal of a student is being considered, the Academic Dean will be in attendance to hear the case but not participate in the committee’s recommendation.

Recommended changes in the curriculum are presented to the Schools of Graduate and Professional Programs (SGPP) Curriculum Committee for input and approval prior to implementation.

Recommended changes in the academic policy or procedure are to be presented to the SGPP Academic Policy Committee for input and approval prior to institution.

Scope and Responsibility
- Review the academic performance of each student at least once per semester and as needed.
- Review the University and Program student evaluations of academic courses on a regular basis.
- Review syllabi and ensure compliance with University standards.
- Review the relevancy and currency of course objectives.
- Review the annual program assessment report prior to submission and plan action on pertinent findings.
- Review relevant findings from the graduate self and employer evaluations.
- Discuss decisions regarding a student’s request for a leave of absence and a plan for the return from a leave of absence.
- Formulate recommendations pertaining to the academic curriculum including enhancing program resources.
- Make recommendations regarding student remediation.

Members of the Committee are:
- Associate Director -Chair
- Academic Director
- Program Director (non-voting)
- Academic faculty
- Advisers
- Academic Dean/Associate Vice President, Saint Mary's University of Minnesota SGPP (non-voting)
Self-Study Committee

Objectives:
Given input from the previous self-study and corresponding Council on Accreditation of Nurse Anesthesia Educational Programs summary accreditation report, the University Curriculum Committee, the Clinical and Academic Evaluations Committee, the Program Advisory Committee, and university administrators the Self-Study Committee will:

- Review continuous on-going evaluation of the Nurse Anesthesia Program.
- Recommend changes in the Nurse Anesthesia Program in order to meet current accreditation standards.
- Monitor trends in nurse anesthesia that may affect the accreditation status of the Nurse Anesthesia Program.
- Assist with the completion and submission of the self-study in preparation for the on-site visit by the Council on Accreditation of Nurse Anesthesia Educational Programs.

Members of the Committee are:

- Program Director-Chair
- Associate Director
- Members of the Advisory Committee
- Other representatives from the academic and clinical faculty, university administration and the community of interest as needed.

The Self-Study Committee will meet on an as-needed basis when performing a Self-Evaluation Study for the Council on Accreditation.
APPENDIX I: Program Position Descriptions

Program Director
Associate Director
Academic Director
Clinical Coordinator
Clinical Instructor

To see these Position Descriptions go to: Position Descriptions
APPENDIX II: PROGRAM RESOURCE MATERIALS
These materials are in addition to the holdings of the Twin Cities Campus Library

To see a complete listing of program resources, go to:

http://www2.smumn.edu/deptpages/~nap/assets/pdfs/Program Resources.pdf
APPENDIX III: Clinical Affiliation Site Orientation Guidelines

Clinical Affiliation Site Orientation Guidelines
The following guide is presented as an outline in order to provide a basic overview of the student’s orientation to each clinical site.

I. General Information for All Sites Provided by the Program
Name and address of clinical affiliation
Clinical coordinator contact person and phone number
Directions to the clinical site from Twin Cities Campus
Student Performance Evaluation policies
Length of affiliation and clinical assignments
Credentials and Immunization status

II. Site Specific Information Provided by the Receiving Institution
Relevant policies and procedures
Parking
Housing
Physical plant orientation
Locker rooms
Cafeteria
Other areas as appropriate
Identification badge requirements

Department Specific Information
Anesthesia/Surgery and other related area (OB, Special Procedures, Outpatient) locations
Personnel, including communication methods
Equipment, including check out procedures
Pertinent anesthesia department specific policies, procedures and routines

Student Specific Policies Provided by the Program and the Receiving Institution
Attendance policies
Sick calls
Scheduled hours
Call time
Site specific supplementary learning materials
Site specific clinical learning objectives and evaluation materials

Originated 1997, REVISED: 08/2015
Appendix IIIa: Clinical Coordinator Orientation Checklist

Elements of Program Orientation (Please submit with the clinical coordinators orientees initials)

_______The names and contact information for university personnel and program personnel was given to the 
clinical coordinator (CC).

_______University on-boarding of clinical faculty, use of information, university credentialling was offered to CCs. 
Resource: University faculty handbook, application for faculty status

_______University mission was reviewed and integrated into student clinical practicum. 
Resources: SMU Catalog and Handbook – on-line

_______Graduate Nurse Anesthesia (GNA) Curriculum, academic and clinical progression have been discussed and 
related to student progression to graduation 
Resource: GNA Student Handbook and Administrative Manual on-line

_______GNA Committee structure and involvement on the clinical advisory committee has been explained. 
Resource: GNA Student Handbook and Administrative Manual on-line

_______Program and clinical outcome objectives for each semester and for the entire program were discussed. 
Evaluation of student progress was related to semester and program outcome objectives. 
Resource: GNA Student Handbook and Administrative Manual on-line

_______Applicable policies and procedures including university, program, and professional behavioral 
expectations were discussed. Incident reporting and student privacy rights assured via FERPA were also 
discussed. 
Resources: GNA Student Handbook and Administrative Manual on-line , SMU Catalog and Handbook – 
on-line Clinical Evaluation Tool Section IX)

_______Plan for student credentialing at the institution was determined and understood by all 
parties. Contact person who will collect and file student credentialling was identified and contact information was shared. 
Resources: Applicable institutional policies and procedures

_______Student performance evaluation was discussed and understood by the CC. 
Resources: Program evaluation forms, GNA Student Handbook and Administrative Manual on-line, 
clinical faculty webpage resources

_______Scheduling, call time, over time, and missed time is understood by the CC along with reporting 
requirements 
Resources: COA time standards, NBCRNA case requirements, GNA Student Handbook and 
Administrative Manual on-line

_______Information provided to students and available on restricted access webpage was shared between 
institutions, and updated regularly. Update times were agreed upon by the CC and program 
Resources: NA Clinical Directory

_______Housing arrangements are understood by all parties including a method to contact students in case of 
emergency or emergency case opportunities. This is included in the NA Clinical Directory. 
Resources: NA Clinical Directory

_______Resources for faculty have been discussed and offered. These include: 

1. Library access.
2. Opportunities to teach academic classes or clinical labs (If interested, coordinator is referred to academic coordinator or program director)

3. Faculty Development opportunities including:
   a. SMU new faculty orientation (on-line)
   b. Hendrickson Forum
   c. SMU annual faculty workshop and dinner
   d. Program newsletter, and website.

4. Clinical faculty website (address is shared)

5. GNA Program website (address is shared)

6. Inservice for orientation of other clinical faculty or on-site clinical faculty development is offered.

Supporting documents have been provided including documents describing how to access web resources.

_________________________________________ Clinical Coordinator Signature

__________________________ Date

_________________________________________ Signature of the person orienting the Coordinator

__________________________ Date
APPENDIX IV: Student Records Retention Policy

Contents of the Student File

Records Retention Policy
Student records are maintained within the Nurse Anesthesia Department. Documents kept are described in the following section. These documents are retained for eighteen months after the student leaves the Program. The final Council on Certification of Nurse Anesthetists transcripts are kept in perpetuity by the Graduate Nurse Anesthesia Program Director. The academic transcripts are kept in perpetuity by the University Registrar.

Contents of the Student’s Office File
The student files are divided into five sections. These sections are labeled Application File, Academic Correspondences, Licenses and Certifications, Student Clinical Evaluations and Student Case Studies. The contents of these sections are listed below.

1. Application File
   • Application to the Nurse Anesthesia Program
   • Student transcripts submitted with the application to the Program
   • Student's Curriculum Vitae
   • Admission Essay
   • Academic Evaluation
   • Any supporting documents submitted by the student at the time of application
   • Registered Nurses License at the time of application
   • All documents posted to Typhon are considered part of the students record

2. Academic Correspondences
   • Any letters sent to the student from University faculty, administrative personnel or support staff
   • Any correspondences received from the student including the document confirming that the student has received, read and understands the contents of the Program Student Handbook

3. All student credentialing materials
   • Student's RN licenses
   • Immunization and vaccination records
   • Background studies from MN and WI
   • Proof of liability insurance coverage
   • Proof of BLS/ACLS/PALS certification

Records kept for five years after program completion:
   • Student's RN licenses
   • Immunization records
   • Background studies from MN and WI

Records kept indefinitely after program completion
   • Final academic transcript
   • Any records that may relate to litigation
   • Any records that may relate to grievances
   • Final case records
   • Final transcript submitted to the NBCRNA
   • Final summative student clinical performance evaluation and final case study
APPENDIX V: Document Management

Document Management
The purpose of Typhon and the Google Drive Folders are two-fold. The Typhon system is designed to demonstrate compliance with all credentialing requirements set forth by the State of Minnesota, State of Wisconsin, Council on Accreditation of Nurse Anesthesia Educational Programs, National Council on Certification and Recertification of Nurse Anesthetists, Saint Mary’s University of Minnesota, and the hospitals that are affiliated with Saint Mary’s. You have internet access to this system at all times. It will be used to provide proof of compliance. There are documents that are kept in this system that may expire. These documents must be renewed and reentered into the Typhon system. If any document is expired, we have no choice but to dismiss you from practicum and/or the program.

DOCUMENT PREPARATION AND FORMATTING
Please refer to the following Appendix VI for guidance on how to label documents and accepted document formats. Please note that photo extensions (gif, jpg, etc) are NOT accepted. The Google Drive Folders will be shared with the Program Director, the Clinical Director, and the Program Coordinator who will have access to both your documents and the information posted on Typhon.
Load specific documents into the corresponding area. Do not combine documents unless asked to do so. Check with program personnel if you are not certain.

DOCUMENTS KEPT IN TYPHON
Credentialing Documentation
(PLEASE NOTE: When you update any of these documents, label them in accordance to policy and notify the Program Coordinator, via email, that you have placed an updated document to Typhon)
This folder contains:
- MN and WI RN Licenses
- Criminal History background checks for both MN and WI
- Certificate of liability insurance coverage
- ACLS card
- BLS card
- PALS card
- HIPAA course completion certificate
- Proof of receiving T-Dap
- Proof of annual flu vaccine administration
- Statement by health practitioner or MD that you are able to perform all duties of a nurse anesthetist
- Lab evidence for the following:
  - 2Step TB or TB Gold test,
  - Complete immunization profile demonstrating proof of immunity to varicella, mumps, rubella and rubeola via quantitative blood tests (all actual lab reports required as well as completed Health Status Form)
  - Proof of immunity to Hepatitis B (actual lab report required as well as completed Health Status Form)
- Site evaluations you complete for each clinical practicum site.
DOCUMENTS KEPT IN YOUR GOOGLE PORTFOLIO
The Google Portfolio is designed for you to keep your academic work so you can that demonstrate that you met the programs outcome objectives. You will be required to review and summarize these documents when you present your thesis during the final semester of the program.

Graduate work including: Corrected copies of all Reflective Essays, Summary/Critique Paper (NA795-797), Synthesis Paper/Presentation and summary of your teaching project (NA798).

1. Case studies
   All case studies after they have been graded. All corrections recommended or required should be included in this document. These case studies represent your best work.

2. Postoperative Rounds Records
   This folder contains:
   - ALL completed post-operative rounds sheets. Goal: every patient cared for, minimum accepted: 30 per month.

3. Schedule Change Forms signed by Clinical Coordinator
   This folder contains:
   - All completed and approved schedule changes signed by the Clinical Coordinator/Clinical Director.
   - Approved Educations Leave Forms

4. Proof of orientation/training for clinical sites (as applicable)
   This folder contains (examples):
   - All Allina Training and orientation Certificates
   - Registration emails received from Allina including Allina A/D Number and Allina Non-Employee Number
   - Proof of completion for all hospital orientation or training programs
   - Excellian and other computer training certificates
   - HIPAA course completion certificate

5. Introduction Letters
   This folder contains all of the introduction letters you sent to your clinical site coordinators for NA770 through NA774. These letters must include your Typhon Passport and résumé.

6. Clinical Evaluations
   All clinical performance evaluations prepared for you by your clinical coordinators.

Folders will be prepared and placed in your Google Portfolio. Please do not change these folders or add any additional materials. These folders are audited by staff and faculty.

FORMS that are sent to the Program Director via email (Please refer to other sections of this Student Handbook for the applicable policy/procedure):
   - All other forms including:
     - Incident reports (Please follow the notification policy)
     - Educational leave requests
     - Clinical rotation change requests

Revised 8/2017
APPENDIX VI: Formatting and Labeling Documents

This document describes how documents are to be labeled. Proper labeling helps staff manage the large volumes of documents received and ensures that the credentialing documents are filed correctly and on time.

All dates should be listed as: Month.Day.Year

Clinical Credentialing Documents: The format for all documents loaded to Typhon must me Adobe Acrobat document (.pdf) Uploading pictures (.jpg, .jpeg, .gif, .png, or any other photo format) or pictures of documents is prohibited for both Typhon and the Google Portfolio/Drive.

Allina Credentialing Certificates: LastName.Semester.Year.AllinaCompliance If more than one learning module/certificate of completion is required for the semester, please combine them into a single .pdf document.

Proof of Clinical Site Orientation (Once you have completed a site-specific orientation, please print proof of completion as a .pdf and email it to the Program Coordinator and Clinical Director. If there is more than one document, either combine the documents into 1 document or add numbers to the label (i.e:1, 2, 3) before the word “Orientation” in the label). Orientation.LastName.NameofClinicalSite

RN Licenses (Licensure verification or certificate must include expiration date): MNLic.LastName.DateExpires, WILic.LastName.DateExpires, or A copy of a compact state license labeled: StateAbbrviationLic.LastName.DateExpires and a copy of signed compact statement labeled: CompactStatement.LastName

Proof of Liability Insurance: Insurance.LastName.DateExpires

TB Testing: 2StepTB.LastName.DateExpires (Expires one year from the date of reading for Step 2), or GoldTB.LastName.DateExpires, or TSpotTB.LastName.DateExpires, or if positive TB – PosTB.LastName Please contact the Program Director if you have a positive TB test.

Annual Flu Vaccine: FluVac.LastName.DateExpires (Expires one year from the date given)

Tdap, Tetanus: Tdap.LastName.DateAdministered, Tetanus.LastName.DateAdministered

Hepatitis B Titer: HepB.LastName.DateTiterDrawn

Certifications: BLS.LastName.DateExpires, ACLS.LastName.DateExpires, PALS.LastName.DateExpires, HIPPA.LastName.Date completed

Program Forms Must be submitted in MS Word (.doc or .docx)

Educational Leave Requests: EdLeave.LastName.FirstInitial.DateSubmitted

Incident Reports: IR.LastName.FirstInitial.DateofIncident

Schedule Changes & Ed Leave Requests: LastName.ScheduleChange.DateSubmitted, LastName.EdLeave.DateSubmitted
Clinical Practicum Documents
Templates are downloaded from Blackboard. Please do not change the document formats.

1. Case Studies (CS) – See individual course syllabi for due dates and evaluation Rubric. Correct labeling for the case study submissions are as follows:
   - LastName.CS.MonthYear-Cardiac
   - LastName.CS.MonthYear-Rural
   - LastName.CS.MonthYear-Neuro
   - LastName.CS.MonthYear-Pediatric
   - LastName.CS.MonthYear-Geriatric
   - LastName.CS.MonthYear-OB
   - LastName.CS.MonthYear-MajorVascular
   - LastName.CS.MonthYear-Emergency/Trauma
   - LastName.CS.MonthYear-Other (please list)

2. Postoperative Rounds (POR) – Monthly, due by the 5th of the following month to your Google Docs folder.

3. Proof of completion certificates or documents received after credentialing or orientation processes are completed

Once you have completed your monthly clinical documents and before you submit to Google and/or Typhon, correctly label as follows:
   1. LastName.NameofDocument.MonthDayYearCompleted

For Example:
Smith.POR.August2015
Smith.CredentialingCertifAmery.August 26 2015
Smith.IntroLetter.SiteName.August 26 2015

REV. 08/2017
APPENDIX VII: Information and Forms: Health Status, TB Testing, and Immunization/Vaccination Requirements (Also, please refer to the policy, Credentialing of Students at Clinical Sites, page 25)

Required Health Status Form, Titer and Vaccination Requirements, and Positive TB Test Protocol

APPENDIX VIII: Student Clinical Evaluation Forms
Student Clinical Performance Summary (Clinical Rotation Evaluation)

APPENDIX IX: Program Evaluation Forms
SUMMARY PROGRAM EVALUATION FORM - GRADUATES
Go to: Summary Program Evaluation Form

EMPLOYER'S EVALUATION OF GRADUATES WHO HAVE BEEN PRACTICING FOR 12 MONTHS
Go to: Employers Evaluation of Graduate Form

EVALUATION FORM FOR GRADUATES WHO HAVE BEEN PRACTICING FOR 12 MONTHS
Go to: Graduates Nurse Anesthetist Evaluation Form

APPENDIX X: Course Evaluation Forms
ACADEMIC FACULTY EVALUATION FORM
Go to: Faculty and Course Evaluation Form

CLINICAL SITE EVALUATION FORM
Go to: Clinical Site Evaluation Form

APPENDIX XI: Accreditation
PROGRAM ACCREDITATION
Go to: Nurse Anesthesia Program Accreditation

UNIVERSITY ACCREDITATION
Go to: Saint Mary's University of Minnesota Accreditation