



**Saint Mary's University of Minnesota**  
**Schools of Graduate and Professional Programs**  
**Twin Cities Campus**  
**Graduate Program in Nurse Anesthesia**  
[www.smumn.edu/anesthesia](http://www.smumn.edu/anesthesia)

## **Student Handbook / Administrative Manual 2018 - 2020**



[Facebook Page](#)

Revised: January, 2019  
Reviewed and approved by the University Academic Policies and Procedures Committee:  
February 27, 2019

## Table of Contents

Introduction	5
Contacts	6
Organization Chart	6
Affiliations	7
Overview	8
Program Philosophy	8
Accreditation	8
Admission Criteria	8-9
Application Process	9-10
Selection Criteria	10
Transfer into the Program	10
Students with International Transcripts	10
Tuition and Fees	10
Academic and Clinical Grading Policies	10-11
Graduation Criteria	11
<b>Curriculum Design</b>	<b>12-15</b>
Curriculum Design	12
Course Descriptions and Student Learning Objectives	12
Program Outcome Objectives	13-14
Clinical Evaluation Process	14-15
<b>Policies and Procedures</b>	<b>16-29</b>
<b>Academic Policies and Procedures</b>	<b>16-21</b>
Class Attendance Policy	16
Copyright Law	16
Course Exams	16
Drug and Alcohol Policy: On and Off Campus	17
Drug Testing Policy	17-18
Electronic Communications Policy	18
Good Name Policy	18
Intellectual Property Rights	19
Leave of Absence: General	19
Military: Annual Duty, Drill Service or Training Leave	19
Nursing Licenses	19
Physical Examination/Immunizations	19-20
Preparation of Student Work	20
The Role of Nurse Anesthesia Students	20
Statement of Student Rights and Responsibilities	20
Student Records Policy	20
Student Time Commitment	21
Student Withdrawal/Resignation	21
Uncompleted Coursework – I/Grade	21
Vacation/Holiday Time	21
<b>Clinical Policies and Procedures</b>	<b>21-29</b>

Clinical Attendance Policies and Procedures	21-22
Sick Time	
Clinical Probation / Dismissal	22
Clinical Rotation Sites	22-23
Clinical Schedules	23-24
Request to change Final Clinical Rotation Site	
Request to participate in Call Time/Off Shift Hours	
Summer Schedules/NA774	
Credentialing of Students at Clinical Sites	25 - 26
Criminal Background Studies	26
Educational Leave for Students	26
Hazardous Material	26
Health Insurance	27
Hospital Documents and Property	27
Housing at Clinical Sites	27
Identification Badges	27
Injury or Illness at a Clinical Affiliate Site	27
Leave of Absence	27-28
Parking	28
Post-Operative Rounds	28
Privacy Rights of Hospital Affiliates and Patients	28
Professional Liability Coverage	28
Student "Call" Experience	29
Supervision of Nurse Anesthesia Students	29
Transportation Costs	29
Unanticipated Patient Events/Outcomes	29
Use of Hospital Provided Attire	30
<b>Program Evaluation Processes</b>	<b>31</b>
Program Annual Assessment Protocols	
Evaluation of Student Academic Process	
Evaluation of Academic Courses and Faculty	
Evaluation of Student Clinical Progress	
Evaluation of Clinical Affiliate Sites and Clinical Faculty Members	
Final Program Evaluation	
Graduate and Graduate's Employer Evaluation of the Program	
Evaluation Forms	
<b>Program Committees Structure</b>	<b>32-35</b>
Committee Structure	
Program Advisory Committee	
Faculty Committee	
Student Advisory Committee	
Self-Study Committee	
<b>Appendices</b>	<b>36-42</b>
I. Program Position Descriptions	
II. Program Resource Materials	

- III. Clinical Affiliation Site Orientation Guidelines
- IIIa. Clinical Coordinator Orientation Checklist
- IV. Student Records Retention Policy
  - Contents of the Student's Office File
- V. Document Management
- VI. Information and Forms for Health Status, TB Testing,  
Immunization/Vaccination Requirements
- VII. Student Clinical Evaluation Forms
- VIII. Academic Faculty Program Handbook
- IX. Clinical Preceptors Manual 2018
- X: Accreditation



## 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](#). If the Graduate Nurse Anesthesia Program Student Handbook/Administrative Manual conflicts with the university Catalog and Student Handbook, the handbook with the more stringent policy or procedure will take precedence. In cases where differences exist about which handbook policy or procedure should control, the General Counsel will make the final determination.

The information, descriptions, policies and procedures contained in this manual are reviewed by the Saint Mary's University of Minnesota Schools of Graduate and Professional Programs Academic Policies and Procedures Committee and General Counsel.

---

Leah Gordon, DNP, APRN, CRNA.  
Program Director  
March, 2019

**CONTACTS:** Saint Mary's University of Minnesota  
Graduate Program in Nurse Anesthesia  
2500 Park Avenue South  
Minneapolis, MN 55404  
612-728-5100  
Toll free: 1-866-437-2788  
Fax: 612-728-5169

University Website: <http://www.smumn.edu>  
Program Website: <http://www.smumn.edu/anesthesia>

**Program Director**

Dr. Leah Gordon  
Brother Louis Hall (BLH) Room # 02 - 612-728-5151

**Associate Director/Clinical Director**

Dr. Merri Moody  
Brother Louis Hall (BLH) Room #01 - (612) 728-5133  
Associate Professor

**Program Coordinator**

Kristy Nielsen  
BLH Room #38 – (612) 728-5132

**Dean of the Graduate School of Health and Human Services**

Dr. Todd Reinhart  
BLH Room #239 - (612) 728-5100

**[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

Ascension Saint Mary's Hospital, Rhinelander, WI

Cambridge Medical Center, Cambridge, MN

CarrisHealth Rice Memorial Hospital, Willmar, MN

CentraCare Saint Cloud Hospital, Saint Cloud, MN

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

Marshfield Medical Center, Marshfield, WI

Mayo Clinic Health System Cannon Falls, Cannon  
Falls, MN

Mayo Clinic Health System New Prague, New  
Prague, MN

Memorial Medical Center, Neillsville, WI

Mercy Hospital, Coon Rapids, MN

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

St Cloud Surgical Center, St. Cloud, MN

Saint Croix Falls Regional Medical Center, Saint  
Croix Falls, WI

Saint Elizabeth's Medical Center, Wabasha, MN

Saint Luke's Hospital, Duluth, MN

ThedaCare Medical Center-Shawano, Shawano, WI

Unity Hospital, Fridley, MN

## **PROGRAM OVERVIEW**

This is a program offered by Saint Mary's University of Minnesota's 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 Board of 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](http://www.hlcommission.org)

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://coacrna.org>). 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 Doctor of Nursing Practice in Nurse Anesthesia Program. In addition to University admission requirements, applicants must have:



1. Current unencumbered licensure as a Professional Registered Nurse in the State of Minnesota, or eligible for reciprocity.
2. A minimum of one year of experience as a Registered Nurse in a critical care setting at the time of application.
3. A completed application submitted by the application deadline.

All students are required to have a physical examination prior to starting the program. A completed [Health Status Form](#) must be submitted prior to matriculation. Documented immunity is required for rubella, rubeola, varicella, Hepatitis B, and mumps. Please refer to the [Health Status Form](#) for specific information. 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.

Additional health-related documents are required later in the program including 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) and proof of annual vaccination against influenza.

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 1<sup>st</sup>.
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 you 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 1<sup>st</sup>.
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 1<sup>st</sup>.

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:** \$620 per credit, 64 credits total (\$39,680)

### **FEES AND EXPENSES**

Application fee \$25.00 (non-refundable)

Registration fee \$1,000 (non-refundable; payable upon acceptance to the program)

Typhon System \$120/year

Graduation fee \$190

Clinical fee \$350 per clinical semester

**OTHER EXPENSES (estimated)**

Books and supplies \$2000

Certification Examination \$995

**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 [SGPP Saint Mary's University of Minnesota Catalog and Student Handbook/Academic Policies](#) for graduate academic grading policies.

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. This includes NA771 Clinical Practicum II, NA772 Clinical Practicum III, NA773 Clinical Practicum IV, NA774 Clinical Practicum V. 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 Practicum:**

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. Criteria for grading are described in the course syllabi for clinical practicum (NA770, 771, 772, 773, and 774).

**GRADUATION CRITERIA**

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

- Maintain a GPA of 3.0 on a 4.0 scale.
- Maintain the minimum level of practice for the designated period in the program in accordance with the clinical objectives.
- 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).
- 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

#### Semester I

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	<u>3 credits</u>
	12 credits total

#### Semester II

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	<u>3 credits</u>
	15 credits total

#### Semester III

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)	<u>2 credits</u>
	17 credits total

### **Second Year**

#### Semester IV

NA795 Portfolio I	1 credit
NA771 Clinical Practicum II (480 hrs)	2 credits
NA780 Clinical Integration	<u>3 credits</u>
	6 credits total

#### Semester V

NA796 Portfolio II	1 credit
NA772 Clinical Practicum III (600 hrs)	<u>3 credits</u>
	4 credits total

#### Semester VI

NA797 Portfolio III	1 credit
NA773 Clinical Practicum IV (600 hrs)	<u>3 credits</u>
	4 credits total

### **Third Year**

#### Semester VII

NA782 Program Comprehensive Exams	1 credit
NA798 Portfolio IV	3 credits
NA774 Clinical Practicum V (480 hrs)	<u>2 credits</u>
	6 credits total
	64 credits total program

[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 Indicators**

#### **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 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 1-2:** 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 3-4:** 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 5-6:** 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 7-8:** 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 Minnesota. 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 as assigned in the syllabus for each course. 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.

### COPYRIGHT LAW

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

### 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 scheduled to take these exams off campus must be sure that they have a high speed or broadband internet access, a suitable environment, a webcam, and the [Lock Down Browser & Respondus Monitor](#) software. If students are unable to attain the correct technology, they need to contact the IT Helpdesk prior to the exam date, for assistance in resolving this issue. 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 to their attendance at an affiliate hospital. The University policy is available on line at: [Drug and Alcohol Policy](#)

## **DRUG TESTING POLICY**

### **Purpose**

The School of Health and Human Services at the Schools of Graduate and Professional Programs recognizes the importance of educating its students about the problems of substance abuse because this significant health risk, and in many cases, criminal matter, is unfortunately prevalent among healthcare providers. Aside from impacting upon the personal and psychological integrity of the abusers, substance abuse may significantly impact the ability of healthcare providers to administer safe, competent patient care. Recognizing that substance abuse is both a disease and a professional hazard, the School of Health and Human Services has established this substance abuse and drug testing policy.

This policy impacts upon and augments the student's ability to maintain personal and professional integrity, and facilitates the student's success both clinically and didactically. It promotes a healthy learning environment for the student. In the clinical setting, this policy enhances patient safety. It also fosters the development of professional nurses who are well educated about the prevalence and adverse outcomes of substance abuse.

### **Policy**

This policy applies to all students in the Master of Science program in Nurse Anesthesia.

Any unlawful possession, use, manufacture, distribution, diversion, or improper use of any illegal or controlled substances by any student in the Nurse Anesthesia Program may be the 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 arylcyclohexylamines.

### **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*

### **ELECTRONIC COMMUNICATIONS POLICY**

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

## GOOD NAME POLICY

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

## INTELLECTUAL PROPERTY RIGHTS

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

## **LEAVE OF ABSENCE: GENERAL**

(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.

## **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 end of October, 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. Follow the link to access: [Interstate RN License Residency Statement](#).

## **PHYSICAL EXAMINATION / IMMUNIZATIONS**

**Prior to starting the program:** All students are required to have a physical examination prior to starting the program. A completed [Health Status Form](#) must be submitted prior to matriculation. Documented immunity is required for rubella, rubeola, varicella, Hepatitis B, and mumps. Please refer to the [Health Status Form](#) for specific information. 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.

**After starting the program:** A 2-Step TB test, Quantiferon/Gold, or T-spot is also required annually. Students who are positive must follow the Students must have a negative 2-step TB test or have evidence that they have 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

Documented proof of annual vaccination against influenza.

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

(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 completing 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 TIME COMMITMENT**

The student time commitment may not exceed 64 hours per week. This limitation is meant to support patient safety and promote effective student learning. This time includes the sum of the hours spent in class and all clinical hours averaged over 4 weeks. Students must have a 10 hour rest period between scheduled clinical duty periods (i.e., assigned continuous clinical hours). At no time may a student provide direct patient care for a period longer than 16 continuous hours.

## **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**

### **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 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 representative. If an 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 their 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 need to make up time must apply, in writing, to the Clinical Director. Notification must be received at least two weeks prior to the proposed make up date. 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 Drive file 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 Drive file folder named "Schedule Changes" after they are sent to and approved by 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 step(s) 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. Due process is always afforded to the student. Due process procedures are described in the [Saint Mary's University Schools of Graduate and Professional Programs Catalog and Student Handbook, 2018-2019 edition](#).

### **CLINICAL ROTATION SITES**

Each clinical site is unique and presents necessary clinical experiences for nurse anesthesia students. Students are expected to rotate through a major medical center, community hospital, rural hospital, specialty hospital, and an ambulatory surgery center 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.

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/ Schedule Change Requests**

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. Students must maintain a minimum of 32 or 40 hours per week as assigned by the syllabus. It is not acceptable to be absent from practicum for an entire week. Other policies/procedures include:

- The process for determining the clinical assignments is reviewed and defined annually. Students are notified as early as possible. A schedule that includes opportunities for students to meet all of the experiences required for certification as a CRNA is prepared and presented to the students for review.
- 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.
- 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.
- A student who is placed on clinical probation or receives a grade of "IP" or "I/NC" in NA771, NA772, NA773, or NA774 will be assigned to day (0700-1530) shifts only until their status changes (removed from clinical probation) or a grade of "P" is conferred.
- The first two weeks of any clinical rotation are extremely important. Students need a time to orient to the facility, policies, personnel, and equipment. No schedule change will be permitted during the first two weeks of any new clinical rotation unless the rotation is the second rotation for the student and the student has already been oriented to the facility, policies, personnel, and equipment.
- No schedule changes are permitted during NA770 or the first term of NA771 (see Request to Participate in Call Time or Off-Shift Hours).
- Requests for schedule changes are made by using the [Application to Change Clinical Schedule](#) form. Any request must be received two weeks in advance of the first day/shift changed. Approved changes are signed by the Clinical Coordinator, reviewed and approved by the Clinical Director, and placed, by the student, in the student's Google Drive file folder named "Schedule Changes."

(See also: Clinical Attendance Policies and Procedures (Courses NA770 – NA774), Educational Leave for Students, Housing at Clinical Sites, and Vacation / Holiday Time).

### **Request to Change the 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 for this change include:

- The site must be one of our clinical affiliate sites.
- The student is not scheduled for a rural/CRNA-only practice, pediatrics, cardiovascular, or respiratory therapy clinical rotation.
- The request can cover no more than the final two 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. If all case requirements have not been met, a plan on how the student will meet these requirements must be submitted.
- 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.
- Documents must be completed and submitted to the Clinical Director at least 8 weeks in advance of the first day of the semester within which the anticipated schedule change will occur.

### **Request to Participate in Call Time or Off-Shift Hours**

Any schedule changes requested by students participating in NA772-NA774 must be approved by the site's Clinical Coordinator. Changes are made by using the [Application to Change Clinical Schedule](#) form. Any request must be received two weeks in advance of the first day/shift changed. Approved changes are signed by the Clinical Coordinator, reviewed and approved by the Clinical Director, and placed, by the student, in the student's Google Drive file folder named "Schedule Changes." (SEE: Student "Call" Experience)

Other guidelines include:

- Schedule changes are made in order to enhance the student's education and optimize the opportunity to meet case and experience requirements.
- 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.
- Students are expected to fulfill their revised schedule. If a student signs up to work a shift longer than eight hours, the student may not leave early under any circumstances.

### **Summer Schedules for Graduating Senior Students – NA774 Clinical Practicum**

Clinical Practicum V (NA774) is scheduled as a 32 hour per week practicum. Eight hours may be used by the student to fulfill the obligations of their other courses, to study for the certification examination, or for personal reasons.

For the summer clinical schedule, students are required to work with their Clinical Coordinators to determine the specific days and hours of the week for their clinical schedule. Students must maintain a minimum of 32 hours per week. It is not acceptable to be absent from practicum for an entire week. Students are reminded that access to clinical sites is a cherished resource. You are there to learn as much as you can before you graduate.

PROCEDURE: Students must communicate with and arrange their schedules with their site coordinators. They must also notify the Program of their schedules. For summer, the [Application to Change Scheduled Clinical](#) form must be completed to reflect the schedule for the duration of each summer clinical rotation site. Completed forms must include the days you will be on site and the days you are off. The required number of hours must be satisfied. All forms must be discussed with and signed by their Clinical Coordinator. This form must be completed



and uploaded to the Google Drive folder at least six weeks before the rotation begins. (SEE: Housing at Clinical Sites)

### **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. The results of a witnessed urine 7-panel *drug screen* that includes: amphetamines, cannabinoids, cocaine, phencyclidine, opiates, barbiturates, benzodiazepines, plus *alcohol* with adulterants, are also required. Testing is provided by the University.

#### **Clinical Credentialing Documents**

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

- A completed Health Status Packet. 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.
- Copies of ACLS, BLS and PALS certification cards

**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-Step TB 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: NA770 Syllabus), a resume or CV, and a copy of your Typhon Student Passport to your Clinical Coordinator(s).

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 Drive file 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 upload renewed documents to the Typhon student management system. Students are responsible to make sure that copies of these documents are available to the clinical site personnel immediately upon request. Renewed documents must be submitted at least two weeks before they expire. (Please see: Appendix V, *Document Management*).

### **Labeling Documents**

All documents must be in 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 their educational program. Educational leave is granted no more than twice to students beyond their first year of study. One day may be granted so the student can complete their student’s teaching project.

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 students Google Drive file folder. The petition must be made with the proper form that describes:

- Meeting/activity title
- Dates expected to be absent from the student’s academic and clinical schedule.
- An attached copy of the program brochure/objectives or proof of an approved teaching project proposal.

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.

Educational leave will not be granted in order to take a Certification Examination review course.

### **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 any CentraCare institution 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 or 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, Program Coordinator, 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 day for day missed.

If a need for a medical leave of absence from clinical practicum is anticipated, a maximum of 32 clock hours (four shifts/days) 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. All time taken off must be made up one day for each day missed.

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 a 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 student's Google Drive file 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 published by the Council on Accreditation of Nurse Anesthesia Educational Programs.

### **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 Services 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. Proof of coverage documentation must be uploaded to Typhon. If a student is denied coverage by the AANA Insurance Services, 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**

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. 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 number of call hours have 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 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**

### **Program Annual Assessment Protocols**

Program effectiveness is evaluated by the program annually and by the University bi-annually. The link to the program's outcome objectives, clinical performance objectives, competency map, and assessment protocols are listed in Appendix IX. All of the assessment tools listed below are also listed in Appendix IX.

### **Evaluation of Student Academic Progress**

Academic progress is determined in accordance with each course syllabus. 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 Associate and Program Directors.

### **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 Associate and Program Directors and discussed with individual faculty members.

In multiple-instructor courses, individual faculty members are evaluated by students through the Typhon system. These evaluations are not anonymous. The results are used to provide individualized feedback to the instructor.

Faculty classroom observations are completed by the Associate Program Director. The results are discussed in a follow-up conversation between the faculty member and the Associate Program Director.

### **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 Typhon. Student evaluations of clinical sites are due as per the syllabus. 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. If an issue is apparent, the Clinical Director will confer with the student and the site's Clinical Coordinator. The collated results of these evaluations are distributed to the Program Director, Clinical Coordinators, and the Advisory Committee.

#### **Final Program Evaluation**

Students are required to complete an on-line program evaluation which is made available during their final semester in the program. Responses from individual students are anonymous. Results are collated and reported to University administration, Associate and Program Directors, and Program Advisory Committee.

#### **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, Associate and Program Directors, and Program Advisory Committee.

#### **Evaluation Forms**

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

## **PROGRAM COMMITTEE STRUCTURE**

### **Committee Structure/Frequency of Committee meetings**

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

Program Advisory Committee: Annually and as needed

Faculty Committee: Each semester at midterm and as needed.

Student Advisory Committee: Once each semester and as needed

Self- Study Committee: As needed

### **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 the 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 Program Director in planning and evaluating the student's academic and clinical curricula to help assure compliance with program outcome objectives.
- Conduct an ongoing assessment to determine what resources and experiences will be needed in the future and plan for the acquisition of these resources.
- Conduct an annual review to ensure that the program 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
- Student Advisory Committee members
- Program Director-Chair



- Public Member
- Six Student Representatives
- Alumni Representative
- School Dean, Graduate School of Health and Human Services, Saint Mary's University of Minnesota SGPP

### **Faculty Committee**

The purpose of this committee is to provide a forum for communication and collaboration between faculty members and administration in order to ensure the delivery of a relevant and rigorous nurse anesthesia curriculum. The committee is guided by the sponsoring institution's mission statements, the Council on Accreditation Standards and Guidelines, and input from the various spheres of practice in which the Program operates.

All recommendations or decisions are to be reviewed by the Program Director. Recommended changes in the curriculum are to be 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. Other types of changes are referred to the Dean of Health Sciences.

### **Scope and Responsibilities**

- Review the academic performance of each student.
- Make recommendations regarding student remediation.
- Review the course and program assessment tools.
- Formulate recommendations regarding the curriculum based on the program, instructor, and course evaluations, clinical site evaluations, student performance evaluations, and changes in the industry.
- Review the Student Handbook, including the program mission, vision, goals, and the program outcomes and recommend changes as warranted
- Formulate recommendations pertaining to the enhancing program resources.
- Participate in Saint Mary's University of Minnesota faculty development activities
- Assist in preparing the annual program assessment and accreditation reports.

The Faculty Committee shall meet after the mid-term each semester (approximately the second week in July, October, and March). The meetings will be held on the Twin Cities campus, with a virtual attendance option.

The Faculty Committee shall consist of the following persons:

- Associate Program Director/Academic Director-Chair
- Program Director
- Academic faculty representatives
- Clinical faculty representatives
- Advisers
- Dean, School of Sciences and Health Professions

### **Graduate Nurse Anesthesia (GNA) Student Advisory Committee**

The Graduate Nurse Anesthesia (GNA) Student Advisory Committee (SAC) represents all GNA students. This committee is designed to address and study issues that affect the Saint Mary's GNA community. The SAC ensures that information is funneled in both directions, from students to administrators/faculty and from faculty/administrators to students. Representatives maintain the professional image of the profession, institution, program, and student body

## **Organization**

The SAC will be composed of three members from each cohort elected by their cohort annually. Student representatives must be in good standing in both the academic and clinical curricula. The Program Director and/or Associate Program attend as non-voting members. Academic advisors, students, University officials, academic faculty, and clinical faculty attend as needed.

## **Meetings**

**Regular Business Meetings:** The SAC will meet at a minimum once per semester. Issues from the student, faculty, and staff are added to an agenda that is presented to members at least a week in advance. Approval of any issue requires a 2/3 vote of the SAC members. Matters discussed and decided by vote at SAC meetings will represent the official student position in discussions with faculty and administrative officials.

**Emergency Meetings:** The SAC Chairperson can, at any time, call an emergency meeting to discuss problems requiring immediate attention.

## **Scope and Responsibilities**

1. The committee assures that students are represented and have the opportunity to participate effectively in policy matters that are relevant to their education and their lives as students.
2. Represent student interests and grievances to the faculty and administrative staff of the nurse anesthesia program.
3. Ensure that relevant information is funneled in both directions, from students to administrators/faculty and from faculty/administrators to students.
4. Facilitate social interaction within and between cohorts.
5. Reach out to other programs and professional organizations to elicit and support professional relationships.
6. Ensure compliance with Council on Accreditation of Nurse Anesthesia Educational Programs standards and policies.
7. Represent the department in the case of special or departmental events.

## **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
- Associate Vice President of Academic Affairs and Academic Dean
- Dean, Graduate School of Health and Human Services
- Associate Dean Curriculum and Assessment

- 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 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: [Program Resources](#)

## **APPENDIX II: Clinical Affiliation Site Orientation Guidelines**

### **Clinical Affiliation Site Orientation Guidelines**

Students are assigned to eight-hour days shifts for the first two weeks of a new clinical practicum site. This is to facilitate an appropriate orientation to the facilities, equipment, key policies, routines, and personnel.

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

Rev: 02/2018

## Appendix IIa: 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 credentialing 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 credentialing 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

Rev. 01/2018

## **APPENDIX III: 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. 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. All records entered into Typhon are kept in accordance to the students agreement with Typhon.

#### **Contents of the Student's Record**

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. Student credentialing materials (These records are kept for five years after program completion via Typhon Student Management System.)
  - Student's RN licenses,
  - Proof of cleared WI and MN Criminal Background Studies,
  - Proof of receiving an annual flu vaccine,
  - Proof of a negative 2-Step TB 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.
  - Immunization and vaccination records
  - Proof of BLS/ACLS/PALS certification
4. 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

Rev.: 02/2018

## **APPENDIX IV: 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 to program and institutional policies. There are documents that are kept in this system that may expire. Expiring documents must be renewed and reentered into the Typhon system. If any document is posted and expired, we have no choice but to dismiss you from practicum and/or the program.

### **Document preparation and formatting**

- *All submitted documents or forms must be submitted in MS Word (.doc or .docx) or Adobe .pdf*
- Photographs (.jpg, .gif, etc), phone, camera, or other scans, and other document formats (i.e., Apple generated documents from software like Pages and Numbers cannot be read by our systems and are prohibited.
- Papers submitted to Blackboard should be formatted in MS Word so they can be evaluated by your instructor(s).
- Please convert documents prepared in other formats to .pdf, .doc, .docx, .xls, .xlsx, .ppt, or .pptx before submitting or sending via email.
- *All documents loaded to Typhon must be in .pdf format.*

**Credentialing documents (definition):** included are any and/or all of the following:

- Registration certificate received after you register to attend a clinical practicum site.
- Certificate or completion documentation received after you complete a clinical practicum site specific on-line orientation
- Certificate or completion documentation received after you complete a clinical practicum computer system

training (i.e.,Excellian).

- Any certificate given when you complete on-line or live training (HIPAA certification, ACLS certification, or clinical practicum site infection control/safety or other training).
- Proof of licensure (RN)

## **REQUIRED DOCUMENTS THAT MUST BE UPLOADED TO TYPHON**

**(Please note, if any of these documents expire, the updated version must be uploaded to Typhon.**

### **\* Indicates Documents that will expire**

- \*MN and WI or compact state RN licenses (Licensure verifications or certificates must include expiration date)
- Criminal history background checks for both MN and WI
- \*Proof/certificate of liability insurance
- Certifications: BLS, ACLS, PALS
- Completed Health Status Form Including Immunization Documentation: Tdap, Tetanus, Hepatitis B Titer (combine to one(1) document)
- \*Annual proof of flu vaccine administration
- \*Annual proof of a negative 2-step TB, TST test, Quantiferon®-TB Gold-in-tube test, or a T-Spot® TB or completion of the positive TB test protocol (See protocol)
- Certificate of completion for HIPAA training (CITI course completion)

## **DOCUMENTS KEPT IN YOUR GOOGLE PORTFOLIO**

The Google Portfolio is designed for you to keep your academic work so you can demonstrate that you met the programs outcome objectives. It also serves as a document collection for your future employers as you look for a position. You will be required to review and summarize these documents when you present your thesis during the final semester of the program.

The Google Drive file folders are shared with the Program Director, Clinical Director, faculty members, and Program Coordinator who audit the folders to ensure that documents are submitted as required.

Not all documents are placed in subfolders. Graduate work includes: Corrected/revised copies of all Reflective Essays, Summary/Critique Paper (NA795-797), final paper proposal (NA796) Synthesis Paper/Presentation (NA798), and summary of your teaching project. These documents are placed in the drive folder but not in a subfolder.

Folders are prepared and placed in your Google Drive Portfolio Folder. Please do not change these folders or add any additional materials. You may add a "MISC" folder if you wish.

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.

### **1. Case studies**

All case studies after they have been revised (if necessary) and graded. All corrections recommended or required should be included in this document. These case studies represent your best work.

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

## 2. Postoperative Rounds Records

This folder contains:

- ALL completed post-operative rounds sheets. Goal: every patient cared for, minimum accepted: 30 per month.

Required labeling: last name.POR.month and year of *visits.pdf* or *.doc*.

*Example:* Smith.POR.August 2018

## 3. Schedule Change Forms signed by Clinical Coordinator

This folder contains:

- All completed and approved schedule changes signed by the Clinical Coordinator and the Clinical Director.
- Approved Educations Leave Forms

## 4. Proof of credentialing (Does not include documents posted to Typhon)

This folder contains (examples): Create a separate sub folder for each site

- All Allina training and orientation certificates
- Site registration emails received from Allina including
- Proof of completion for each hospital orientation or training program(s)
- Each computer training certificate(s)
- **Labeling:** LastName.NameofDocument.MonthDayYearCompleted

*Examples:*

Smith.CredentialingCertifAmery.August 26 2015

Smith.ProofofOrientation.Rhineland.August 26 2015

Smith.ExcellianComputerTrain.Allina.August 26 2015

Smith.IntroLetter.SiteName.August 26 2015

## 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 current Typhon Student Passport and résumé.

## 6. Clinical Evaluations

All clinical performance evaluations prepared for you by your clinical coordinators. Label:

LastName.CEval.PracticumSite.Dateof Evaluation.pdf

*Example:*

Smith.CEval.Amery.August 26 2018

\*Combine skills checklist documents for NA770 into one document and post.

**FORMS that are sent to the Program Director via email (Please refer to the Student Handbook for the applicable policy/procedure):**

**All other forms including:**

- Incident reports (Please follow the notification policy)
- Educational leave requests

○ Revised 9/2018

**APPENDIX V: 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)  
[Health Status Form](#)

**APPENDIX VI: Student Clinical Evaluation Forms**  
[Student Clinical Performance Summary \(Clinical Rotation Evaluation\)](#)

**APPENDIX VII: Academic Faculty Reference Manual**  
[Academic Faculty Reference Manual](#)

**APPENDIX VIII: Clinical Preceptors Manual**  
[Clinical Preceptors Manual.pdf](#)

**APPENDIX IX: Student Clinical Evaluation Forms**

**APPENDIX X: Program Evaluation Forms**

Program Annual Assessment Protocols: [Annual Assessment Plan](#)

Summary Program Evaluation Form - Graduates: [Summary Program Evaluation Form](#)

Employer's Evaluation of Graduates Who Have Been Practicing for 12 Months: [Employers Evaluation of Graduate Form](#)

Evaluation Form for Graduates Who Have Been Practicing for 12 Months: [Graduates Nurse Anesthetist Evaluation Form](#)

Evaluation of Course Instructors: [Program Academic Instructor Evaluation](#)

Evaluation of Clinical Site and Personnel: [Clinical Site and Instructor Evaluation](#)

**APPENDIX XI: Accreditation**

Council on Accreditation of Nurse Anesthesia Educational Programs: [Nurse Anesthesia Program Accreditation](#)

University Accreditation: [Saint Mary's University of Minnesota Accreditation](#)

