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

Student Handbook / Administrative Manual 2016 - 2017

Facebook Page

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INTRODUCTION

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

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

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

Merri L. Moody APRN, CRNA, DNP.
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March, 2016
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SAINT MARY’S UNIVERSITY OF MINNESOTA
SCHOOL OF GRADUATE AND PROFESSIONAL PROGRAMS
TWIN CITIES CAMPUS

Master of Science in Nurse Anesthesia

Vice President

Academic Dean & Associate Vice President

Nurse Anesthesia Program Director

Administrative Assistant

Academic Coordinator

Didactic Faculty

Assistant Director

Clinical Coordinator

Clinical Faculty

Guest Lecturer

Note: Students in the nurse anesthesia program have access to individuals at all levels represented in this organization chart.
AFFILIATIONS
Students enrolled in the Saint Mary’s University of Minnesota Graduate Program in Nurse Anesthesia affiliate with other health care facilities to enrich their clinical training and/or meet certain graduation requirements.

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

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

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

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

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

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

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

The Nurse Anesthesia Program enjoys full accreditation from the Council on Accreditation of Nurse Anesthesia Educational Programs. The Council is recognized by the United States Department of Education and the Council for Higher Education Accreditation. (http://home.coa.us.com)

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

1. Completed an appropriate baccalaureate degree from a regionally accredited institution. Degrees must be completed and final transcripts must be submitted by the April 1st deadline. Appropriate degrees include the areas of nursing, biophysical, biological or behavioral sciences.
2. An overall GPA of 2.75 on a 4.0 scale or higher.
3. Current unencumbered licensure as a Professional Registered Nurse in the State of Minnesota, or eligible for reciprocity.
4. A minimum of one year of experience in a critical care setting.
5. A completed application submitted by the application deadline.

All students are required to have a physical examination prior to starting the program. Documented immunity to communicable disease is also required prior to the student’s involvement in hospital activities. Serum titers that are required include rubella, rubeola, varicella, hepatitis B, and mumps. Vaccination will be required in non-
immune students. Proof of receiving the Tdap vaccine (protection against diphtheria, tetanus, and pertussis) that extends to the date of the student’s graduation from the program is also required.

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

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

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

APPLICATION PROCESS

Persons applying to the nurse anesthesia program must submit:

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

2. An official transcript issued to Saint Mary's University from each undergraduate college or university attended since high school, including an official transcript from the institution posting the applicant's completed bachelor's degree.

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

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

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

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

All application materials are to be submitted through the 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: $552 per credit, 64 credits total ($35,328)

FEES AND EXPENSES
Application fee $25.00 (non-refundable)
Registration fee $1,000
(non-refundable; payable upon acceptance to the program)
Graduation fee $175
Clinical fee $250 per clinical semester

OTHER EXPENSES (estimated)
Books and supplies $1600
Certification Examination $750

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

ACADEMIC AND CLINICAL GRADING POLICIES
Academic:
Students should review University grade values and points found in the Catalog and Student Handbook for graduate academic grading policies. Graduate students must maintain a minimum grade point average (GPA) of 3.0. Students whose cumulative GPA is below 3.0 are placed on academic probation. To be removed from academic probation, students must complete the next five credits to raise their cumulative GPA to 3.0 or above. Failure to achieve a 3.0 or above will result in academic dismissal.
A student who receives a grade of “NC” in any course will be dismissed from the Nurse Anesthesia Program.

Students must have a GPA of 3.0 or higher to register for Clinical Practicum 2 – 5. (NA771 Clinical Practicum 2, NA772 Clinical Practicum 3, NA773, Clinical Practicum 4, NA774, Clinical Practicum 5) Students with a GPA lower than 3.0 after the third semester may not continue in the nurse anesthesia program.

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

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

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

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

GRADUATION CRITERIA
Students enrolled in the program must meet the graduation criteria of Saint Mary's University of Minnesota Nurse Anesthesia Program. A student must have all degree requirements completed prior to graduation. An application for graduation and graduation fee are additional requirements of the University.
A GPA of 3.0 on a 4.0 scale must be maintained by the student.
The student must maintain the minimum level of practice for the designated period in the program in accordance with the clinical objectives.
The student must receive a passing score, as determined annually, on the second of two Self Evaluation Examinations (SEE) administered by the National Board on Certification and Recertification of Nurse Anesthetists (NBCRNA).
The student must pass the Program Comprehensive Examinations (PCE). (Please see the following section entitled Certification Examination Review Curriculum)
The student must fulfill those requirements outlined in the University and Program Outcome Objectives.

Certification Examination Review Curriculum
Purpose: Students must actively prepare for the Certification Examination throughout their second year of the Program. Enrolling in and taking an outside board review course has not been demonstrated to ensure success. According to program data, students who have not passed the certification exam on the first attempt have taken at least one external board review course.
The Self Evaluation Examination (SEE) exam is administered by the National Board on Certification and Recertification of Nurse Anesthetists (NBCRNA). Program data shows that students who achieve a cumulative score equal to or above the national average are more likely to pass the Certification Examination on the first attempt.

Program Comprehensive Examinations (PCE)
Students will challenge five computer administered examinations during their second year in the Program. The content of these exams will include basic and advanced principles of anesthesia practice, basic science (anatomy, physiology, biochemistry, chemistry and physics), professional aspects of anesthesia practice, pharmacology, advanced monitoring, technology and equipment. These exams will be offered in accordance with the syllabus for NA782 Program Comprehensive Exams.
Self Evaluation Examination (SEE)
Students will be registered to take the SEE once during the final two semesters of the program during the months of January through April of their senior year. A passing score is considered to be a cumulative score at or above the national average for students in their second year as reported by the NBCRNA in January of the same year the students take the second exam. Students must pass the SEE. If a student fails to achieve a passing score they must re-take the exam, at their own expense, until they achieve a passing score. Failure to pass the SEE may result in a delayed graduation date.
**CURRICULUM DESIGN**

**Curriculum Design – Class of 2017**

**Semester I (Summer 2015)**
- NA630 Professional Aspects of Nurse Anesthesia: 3 credits
- NA640 Chemistry & Physics: 4 credits
- NA606 Research Design & Statistical Analysis: 3 credits
- NA635 Professional Communication: 3 credits
- **Total: 13 credits**

**Semester II (Fall)**
- NA614 Advanced Health Assessment for Nurse Anesthesia: 2 credits
- NA618 Principles of Anesthesia Practice I: 4 credits
- NA645 Anatomy & Physiology I: 6 credits
- NA651 Pharmacology for Nurse Anesthetists: 3 credits
- **Total: 15 credits**

**Semester III (Spring 2016)**
- NA650 Anatomy & Physiology II: 6 credits
- NA661 Pharmacology: 3 credits
- NA620 Principles of Anesthesia Practice II: 6 credits
- NA770 Clinical Practicum I (150 hrs): 2 credits
- **Total: 17 credits**

**Second Year - 2016**

**Semester IV (Summer)**
- NA787 Portfolio I: 2 credits
- NA771 Clinical Practicum II (480 hrs): 2 credits
- NA780 Clinical Integration: 3 credits
- **Total: 7 credits**

**Semester V (Fall)**
- NA772 Clinical Practicum III (600 hrs): 3 credits
- **Total: 3 credits**

**Semester VI (Spring 2017)**
- NA773 Clinical Practicum IV (600 hrs): 3 credits
- **Total: 3 credits**

**Third Year**

**Semester VII (Summer)**
- NA782 Comprehensive Exams: 1 credit
- NA788 Portfolio II: 3 credit
- NA774 Clinical Practicum V (480 hrs): 2 credits
- **Total: 6 credits**
- **Total Program: 64 credits**
## CURRICULUM DESIGN

### Curriculum Design – Class of 2018

#### Semester I (Summer 2016)
- NA630 Professional Aspects of Nurse Anesthesia: 3 credits
- NA640 Chemistry & Physics: 3 credits
- NA606 Research Design & Statistical Analysis: 3 credits
- NA635 Professional Communication: 3 credits

Total: 12 credits

#### Semester II (Fall 2016)
- NA614 Advanced Health Assessment for Nurse Anesthesia: 2 credits
- NA618 Principles of Anesthesia Practice I: 4 credits
- NA645 Anatomy & Physiology I: 6 credits
- NA651 Pharmacology for Nurse Anesthetists: 3 credits

Total: 15 credits

#### Semester III (Spring 2017)
- NA650 Anatomy & Physiology II: 6 credits
- NA661 Pharmacology: 3 credits
- NA620 Principles of Anesthesia Practice II: 6 credits
- NA770 Clinical Practicum I (150 hrs): 2 credits

Total: 17 credits

#### Second Year - 2017

#### Semester IV (Summer 2017)
- NA787 Portfolio I: 3 credits
- NA771 Clinical Practicum II (480 hrs): 2 credits
- NA780 Clinical Integration: 3 credits

Total: 8 credits

#### Semester V (Fall 2017)
- NA772 Clinical Practicum III (600 hrs): 3 credits

Total: 3 credits

#### Semester VI (Spring 2018)
- NA773 Clinical Practicum IV (600 hrs): 3 credits

Total: 3 credits

#### Third Year

#### Semester VII (Summer 2018)
- NA782 Comprehensive Exams: 1 credit
- NA788 Portfolio II: 3 credit
- NA774 Clinical Practicum V (480 hrs): 2 credits

Total: 6 credits

Total program: 64 credits

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

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

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

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

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

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

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

Clinical Practicum Student Performance Objectives:

1. Provides a safe patient care environment at all times.
   A. Protect patients from iatrogenic complications.
   B. Participate in the positioning of patients to prevent injury.
   C. Conduct a comprehensive and appropriate equipment check.
   D. Utilize standard safety precautions and appropriate infection control measures.
   E. Demonstrates vigilance while delivering patient care and refrains from any activity that could interfere with vigilance.
2. Performs a comprehensive history and physical assessment, creates a relevant care plan, and discusses it with the anesthesia care team.
3. Selects and prepares the equipment and supplies needed to safely conduct the case.
4. 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.
5. Monitors patients efficiently and accurately and makes sound decisions based on the available data.
6. Recognizes and appropriately responds to changes in the patient’s condition in a timely way.
7. Provides nurse anesthesia care based on sound principles and research evidence for all phases of the anesthetic process including
   A. Induction of Anesthesia
   B. Maintenance of Anesthesia
   C. Emergence from Anesthesia
   D. Postoperative Assessment and Care
8. Effectively communicates with patients and their families.
9. Effectively communicates with the patient care team.
10. Delivers culturally competent perianesthetic care throughout the anesthesia experience
11. Functions within appropriate legal requirements and accepts responsibility and accountability for his/her practice.
12. 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:** Requires continuous supportive and directional cues more than 50% of the time.
DESCRIPTION: Identifies segments of anesthesia principles, needs direction to apply them correctly, observes or practices clinical skills, lacks manual dexterity, focuses entirely on own behavior, rarely on patient and/or procedure.

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

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

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

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

Students may access the Clinical Director or the Program Director at any time with concerns about their clinical curriculum or clinical progress.
Graduate Nurse Anesthesia Program Policies and Procedures

POLICIES and PROCEDURES
These policies are in addition to the policies set forth by Saint Mary’s University of MN. In cases where there are conflicting policies between the program and the university, the program policy takes precedence. Saint Mary’s University policies and procedures can be found on – line: Schools of Graduate and Professional Programs Catalog and Student Handbook
Failure to follow these policies or procedures may result in dismissal from this program.

CLASS ATTENDANCE POLICY
This policy includes conferences as well as all program courses. Students are expected to attend all scheduled classes and conferences. If the student is unable to attend a class session due to illness or a family emergency, please notify the Program Coordinator, (612) 728-5132, who will pass the message on to the instructor and the Program Director. Regardless of why a class is missed, the student is responsible for the material covered. Additional work may be assigned by the instructor. Students who miss more than two class sessions, or are late more than twice or leave early more than twice, must withdraw from the course and register to take it at a later time. 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.

CLINICAL ATTENDANCE POLICIES AND PROCEDURES (Courses NA770 – NA774)
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.

A student may start extended clinical hours or call time following the 10th week of NA771 with clinical site approval. The student must apply, in writing, to the Clinical Director at least two weeks prior to the anticipated schedule change. A completed clinical evaluation for NA771 showing that the student has met or exceeded all clinical performance objectives for NA771 must be submitted to the Clinical Director. Written approval by the Clinical Coordinator affected by the schedule change must 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 Director and approved by the Clinical Coordinator. Copies of all documentation, including correspondences and the revised clinical schedule, are placed in the student’s record. Students are expected to fulfill their revised schedule.

It is the responsibility of the student to notify their Clinical Instructor, Charge CRNA, and Clinical Coordinator prior to leaving the clinical area or site for any reason. Failure to do so may result in dismissal from the program.

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. The student must notify all involved parties of any planned schedule changes altering their reservations. It is the responsibility of the student to adhere to any reservation cancellation policy due to illness or unplanned schedule changes. Failure to do so may result in the student paying any reservation cancellation fee.

If the student is unable to attend clinical due to illness or a family emergency, students must notify both the Clinical Director and appropriate clinical site. If the absence, due to illness, affects the student's ability to complete the nurse anesthesia program, the leave of absence policy may apply or the student may be dismissed from the program. Regardless of why a clinical day is missed, the student is required to make up the missed day. Additional work may be assigned by the Clinical Director.

Students who miss more than two clinical days 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.
A. Direct Return to Department
   - A student returning to school after an illness should report directly to his/her department except for specifically listed conditions / diseases identified in section "B".

B. Return to School Via Physician Consent Note
   - Students with the following conditions must be screened through their physician prior to returning to clinical practice:
     - 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.

CLINICAL PROBATION / DISMISSAL
A student who has performance or interpersonal problems may be placed on clinical probation or dismissed from the Program. Depending upon the facts and circumstances of each case, the Program reserves the right, through appropriate channels, to determine which steps, if any, as set forth previously, will be applied.

CLINICAL ROTATION SITES
Each clinical site is unique and presents necessary clinical experiences for nurse anesthesia students. Students are expected to rotate through a tertiary hospital, community hospital, rural hospital and sub-specialty experiences as assigned. The length of affiliation experience ranges from two to eight weeks depending on the affiliation site. Specific educational objectives to be accomplished during these affiliations are posted on the NA Clinical Directory page on Blackboard. Students are expected to review these along with applicable course materials prior to their clinical experience. Students are expected to submit their additional learning objectives to the respective clinical coordinators at least two weeks prior to the start of the rotation.

Orientation to clinical sites is provided by the receiving institution. Basic elements of this orientation can be found in Appendix III.

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

CLINICAL SCHEDULES
Clinical rotation schedules are designed to provide each student with the best possible opportunities to apply classroom content to patient care and qualify to take the National Certification Examination. There are many factors that affect how the schedule is written and amended. Students will be given an opportunity to have input
into their clinical rotation schedule before the start of their clinical practicum sequence. Students will not be scheduled at any clinical site during the Christmas to New Year semester break under any circumstances. The final schedule will be posted to a web server with a link made available on Blackboard. All time off is designated by the Program including holidays and semester breaks. (RE: VACATION / HOLIDAY TIME) This schedule may be changed at any time. Changes are only made to the schedule when they are unavoidable. Students are expected to comply with any changes. If the schedule is changed, as much notice as possible will be given to the student.

It may be possible to change a student’s clinical schedule to accommodate a request to be scheduled at a site where the student plans to work. This site must be one of our clinical affiliate sites. A request must be made in writing to the Clinical Director and accompanied by proof that all clinical case requirements have been met, the site does not displace another student to fulfill the request, and we receive written permission from the site’s anesthesia director. All documents must be completed and submitted to the Clinical Director at least 6 weeks in advance of the first day of the anticipated schedule change.

**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 and that are not proctored. Students wishing to take these exams off campus must be sure that they have a high speed or broadband internet access, a suitable environment, and the Respondus Lock Down software. If students are unable to attain the correct technology, exams can be taken on-campus by appointment with the Course Coordinator, Course Instructor, or Academic Director. Unless otherwise specified by the syllabus, these are considered exams and must be taken in accordance with the [Academic Dishonesty Policy](#). This policy can be found in the [Saint Mary's University of Minnesota Catalog and Student Handbook 2015-2016](#).

**CREDENTIALING OF STUDENTS AT CLINICAL SITES**
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 are also sent to the receiving practicum sites.

**Renewal of Clinical Credentialing Documents**
Students are required to monitor, renew, and submit renewable clinical credentialing documentation to the Program Coordinator with copies submitted to the Clinical Director at least two weeks prior to the expiration date. This documentation includes, but may not be limited to, 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 Studies, proof of receiving an annual flu vaccine, results from an annual 2-StepTB TST test, Quantiferon®-TB Gold-in-Tube test (QFT-GIT), or a T-SPOT® TB, and proof of liability insurance coverage.

Students will be given notice of an expiring clinical compliance document six weeks prior to the expiration date. Students must be given a scanned copy of the updated document, email it to both the Program Coordinator and the Clinical Director. All documents must be in either Microsoft Word or Adobe PDF format and labeled in accordance to the guidelines posted as Appendix IVa, Formatting and Labeling Documents.

Many clinical practicum sites require specific credentialing or on-boarding be done by the student prior to arrival at the site. These institutions include (but may not be limited to) Aspirus Medford Hospitals & Clinics, Children's Hospitals and Clinics, Essentia St. Mary's Medical Center, Gillette Children's Specialty Healthcare, Glencoe Regional Health Services, Lakeview Medical Center, Memorial Medical Center, Ministry St. Mary's Hospital, Owatonna Hospital, Regions Hospital, Rice Memorial Hospital, Ridgeview Medical Center, River Falls Hospital, Riverwood Healthcare, Shawano Medical Center, St. Cloud Hospital, St. Croix Regional Medical Center, St. Gabriel's Hospital, St. Joseph's Hospital, St. Luke's Hospital, and Winona Health Service. All students must complete an on-line orientation for Allina Health. The clinical Director will announce the start and due dates for this process.

Deadlines for completion of site specific processes are posted in the NA Clinical Directory in Blackboard. Proof of completion at all sites must be emailed to both the Program Coordinator and the Clinical Director. Proof of completion documents are labeled in accordance to the guidelines posted as Appendix IVa, Formatting and Labeling Documents.

Clinical time is vitally important. If time is missed due to non-renewal of credentialing documentation or failure to complete site specific credentialing processes, this time must be made up in order for the student to meet the required number of hours for the course. Any time missed at a site because of failure to complete the on-boarding or credentialing process must be made up hour for hour missed. 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.

NEW Jan, 2016

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.

DRUG AND ALCOHOL POLICY: On and Off Campus
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:
http://catalog.smumn.edu/content.php?catoid=18&navoid=1071#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 be not 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

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

Policy:
Students enrolled in the Nurse Anesthesia program may petition the Program Director for educational leave to attend an anesthesia related educational meeting or event. The petition must be made with the proper form that describes:

- Meeting title
- Dates expected to be absent from the student’s academic and clinical schedule.
- Program content (with attached copy of the program).
- Student’s educational objectives and goals to be attained by attending this conference.
- Notation of any previously granted educational leave.
If the educational leave is granted by the Program Director, such time will not be counted as vacation, but will be considered as part of the student’s program time commitment. All costs associated with the meeting shall be borne by the student.

Time requested to take a Certification Examination review course will be granted once during second year of the program. Time will only be granted for practicum (NA771-NA774) courses. All time taken must be made up at the institution where time was missed. A plan for making the time up must be approved by both the clinical site coordinator and the Clinical Director.

**GOOD NAME POLICY**

**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/](https://www.mnsure.org/)).

Please note that ALL students planning to attend either St. Cloud Hospital or CentraCare Surgery Center are required to submit proof of health insurance coverage to the Clinical Director. This is a stipulation of these affiliate sites.

**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.

**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.

**INTELLECTUAL PROPERTY RIGHTS OF STUDENTS**

Copyright is a form of protection provided by the laws of the United States (Title 17, U.S. Code) to the authors of "original works of authorship," including literary, dramatic, musical, artistic, and certain other intellectual works. Protection is available to both published and unpublished works, but the work must be fixed in a tangible medium of expression. The owner of the copyright is given the exclusive right:

- To make copies;
- To create derivative works based upon the work;
- To distribute the work to the public;
- To perform or display the work publicly;
• For sound recordings, to perform the work publicly by means of digital audio transmission. (Information from Copyright Basics, Circular 1, http://lcweb.loc.gov/copyright/circs/cir01.pdf)

All undergraduate and graduate student work is protected under intellectual property law. Students own all rights to their papers, responses to assignments and tests, and final program papers and materials, whether in written or electronic form. The University retains no ownership in a student’s work created as part of a Saint Mary’s University course.

Students with exemplary work may be asked to provide consent to the University to use of their work in a program library. The University may use student work only when written consent is provided by the student and all identifiable student information is removed from the work.

INTELLECTUAL PROPERTY RIGHTS OF INSTRUCTORS

All material placed on Blackboard, the Program Website (www.smumn.edu/nap), distributed electronically or distributed in printed form is intended only for the use of the individual student enrolled in the course. Distribution and/or sharing this material with any other student, individual or organization are strictly prohibited without the written consent of the course instructor, Program Director and the Academic Dean of the Twin Cities campus.

LEAVE OF ABSENCE

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.

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

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.

Clinical Time: 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. Students must be aware that the ability to do extended shifts or “call” shifts to make up time away may not be an option.

ELECTRONIC COMMUNICATIONS 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 states of Minnesota and Wisconsin (unless *Interstate Compact Licensing Rules apply and the Wisconsin nursing license requirements are met by another state’s nursing license). Copies of a current Minnesota must be submitted to the Program prior to enrollment in course
work and each time the license is renewed. Copies of the Wisconsin Registered Nurses license must be submitted no later than the third Wednesday in September prior to participation in NA770 Clinical Practicum I. Both licenses must remain current and unencumbered throughout the Program. Students without unrestricted/unencumbered licensure will not be permitted to participate in clinical or classroom activities. Students are not allowed access to clinical sites until proof of current licensure is provided to the Program Director. Any clinical time missed must be made up and may be scheduled during designated vacation time or after the program completion date.

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

PARKING

Students parking at clinical sites must follow the parking policies of that institution. All students are reminded that we exist in an urban environment and that personal safety should be concern of 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.

PHYSICAL EXAMINATION / IMMUNIZATIONS

Prior to starting the program: All students are required to submit a physician’s statement stating that the student is physically able to function in the role of a nurse anesthesia student. This statement must be received prior to the student starting in the Program. Documented immunity to communicable disease is also required prior to the student’s involvement in hospital activities. Laboratory titers that are required include rubella, rubola, varicella, and mumps. Hepatitis vaccination is required. Vaccination will be required in non-immune students. A record of receiving the T-dap is required within 10 years of graduation from the program.

Prior to registration for NA770 Clinical Practicum I: A 2-StepTB TST test, QuantiFERON®-TB Gold-in-Tube test (QFT-GIT), or a T-SPOT® TB is required and must be repeated annually. Flu vaccine is required annually. Exemption from receiving a flu shot can only be made by a students attending physician and a copy must be on-file with the program. Initial documentation of proof for TB testing and annual flu vaccination is submitted to the Clinical Director and due no later than the third Wednesday in September prior to participation in NA770 Clinical Practicum I.

Students are not allowed access to clinical site activities until proof of immunity, vaccination, and current 2-StepTB test are provided to the Clinical Director. Students who do not fulfill these requirements will be dismissed from all clinical activities. Any clinical time missed must be made up and may be scheduled during designated vacation time or after the program completion date.

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 Assistant Director. In the event that the patient reports an unanticipated event or post-anesthetic complication, the student is to notify the anesthesiologist who was in charge of the case or the anesthesiologist who is in charge for that day if the anesthesiologist who did the case is not available. The student must also follow the policy for Unanticipated Patient Events/Outcomes. The charge CRNA must be notified prior to the student leaving the OR to make rounds. This policy is in compliance with the Standards and Guidelines for Nurse Anesthesia Educational Programs by the Council on Accreditation of the American Association of Nurse Anesthetists.

PREPARATION OF STUDENT WORK

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.

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: POLICY CONCERNING UNANTICIPATED PATIENT EVENTS / OUTCOMES)

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

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

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

Evaluation of Student’s Clinical Progress (See page 17)
Evaluation of Clinical Affiliate Sites and Clinical Faculty Members
The students of the Nurse Anesthesia Program evaluate the clinical faculty and the clinical affiliation sites using a standard form. The completed clinical evaluations must be submitted by each student to the Clinical Director via the "Nurse Anesthesia Clinical Site Evaluations" Blackboard page. Student evaluations of clinical sites are due as per the syllabus for each clinical practicum course. The results are collated before review by the Clinical Director. Anonymity of the individual student is assured. Collated evaluations are discussed between the Clinical Director and the affiliates Clinical Coordinator. Review of these evaluations is conducted by the Clinical Director at the end
of each semester. Distribution of these evaluations to the Program Director and Clinical Coordinators occurs annually, and as necessary, based on student feedback.

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

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

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

**THE ROLE OF NURSE ANESTHESIA STUDENTS**
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**
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 "CALL" EXPERIENCE
In order to achieve the goal of becoming a competent entry level nurse anesthesia provider, student nurse anesthetists are given the opportunity to participate in a broad range of clinical experiences. These clinical experiences include participating in clinical practicum activities outside of the regularly scheduled hours of normal operation (0700-1700). “Call time” is defined as being physically present and involved with patient care or other anesthesia department activities between the hours of 1700 and 0600 Monday through Friday or all day Saturday, Sunday and legal holidays. Students must complete at least one hundred and twenty (120) hours of call time as part of their clinical curriculum. This includes participation in 12 and 16 hour shifts. Availability of these shifts will depend on the specific site. Students are encouraged to review the availability of clinical experiences at each clinical site and work with the Clinical Coordinator to schedule call hours when they are available. If the required call time has not been completed by the end of NA773, Clinical Practicum IV, the student must notify the Clinical Director with a written plan on how they intend to obtain the remaining call time hours.

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 emergency situations 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 emergency situations.
- 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.

STUDENT RECORDS POLICY
Students enrolled in the Nurse Anesthesia Program are responsible for completion of 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.

STUDENT WITHDRAWAL/RESIGNATION
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.

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 one business week of the incident. The report must be typed and must contain all of the information requested on the incident report form.

The student should 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.

UNCOMPLETED COURSEWORK, ACADEMIC AND CLINICAL - I/GRADE
The grade of “I” (Incomplete) may or may not be given by the instructor at the student’s request when the required work is not completed. The student must submit a written request to the instructor prior to the final class session. In addition, the student must contact the instructor to ascertain exactly what work remains to be done.

The instructor must report on the official grade roster the grade “I” followed by the grade that the student will receive if the coursework is not completed within 30 calendar days of the last day of the class (e.g. I/NC). If the required work is completed in the specified time, the instructor will report a single final grade to the registrar. That grade will replace the I/grade, the incomplete will be removed, and the grade point average will be recomputed accordingly.

A request for an extension beyond 30 calendar days must be submitted, in writing, to the program director. The program director, after conferring with the instructor, may or may not grant the extension. If an extension is approved, a new deadline must be established. Students receiving incompletes in courses will be administratively withdrawn from the subsequent course if the incomplete is not resolved at least one week prior to the start of the course.

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.

VACATION / HOLIDAY TIME
All students are granted 6 legal holidays off annually. All other time off is designated by the Program.

APPROVED: University Academic Policies and Procedures Committee
POLICIES REVIEWED April, 2015
PROGRAM COMMITTEE STRUCTURE

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

Program Advisory Committee
Academic Evaluations Committee
Clinical Evaluations Committee
Self-Study Committee

Frequency of Committee meetings:
Advisory: Meets annually and as needed.
Academic Evaluations: Once per semester at midterm and as needed to discuss student progress.
Clinical Evaluations: Meets each semester and as needed to discuss student progress.
Self-Study: 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. 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 and clinical outcome objectives.
- Provide input to the Academic Evaluations Committee in establishing course content and instructional methods required to meet the program academic 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.
- Provide input to the Clinical Evaluations Committee in establishing student clinical performance objectives.
- 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 Academic Dean/Associate Vice President.

Members of the Committee are:
- Administrative representatives from clinical affiliates, hospitals and practice groups
- Program faculty members
- Program Director-Chair
- Public Member
- Four Student Representatives
- Alumni Representative
- Academic Dean/Associate Vice President, Saint Mary’s University of Minnesota SGPP
Academic Evaluations Committee
This committee is charged with reviewing student progress through the academic curriculum. This committee is also charged with reviewing the program’s annual assessment report, academic curriculum, and course evaluations. The Committee shall pursue excellence in education of nurse anesthetists and the achievement of predetermined program outcome objectives. The committee is guided by the sponsoring institution’s mission statements, the Council on Accreditation Standards and Guidelines, published program and university policies and procedures and input from the various spheres of practice in which the Program operates.

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

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

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

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

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

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

Clinical Practicum Advisory Committee
The purpose of the Clinical Practicum Advisory Committee is to pursue excellence in the clinical education of student nurse anesthetists. This committee reviews resources available to the program and its students in attempt to ensure that each student has the opportunity to achieve the clinical performance and program objectives. The committee is guided by course syllabi, the policies and procedures documented in the Saint Mary's University of Minnesota Catalog and Student Handbook (current version) and the Graduate Program in Nurse Anesthesia Student Handbook and Administrative Manual (current version), the standards, guidelines, policies and procedures published by both the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) and the National Board for Certification and Recertification of Nurse Anesthetists (NBCRNA) standards, and input from the various spheres of practice in which the Program operates.
The Clinical Practicum Advisory Committee reviews all aspects of the clinical curriculum including, but not limited to, the clinical evaluation process, clinical site resources, clinical opportunities and case numbers, site specific requirements, policies and procedures, program and university handbooks, curriculum content, syllabi and sequence, practicum student learning objectives in relation to program student outcome objectives. Recommendations made by this committee are forwarded to the program director that will refer to a university committee or to the dean for approval.

**Scope and Responsibility**
- Assist the Clinical Director in planning and evaluating the student’s clinical curriculum to help assure compliance with program outcome objectives.
- Conduct an ongoing assessment to determine what clinical resources and experiences will be needed in the future and plan for the acquisition of these resources.
- Conduct an annual review of requirements, policies, procedures, and standards set forth by National Board for Certification and Recertification of Nurse Anesthetists (NBCRNA), the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) and assure compliance with these requirements.
- Conduct an annual review to assure that the clinical policies and procedures listed 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.

**Members of the Committee**
- Clinical Director – Chair
- Clinical Coordinators from Affiliate Institutions
- Two student members as selected by the committee chair

Ad hoc members:
- Program Director
- Academic Director
- Academic Dean/Associate Vice President, Saint Mary’s University of Minnesota SGPP

**Frequency of Committee Meetings**
- Every semester

**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 the university administration 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
- Assistant Director
- Clinical Director
- Members of the Advisory Committee
- Other representatives from the academic and clinical faculty, university administration and the community of interest as needed.

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

Program Director
Associate Director
Clinical Director
Anesthesia Academic Faculty
Program Coordinator
Clinical Coordinator
Clinical Instructor
To see these Position Descriptions go to: Position Descriptions
APPENDIX II: PROGRAM RESOURCE MATERIALS
These materials are in addition to the holdings of the Twin Cities Campus Library

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

_______Applicable policies and procedures including university, program, and professional behavioral expectations were discussed. Incident reporting and student privacy rights assured via FERPA were also discussed.  

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

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

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

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

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

_______Resources for faculty have been discussed and offered. These include: 
   1. Library access.
2. Opportunities to teach academic classes or clinical labs (If interested, coordinator is referred to academic coordinator or program director)
3. Faculty Development opportunities including:
   a. SMU new faculty orientation (on-line)
   b. Hendrickson Forum
   c. SMU annual faculty workshop and dinner
   d. Program newsletter, and website.
4. Clinical faculty website (address is shared)
5. GNA Program website (address is shared)
6. Inservice for orientation of other clinical faculty or on-site clinical faculty development is offered.

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

_______________________________ Clinical Coordinator Signature

_____________________________ Date

_______________________________ Signature of the person orienting the Coordinator

_____________________________ Date
APPENDIX IV: Student Records Retention Policy

Contents of the Student File

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

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

1. Application File
   - Application to the Nurse Anesthesia Program
   - Student transcripts submitted with the application to the Program
   - Reference letters
   - Student’s Curriculum Vitae
   - Status of the application checklist
   - Any supporting documents submitted by the student at the time of application
   - Registered Nurses License at the time of application

2. Academic Correspondences
   - Any letters sent to the student from University faculty, administrative personnel or support staff
   - Any correspondences received from the student
   - Current student transcript

3. Licenses and Certifications
   - Minnesota Registered Nursing license, Wisconsin license if applicable (current license and all licenses received while students of the Program)
   - Student’s laboratory proof of immunity to communicable diseases and hepatitis vaccine records
   - BLS, ACLS and PALS Provider Certifications
   - Document confirming that the student has received, read and understands the contents of the Program Student Handbook
   - AANA student identification number
   - Application for Student Membership in the AANA
   - Minnesota Criminal Background Study results (renewed annually)

4. Clinical Evaluations
   - All clinical performance evaluations describing the student’s progress through the Program

5. Student Case Studies
   - Assigned case studies prepared by the student and submitted to the Program (these are returned to the student once they are reviewed, evaluated and a semester grade for the applicable Clinical Practicum has been conferred)
   - Post Anesthesia Patient Assessment forms (reviewed, evaluated and returned at the end of each semester)
APPENDIX IVa: Formatting and Labeling Documents

In order to manage the large amount of documents that are submitted to the program each week, there are requirements for formatting and labeling the documents that you submit to the program. This document describes how documents are to be labeled. Proper labeling helps staff manage the large volumes of documents we receive and ensures that the credentialing documents are filed on time, that you receive credit for submitting assigned work on time, and that others can identify and access the documents efficiently. All documents must be submitted electronically via email or Blackboard. Required formats for specific documents are listed below.

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

Clinical Credentialing Documents Must be submitted as an Adobe Acrobat document (.pdf)

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

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

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

Proof of Liability Insurance: Insurance.LastName.DateExpires

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

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

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

Hepatitis B Titer: HepB.LastName.DateofTiter

Certifications: ACLS.PALS..LastName.DateExpires, HIPPA.LastName

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

Educational Leave Requests: EdLeave.LastName.FirstInitial.DateSubmitted

Incident Reports: IR.LastName.FirstInitial.DateofIncident

Schedule Changes & Ed Leave Requests: LastName.ScheduleChange.DateSubmitted, LastName.EdLeave.DateSubmitted
Clinical Practicum Documents
Templates are downloaded from Blackboard. Please do not change the format. Formats include .xls, .xlsx, .doc, .docx

1. Case Studies (CS) – Submission deadline based on case study portfolio topic and as outlined in your clinical practicum syllabus. Submitted via an email attachment to the Clinical Director. Correct labeling for the eight required case study submissions are as follows:
   - LastName.CS.MonthYear-Cardiac
   - LastName.CS.MonthYear-Rural
   - LastName.CS.MonthYear-Neuro
   - LastName.CS.MonthYear-Pediatric
   - LastName.CS.MonthYear-Geriatric
   - LastName.CS.MonthYear-OB
   - LastName.CS.MonthYear-MajorVascular
   - LastName.CS.MonthYear-Emergency/Trauma

2. Postoperative Rounds (POR) – Monthly, due by the 5th of the following month to your Clinical Practicum course assignments on Blackboard

3. Monthly Case Count Records (MCCR) - Monthly, due by the 5th of the following month to your Clinical Practicum course assignments on Blackboard

Once you have completed your monthly clinical documents and before you submit to Blackboard, correctly label as follows:
   - LastName.NameofDocument.MonthYear

For Example:
Smith.POR.August2015
Smith.MCCR.August2015

REV. 01.2016
APPENDIX V: Student Clinical Evaluation Forms

Go to: Clinical Program Forms Page
-or-
Refer to the "Links" section of the Nurse Anesthesia Program Web address: http://www.smumn.edu/anesthesia and choose SMU Clinical Program Forms

APPENDIX VI: Program Evaluation Forms

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

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

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

APPENDIX VII: Course Evaluation Forms

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

CLINICAL SITE EVALUATION FORM
Go to: Clinical Site Evaluation Form

APPENDIX VIII: Accreditation

PROGRAM ACCREDITATION
Go to: Nurse Anesthesia Program Accreditation

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