

UNIVERSITY OF HAWAII
DEPARTMENT OF NURSING

COURSE OVERVIEW
Spring 2007

Course Number: Nurs 675

Course Title: Advanced Practice Clinical

Course Credit and Hours: 1 to 10 credits (variable-may be repeated up to 10 times)

Placement in Curriculum: Cross-term

Meeting Schedule: Weekly Conferences will be arranged with UH Course Faculty.

Clinical Hours for other students to be arranged with UH Course Faculty and Clinical Faculty (Preceptor) to begin by the second week of the semester.

Capstone Clinical for students who have completed N640 and N621 is recommended to be a full-time experience. The clinical time and course work must be completed at least 1 week prior to the graduation date.

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Catalog Description: Application of concepts and principle of assessment, diagnosis, management, and evaluation of clients in supervised clinical practicum for advanced practice nursing.

Prerequisites: N612, N612L

Co-requisite: None

Course Objectives: By the completion of the course, the student will be able to consistently do the following in relation to their own clinical objectives.

1. Performs appropriate history, physical examination, and diagnostic procedures for clients' complaints.
2. Demonstrates research-based clinical reasoning.
3. Formulates and implements an appropriate and culturally sensitive plan of care for clients.
4. Demonstrates ability to collaborate and consult with other members of the health care team.
5. Provides care based on the highest ethical, professional and practice standards.
6. Evaluates the effectiveness of care provided to clients or populations of clients.

Teaching Strategies:

Each student will be assigned to clinical faculty (preceptor) for 45 hours per credit for a **supervised clinical practicum**. This experience is intended to be an opportunity to 1) integrate knowledge and skills gained in previous semesters, and 2) utilize higher levels of syntactical and inquiry learning. Written assignments are designed to support the learning process. Site assignments for the clinical practicum will be made to allow the learner to experience a variety of practice settings and client populations (such as large systems in the military or HMO, private practice, community health) as well as a mix of physician and nurse practitioner clinical faculty. Practice sites outside of student's own work environment are requested for optimal learning experiences. When desirable, learners will be reassigned to clinical faculty or sites.

Each student, at the completion of 8 credits of N675, will have a capstone experience. The **capstone clinical experience** for the graduate program is a "culminating experience in which students are expected to integrate, extend, critique, and apply knowledge gained in the major" (Wagenaar, 1993). Learning activities must include clinical practicum, and the capstone project, SOAPs, project and/or case studies, small group work, analysis of issues, and/or industry/community involvement. The educational outcomes include decision making, critical thinking, collaborative/professional relationships, oral communications, written communications, and problem solving. This experience offers students the opportunity to enhance knowledge and skills they acquired in previous classes. Collaboration demonstrates teamwork that is vital to the completion and success of their learning experience, just as these skills are necessary in the workplace.

Evaluation Methods:

There are a series of assignments which vary over the course of the program (described below). The assignments over each part of the program are presented in Table 1.

Course Assumptions: Active involvement promotes learning. Knowledge is socially constructed and derives from cognitive, social and emotional learning. Course faculty are available to discuss client problems or clinical issues experienced in clinical practice as needed.

Clinical Objective

Forms are required for several of the assignments, and these forms are attached at the end of the syllabus. Each learner is required to write four to six individualized **learning objectives showing progressive growth as role development occurs**, using the Clinical Experience Agreement (Form C). These objectives must be (1) specific and appropriate for each individual clinical experience, (2) measurable and (3) based on correlating theory courses (acute, chronic, pediatrics, women’s health, family, etc) and core competencies of NP practice guidelines. Redundancy of objectives will not be accepted. Clinical objectives must be typed.

The Clinical Experience Agreement form will be signed and dated by the clinical faculty by the end of the first week of clinical. **Course objectives will be reviewed by the course faculty.** Review of journals, articles, client logs and evaluations from the previous semesters will be useful in developing learning objectives. In addition to this syllabus, be sure to discuss what other expectations and/or evaluation methods will be required by your assigned course faculty.

Regular Written Assignments:

For a summary of assignments and the due dates, refer to Table 1 in this syllabus.

Non-capstone clinical experience (cumulative credits 1 to 8)

Four assignments are required: 1) Journal, 2) Current Evidenced-based Research Article, 3) SOAP note, and 4) Electronic Client Contact Records. Each of these four assignments are to be completed for a total of 4 of each of the four assignments for each credit of N675 taken during the semester. For example, students taking 2 credits over a 16 week semester will do each of the four assignments 8 times throughout the semester. The total number of assignments due and the number of assignments due each week in a 16 week semester for one to four credits per semester is shown in the following table:

Assignment	1 credit / sem	2 credits / sem	3 credits / sem	4 + credits / sem
Journal	4	8	12	16
EBR Article	4	8	12	16
SOAP note	4	8	12	16
Electronic client record	weekly entry	weekly entry	weekly entry	weekly entry

NOTE: The maximum number of assignments per semester is listed in the 4+ credits column. The journal, research article and SOAP notes will be turned into the course instructor via fax, email, regular mail or in person weekly or as agreed upon with the UH course faculty. SOAP notes should be typed in the “clinical notes” section of the Typhon log. These regular assignments will be returned to the student the following week or as arranged with your course faculty. The Electronic Client Contact Record will be recorded on the Typhon website. **All regular written assignments must be completed before a final grade for the semester can be submitted.**

Descriptions of Assignments

1. **Journals** are summaries of clinical experiences, feelings, observations, questions or other data.

Journals should reflect knowledge gained from the EBP article reviewed as it relates to the clinical experience. This journal is also an important tool for communication between the student and course faculty. Expression of feelings related to adapting to the nurse practitioner role, or dealing with difficult situations, is encouraged. The student needs to include information about the acquisition and utilization of new skills and knowledge. The journal entry may set personal goals and evaluate them, and may reflect your progress toward meeting the competencies for your NP specialty available on the website of the National Organization of Nurse Practitioner Faculties (NONPF) at www.NONPF.org. Each journal entry must be 1-2 pages typed.

No late journal entries will be accepted unless prior arrangements are made with UH course faculty. Failure to comply will mean a failure of this element. *Journals are not required of students in the Capstone Clinical.*

2. A copy of a **Current Evidence-Based Research Article** (not more than 5 years old) related to the clinical experience must be submitted with each journal. This should be a research article and NOT a review article. The purpose of reading an article is to build the habit of accessing current data-based research to guide clinical practice as the need arises.

3. **SOAP notes** will be submitted on the electronic client log under the clinical notes section for the particular client. The actual medical records for clients should **not be photocopied** because of HIPAA regulations. **No identifiers** should be included except for date, patient age and gender.

4. Students are required to maintain **electronic client contact records** of each patient encounter during their clinical experiences. An orientation to this electronic client contact record will be provided through a 40 minute web-based video. Students will need the windows media player to access the instructional video. Log on to hawaii.typhongroup.net. This site has a built-in facility number allowing you access once you have your password. You will receive your password via your UH email. The student will update the electronic log by MONDAY evening at 7 PM or at the discretion of your course faculty with all of the clients they have seen from the previous week (Monday though Sunday).

This web-based Typhon record will track the hours required for graduation from the program. Make sure that the time you put into Typhon logs each day accurately reflects the time spent in your clinical setting. Please keep a copy of this record during the course of the program. This log of your clinical experience will be useful when applying for positions or to apply for licensure in different states.

***At least 75% of logged in hours MUST be direct patient care with up to 25% consultation time.**

Late and missing assignments:

No late weekly assignments will be accepted unless prior arrangements are made with UH faculty. A phone call or e-mail detailing your particular circumstances will be sufficient. Unexcused lateness of assignments will result in failure of this element for that week. Failure to remove patient identifiers from a submitted note is a breach of confidentiality and may result in failure of the course. All assignments must be completed to receive a grade for the course.

Periodic Assignments:

Non-Capstone Clinical Experience (cumulative credits 1 to 8):

There are two periodic assignments for **non-capstone clinicals**: 1) evidence-based practice prescription, and 2.) memory aids for practice (a.k.a. "ectopic brain"). See Table 1 for due dates.

1. **Evidence-based Practice Prescription:** Format is provided (Form D). A focused question arising from your clinical experience will lead to a limited literature search of four or five articles. This assignment will provide experience using current research to answer clinical questions.

2. Memory Aids a.k.a. “Ectopic Brain”: This is a small notebook (in addition to a Palm Pilot) that you will create as you go through your clinical rotations. In this notebook you will add information helpful to you in your clinical practice. Examples of entries include:

- how to treat a particular condition
- signs and symptoms of illness
- diagnostic procedures to order
- lab values
- teaching information for patients
- guidelines for staging hypertension, targets for dyslipidemia
- PEARLS obtained from class, preceptor, etc.

Capstone Clinical Experience (cumulative credits 9 to 13)

Students taking cumulative credits 9 to 13 are considered to be in their capstone experience. If the capstone experience is 4 or more credits, 16 SOAP notes will be submitted. These notes should be submitted weekly. If the capstone is less than 4 credits, the number of SOAPS required will be prorated over the experience (see chart above). The Capstone Clinical is recommended as a full-time clinical experience. This concentrated time requires 40 hours per week for a minimum of four weeks with the goal of managing a group of patients with minimal supervision. A specific focus of the capstone experience is working with the rural, underserved, or other vulnerable populations in the community.

There are 2 periodic assignments during the Capstone Clinical Experience:

- 1) Capstone Project,
- 2) Self-Review, based on your Electronic Client Contact Records for the program.

1. The CAPSTONE PROJECT

This project should be a clinically focused project that will contribute significantly to one of your clinical placement sites. A few examples are developing & implementing a specific education program, conducting a quality improvement project, developing and using teaching aids. Use creativity! The proposal for this project is due to your UH faculty by ¼ of the way through your capstone experience. The proposal will include a description of project and projected timeline. At the completion of the project, the student will complete a 4-5 page paper. Guidelines for the paper are listed below. This project will contribute 25 of your total grade for the course.

Grading Criteria:

<u>Proposal:</u>	5
<u>Paper:</u>	
Statement of the Problem	4
Review of the Literature	5
Description of the Project	5
Evaluation of the Project	5
References (APA style)	1

2. The SELF REVIEW:

The **self-review** should be a 3 to 5 page assessment of your strengths and weaknesses in the nurse practitioner role, and the opportunities and threats you see for practicing in the role after graduation. The self-review is designed to prepare you for job interviews, and form the basis for your continued learning after graduation. The reports you can generate from the Typhon Client Clinical Record should be incorporated into your self-review.

Faculty Evaluation of Clinical Performance

Mid-way and at the end of the semester or clinical practicum, the clinical faculty (preceptor) will complete the form, **Evaluation of Student's Clinical Performance** to be submitted to the UH course faculty. Students, clinical faculty and UH course faculty will meet to discuss students progress at mid-semester, end of the semester, and as needed throughout the semester. Students are expected to consult with their clinical faculty for supervision and evaluation on a regular basis. The UH course faculty will provide supervision in conjunction with the clinical faculty to support and observe the students performance.

Standardized Patients – a milestone experience

At the completion of specialty course work (n640, N621, N635, & N633 if applicable), all students will be required to participate in a standardized patient experience. No grade will be awarded; however, the experience will fulfill student graduation requirements.

Evaluation of Clinical Site Students will submit an evaluation of their clinical site to their UH course faculty at the end of the semester during the second site visit (see Form E). Clinical faculty (preceptors) will also submit an evaluation of APN experience form (Form F). These forms are critical to program evaluation.

Textbooks:

Optional:

Buttaro, T, et.al. Primary Care: A Collaborative Practice, Mosby, 2003.

Learners are encouraged to use additional texts from their theory courses as resources for clinical guidelines and symptom evaluation.

Course Grades:

98-100%	=	A+
94-97%	=	A
90-93%	=	A-
88-89%	=	B+
84-87%	=	B
80-83%	=	B-
78-79%	=	C+
74-77%	=	C
70-73%	=	C-
< 70%	=	F

General Clinical Guidelines for University of Hawaii, Manoa School of Nursing:

Client Safety is of utmost concern to faculty, students, and clinical agencies. Failure to maintain an acceptable level of clinical competency will result in failure of N 675. Using practices that jeopardize the emotional or physical safety of clients, including violation of the principles of asepsis, will also result in failure of the clinical course. Students are expected to come prepared each day to provide nursing care based on sound understanding and rationale. Incomplete preparation for clinical may result in dismissal from the clinical site and an unexcused absence. Furthermore, appropriate and professional attire is required for all lab and clinical experiences. Open toed shoes, high heels, midriff tops and shorts are unacceptable attire. Please limit facial jewelry to earrings only. Inappropriate and/or unprofessional attire will result in dismissal from the clinical and an unexcused absence. A lab coat and UH student ID should be worn at all times during your clinical experience.

Physical Jeopardy includes any action or inaction that threatens the client=s physical well-being, including, but not limited to: 1) not maintaining a safe environment such as not removing spillage from the floor; 2) not using side rails when the client is unconscious, confused, sedated, etc.; 3) improper application/use of restraints or other equipment that may result in physical injury; 4) failing to explain the proper use of equipment used in the care of the client; 5) failing to identify the client before initiating therapeutic measures; and/or 6) charting inaccurately.

Emotional Jeopardy includes any action or inaction that threatens the client=s emotional well-being, including, but not limited to: 1) ignoring the privacy of the client; 2) use of words or movements that suggest disapproval or disgust; 3) use of overt or covert threats to get client to respond or Policies as outlined in the *School of Nursing Student Handbook 2000/02* and the *Student Conduct and Discipline* policy located in the appendix of the *University of Hawai=i at Manoa 2001-2002 General and Graduate Information Catalog*, will be followed. The general catalog can be found in the campus bookstore.

In addition, the following policies are also in effect:

Clinical Practice: Unacceptable behaviors include 1) any breach of client confidentiality, duplication of client information for personal use, 2) fabrication or documentation of interventions not performed, 3) performing interventions of which you have no knowledge of the proper procedures, and/or fabricating documentation such as SOAP notes, 4) failing to handle one=s own anxiety appropriately in the clinical setting, 5) repeated use of probing or attacking-type questions in speaking with the client.

A great deal of time and effort goes into negotiating clinical sites for student practicum every semester. Negotiations include a legal agreement between the School and the clinical site; therefore, these assignments are not to be taken lightly. Individual clinical assignments are made by the faculty and specific hours are negotiated between the preceptor and the student at the beginning of the semester. At times those hours might need to be adjusted to accommodate faculty site visits or changes in the preceptor's schedule. Any permanent change in a clinical assignment needs to be negotiated between the student, preceptor, and course faculty or clinical site coordinator and approved by all BEFORE changes are made. Failure to do this might result in a delay in completing clinical course requirements. Clinical assignments are to be treated much the same as any professional assignment---adequate notice needs to be given for illness/other absence from clinical; schedules are to be kept; personal business, such as phone calls, should be restricted to emergencies only. If there is an emergent situation---the course faculty needs to be notified immediately.

This course will follow the academic dishonesty guidelines set forth by the graduate division at the University of Hawaii. Plagiarism will not be tolerated and will result in failure of the course. Students are expected to communicate with and receive confirmation from UH course faculty regarding their scheduled clinical dates and times. No student is to complete her/his clinical experience for the semester without appropriate site visits from UH course faculty.

*If, for any reason, you feel a need to review technical procedures, please contact Ms. Ginny Date in the Learning Center at 956-5327, Webster 309-B to arrange a review session. Adult and professional learning mandates that learners actively seek experiences to develop competency and proficiency as a professional nurse.

Cumulative Credits in N675	1-8 credits	9-13 credits	Due Dates
Concurrent Theory Course Placement	N621, 640, N633, N635 Fall/Spring	Capstone Clinical Summer/Fall	All Students as indicated
Clinical Faculty Evaluation (Preceptor)	20% Form A	20% Form A	Middle and end of semester or capstone
UH Course Faculty Evaluation (Form B)	20%	20%	Middle and end of semester or capstone
SOAP notes	20%	15%	4 per credit over the semester; to max of 4 credits (16 SOAPS)
Learning Objectives (Form C)	5%	5%	End of first week of clinical ***
Electronic Client Contact Record (Typhon)	10%	10%	By 7pm Monday evening
Journal Entries	10%	NA	Weekly
Research Articles	5%	NA	Weekly
Evidence-based Practice Prescription (Form D)	5%	NA	Mid-semester Mar 2, 2007
Memory Aids for Practice (ectopic brain)	5%	NA	Ongoing
Capstone Proposal Capstone Project	NA	5% 20%	Feb 16, 2007 Apr 27, 2007
Self-Review	NA	5%	Apr 27, 2007

Table 1 Overview of assignments and due dates for N675 Advanced Practice Clinical for NPs

UNIVERSITY OF HAWAII AT MANOA, SCHOOL OF NURSING
 ADVANCED PRACTICE NURSING PROGRAM
PRECEPTOR EVALUATION OF STUDENT PERFORMANCE
N675 (1-13 credits)
FORM A

STUDENT _____ DATE _____ COURSE _____

CLINICAL FACULTY _____ SITE _____

To Clinical Faculty: Rate the student in each area with the following scores utilizing their course objectives:

- (3) Above average
- (2) Average (good, steady improvement)
- (1) Below average (slow improvement)
- (0) Unsatisfactory (little or no improvement)

1. COMMUNICATION SKILLS

Establishes general patient acceptance/rapport	3	2	1	0
Provides empathy / support	3	2	1	0
Demonstrates appropriate interviewing skills	3	2	1	0
Demonstrates appropriate patient education skills	3	2	1	0
Presents cases in systematic, organized manner	3	2	1	0

SECTION TOTAL _____

2. KNOWLEDGE AND LEARNING

Knows basic pathophysiology and course of disease	3	2	1	0
Knows basic differential diagnosis	3	2	1	0
Knows appropriate HCM (Health Care Maintenance) parameters for all clients	3	2	1	0
Knows basic psychosocial concepts related to health and illness	3	2	1	0

SECTION TOTAL _____

3. CLINICAL SKILLS

Does appropriate examination	3	2	1	0
Assesses problems correctly (including family / social context)	3	2	1	0
Develops pertinent treatment plans (including patient / family education)	3	2	1	0
Consults effectively as needed	3	2	1	0
Demonstrates appropriate clinical judgment	3	2	1	0
Works with a variety of clients	3	2	1	0
Demonstrates ability to carry out management plan	3	2	1	0

SECTION TOTAL _____



UNIVERSITY OF HAWAII AT MANOA, SCHOOL OF NURSING
ADVANCED PRACTICE NURSING PROGRAM

UHM Course Faculty Evaluations
Of Student Performance
N675 (1-13 credits)
Form B

STUDENT _____ DATE _____

PRECEPTOR / Clinical Faculty _____ SITE _____

UHM Course Faculty _____

TIME SPENT _____ NUMBER OF CLIENTS/
FAMILIES OBSERVED _____

PASS _____ FAIL _____

Rate the student in each area using the following scores and check if each item is completed by student:

- A = 90 – 100%
- B = 80 – 89%
- C = 70 – 79%
- F = <70%

I. COMMUNICATIONS SKILLS (10%)	A	B	C	F	COMMENTS	TOTAL
_____ introduces and defines self as APN student _____ determines how client wishes to be addressed _____ initial time putting client at ease _____ eye contact _____ open-ended questioning _____ directive questioning _____ non-directive facilitation of stated feelings _____ repetition/clarification of stated feelings/history _____ support of expressed feelings _____ use of silence _____ summary of stated history _____ closing comments _____ termination of the encounter						
						___/10 points
II. HISTORY TAKING SKILLS (25%)	A	B	C	F	COMMENTS	TOTAL
A. Reason for Contact / Present Illness (12%) _____ c/c in clients own words _____ last feeling well _____ general health _____ onset _____ character _____ location _____ radiation _____ duration _____ frequency _____ time of day occurring _____ severity / disability _____ progression _____ changes in character _____ associated phenomena _____ what makes it better / worse _____ prior Hx of same _____ contact with others with same _____ prior Rx _____ medications _____ complementary therapies						
						___/12 points

	A	B	C	F	COMMENTS	TOTAL
B. ROS, PMH, FH Concerns (13%) _____ Pertinent ROS (complete per c/c) Systems addressed: _____ Pertinent PMH _____ Pertinent FH _____ Client's Perception						
						___/13 points
III. PHYSICAL EXAM SKILLS (25%)	A	B	C	F	Comments	TOTAL
_____ Complete per c/c _____ organized _____ good technique _____ pertinent systems? <u>List systems examined:</u> _____ _____ _____ _____						
						___/25 points
IV. ASSESSMENT SKILLS OBSERVED (15%)	A	B	C	F	Comments	TOTAL
_____ appropriate to history and physical findings _____ separation of relevant problems _____ complete problem list						
						___/15 points
V. PLAN AND MANAGEMENT SKILLS (15%)	A	B	C	F	Comments	TOTAL
_____ appropriate plan assessment _____ adequate rationale _____ diagnostic studies (Dx) _____ treatment complete (Rx) _____ client / family education (Pt. Ed) _____ plan for follow-up (f/u) _____ inclusion of client / family						
						___/15 points

VI. ORAL PRESENTATION SKILLS (5%)	A	B	C	F	Comments	TOTAL
_____ presents client profile _____ focused, succinct, organized _____ accurate _____ complete / major areas from problem list _____ separate problems in problem list						
						____/5 points
VII. RECORD KEEPING SKILLS (5%)	A	B	C	F	Comments	TOTAL
_____ presents client profile _____ agency format _____ all pertinent positives and negatives _____ separation of problems						
						____/5 points
Total Score						____/100
Faculty Summary: _____						

Areas to work on: _____						

Faculty: _____ Date: _____ Student: _____ Date: _____						



UNIVERSITY OF HAWAII, SCHOOL OF NURSING

ADVANCED PRACTICE NURSING PROGRAM

CLINICAL EXPERIENCE AGREEMENT FORM (OBJECTIVES)

Form C

Student: _____ Preceptor: _____

Address: _____ Clinical Site: _____

Course: N _____ Semester _____ Clinical Address: _____

STUDENT LEARNING OBJECTIVES:

CLINICAL EXPERIENCE AGREEMENT FORM – Continued

PLAN FOR MEETING OBJECTIVES:

EVALUATION MECHANISM:

SIGNATURES:

Student: _____ Date: _____ Phone: _____

Preceptor: _____ Date: _____ Phone: _____

Faculty: _____ Date: _____ Phone: _____

EVIDENCE-BASED PRACTICE EDUCATIONAL PRESCRIPTION Form D

FACULTY: Any faculty can suggest a student complete an EBPRx as a part of clinical practice setting or a seminar discussion. We encourage this as a useful way for students to learn how to approach solving clinical problems by consulting relevant research-based literature. It is not important that you know the answer to the problem already – in fact, the problem could be one that you have not had time to research yet yourself. It is important that you discuss the process and the reason for searching the literature to solve clinical problems. Please follow through by asking the student to present his or her findings to you in your next meeting and providing feedback on the quality of the information and presentation.

STUDENT: Use the format on the reverse side of this paper (*be sure your written answers do not exceed 1 page, single-spaced or 2 pages, double-spaced*) – and address the following:

Activity – class or clinic site (*be specific*)

Problem – e.g. classroom discussion, patient clinical encounter (*be concise and specific in 1-2 sentences*).

Statement of the clinical question – a concise statement of what you intend to research (*this should be only 1 sentence and be an answerable question that will help you solve the problem situation*).

Your best answer now – make a guess based on previous experience or gut feeling (*it's OK to say "I have no idea!"*)

Search strategy – briefly describe in 1-2 sentences how you organized the search (*give your rationale for searching in a specific data base or with a specific search engine and list your search terms and qualifiers*).

Evidence – summarize the type, quality, and number of resources your search yielded in 2-3 sentences (*attach a print out of your best evidence – i.e. abstract or article*).

Evidence-based answers – answer the question specifically that you asked above (*this may not be longer than 3 sentences; 1-2 preferred – write citation source in AMA [Vancouver] format upon which you base your answer*).

How does this change your plan/practice? it's OK to say your current practice is supported by the evidence or that you would deviate from the evidence for a very specific reason (*be sure to clearly explain your reasoning in no more than 3 sentences*).

References

American Medical Association. *Manual of Style*. 9th ed. Baltimore, MD: Williams & Wilkins; 1997.

Friedland JL, Go AS, Davoren JB, Shlipak MG, Bent SW, Subak LL, Mendelson T. ISBN: 0-683-40206-4

Evidence-Based Medicine: A Framework for Clinical Practice. Stamford, CT: Appleton & Lange; 1998.

Sackett DL, Richardson WS, Rosenberg W, Haynes RB.

Evidence-based Medicine: How to Practice & Teach EBM. Edinburgh: Churchill Livingstone; 1997.

Evaluation: (*to be completed by faculty*)

Was the question focused and specific? Yes No

Was the evidence appropriate? Yes No

Grade the overall quality of the information and/or presentation on a scale of 1 to 5.

(5=outstanding; 4=above average; 3=average; 2=below average; 1=poor)

CONTINUED ON REVERSE SIDE

Instructions for completing an EBPRx.doc

Format

EVIDENCE-BASED PRACTICE EDUCATIONAL PRESCRIPTION Due Date _____

Faculty: _____ Student: _____

- Generated during (activity):

- Problem that generated question:

- Statement of the clinical question:

- Your best answer before searching:

- Search strategy you used including database, search engine, and terms:

- What evidence did you find? (Name sources and attach primary evidence):

- Your evidence-based answer to the question:

- How does this change your plan/practice – if at all:

N675 STUDENT EVALUATION FORM
FORM E
NP STUDENT EVALUATION OF CLINICAL ROTATION

Name of Student: _____ Location: _____

Preceptor: _____ Date of Rotation: From _____ To _____

GENERAL	Excellent	Very Good	Good	Fair	Poor	Not Done	Comments
Orientation to Setting							
Objectives – Clarified							
Opportunities to Meet Objectives							
Welcomed as a Team Member							

PRECEPTOR AS TEACHER	All of the time	Most of the time	Sometimes	Rarely	Not at all	Comments
Encourages questions						
Stimulates problem solving						
Freely admits does not know						
Concise/logical						
Available evaluation/supervisor						
Observed you doing history						
Observed you doing PE						
Gives helpful feedback						

Would you recommend other students go to this clinical site? _____ YES _____ NO

Why/why not (please be specific): _____

Was the final evaluation discussed with you? _____ YES _____ NO

Narrative Summary: _____

Student Signature: _____ Date: _____

FAX completed form to:
 Carol Mak
 808-956-7396 (Honolulu)

SCHOOL OF NURSING

MASTER OF SCIENCE PROGRAM

**Clinical Faculty (Preceptor) Evaluation of APN Experience
 Form F**

Course: _____ Period of Evaluation: _____

KEY: 5 = Consistently 4 = Usually 3 = Sometimes 2 = Seldom 1 = No N/A = Not Applicable

I was provided

• a copy of the clinical agreement forms in a timely manner	5	4	3	2	1	N/A
• a copy of the syllabus with student's expectations and relevant evaluation forms (website)	5	4	3	2	1	N/A
• information about how to give feedback about the program	5	4	3	2	1	N/A
• a response to my questions and/or suggestions	5	4	3	2	1	N/A
• information about activities available for clinical faculty development and professional growth (website)	5	4	3	2	1	N/A

The course faculty

• conducted a site observation at least once during the semester	5	4	3	2	1	N/A
• informed of changes in the student's status	5	4	3	2	1	N/A
• provided adequate supervision for the student	5	4	3	2	1	N/A
• informed me of changes in the syllabus regarding schedule, requirements, evaluation methods	5	4	3	2	1	N/A

Note Additional Comments on Reverse Side →

Suggested Format for Presenting Patient Cases
(adapt as needed for preceptor/faculty expectations)

This is a _____ YO M/F patient who presents with:

HPI reveals:

Past Hx:

Med:

Surg:

Psych:

Current Meds:

Allergies:

Social Hx:

Physical Exam Findings:

My working diagnosis at this time is:

Because:

Top differential includes:

1.

This is likely because...../ Unlikely because.....

2.

3.

My plan is to:

Include relevant:

Diagnostics

Pharmaceuticals

Referrals

Education

Follow-Up

Health Maintenance needs were addressed. They were:

Questions/concerns I have about this case are:
