



**MASTER'S OF SCIENCE IN NURSING PROGRAM  
HANDBOOK**

**Georgia College  
School of Nursing**

**Summer 2017 Cohort**

## **Welcome to the Master of Science in Nursing Program**

### **Purpose of the Handbook**

The purpose of the handbook is to communicate important information and promote effective operation of the Master's in Nursing Science program in the School of Nursing. University policies, School of Nursing policies and procedures, as well as information about advising, resources, and operations are provided for easy reference.

Students are responsible for being familiar with information contained in this handbook and in the School of Nursing catalog. Failure to read these sources will not excuse students from abiding by policies and procedures described in them. The School of Nursing reserves the right to make changes in its policies and procedures, and other information in the handbook as deemed appropriate and necessary. All changes will be communicated promptly to students, faculty, and staff. The handbook is prepared and revised annually for the use of administrators, faculty, students, and staff. Suggestions regarding clarification or addition of topics are welcome.

The master's degree program in nursing, and post graduate APRN certificate programs at Georgia College & State University are accredited by the Commission on Collegiate Nursing Education ,655 K Street, NW, Suite 750, Washington, DC 20001, 202-887-6791.

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## **Curriculum**

### **Mission**

*In concert with the Georgia College (GC) liberal arts mission, the School of Nursing is committed to the formation of nurse leaders to engage in evidence-based practice, lifelong learning, and civic participation in a health information intensive environment through the development and mastery of clinical reasoning, professional nursing skills, and values.*

### **Vision**

*The GC School of Nursing aspires to be recognized as a national leader in nursing education. GC nurses will serve at the forefront of the changing healthcare delivery system.*

### **Philosophy**

*The following statements reflect the philosophical values of the GC School of Nursing in relation to the concepts of education, person, environment, health, and nursing.*

#### ***Education***

*Nursing education is an active process where the student develops and masters clinical reasoning, professional nursing skills and values that enable graduates to thrive in a health information intensive environment. The minimal level of education for entry to professional nursing practice occurs at the baccalaureate level and mastery occurs through graduate education and life-long learning.*

- Clinical reasoning is a cognitive process of thinking where data is reviewed and analyzed to improve health outcomes.
- Professional nursing skills are developed through integration of theoretical knowledge and guided clinical practice.
- Professional nursing values are the consistent demonstration of altruism, autonomy, human dignity, integrity, and social justice.

#### ***Person***

*Person is a complex, unique, holistic individual with inherent worth and dignity. The meanings a person attaches to life experiences are influenced by the environment, developmental level, group membership, culture, and ethnicity. The person has the power to identify their own life choices.*

#### ***Environment***

*The environment is the accumulation of physical, physiological, social, cultural, spiritual, economic, and political conditions that interact with and influence the human experience. The interaction is constant and the environment can be altered to influence health outcomes. Nursing can create and sustain a culture of safety and quality health care that can transform the environment by creating a safe workplace that produces optimal patient outcomes.*

## ***Nursing***

Nursing is the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response to actual or potential health problems for health promotion, disease prevention, and advocacy in the care of individuals, families, communities, and populations (American Nurses Association, 2010a, p. 1).

## ***Health***

Health is the dynamic integration of the physical, psychological, spiritual, cognitive, and socio-cultural well-being of individuals, families, groups, and communities. The meaning of health varies between individuals and cultures, and is universally accepted as more than being free of disease or infirmity. Health beliefs and practices are impacted by the affordability and accessibility of health care.

Nursing Faculty Organization Approved 10-07-02, Updated: 01/14/03, 4/3/-03; reaffirmed 11/2009, Updated 4/4/11

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## **Conceptual Definitions for the Organizing Framework**

The organizing framework provides faculty and students with a way of conceptualizing and organizing knowledge, skills, values, and beliefs (Billings & Halstead, 2009). This framework facilitates the creation of courses and the organization of the courses into a cohesive curriculum that enables students to achieve the desired learning outcomes.

In 1860 Florence Nightingale first published “*Notes on Nursing*” in the United States (Skretkowitz, 1993)). From her writings, the concepts of person, environment, nursing, and health have been drawn. These concepts are still considered to be the cornerstones of many nursing theoretical models (Billings & Halstead, 2009). The following statements are Georgia College’s own unique perspectives related to these concepts as they are reflected in our curriculum.

**Person:** The person is conceptualized holistically as a system, whether individual, family, group, or community. Viewing persons in a holistic manner involves appreciation of the biological, psychological, sociocultural, spiritual, and developmental dimensions that make the person unique, unprecedented, and unrepeatable.

**Environment/Society:** The curriculum reflects concepts revealing an interaction between persons and their environment, which has the potential to impact their health. An evolving care system has developed within the context of the socioeconomic, political, and global environment. The system constantly changes in an attempt to meet the health needs of the populations. Nursing demands a professional who is able to serve as client advocate or change agent to assure that clients have access to quality care that is satisfying and cost effective.

**Nursing:** The curriculum reflects selected concepts and processes to construct the meaning of professional nursing practice. At the undergraduate level, nursing is conceptualized as a profession that involves practice as a generalist while the graduate program prepares the professional nurse for practice within a prescribed nursing specialty.

The Bachelor of Science in Nursing (BSN) graduate is prepared for beginning roles caring for individual clients throughout the lifespan in a variety of settings, and for families, groups, and communities as clients and to assume a beginning leadership role in nursing. The Master of Science in Nursing (MSN) program builds on the generalist foundation of the baccalaureate nurse and extends the breadth, depth, and scope of nursing education to inform practice. MSN graduates and students completing postmaster's programs are prepared to assume leadership roles as family nurse practitioners. The Doctor of Nursing Practice (DNP) program prepares nurse leaders for evidence-based practice in both direct patient care and executive roles. This requires competence in translating research into practice, evaluating evidence, applying research in decision-making, and implementing viable clinical and organizational innovations to change practice.

**Health:** In order to understand health as a dynamic multidimensional state, the curriculum explores selected concepts: holistic health, outcomes management, and global health. Holistic health as a human value occurs within the text of a diverse interconnected individual, family, group, and community. Holistic health encompasses health promotion, maintenance, and restoration, achievable through collaborative communication, empowerment, advocacy, and access to health care. The outcomes from the delivery of health care are managed to improve the quality of life and reach the maximal potential of the individual, family, and community. Global health incorporates a worldview in which humankind is interconnected and cultural diversity is appreciated.

Developed 11/ 20/1995; Revisited 11/30//95; 4/2003; reaffirmed 11/2009; 5/26/2011

### **Program Concepts**

The curriculum for undergraduate and graduate programs is designed around **ten nursing-practice concepts:** 1) communication, 2) evidence-based practice, 3) leadership, 4) ethics, 5) cultural diversity, 6) health promotion & disease prevention, 7) advocacy, 8) collaboration, 9) information science/informatics, and 10) professional role. As noted earlier, the graduate program builds upon the undergraduate program.

### **Program Concepts Definitions**

**Communication** is a two-way process of sending and receiving meaningful information that goes beyond the simple transfer of information to the establishment of a relationship between people (Blais & Hayes, 2011).

**Evidence-based practice** is a the conscientious, explicit, and judicious use of current best evidence applied to improve the quality of clinical judgment in making decisions about the care of individuals moderated by patient circumstances and preferences (Blais & Hayes, 2011; Sackett, Rosenberg, Gray, Haynes, & Richardson, 1996).

**Leadership** shapes and shares a vision, by inspiring, enlivening, and engaging others to participate in building consensus for goal achievement (Blais & Hayes, 2011; Kelly, 2008).

**Ethics** is a branch of philosophy that provides an integral part of the foundation of nursing. A code of ethics makes the primary goals, values, and obligations of the profession explicit. It is an expression of nursing's own understanding of its commitment to society. (Fowler, 2008, p. 145).

**Cultural Diversity** is respect, understanding, and sensitivity to the needs between and within cultural groups. Individual diversity may include but is not limited to race, ethnicity, age, religion, gender, sexual orientation, primary language, disability, veteran status, national origin, geographical background and economic status. Diversity extends beyond acceptance; it is the exploration and understanding of individual's uniqueness and differences in a safe, non-judgmental, and caring environment (Blais & Hayes, 2011) (College of Health Sciences).

**Health Promotion & Disease Prevention** is the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities, and populations (also ANA definition of nursing) (American Nurses Association, 2010a, p. 1).

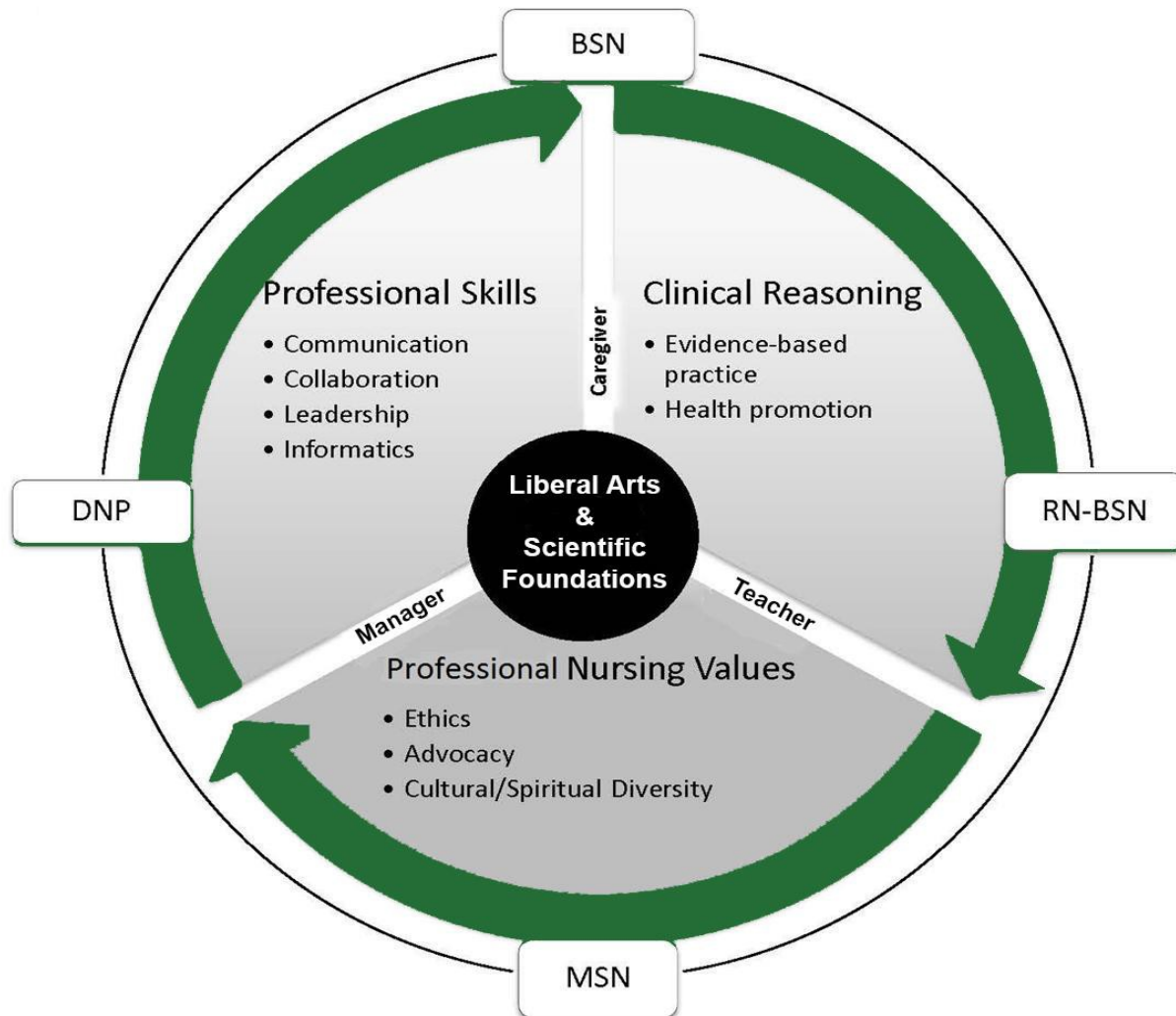
**Advocacy** is a practical partnership between a professional who has expertise to offer to the client who is experiencing inherent ambiguity associated with significant health concerns (Joel, 2009, p. 263).

**Collaboration** is a professional healthcare partnership grounded in a reciprocal and respectful recognition and acceptance of: each partner's unique expertise, power, and sphere of influence and responsibilities; the commonality of goals; the mutual safeguarding of the legitimate interest of each party, and the advantages of such a relationship (American Nurses Association, 2010b, p. 64).

**Informatics** is a combination of computer, information and nursing sciences that facilitates the management and processing of nursing data, information and knowledge and supports the practice of nursing (Staggers & Thompson, 2002, p. 227).



**Professional Role** is the role of a nurse that uses a distinct body of knowledge, university-based education, specialized practice, standards of practice, a social contract, and an ethical code (American Nurses Association, 2010b, p. 15).



**MSN Program Outcomes with Relationship to Program Concepts (Effective Spring 2012)**

Each MSN program outcome is mapped to a curriculum concept.

Concept	MSN Program Outcomes Specialist Practice
<b>Communication</b>	Demonstrate effective communication through collaboration, partnerships, presentations, and scholarly writing.
<b>Evidence-based Practice</b>	Improve healthcare outcomes using scholarly inquiry and analysis of evidence.
<b>Leadership</b>	Demonstrate advanced specialty role leadership and management principles to mitigate risk and enhance healthcare delivery systems.
<b>Ethics</b>	Model use of legal & ethical professional standards for specialized

<b>Concept</b>	<b>MSN Program Outcomes Specialist Practice</b>
	nursing practice.
<b>Cultural Diversity</b>	Partner with the client in the provision of compassionate and coordinated care, based on respect for the client’s preferences, values, and needs.
<b>Health Promotion &amp; Disease Prevention</b>	Use data to monitor and improve the quality and safety of health promotion & disease prevention outcomes.
<b>Advocacy</b>	Advocate for social justice and equity in healthcare by supporting improvements in regulatory, legislative, and public policy development.
<b>Collaboration</b>	Collaborate within nursing and inter-professional team members to foster open communication, mutual respect, and shared decision-making.
<b>Informatics</b>	Demonstrate essential informatics competences to analyze data and evidence-based care practices.
<b>Professional Role</b>	Demonstrate the competencies associated with a nursing specialty role.

Approved Graduate Committee 1/20/1995  
 Reaffirmed 1996, 1997, 1999, 2001  
 Revised 11/24/2003, Revised 6/14/2011, Revised 1/2014

### **Programs of Study**

GC School of Nursing currently offers three MSN Specializations, the family nurse practitioner (FNP), Psychiatric Mental Health Nurse Practitioner (PMHNP) and the Nurse Educator. Examples of programs of study for the graduate level major are found in the Graduate Handbook Appendix A.

The curriculum for the Master of Science in Nursing (MSN) Degree at GC consists of graduate core courses, support courses, and specialty courses. If a student wishes to change MSN focus within the MSN program, the first step is to arrange a meeting with their advisor.

### **Admission, Progression, Graduation, and Certification**

#### **Admission**

Admission requirements are described in the GC Graduate Catalog. Please refer to [Graduate Programs](#) web pages and School of Nursing web pages for more details. Students seeking admission to the MSN degree program may apply online or by downloading a paper application. Paper application and/or supporting materials and application fees are sent to:

**Graduate Admissions Office**  
**Georgia College**  
**Campus Box 107**  
**Milledgeville, GA 31061**

The admissions requirements for the MSN degree program are found in the Graduate Catalog. In addition to University requirements for admission, the MSN degree program requires applicants to meet [technical standards](#) and provide proof of immunization, other health-related information, and liability insurance. Criteria are specified in the Graduate Catalog.

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### **Advisement**

Students are advised according to the procedure described in the GC Graduate Catalog.

Advising at GC is a shared responsibility between students, faculty and staff. Through a network of resources and support, students communicate with advisors to obtain information and guidance aimed at the student's successful completion of degree requirements and preparation for post-master's degree opportunities. An inherent goal of the advising process is for student to gain self-understanding that will inform their decisions regarding academic, career and life goals.

### **Advising Purpose**

The purpose of advising in the graduate nursing program is to assist the graduate nursing students to be successful in their programs of study. Students have either a full-time or part-time program of study, which they must follow once they are accepted into the program. Students in the full-time program may elect if space is available to move to the part-time program after meeting with their advisor and requesting this change. Because of course sequencing, students in the part-time program are not able to move to the full-time program.

### **Specific Advising Aims**

**Aim 1:** Students will receive effective advising consistent with GC, College of Health Sciences, and School of Nursing guidelines.

**Aim 2:** Students will actively participate in the advising process.

**Aim 3:** Successful completion of program of study.

After students are accepted and have regular admission status for graduate study, a program of study will be developed with the Assistant Director of Graduate Programs. The **program of study** outlines the courses required to earn a Master of Science in Nursing specializing as a FNP, PMHNP or Nurse Educator. Once the program of study is on file, students should register for courses as early as possible. Registration is available in [PAWS](#). See the [Academic Calendar](#) for registration dates for more information.

Appointments with academic advisors are encouraged to discuss coursework, programs of study, and opportunities for clinical placement and to release advisor holds for registering for classes.

### **Advisor Responsibilities**

Graduate students can expect their advisors to:

1. Understand and effectively communicate the University policies and procedures.
2. Provide information about and strategies for utilizing available campus resources and services.
3. Monitor and accurately document the advisee's progress toward meeting curricular goals.
4. Discuss and monitor student's electronic portfolio each semester.
5. Maintain confidentiality.
6. Be accessible via posted office hours, scheduled appointments, email, and/or telephone.

### **Advisee Responsibilities**

The advisees are ultimately responsible for their educational success and are expected to:

1. Participate in mandatory graduate orientation and immersion week.
2. Read the University catalog and Graduate Handbook.
3. Schedule regular appointments or make regular contact with their academic advisor.
4. Make use of campus services and resources to enhance your personal and academic success.
5. Be prepared for each advisement meeting with questions and discussion points.
6. Accept responsibility for own decisions.
7. Update and share the electronic portfolio with their advisor each semester.

**[Revised 5/2010, Revised 6/21/11, 4/11/2014]**

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### **Progression**

In order to stay in good academic standing with the University and the MSN degree program, students must demonstrate high academic performance. Policies regarding academic performance are found in the [Graduate Catalog](#)

In addition to these policies, the MSN degree program has the following clinical requirements: Prior to participation in any clinical learning rotation, students must submit evidence of health history and physical exam, TB screening, proof of hepatitis B immunity, professional liability insurance, RN license, current CPR certification, and any additional requirements specified by healthcare agencies.

These documents must be updated annually. Criminal background checks and urine drug screens are a requirement and are completed through PreCheck. Some clinical agencies may have additional requirements (for example orientation to the facility) that students will have to meet.

## **Progression Policies for MSN Students**

1. MSN students are expected to earn a grade of no less than a “B” in all of the MSN clinical courses, no less than a “C” in all non-clinical courses, and must maintain an overall “B” average (3.0) in the MSN program. A grade of “C” or lower in any clinical course requires the student to retake the course to progress.
2. MSN students who earn a rating of “clinically unsatisfactory” in a clinical course will have a grade of “F” assigned for that course, regardless of the class average for the semester. Students who earn a clinically unsatisfactory rating due to the question of competence may not progress in the MSN program.

Clinical Courses for the FNP program are:

- NRS 5480 (Advanced Nursing Assessment)
- NRS 7000 (Primary Care of Adults I)
- NRS 7010 (Primary Care of Adults II).NRS 7030 (Primary Care of Women).NRS 7050 Primary Care of Children & Adolescents)
- NRS 7410 (Primary Care Practicum).

Clinical Courses for Nurse Educator Program are:

- NRS 5480 Advanced Nursing Assessment
- NRS 6120 Implementing Educational Programs in Nursing
- NRS 6121 Integrating Technology in the Healthcare Educator Role
- NRS 6551 Graduate Nursing Practicum.

Clinical Courses for the PMHNP program are:

- NRS 5480 (Advanced Nursing Assessment)
- NRS 7100 Foundation for Psychiatric-Mental Health Nursing
- NRS 7110 Psychiatric Mental Health Nursing I
- NRS 7120 Psychiatric Mental Health Nursing II
- NRS 7200 Practicum in Psychiatric Mental Health Nursing

3. A graduate student whose cumulative grade point average (GPA) falls below 3.0 at the end of a semester will receive a warning from the University. The student and Assistant Director of Graduate Programs will meet to determine whether a return to a 3.0 GPA is feasible based on the remaining coursework. If a 3.0 GPA is not feasible, the student will be withdrawn from the program.
4. A student may repeat only one nursing course in their specific MSN program. If a student fails two nursing courses or the same course twice, they will be denied continued enrollment in their MSN program. Eligibility for enrollment in another MSN program will be determined on a case by case basis by the Graduate Committee.
5. A student who fails a course and has no previous failure may petition the Graduate Committee of the School of Nursing to return to the program and request to retake the course the next time it is offered **based on space availability**. The student will be required to submit to the School of Nursing Graduate Committee the [Graduate Student Petition](#) with accompanying documentation

addressing the student's plans for succeeding in the course. Students who re-enter the MSN program after a failure will do so under the current catalog and current SON requirements.

All candidates for readmission to the MSN program will have their admission status determined by the Graduate Committee of the School of Nursing. Acceptance of previously earned course credits will be at the discretion of the faculty. New: 05/07/09; revised 08/1010; revised 6/11]

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### **Grievances, Appeals, and Petitions**

The School of Nursing (SON) follows the policies and procedures outlined in the University Graduate Catalog regarding academic and non-academic grievances and appeals. These can be found in the Graduate Catalog under [Grievance and Appeals](#).

**Student Concern Form & Flow Chart** can be found at the following website:

<https://intranet.gcsu.edu/cohs-students/student-concern-form>

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### **Readmission to Graduate Studies**

Students who have not been enrolled for one (1) semester (excluding summer) must contact the Office of Graduate Admissions and update their status before they can enroll for the next semester:

### **Graduate Admissions**

**Georgia College**

**Campus Box 107**

**Milledgeville, GA 31061**

**Fax: 478.445.1914**

Students who have not been enrolled for over a year must complete a new application and submit it to Graduate Admissions. All required courses for the MSN degree must be completed within a period of seven (7) years from the date the student begins graduate courses at Georgia College. Any course work, including transient courses, completed more than seven (7) years prior to completion of requirements for the MSN degree will be considered outdated and will not apply toward the MSN degree program.

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### **Transfer and Transient Credit**

Transfer credit applied toward MSN degree requirements from another ACEN or CCNE accredited school may be possible. Contact the Assistant Director of Graduate Programs to inquire. In addition, consult the [University Graduate Catalog](#) for policies related to transfer credit. Students may transfer a maximum of 9 credit hours. Students may take classes at another University as transient students. Students should contact their academic advisor for more information.

## **Synthesis Requirement**

The MSN student is expected to achieve program outcomes as evidenced by depth and breadth of knowledge, a synthesis of data, complexity of skills and interventions, and role autonomy by the end of the program. In addition the NP student is expected to demonstrate that they are educationally prepared **to assume responsibility and accountability** the assessment, diagnosis, and management of the patient, which includes health promotion and/or maintenance as well as the use and prescription of pharmacologic and non-pharmacologic interventions.

The purpose of the synthesis requirement is to measure this achievement. The MSN student will demonstrate successful completion of the program outcomes by:

1. Maintaining a Master's Portfolio during the program that successfully demonstrates the student's mastery of the program outcomes. This electronic portfolio must be started at the beginning of the program and shared with the student's academic advisor at least once during each semester for the advisor hold to be released for the student to register.
2. In addition, NP students are required to successfully complete the Simulated Certification Exam on the first attempt with a score within the acceptable range (see course materials.) Those students not passing the simulated certification exam on the first attempt will be given the option of completing an Oral Examination or working with faculty in a remediation course which includes another simulated certification exam.

## **Master's Portfolio**

Students will receive an orientation to the program outcomes and the requirements for the Synthesis during the initial immersion learning experience at the beginning of the program. Each semester, course faculty will outline in the syllabus the course components to be included in the portfolio.

Emphasis is placed on demonstration of the relevance of coursework for practice. Students and faculty are encouraged to arrange multiple experiences in synthesis and application to practice throughout the program. The process of synthesis should be a scholarly experience that threads throughout the program and is finalized in the last semester. The Master's Portfolio should demonstrate the student's mastery of the program outcomes. Students are required to make an appointment with their advisor for the purpose of reviewing the portfolio each semester. Documentation of a satisfactory portfolio will be signed by the student and the advisor and placed in the student's folder.

## **Oral Examination**

The simulated exit exam will be administered the last semester that the student is in the program. A student that scores below the acceptable level (see course materials) may opt to sit for oral exams before a panel of 3 APRN full-time faculty. The panel will consist of at least one faculty who is certified as a FNP for FNP students or PMHNP for those students.

The remaining two members will represent a specialty population certification. Panel make-up will be dictated by faculty availability.

The student will be given the following mix of case studies and asked to present their patient management and defend their answers with evidence-based research: 1 adult case, 1 pediatric case, 1 women's health case, 1 special population's case.

## Criteria for Scoring Oral Exam

Each section on the exam will be awarded a score as follows:

"S" indicating questions in the sections have been adequately and completely answered without substantive problems noted.

"U" indicating responses to the questions in this section are unacceptable. The answer(s) may be incomplete, contain numerous inaccuracies, and/or based entirely on personal opinion and not scientific evidence.

## Passing and Failing

A student passes the oral comprehensive examination with approval by at least two of the three members of the committee. Grading on the examination will be on a pass/fail basis. In accord with School of Nursing Admission's and Progression policy, a master's candidate may be dropped from the graduate nursing program after a second failure of the oral comprehensive examination, upon the recommendation of the examination committee. **The committee will be responsible for formulating a remediation plan prior to the student making a second attempt.** Completion of degree requirements is not to exceed the period of seven years from the date the student begins graduate courses at Georgia College.

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## Graduation Information

Preparation for graduation happens much sooner than students expect. The University provides policies about graduation in the [Graduate Catalog](#), and online at [www.gac.edu/graduate](#). If you still have questions about graduation, contact your academic advisor or the Registrar.

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## Information for Accessing Certification Applications

American Nurses Credentialing Center (ANCC)/ANA

8515 Georgia Avenue; Suite 400

Silver Spring, MD 20910

800.274.4ANA

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

[Certifies Family Nurse Practitioners]

American Academy of Nurses Practitioners (AANP) Certification Program, Inc.

P.O. Box 12926

Austin, TX 78711



512.637.0500  
512.637.0540 (facsimile)  
[www.aanpcertification.org](http://www.aanpcertification.org)  
[Certifies Family Nurse Practitioners]

Certified Nurses Educator (CNE) Examination  
National League for Nursing  
The Watergate  
2600 Virginia Avenue, NW  
Washington, DC 20037  
800-669-1656  
<http://www.nln.org/certification/index.htm>

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## **Class Information**

### **Location of Classes**

Didactic classes are held online and exams and special lab assignments are at the Georgia College Macon Graduate Center. The specific information regarding the course is found in the Graduate Catalog. For specific information you may call the Graduate Center at 478.752.4278.

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### **Academic Code of Conduct**

The University has formulated a number of policies and procedures with which the student will need to be familiar. Graduate students are expected to comply with all aspects of the Georgia College Student Academic Dishonesty Policies found in the Georgia College Catalog.

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## **Student Academic Dishonesty**

### **I. Policy Statement** (Quoted from GC Graduate Catalog)

Georgia College acknowledges the need to preserve an orderly process with regard to teaching, research, and public service, as well as the need to preserve and monitor students' academic rights and responsibilities. Since the primary goal of education is to increase one's own knowledge, academic dishonesty will not be tolerated at Georgia College. Possible consequences of academic dishonesty, depending on the seriousness of the offense, may range from a revision of assignment, an oral reprimand, a written reprimand, an F or a zero for grade work, removal from the course with a grade of F, to suspension or exclusion from the University.

Academic dishonesty includes the following examples, as well as similar conduct aimed at making false representation with respect to academic performance:

1. Cheating on an examination;
2. Collaborating with others in work to be presented, contrary to the stated rules of the course;
3. Plagiarizing, including the submission of others' ideas or papers (whether purchased, borrowed, or otherwise obtained) as one's own. When direct quotations are used in themes, essays, term papers, tests, book reviews, and other similar work, they must be indicated; and when

the ideas of another are incorporated in any paper, they must be acknowledged, according to a style of documentation appropriate to the discipline;

4. Stealing examination or course materials;
5. Falsifying records, laboratory results, or other data;
6. Submitting, if contrary to the rules of a course, work previously presented in another course;
7. Knowingly and intentionally assisting another student in any of the above, including assistance in an arrangement whereby any work, classroom performance, examination, or other activity is submitted or performed by a person other than the student under whose name the work is submitted or performed.
8. Students accused of academic dishonesty may appeal through the student academic dishonesty procedures in effect at Georgia College.

Students accused of academic dishonesty may appeal through the student academic dishonesty procedures in effect at Georgia College.

The complete Student Academic Dishonesty Policy can be found at:

<http://catalog.gcsu.edu/grad/student-academic-dishonesty.htm>

**Students violating this code should expect to receive an "F" for the course(s) in which the academic dishonesty occurs and to be dropped from the graduate nursing program.**

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### **Compliance with Georgia Law Governing Nursing**

Graduate nursing students are to comply with the law governing the practice of nursing in Georgia. This law is outlined in the [Georgia Registered Professional Nurse Practice Act](#).

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### **Unprofessional Conduct**

Nurses are expected to conduct themselves in a professional manner. Professional behavior is expected in all areas of their lives: academic, work, and personal. The professional standards that are expected of nurses translate to the use of social media as well. Students who through unprofessional conduct are unable to maintain an unencumbered license in their state of practice will be withdrawn from the graduate program.

The Georgia Board of Nursing defines unprofessional conduct for nurses in the following way:

Nursing behaviors (acts, knowledge, and practices) failing to meet the minimal standards of acceptable and prevailing nursing practice, which could jeopardize the health, safety, and welfare of the public, shall constitute unprofessional conduct. These behaviors shall include, but not be limited to, the following:

- a) using inappropriate or unsafe judgment, technical skill or interpersonal behaviors in providing nursing care;
- b) performing any nursing technique or procedure for which the nurse is unprepared by education or experience;
- c) disregarding a patient/client's dignity, right to privacy or right to confidentiality;
- d) failing to provide nursing care because of diagnosis, age, sex, race, creed or color;
- e) abusing a patient/client verbally, physically, emotionally, or sexually;
- f) falsifying, omitting or destroying documentation of nursing actions on the official patient/client record;
- g) abandoning or knowingly neglecting patients/clients requiring nursing care;
- h) delegating nursing care, functions, tasks or responsibility to others when the nurse knows or should know that such delegation is to the detriment of patient safety;
- i) providing one's license/temporary permit to another individual for any reason;
- j) failing to practice nursing in accordance with prevailing nursing standards due to physical or psychological impairment;
- k) diverting prescription drugs for own or another person's use;
- l) misappropriating money or property from a patient/client or employee;
- m) Failing to notify the appropriate party of any unprofessional conduct which may jeopardize patient/client safety.

Authority O.C.G.A. Secs. 43-26-2, 43-26-3, 43-26-5(a)(b)(c), 43-26-10. **Administrative History.** Original

Rule entitled "Definition of Professional Conduct" was adopted as Rule 410-11-.01 on February 6, 1987;

effective February 26, 1987 and renumbered as Rule 410-11-.02 by filing of August 5, 1987; effective

August 25, 1987. **Repealed:** Authority repealed, new authority adopted. F. May 8, 1990; eff. May 28,

1990. Source: Georgia Board of Nursing. Retrieved June 22, 2011 from <http://rules.sos.state.ga.us/docs/410/11/02.pdf>

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## **Attendance Policies**

### **Class**

Graduate students are expected to attend all scheduled classes (both face-to-face and synchronous online) and to arrive promptly. Students who demonstrate excessive absences or tardiness will be counseled individually. Students are expected to complete the sound check prior to each synchronous online class and having a working microphone and headset. In the event of an absence students should:

- Notify the nursing faculty member prior to class if they expect to be absent due to personal or family illness death of a relative/close friend, or for participation in approved co-curricular activities.
- Make arrangements with the nursing faculty member for missed assignments or examination according to the guidelines in individual course syllabi. Students may be given an alternate form of the examination.

It is important that all students understand that many MSN courses include participation in synchronous classes as a component of the grade calculation. Students cannot participate if absent or late; consequently, the grade will be adversely affected by absence or tardiness.

## Academic Evaluation

### Graduate Testing Policy for online courses

A federal requirement has been put into place by the U.S. Department of Education which requires schools to verify the identity of online students. In response to this requirement, Georgia College Graduate Nursing Program has adopted the following policy to ensure the following:

- The student who registers in an online education course or program is the same student who participates in and completes the course or program and receives the credit by verifying the identity of a student who participates in class or coursework.
- The student who registers for an online course may elect either of the following. **Student verification options that are offered by GC Graduate Nursing Program:**
  - Face to Face testing at the Macon Graduate Campus
  - Proctored Examinations

### The Roles and Responsibilities of the Online Student Regarding Proctored Exams

- Student is responsible for locating a qualified proctor and having the proctor complete the *Proctor Agreement* section of the **Student & Proctor Agreement** and getting the completed agreement to the faculty member by the 3rd week of the fall, spring or the 1st week of summer semester.
- The student is responsible for making arrangements with the faculty member to make the exam available to the proctor. The faculty member will communicate the necessary password and login procedures for the exam.
- Student is responsible for any fees charged by the proctor or proctor's institution and for reimbursement of any mailing costs incurred by proctor.
- Student will not bring any books, bags, electronic devices or any other item to the exam except materials identified by the course faculty member as being allowed or needed for the exam.

- Student will provide proper identification to the proctor before the exam can be administered. An example of appropriate identification includes **both** a College ID and a Photo ID (driver's license.)
- Student will not talk with any one during the exam.
- If the student does not show up at the appointed time or is unduly late, the exam will be returned to faculty member identified as a no-show.

### **The Roles and Responsibilities of the Proctor**

Proctor must not be a friend or relative of the student.

The proctor must be one of the following:

- Professional educator
- Education official
- Librarian
- Counselor
- Teacher/administrator at a school (K-college)
- Librarian at a town library
- Hospital educator
- Member of the clergy
- Testing administrator
- Educational services officer for the military

Proctor will email or fax the completed **Student & Proctor Agreement** in advance of the scheduled exam date. The Proctor Agreement Form is located in Nightingale Cafe.

### **Proctor will agree in writing to the following statements:**

1. I am not related to the student.
2. I am not a friend or co-worker of the student.
3. I am not another student.
4. I do not teach in the same discipline as the course for which the student is being proctored.
5. I agree to verify the identity of student prior to taking the exam.
6. I will personally observe the student throughout the entire process and will not provide assistance in interpreting or completing the exam.
7. I will not allow the student to talk with anyone during the exam.
8. I understand that once an exam starts, it must be completed - If the student stops before completing exam it must be taken up and faxed/mailed back to faculty member.
9. I will not copy or reproduce the exam.

10. I will provide an appropriate testing environment and if necessary, the computer equipment and software required.
11. I will keep tests secure until the time of the exam.
12. I agree to collect all exam materials and fax or mail answer sheet/exam to the faculty member identified in the instructions within 24 hours.
13. I will destroy by shredding any test materials that are not required to be mailed back to the faculty.
14. I will return the exam materials no later than 3 days after date of exam if the student has not taken the exam.
15. I will include with the fax or mail package, a signed *Proctor Certification*.

### **The Roles and Responsibilities of the Faculty Member Regarding Proctored Exams**

An online student cannot be required to come to campus for exams. Faculty members who teach online courses and who require proctored exams must accept a request from a student for a proctored exam near his/her home or school at a site mutually acceptable by both the student and faculty member.

The faculty member must send the exam with instructions and password if appropriate to the proctor in a timely fashion. Proctored exams are to be taken during the assigned course exam hour. Faculty must be readily available by phone to the exam proctor and the student, in case issues with administering the exam arise.

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### **Clinical Experiences**

Attendance at all scheduled lab activities is necessary to meet course objectives. Students should report promptly each day to the clinical agency as designated in the course syllabus and clinical rotation schedule. It is the student's responsibility to check the clinical rotation schedule and report to the correct location. Students have responsibility for their clinical learning experience. They should prepare for each clinical and communicate their learning needs to their preceptor and supervising faculty member. Students can participate in clinical hours only when faculty are available for supervision. For example, students should not schedule clinical time during spring break or holidays because faculty may not be working during this time.

In the event of tardiness or absence students must:

1. Notify the clinical agency of anticipated tardiness or absenteeism. Ascertain the name of the person receiving the message.
  2. Contact the faculty member prior to the beginning of the clinical experience if that faculty member was planning to make a clinical visit that day.
- 

### **Professional Experiences**

Students will be required to attend selected lectures, conferences and workshops that enhance their professional development. Students will be notified of these events in advance so that schedules can be planned accordingly.

**Cell Phones and Beepers are to be turned off during class, clinical, or professional activities.**

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## **Classroom**

The University Graduate Catalog provides a description of [methods for determining academic standing](#).

Courses within the Graduate Program evaluate student attainment of learning objectives using a variety of methods specified in course syllabi. The grading scale used in nursing graduate classes is specified below:

- A 91-100**
- B 83-90**
- C 75-82**
- D 66-74**
- F 65 and below**

## **Clinical Evaluation**

Clinical performance is evaluated using a Satisfactory/Unsatisfactory system. The student must earn a satisfactory rating on the clinical evaluation in order to pass the course.

- Students are expected to meet [Technical Standards](#) each semester.
- Students are evaluated by preceptors as well as faculty members in many graduate clinical courses. Students are expected to be familiar with all course specific requirements and evaluation methods as described in course syllabi.
- Evaluation conferences will be held at the end of the semester, and may be conducted at any time deemed necessary by the student and/or preceptor or faculty to discuss progress or problems in meeting course expectations.

**Note: students who are rated as clinically unsatisfactory for a course will be assigned a course grade of "F."**

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## Course Specific Clinical Evaluation

Each clinical nursing course identifies specific expectations for satisfactory clinical performance. These expectations are indicated in course materials, and may include guidelines, checklists, or other forms that describe the course specific requirements for satisfactory clinical performance. Each course also describes the method by which clinical evaluation will be conducted, which may include, but is not limited to, observation of performance by faculty and/or others supervising the student; written assignments; journals; or self-evaluation and components for Master's Portfolio.

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## Criteria for Written Assignments

Written assignments are required in most graduate courses. Because these assignments reflect the student's knowledge of content, as well as professional communication skills, written assignments should be prepared with care. The general guidelines should be followed in addition to any course specific criteria.

1. Typewritten in Microsoft Word and saved as a .doc or .docx document. (It is the student's responsibility to seek assistance with using the Microsoft Office software.)
  2. Written in accordance with APA style (Publication Manual of the American Psychological Association, latest edition guidelines. Purchase of the APA manual is strongly recommended for all graduate students.
  3. Composed using correct sentence and paragraph structure.
  4. Written using correct grammar and spelling.
  5. Documented appropriately with references.
  6. Presented in a professional manner.
  7. Prepared according to criteria specified in the course requirements and The GC Graduate Writing Manual Guidelines.
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## Primary and Secondary Sources in Scholarly Work

Students should be familiar with the differences between and the use of primary and secondary sources in scholarly work. A brief overview may be viewed at:

[http://journals.lww.com/ajnonline/Fulltext/2009/04000/Primary\\_and\\_Secondary\\_Sources\\_Guidelines\\_for.47.aspx](http://journals.lww.com/ajnonline/Fulltext/2009/04000/Primary_and_Secondary_Sources_Guidelines_for.47.aspx)

In essence there are three rules that should guide the writer when selecting resources:

1. **The quality of the article.** Generally, the most up-to-date (written within 3-5 years) articles should be used for references. However, seminal (important & influential) works should take precedence in certain situations.
2. **Primary sources.** The author who did the research was the person who wrote the article.
3. **Secondary sources.** The author refers to an article written by another person.



(“Primary and secondary sources: Guidelines for authors”, 2009)

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## **GALILEO Digital Library**

### GALILEO Digital Library

Students should also demonstrate skill finding peer reviewed resources in the GALILEO (<http://galileo.usg.edu>) database. An online tutorial on this topic, Finding Peer-Reviewed Articles in Galileo, is available at <http://www.galileo.usg.edu/scholar/gcsu/subjects/>. The password access to GALILEO changes every semester. Students can retrieve the password from [PAWS](#). From the Main Menu in PAW, click on the GALILEO link.

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## **EndNote Personal Bibliographic Software**

Students are expected to use the most current personal bibliographic manager supplied by GC to retrieve citation information from digital libraries and to cite references in scholarly papers. GC provides free access to [EndNote](#) personal bibliographic software. The software license allows students to download the EndNote to a flash drive or laptop and to install the software on student personal computers. The software is compatible with Windows and Mac operating systems. Software can be downloaded from all GC campus sites at <http://software.gcsu.edu>. To protect the licensing agreement, the software **cannot** be downloaded from off campus.

The EndNote website provides a variety of tutorials on how to use the software at <http://www.endnote.com/support/ensupport.asp>.

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## **Turnitin**

Faculty reserve the right to require submission of students' paper to [Turnitin](#), or the most current anti-plagiarism software program adopted by the university. Faculty will provide this information in their syllabi.

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## **D2L Learning Management System**

The graduate courses are taught on-line. All courses use D2L learning management system as a support tool and faculty expect that graduate students are computer-literate.

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## Technology Requirements

If you have questions regarding minimum technology requirements for laptop and desktop computers, as recommended by GC, please contact Alex Prather at [alexander.prather@gcsu.edu](mailto:alexander.prather@gcsu.edu).

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## Antivirus Products

Graduate students are expected to use antivirus software. GC currently uses Kaspersky but any reputable antivirus software is acceptable.

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## Technology Resources

Technology resources such as **iPods, iPads, laptop computers, digital cameras**, and other **resources** are available through [GC Library and Information Technology Center \(LITC\)](#). Poster printing services are also available through the LITC services. Printing costs two cents per square inch printed payable through the pay-for-print system with a Bobcat card. It is available to students and faculty. Print time varies with size but may take 30-45 minutes. For additional information about equipment that can be checked out from the LITC, go to <http://www.gcsu.edu/library/itc/itc.htm>.

Computer software can be purchased with significant discounts at [Software Resource & Services](#) because of a University System of Georgia contract. Approved software can be purchased online and postal mailed to the student's home. Additionally, students can download Microsoft Office 365 for free through UNIFY and also get 7GB of storage for use while they are a student at GC. Here is the link for that information. <http://infox.gcsu.edu/content/university-offers-microsoft-office-students-no-cost>

For questions, please contact the Serve Help Desk at 478.445.7378 or via email at [serve@gcsu.edu](mailto:serve@gcsu.edu).

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## Clinical Information

### Clinical Hours

Clinical hours are counted as time under the **direct guidance** of a preceptor or designee for the purpose of fulfilling the requirements of the clinical learning contract.

Reading, self-reflecting, journaling, and/or completing course or clinical assignments **do not** count as clinical time.

Travel and meals **do not** count as clinical time.

The intent of clinical hours is to spend the hours **interacting** with the preceptor and others in learning your advanced practice roles. Interacting is the key word. The purpose of and focus for clinical experiences are to learn the advanced practice or educator role by interacting with and observing others in that role.

Attending conference or webinars for CNE do not apply to clinical time.

## Clinical Requirements

### Documentation Required Prior to Clinical Experiences as MSN Student

The following steps must be completed prior to any clinical learning experience in any setting as a graduate student in nursing.

1. Current professional liability insurance will be arranged for MSN students through the School of Nursing.
2. Current American Heart Association Healthcare Provider Course (CPR) to include one- man and two-man rescue; infant, child, and adult resuscitation; and the use of automated external defibrillators (AEDs).
3. TB test (skin test) annually or chest x-ray, as needed.
4. Hepatitis B immunization and titers per OSHA and CDC guidelines. [29 CFR 1910.1030(f)(1)(ii)(D)] takes into consideration the changing nature of medical treatment relating to Hepatitis B. The CDC is the U.S. Public Health Service (USPHS) agency responsible for issuing guidelines and making recommendations regarding infectious agents. OSHA requires use of the CDC guidelines current at the time of the evaluation or procedure. Copies of the current guidelines and other CDC documents can be obtained on CDC's web site, <http://www.cdc.gov>. The hepatitis B vaccination must be given in the standard dose and through the standard route of administration as recommended in the USPHS/CDC guidelines. The most current CDC guideline regarding Hepatitis B is the Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV and Recommendations for Post-exposure Prophylaxis in Vol 50, No. RR-11, published in the June 29, 2001 MMWR. It recommends that employees who have ongoing contact with patients or blood and are at ongoing risk for injuries with sharp instruments or needlesticks be tested for antibody to Hepatitis B surface antigen, one to two months after the completion of the three-dose vaccination

series. Employees who do not respond to the primary vaccination series must be revaccinated with a second three-dose vaccine series and retested. Non-responders must be medically evaluated.

5. Current unencumbered license to practice as registered nurse in Georgia or state in which practice setting is located.
6. Successful completion of [Self-Study Module](#) on Health Insurance Portability and Accountability Act (HIPAA).
7. Signed [Technical Standards & Physical Exam Form](#) completed by a healthcare provider within. Exam must be updated every two years.
8. Other requirements specified by clinical agencies.

**PLEASE NOTE: In the absence of any update clinical information, graduate students are not eligible to attend clinical experiences.**

**Any clinical hours completed in the absence of updated documents will not count toward the clinical hours requirement.**

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### **Health Insurance for MSN Students**

Graduate students must have their own or family health insurance coverage. Neither the University nor clinical agencies are liable for costs incurred if an injury or illness occurs as a result of clinical practice in the student role. Graduate students are required to ask for a waiver each semester from USG Student Health Insurance Program (SHIP) by completing a form found at <https://www.uhcsr.com/gcsu>

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### **Policy on Background Checks for MSN Students**

MSN students must hold an unencumbered license in the state where they will complete their clinical experience. Criminal background checks and urine drug screens are required for all MSN students by the School of Nursing. . PreCheck is used for this service and the results will be available to clinical agencies that the student is assigned. Information about utilizing PreCheck will be provided to the students during Immersion and Orientation. .

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### **Ordering Student Photo ID**

Students enrolled in clinical MSN courses are expected to have a GC photo ID to identify them as such in clinical settings. Photo ID with the University logo may be ordered through the Georgia College Bobcat Card Services. Students may do this during Immersion and Orientation Week.

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## **Uniform Policy**

Students engaged in clinical activities are expected to dress in an appropriate and professional manner. While traditional nursing uniforms are expected in some clinical settings used for learning by graduate students, the majority of settings require professional street clothing and lab coats with a name pin indicating that the individual is a graduate student in Nursing. Clothing and behavior of the student reflect on the student, the School of Nursing, and the University. Specific uniform guidelines will be discussed in courses with clinical components. Gauged earrings, multiple piercings, exposed tattoos, and nail polish are not allowed in the clinical setting. Educator Focus students will follow all guidelines for the facilities in which they are assigned for clinical experiences. OSHA requires closed toed shoes to be worn in the workplace.

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## **Criteria for Selection of Preceptors**

### **The preceptor/facilitator is a person who:**

- Agrees to assume the responsibilities of the preceptor or facilitator role.
  - Holds a minimum of a Master's degree and has one year of experience as a leader/manager.
  - Has knowledge of agency policies and procedures.
  - Will send a résumé (if a non-nurse) to the School of Nursing or complete the “Preceptor Qualification Record.”
  - Has direct, primary knowledge needed to facilitate learning objectives in the practicum setting.
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## **Expectations of Clinical Preceptors for Nurse Practitioner Graduate Students**

1. Discusses with student the goals set for this preceptorship and the anticipated schedule in the practice setting to accomplish course goals.
2. Agrees to have a nurse practitioner faculty member visit the practice site to evaluate student performance while rendering care and to discuss candidly with that faculty member the quality of student performance.
3. Orients student to the practice site to include emergency procedures, OSHA, fire and safety, and location of evacuation procedures.
4. Develops an environment conducive to student learning. Welcomes student questions and requests for assistance and guides student actions as necessary in situations of uncertainty for the student.

5. Provides feedback on student performance throughout the experience, guiding student in improving assessment strategies, diagnosis, plans of care, and understanding the pathophysiology being encountered in patients under care.
6. Documents the level of performance in writing at the end of the rotation, using the instrument provided by the student, and sharing feedback with student.
7. Notifies the faculty if problems arise prior to the evaluation site visit or thereafter.
8. Helps select patients and or learning experiences that will provide a varied experience within the organization's patient population.
9. Allows student to perform a complete history and physical exam based on the assigned patient's presenting problem.
10. Allows student to generate a working diagnosis, differential diagnoses, or problem list.
11. Allows the student to develop a preliminary plan of care, including medications.
12. Listens to a review of findings and the preliminary care plan for assigned patient and critiques plan for final implementation, helping student to understand why modifications in her/his plan have been suggested, to enable learning to occur.
13. Helps student to understand the cost implications of the management plan for reimbursement under consideration.
14. Allows student to document the care provided using agency procedure and assures that documentation includes those elements of the clinical encounter necessary to continuity of care, third-party reimbursement, and a legally prudent record and affixes signature to record.
15. Appreciates that the student is a learner and should be allowed to function in the setting as a health care provider but may take more time and need more consultation than an experienced provider.
16. Reviews the evaluation criteria to appreciate what competencies are to be evaluated in order to observe for evidence of these throughout the rotation.
17. Completes the electronic evaluation form at the end of the semester.

## **Expectations of Clinical Preceptors for Nurse Educator Graduate Students**

1. Discusses with student the goals set for this preceptorship and the anticipated schedule in the practice setting to accomplish course goals.
2. Agrees to have a nurse educator faculty member visit the practice site to evaluate student performance while practicing educational activities and to discuss candidly with that faculty member the quality of student performance.
3. Orients student to the educational site to include emergency procedures, OSHA, fire and safety, and location of evacuation procedures. .
4. Develops an environment conducive to student learning. Welcomes student questions and requests for assistance and guides student actions as necessary in situations of uncertainty for the student.
5. Provides feedback on student performance throughout the experience, guiding student in improving ability to develop learning outcomes, prepare educational materials, assess student learning, and improve the teaching-learning process.
6. Documents the level of performance in writing at the end of the rotation, using the instrument provided by the student, and sharing feedback with student.
7. Notifies the faculty if problems arise prior to the evaluation site visit or thereafter.
8. Helps select patients and or learning experiences that will provide a varied experience within the organization's client population.
9. Allows the student to take an active role in teaching and learning activities, with direct interaction with nursing students in classroom and/or clinical settings.
10. Listens to the student's evaluation of the teaching learning process for each educational activity and recommends changes for future activities to improve student learning.
11. Helps student to understand accreditation standards, curricular requirements, and clinical placement, and fiscal issues that affect nursing education.
12. Allows student to complete required educational reports and documentation of learner feedback and grades.
13. Appreciates that the student is a learner and should be allowed to function in the setting as an educator, but may take more time and need more consultation than an experienced educator.
14. Reviews the evaluation criteria to appreciate what competencies are to be evaluated in order to observe for evidence of these throughout the rotation.
15. Completes the electronic evaluation form at the end of the semester.

## Policies on Infectious Diseases and Injuries

The GC School of Nursing requires all students accepted into professional nursing programs to maintain proof of immunization status and titers in the clinical documents file (students born before 1959 are not required to provide proof of MMR or Varicella):

Vaccine	Acceptable Alternative Record
Hepatitis B	<ul style="list-style-type: none"><li>• Hepatitis B Declination form</li><li>• Laboratory evidence of Hepatitis B immunity (titers) this is required not alternate</li></ul>
MMR	<ul style="list-style-type: none"><li>• Documentation of physician-diagnosed measles or mumps</li><li>• Laboratory evidence of measles, mumps or rubella immunity</li></ul>
Varicella	<ul style="list-style-type: none"><li>• Laboratory evidence of varicella immunity</li><li>• Laboratory confirmation of disease</li><li>• Physician diagnosed history of varicella or herpes zoster</li></ul>
Tetanus, diphtheria, pertussis	<ul style="list-style-type: none"><li>• Documentation of booster within previous 10 years for tetanus/diphtheria preparations</li><li>• DTaP within 10 years; then follow with TD every 10 years.</li></ul>
Influenza	<ul style="list-style-type: none"><li>• Documentation of yearly vaccination</li></ul>
Zoster	<ul style="list-style-type: none"><li>• Documentation of vaccination if applicable</li></ul>

Updates are available at:

Centers for Disease Control and Prevention. (2014). Recommendations and guidelines: Adult immunization schedule (anyone over 18 years old). Retrieved April 22, 2014, from <http://www.cdc.gov/vaccines/schedules/index.html>

In addition to current immunization status, all nursing students are required to have documentation of either an annual negative PPD or chest x-ray, as needed.

### Standard Precautions

All students engaged in clinical education activities shall adhere to Standard Precautions as outlined at:

Centers for Disease Control and Prevention. (2010, September 29). 2007 guideline for isolation precautions: Preventing transmission of infectious agents in healthcare. Retrieved June 27, 2011, from <http://www.cdc.gov/hicpac/2007IP/2007isolationPrecautions.html>

Centers for Disease Control and Prevention. (2011, April 19). Prevention of MRSA infections in healthcare settings. Retrieved June 27, 2011, from <http://www.cdc.gov/mrsa/prevent/healthcare.html>

United States Department of Labor: Occupational Safety and Health Administration. Blood Borne Pathogens Standard. Retrieved April 25, 2014, from <https://www.osha.gov/html/faq-bbp.html>



## Background

Standard Precautions combine the major features of Universal Precautions (UP) and Body Substance Isolation (BSI) and are based on the principle that all blood, body fluids, secretions, excretions except sweat, nonintact skin, and mucous membranes may contain transmissible infectious agents. Standard Precautions include a group of infection prevention practices that apply to all patients, regardless of suspected or confirmed infection status, in any setting in which healthcare is delivered. These include: hand hygiene; use of gloves, gown, mask, eye protection, or face shield, depending on the anticipated exposure; and safe injection practices. Also, equipment or items in the patient environment likely to have been contaminated with infectious body fluids must be handled in a manner to prevent transmission of infectious agents (e.g., wear gloves for direct contact, contain heavily soiled equipment, properly clean and disinfect or sterilize reusable equipment before use on another patient).

The application of Standard Precautions during patient care is determined by the nature of the HCW-patient interaction and the extent of anticipated blood, body fluid, or pathogen exposure. For some interactions (e.g., performing venipuncture), only gloves may be needed; during other interactions (e.g., intubation), use of gloves, gown, and face shield or mask and goggles is necessary. Education and training on the principles and rationale for recommended practices are critical elements of Standard Precautions because they facilitate appropriate decision-making and promote adherence when HCWs are faced with new circumstances. An example of the importance of the use of Standard Precautions is intubation, especially under emergency circumstances when infectious agents may not be suspected, but later are identified (e.g., SARS- CoV, *Neisseria meningitides*). Standard Precautions are also intended to protect patients by ensuring that healthcare personnel do not carry infectious agents to patients on their hands or via equipment used during patient care. **Depending on the clinical site you are in and the type of patients and procedures encountered, the clinical site may direct you to use Standard or Universal Precautions. You need to clarify with the OSHA officer during your orientation to the clinical site which they are using to comply with OSHA Blood borne Pathogens Guidelines.**

**Universal Precautions.** Universal precautions is an approach to infection control to treat all human blood and certain human body fluids as if they were known to be infectious for HIV, HBV and other bloodborne pathogens, (Bloodborne Pathogens Standard [29 CFR 1910.1030\(b\)](#) definitions).

- Bloodborne Pathogen Standard [29 CFR 1910.1030\(d\)\(1\)](#) requires:

Employees to observe Universal Precautions to prevent contact with blood or other potentially infectious materials (OPIM).

Under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials.

Treat all blood and other potentially infectious materials with appropriate precautions such as:

- Use gloves, masks, and gowns if blood or OPIM exposure is anticipated.
- Use engineering and work practice controls to limit exposure.

OPIM is defined in [29 CFR 1910.1030\(b\)](#) as:

- The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids;
- Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and
- HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

The Bloodborne Pathogens Standard allows for hospitals to use acceptable alternatives [[OSHA Directive CPL 02-02-069](#), (2001, November 27)] to universal precautions:

- Alternative concepts in infection control are called Body Substance Isolation (BSI) and Standard Precautions. These methods define **all** body fluids and substances as infectious. These methods incorporate not only the fluids and materials covered by the Bloodborne Pathogens Standard but expands coverage to include all body fluids and substances.
- These concepts are acceptable alternatives to universal precautions, provided that facilities utilizing them adhere to all other provisions of the standard.
- For compliance with OSHA Standards, the uses of either Universal Precautions or Standard Precautions are acceptable.

The CDC recommends **Standard Precautions** for the care of all patients, regardless of their diagnosis or presumed infection status.

- **Standard Precautions** apply to 1) blood; 2) all body fluids, secretions, and excretions, *except sweat*, regardless of whether or not they contain visible blood; 3) non-intact skin; and 4) mucous membranes. Standard precautions are designed to reduce the risk of transmission of microorganisms from both recognized and unrecognized sources of infection in hospitals.

Standard precautions include the use of: hand washing, appropriate personal protective equipment such as gloves, gowns, masks, whenever touching or exposure to patients' body fluids is anticipated.

- **Transmission-Based Precautions** (i.e., Airborne Precautions, Droplet Precautions, and Contact Precautions), are recommended to provide additional precautions beyond Standard Precautions to interrupt transmission of pathogens in hospitals.

Transmission-based precautions can be used for patients with known or suspected to be infected or colonized with epidemiologically important pathogens that can be transmitted by airborne or droplet transmission or by contact with dry skin or contaminated surfaces. These precautions should be used in addition to standard precautions.

- **Airborne Precautions** used for infections spread in small particles in the air such as chicken pox.
- **Droplet Precautions** used for infections spread in large droplets by coughing, talking, or sneezing such as influenza.
- **Contact Precautions** used for infections spread by skin to skin contact or contact with other surfaces such as herpes simplex virus.  
Airborne Precautions, Droplet Precautions, and Contact Precautions. May be combined for diseases that have multiple routes of transmission. When used either singularly or in combination, they are to be used in addition to Standard Precautions

[2007 Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings](#) [3 MB PDF, 225 pages]. Centers for Disease Control and Prevention (CDC), (2007).

United States Department of Labor: Occupational Safety and Health Administration. Blood Borne Pathogens Standard. Retrieved April 25, 2014, from <https://www.osha.gov/SLTC/etools/hospital/hazards/univprec/univ.html>

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## Accidents and Injury to Students

### Injury/Occurrence Policy

In the case of a student injury during a clinical, the safety and well-being of the student is the first priority. The student must **IMMEDIATELY** notify the faculty member or clinical preceptor responsible for the clinical learning experience. If the student is injured or experiences a high-risk exposure while under the supervision of a clinical preceptor, the faculty member should be notified as soon as safely possible.

The policies of the occupational or employee health department of the institution will be followed. The student should receive the same kind of assessment and care that an employee of the agency would under the circumstances. If the student has sustained a serious injury or has been exposed to blood, body fluids, or hazardous materials, then time is of the utmost importance and the student should receive prompt treatment through the qualified health care provider or the emergency department of his/her choice. Students exposed to blood or body fluids should receive treatment within two (2) hours.

## **Personal Liability and Medical Insurance**

**All students are required to carry personal health and medical insurance.** A College of Health Sciences incident/injury report is to be completed by the student and faculty member as soon as possible after the incident. The faculty member will notify the Director of the School of Nursing (478.445.5122/1076) as soon as possible. The clinical agency may request that an incident report be completed there as well.

Georgia College, the GC College of Health Sciences and the School of Nursing assume no responsibility for the risks of exposure if the student chooses not to inform the appropriate faculty member or clinical preceptor and/or follow the Injury/Occurrence Policy.

## **Blood Bourne Pathogen Exposure**

Students who experience a needle stick, sharps injury, blood splash, or other potentially infectious contact with body fluids during the course of a clinical educational experience are required to report exposures promptly to the faculty member and/or preceptor.

Reporting of blood exposure will not adversely affect a clinical course grade.

Post-exposure prophylaxis shall be offered to students through the agency designated for post-exposure and care according to U.S. Public Health Service Guidelines. Students are required to have health insurance coverage for such follow-ups as neither the clinical agency nor the university or their personnel are liable for the student's health care. The latest guidelines documents may be found at:

Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HIV and Recommendations for Post exposure Prophylaxis (2005) at <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5409a1.htm>

Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV and Recommendations for Post exposure Prophylaxis (2001) at <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5011a1.htm>

Students shall notify the Director of Nursing within 24 hours. 478.445.5122.

Students shall submit a completed GC injury/accident report to the Director's office with two (2) days after incident. This report is required even if an incident report was completed by the clinical agency.

Students are encouraged to make an appointment for free counseling in Student Health Services as desired to help in dealing with concern of exposure.

Students are encouraged to use the following resources for information regarding post-exposure care and prophylaxis:

Exposure to Blood: What Healthcare Personnel Need to Know (2003) published by the CDC and available at:

[http://www.cdc.gov/ncidod/dhqp/pdf/bbp/Exp\\_to\\_Blood.pdf](http://www.cdc.gov/ncidod/dhqp/pdf/bbp/Exp_to_Blood.pdf)

PEPline – National Clinicians’ Post-exposure Prophylaxis Hotline at **1-888-HIV-4911**

## **Other Injury**

1. Notify faculty member or preceptor immediately.\*
2. Initiate injury-reporting system in agency.
3. Report to emergency department or other unit designated by agency for assessment and care.
4. Complete GC Incident/Injury Report and forward to the Office of the Director of Nursing with two (2) days after incident. This report is required even if an incident report was completed by the clinical agency.
5. Notify the faculty member as soon as possible without delaying treatment.

\*\*Students are required to have health insurance coverage for such care as neither the clinical agency nor the university or its personnel are liable for the student’s health care.

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## **ANA Code of Ethics for Nursing**

All professional nurses are expected to incorporate ethics into their practice. Therefore both students and faculty at GC are expected to adhere to the following ANA Code of Ethics:

Provision 1: The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.

Provision 2: The nurse’s primary commitment is to the patient, whether an individual, family, group, community, or population.

Provision 3: The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.

Provision 4: The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.

Provision 5: The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.

Provision 6: The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.

Provision 7: The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.

Provision 8: The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.

Provision 9: The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principle of social justice into nursing and health policy.

**To access the ANA Code of Ethics with Interpretive Statements:**

<http://nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses/Code-of-Ethics-For-Nurses.html>

*American Nurses Association, Code of Ethics for Nurses with Interpretive Statements, Washington, D.C.: American Nurses Publishing, 2015*

## **American Nurses Association Standards**

The following American Nurses Association standards of professional practice guide the educational experience of students and the practice of both students and faculty in the School of Nursing at GC.

### **Standards of Practice**

1. **Assessment.** The registered nurse collects comprehensive data pertinent to the patient's health and/or the situation.
2. **Diagnosis.** The registered nurse analyzes the assessment data to determine the diagnoses or issues.
3. **Outcomes Identification.** The registered nurse identifies suspected outcomes for a plan individualized to the patient or the situation.
4. **Planning.** The registered nurse develops a plan that prescribes strategies and alternatives to attain expected outcomes.
5. **Implementation.** The registered nurse implements the identified plan.
  - A. **Coordination of Care.** The registered nurse coordinates care delivery.
  - B. **Health Teaching and Health Promotion.** The registered nurse employs strategies to promote health and a safe environment.
  - C. **Consultation.** The graduate-level prepared specialty nurse or advanced practice registered nurse provides consultation to influence the identified plan, enhance the abilities of others, and effect change.
  - D. **Prescriptive Authority and Treatment.** The advanced practice nurse uses prescriptive authority, procedures, referrals, treatments, and therapies in accordance with state and federal laws and regulations.
6. **Evaluation.** The registered nurse evaluates progress toward attainment of outcomes.

### **Standards of Professional Performance**

7. **Ethics.** The registered nurse practices ethically.

8. **Education.** The registered nurse attains knowledge and competency that reflects current nursing practice.
9. **Evidence-Based Practice and Research.** The registered nurse evaluates one's own nursing practice in relation to professional practice standards and guidelines, relevant statutes, rules, and regulations.
10. **Quality of Practice.** The registered nurse contributes to quality of nursing practice.
11. **Communication.** The registered nurse communicates in all areas of practice.
12. **Leadership.** The registered nurse demonstrates leadership in professional practice setting and the profession
13. **Collaboration.** The registered nurse collaborates with healthcare consumer, family, and others in the conduct of nursing practice.
14. **Professional Practice Evaluation.** The registered nurse evaluates her or his own nursing practice in relation to professional practice standards and guidelines, relevant statutes, rules, and regulations.
15. **Resource Utilization.** The registered nurse utilizes appropriate resources to plan and provide nursing services that are safe, effective, and financially responsible.
16. **Environmental Health.** The registered nurse practices in an environmentally safe and healthy manner.

Source: (American Nurses Association, 2010b, p. 9-11)

## **Other Information**

### **Nursing International Exchange Opportunities for Graduate Students**

The College of Health Sciences has international exchange agreements with a number of universities. Graduate students in good standing within the University may apply for an international exchange experience during their academic program. Academic requirements and scheduling are negotiated between graduate course faculty at GC and the respective faculty abroad.

For further information on the international exchange possibilities, please visit the [GC International Exchange](#) website and consult Dr. Sallie Coke (sallie.coke@gcsu.edu).

## **Graduate Nursing Pin**

### **Pin Description**

The nursing pin is a replication of the Georgia College seal and bears the University colors of blue, green, & and gold. The center of the pin is gold. The University and specific nursing degree are identified with gold lettering.

In the center of the (Georgia College) seal is the Seal of the State of Georgia, indicating that Georgia College is a public institution.

In the four quadrants around the state seal are four orthodox academic symbols:

- a retort indicating science;
- a book symbolizing the arts;
- a philosopher's lamp for philosophy;
- and a laurel wreath, the symbol for honor and achievement.

Near the bottom, crossing the line separating the two lower quadrants, is the year in which the University was chartered, 1889.

The seal was designed by a faculty committee composed of Dr. J. C. Bonner (chairman), Dr. Ed Dawson, and Miss Janice Hardy."

("Thirty", Vol. XIV, No.28, 7/29/68 Georgia College - Milledgeville, GA)

A small gold Aladdin's lamp has been designated as a chain guard for the nursing pin.

### **Pin Purchase Policy**

1. Only those persons confirmed as having graduated from the Georgia College nursing program may purchase a pin.
2. Graduates of the Georgia College graduate program may purchase the pin with the lettering "Masters of Science – Nursing."
3. Student must contact the university bookstore for specific information about pins and for ordering.

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## **Scholarships, Awards and Honors**

General information concerning scholarships, awards, prizes, and grants may be obtained from the scholarship committee. Contact the [GC Financial Aid Office](#) at 478.445.5149.



### **Georgia Nurses Foundation, Inc.**

The Georgia Nurses Foundations offers scholarships on an annual basis. Visit their website for more information.

### **Georgia Association for Nursing Education (GANE)**

GANE offers the Spillman-Bischoff scholarship for graduate nursing students. Visit their [website](#) for more information.

### **Theta Tau Nursing Scholarship**

Students must be enrolled in graduate nursing and a member of the Theta Tau chapter of [Sigma Theta Tau, International](#). The recipient must have earned 20 hours of graduate credit prior to the year in which the scholarship is awarded. Contact the Theta Tau Chapter of Sigma Theta Tau International (STTI) for more information.

### **Outstanding Graduate Student**

The purpose of the award is to recognize an outstanding graduate student in the areas of clinical performance, community service or service learning, and scholarly activities. Students are encouraged to develop a portfolio which documents their development as a master's prepared nurse, emphasizing the following areas: involvement with national or local nursing organizations in their area of expertise, university involvement, community service in the area of nursing, and the development of an evidence based practice in their area of expertise.

The award is given each spring to students who are graduating. Students whose graduate grade point average falls between a 3.50 and 4.00 will be notified that they are eligible to apply for this award.

Eligible students will submit:

1. A cover letter addressing the criteria
  2. A current curriculum vitae
  3. At least one supporting letter from a preceptor
  4. At least one supporting letter from a faculty member
  5. Other relevant documents
- 

## **Participation in University Community**

### **University-Level Committees**

Graduate students are invited to serve on a number of committees at the University level in order to provide the unique perspective of the graduate nursing student to the group's work. If you have interest in serving on a university-level committee, please contact the Director of the School of Nursing at 478.445.5122/1076

### **Nursing Program Committees**

Several standing and ad hoc committees exist to enable much of the work of the College of Health Sciences and the Nursing Program. If you are interested in serving on the Nursing Faculty

Organization (NFO), please contact the Director of Nursing at 478.445.1076/5122 \*Student representatives will be excluded during admission/progression deliberations.

\*\* Ad Hoc committees may be established by any standing committee or the Director and continue to function until their assignment is complete.

### **GC Graduate Writing Manual Guidelines**

Students enrolled in graduate programs at the Georgia College & State University School of Nursing are responsible for ensuring that assignments and major papers meet the format requirements of the program of study. The Georgia College School of Nursing has adopted the *Publication Manual of the American Psychological Association*, 6<sup>th</sup> edition (referred to as the APA Manual) as the official guide for preparation of written work within all programs. This guide has been developed to assist students in preparation of written work in compliance with the guidelines. This document will also guide the student in adapting the guidelines to meet specific School of Nursing requirements. Please refer to the CG Graduate Writing Manual for complete details.

### **References**

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Joel, L. A. (2009). *Advanced practice nursing: Essentials for role development* (2nd ed.). Philadelphia: F.A. Davis.

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## Appendix

### **Forms**

1. Sample Six Semester Program of Study--FNP
2. Sample Nine Semester Program of Study-- FNP
3. Sample Six Semester Program of Study-- PMHNP
4. Sample Nine Semester Program of Study-- PMHNP
5. Sample Six Semester Program of Study—Nurse Educator
6. Sample Nine Semester Program of Study—Nurse Educator

**FNP Curriculum**

**Total Hours: Course (40) Lab (630)**

**CURRICULUM PLAN Full Time (6 Semesters) Family Nurse Practitioner (FNP)**

**YEAR 1**

**Semester 1 (Summer)**

- NRSNG 5480           Advanced Nursing Assessment /Lab (2-3-3)
- NRSNG 5500           Perspective of Advanced Nursing Practice (2-0-2)

**Semester 2 (Fall)**

- NRSNG 5600           Health Care Research & Statistical Analysis (3-0-3)
- NRSNG 6300           Advanced Physiology & Pathophysiology (3-0-3)
- NRSNG 6410           Nursing Theory: Principles & Applications (2-0-2)

**Semester 3 (Spring)**

- NRSNG 7000           Primary Care of Adults I/Lab (2-6-4)
- NRSNG 5800           Applied Pharmacology (2-0-2)
- NRSNG 6110           Ensuring Health Care Safety (2-0-2)

**YEAR 2**

**Semester 4 (Summer)**

- NRSNG 7010           Primary care of Adults II/Lab (2-6-4)

**Semester 5 (Fall)**

- NRSNG 7030           Primary Care of Women/Lab (2-6-4)
- NRSNG 7050           Primary Care of Children & Adolescents (2-6-4)

**Semester 6 (Spring)**

- NRSNG 7410           Primary Care Practicum/Lab (1-15-6)

**FNP Curriculum****Total Hours: Course (40) Lab (630)****CURRICULUM PLAN Part Time (9 Semesters) Family Nurse Practitioner (FNP)****YEAR 1****Semester 1 (Summer)**

NRS 5500 Perspective of Advanced Nursing Practice (2-0-2)

**Semester 2 (Fall)**

NRS 5600 Health Care Research &amp; Statistical Analysis (3-0-3)

NRS 6410 Nursing Theory: Principles &amp; Applications (2-0-2)

**Semester 3 (Spring)**

NRS 6110 Ensuring Health Care Safety (2-0-2)

**YEAR 2****Semester 4 (Summer)**

NRS 5480 Advanced Nursing Assessment /Lab (2-3-3)

**Semester 5 (Fall)**

NRS 6300 Advanced Physiology &amp; Pathophysiology (3-0-3)

**Semester 6 (Spring)**

NRS 7000 Primary Care of Adults I/Lab (2-6-4)

NRS 5800 Applied Pharmacology (2-0-2)

**YEAR 3****Semester 7 (Summer)**

NRS 7010 Primary care of Adults II/Lab (2-6-4)

**Semester 8 (Fall)**

NRS 7030 Primary Care of Women/Lab (2-6-4)

NRS 7050 Primary Care of Children &amp; Adolescents (2-6-4)

**Semester 9 (Spring)**

NRS 7410 Primary Care Practicum/Lab (1-15-6)

**CURRICULUM PLAN Full Time (6 Semesters) Family Nurse Practitioner (FNP)**

**YEAR 1**

**Semester 1 (Summer)**

- NRS 5480 Advanced Nursing Assessment /Lab (2-3-3)
- NRS 5500 Perspectives of Advanced Nursing Practice (2-0-

**2) Semester 2 (Fall)**

- NRS 6300 Advanced Physiology & Pathophysiology (3-0-3)
- NRS 5810 Advanced Psychopharmacology and Neurobiology (3-0-3)

**Semester 3 (Spring)**

- NRS 7100/L Foundations for Psychiatric-Mental Health Nursing/Lab (2-6-4)
- NRS 5800 Applied Pharmacology (2-0-2)
- NRS 6110 Ensuring Health Care Safety & Quality (2-0-2)

**YEAR 2**

**Semester 4 (Summer)**

- NRS 6410 Nursing Theory: Principles & Applications (2-0-2)
- NRS 7110/L Psychiatric Mental Health Nursing I/Lab (2-6-4)

**Semester 5 (Fall)**

- NRS 5600 Healthcare Research & Statistical Analysis (3-0-3)
- NRS 7120/L Psychiatric Mental Health Nursing II/Lab (2-6-4)

**Semester 6 (Spring)**

- NRS 7200/L Practicum in Psychiatric Mental Health Nursing/Lab (1-15-6)

**PMHNP Curriculum**

**Total Hours: Course (39) Lab (540)**

**CURRICULUM PLAN Part Time (9 Semesters) Family Nurse Practitioner (FNP)**

**YEAR 1**

**Semester 1 (Summer)**

NRSG 5500 Perspectives of Advanced Nursing Practice (2-0-2)

**Semester 2 (Fall)**

NRSG 5600 Health Care Research & Statistical Analysis (3-0-3)

**Semester 3 (Spring)**

NRSG 6110 Ensuring Health Care Safety (2-0-2)

**YEAR 2**

**Semester 4 (Summer)**

NRSG 5480 Advanced Nursing Assessment /Lab (2-3-3)

**Semester 5 (Fall)**

NRSG 6300 Advanced Physiology & Pathophysiology (3-0-3)

NRSG 5810 Advanced Psychopharmacology and Neurobiology (3-0-3)

**Semester 6 (Spring)**

NRSG 7100 Foundations for Psychiatric-Mental Health Nursing (2-6-4)

NRSG 5800 Applied Pharmacology (2-0-2)

**YEAR 3**

**Semester 7 (Summer)**

NRSG 6410 Nursing Theory: Principles & Applications (2-0-2)

NRSG 7110/L Psychiatric Mental Health Nursing I/Lab (2-6-4)

**Semester 8 (Fall)**

NRSG 7120/L Psychiatric Mental Health Nursing II/Lab (2-6-4)

**Semester 9 (Spring)**

NRSG 7200/L Practicum in Psychiatric Mental Health Nursing/Lab (1-15-6)

**CURRICULUM PLAN Full Time (6 Semesters) Nurse Educator**

**YEAR 1**

**Semester 1 (Summer)**

- NRS 5480 Advanced Nursing Assessment /Lab (2-3-3)
- NRS 6115 Role Perspective of the Masters-Prepared Nurse (3-0-3)

**Semester 2 (Fall)**

- NRS 5600 Health Care Research & Statistical Analysis (3-0-3)
- NRS 6300 Advanced Physiology & Pathophysiology (3-0-3)
- NRS 6410 Nursing Theory: Principles & Applications (2-0-2)

**Semester 3 (Spring)**

- NRS 6125 Curriculum Design & Evaluation (3-0-3)
- NRS 5800 Applied Pharmacology (3-0-3)
- NRS 6110 Ensuring Health Care Safety & Quality (2-0-2)

**YEAR 2**

**Semester 4 (Summer)**

- NRS 6120 Implementing Educational Programs in Nursing (3-6-5)
- NRS 6120/Lab

**Semester 5 (Fall)**

- NRS 6121 Integrating Technology in the Healthcare Educator Role (3-6-5)
- NRS 6121/Lab
- NRS 6500 Graduate Nursing Practicum Development (1-0-1)

**Semester 6 (Spring)**

- NRS 6551 Graduate Nursing Practicum (2-12-6) NRS 6551/Lab



**Educator Curriculum****Total Hours: Course (39) Lab (405)****CURRICULUM PLAN Part Time (9 Semesters) Nurse Educator****YEAR 1****Semester 1 (Summer)**

NRSNG 6115                      Role Perspective of the Masters-Prepared Nurse (3-0-3)

**Semester 2 (Fall)**

NRSNG 5600                      Health Care Research &amp; Statistical Analysis (3-0-3)

NRSNG 6410                      Nursing Theory: Principles &amp; Applications (2-0-2)

**Semester 3 (Spring)**

NRSNG 6110                      Ensuring Health Care Safety (2-0-2)

**YEAR 2****Semester 4 (Summer)**

NRSNG 5480                      Advanced Nursing Assessment /Lab (2-3-3)

**Semester 5 (Fall)**

NRSNG 6300                      Advanced Physiology &amp; Pathophysiology (3-0-3)

**Semester 6 (Spring)**

NRSNG 6125                      Curriculum Design &amp; Evaluation (3-0-3)

NRSNG 5800                      Applied Pharmacology (3-0-3)

**YEAR 3****Semester 7 (Summer)**

NRSNG 6120                      Implementing Educational Programs in Nursing (3-6-5)

NRSNG 6120/Lab

**Semester 8 (Fall)**

NRSNG 6121                      Integrating Technology in the Healthcare Educator Role (3-6-5) (

NRSNG 6121/Lab

NRSNG 6500                      Graduate Nursing Practicum Development (1-0-1)

**Semester 9 (Spring)**

NRSNG 6551                      Graduate Nursing Practicum (2-12-6) NRSNG 6551/Lab

## STUDENT HANDBOOK RECEIPT

I have read the Georgia College Graduate Student Handbook and agree to adhere to the policies stated herein.

Student Name (Please Print): \_\_\_\_\_

Student Signature: \_\_\_\_\_

Student Signature Date: \_\_\_\_\_