TABLE OF CONTENTS

Faculty Directory ............................................................................................................. 4
Student Affairs and Support Services................................................................. 5
Frequently Asked Questions ......................................................................................... 6
Practicalities .................................................................................................................. 9
  Change of Address, Phone or Name................................................................. 9
  Email ..................................................................................................................... 9
  Role of the Faculty Advisor .............................................................................. 9
  Health Insurance ................................................................................................. 10
  Identification Cards ......................................................................................... 10
  Library Cards ..................................................................................................... 10
  Registration ....................................................................................................... 10
  Tuition and Fees ............................................................................................... 11
  UCInetID ........................................................................................................... 11
  Computer Lab Usage Policy (Berk Hall) .......................................................... 11
Introduction .............................................................................................................. 14
  Purpose of the Handbook .................................................................................. 14
  Program Description .......................................................................................... 14
  Accreditation ....................................................................................................... 14
School of Nursing Information ............................................................................... 15
  Mission ................................................................................................................ 15
  Vision .................................................................................................................... 15
  Philosophy .......................................................................................................... 15
  Master of Science in Nursing Science Program Goals .................................... 16
  Expected Student Outcomes, NP Track ............................................................ 16
  Specialty Competencies, FNP and AGPCNP Concentrations ......................... 17
University Policies .................................................................................................... 18
  Academic Calendar ............................................................................................. 18
  Academic Disqualification ............................................................................... 18
  Academic Honesty ........................................................................................... 18
  Advancement to Candidacy ............................................................................. 19
  Enrollment .......................................................................................................... 20
  Financial Aid ....................................................................................................... 20
  Holidays .............................................................................................................. 21
  Lapse of Status ................................................................................................ 21
  Leave of Absence for UCI Graduate Students .............................................. 22
  Master of Science Transfer Policy ................................................................. 22
  Readmission Policy ......................................................................................... 23
  Residency Requirements ................................................................................... 23
  Withdrawal Policy .............................................................................................. 23
**FACULTY DIRECTORY**

Please see the following link for faculty:

http://www.nursing.uci.edu/faculty.asp
**STUDENT AFFAIRS & SUPPORT SERVICES**

Student Affairs & Support Services is a primary resource for student information, advice, and assistance. Academic Counselors advise current and prospective students on admission and academics, in person, on the phone or by email. They are aware of all University policies and School requirements. Academic Counselors review and provide expert counseling on most of your paperwork during your program of study, including petitions for part-time study, leaves of absence, and transfer of coursework. They work closely with the MS/NP Program Director to approve your program of study, coursework, and advancement to candidacy. Academic Counselors are available to discuss any issue related to your matriculation as a graduate student at UC Irvine. They refer students to appropriate and extensive campus resources at UCI to support student success and wellbeing, including assistance with learning skills, psychological support, financial aid, housing, student disability issues, available tutoring, or other resources.

**LOCATION:**

Student Affairs & Support Services is located in 106 Berk Hall. Berk Hall is Building Number 802 on the campus map.

**OFFICE HOURS:**

Monday through Friday: 8:00 am to 12:00 and 1:00pm to 5:00pm
Closed from 12:00 to 1:00pm for lunch

**WEBSITE:**

http://www.nursing.uci.edu

**EMAIL:**

Graduate Programs Email Address: gnsao@uci.edu

**ADVISING STAFF CONTACT INFORMATION:**

Julie Aird, Director of Student Affairs (949) 824-1514 jaird@uci.edu

Tina Nguyen, Academic Counselor (949) 824-1514 tinahn3@uci.edu
**FREQUENTLY ASKED QUESTIONS**

**General Questions:**

*Where can I purchase course books?*
Required and recommended texts for courses in the Nurse Practitioner program may be purchased at the UCI Bookstore and/or through online vendors (e.g. amazon.com). Both required and recommended texts are course-specific and can be found in individual course syllabi.

*Where can I park on campus?*
All students must purchase a parking permit in order to park on campus at UCI. UCI Transportation Services offers a number of options to students interested in purchasing permits; visit [http://www.parking.uci.edu/](http://www.parking.uci.edu/) for more information. Long-term parking permits can be purchased at the Transportation Services office or through its website. Short-term, one-day permits can be purchased at parking kiosks located throughout campus or at the Transportation Services office.

*How can I get a name badge?*
You must have a name badge prior to starting clinical rotations. Picture ID badges will be taken at the new student orientation. While in clinic students are expected to wear their name badge at all times.

*Where will classes be held?*
Room assignments will be determined one week prior to the start of each quarter and students will be notified by email.

*Do I have access to UCI libraries?*
Yes. All NP students have access to the libraries at UCIMC and on campus. The library has a list of all incoming students. You will be assigned a UCInetID number in the fall to facilitate remote access to library resources. **Do NOT lose your UCInetID.**

**Clinical Questions:**

*Do I need to find my own clinical preceptor?*
Students are encouraged to identify **two** preceptors to augment clinical learning experiences. UC Irvine is responsible for coordinating and supervising students’ clinical experiences. To ensure timely graduation and acquisition of clinical competencies specific to their clinical concentration students will need to submit new preceptors for program approval (See Appendix E). FNP concentration students are encouraged to identify an OB/GYN and a primary care site (inclusive of pediatric population); AGPCNP concentration students are encouraged to identify a geriatric-specific preceptor which may include outpatient or SNF as well as a primary care site. For legal reasons, the University of California, Irvine must vet and approve the preceptor/facility, complete an affiliation agreement between the preceptor/facility, and provide an orientation to our program to ensure the student is able to be successful in completing the
objectives and obtaining the necessary competencies for that clinical rotation. This process must occur prior to student assignment and may take an average of 6 months.

Can I request a clinical preceptor?
Yes. If you have a preceptor request for an established preceptor who has worked with UCI NP students in the past, discuss this with Dr. Susan Tiso, the Clinical Education Coordinator. If you request a preceptor who is new to our program, you must provide the Operational Support Analyst with a completed New Preceptor/Clinical Site Information Form (see Appendix E). The Nurse Practitioner Program will contact the potential preceptor to determine whether it is an appropriate clinical placement for a Nurse Practitioner student. Please note that requests for self-selected preceptors should be made well in advance of clinical rotations; the Program must set up an affiliation agreement that requires an average of six months to finalize.

Is there a dress code for clinical rotations?
Appropriate dress is required in clinical rotations. You must wear professional attire, a clean and pressed UCI Nursing Science lab coat with your name tag, your stethoscope, and closed-toed shoes. See Professional Attire policy.

When do I start my clinical rotations?
Clinical rotations will begin the second quarter, 1st year, of the program (January).

When do clinical rotations occur?
Clinical rotations occur as scheduled with your preceptor and based on his/her availability. Some preceptors may be able to provide weekend hours; however, this is not the norm, as you will be working in outpatient primary care. The Clinical Education Coordinator will need to be notified and available if you are scheduled after hours or on weekends. This is your responsibility.

Where can I get malpractice insurance coverage?
The three companies listed below currently provide malpractice insurance for Nurse Practitioners. You must obtain malpractice coverage as a student Nurse Practitioner before you are allowed to start your clinical rotation. Students are required to upload copies of their malpractice insurance to the Typhon Health Portal. Instructions on how to upload your clinical documents can be obtained from the Operational Support Analyst.

NSO (Nursing Service Organization)
800-247-1500
http://www.nso.com/

CM&F (Cottrell, Mitchell & Fifer)
800-221-4904
http://www.cmfgroup.com/
What if I don’t have all of my required documents for clinical practicum?
Any required documents missing from a student’s file (current copy of RN license, BLS certification, current immunizations, TB screening results, current insurance, background check, etc.) will delay clinical placement. It is the students’ responsibility to upload current documents throughout the program as renewals occur. Documents are uploaded to the Typhon Health Portal and are checked by the UCI Nursing Science Operational Support Analyst to make sure students are in compliance.
**PRACTICALITIES**

**CHANGE OF ADDRESS, PHONE OR NAME**

All local addresses, permanent addresses, and telephone numbers must be maintained through the UCI Office of the Registrar. Students can update their information through the Student Access program offered by the Office of the Registrar; visit [http://www.reg.uci.edu/access/student/welcome/](http://www.reg.uci.edu/access/student/welcome/). The following information can be updated online: local address and phone number; permanent address and phone number; next of kin address and phone number; e-mail address release.

Students who need to change their name on UCI records should refer to this website for instructions: [http://reg.uci.edu/request/changename.html](http://reg.uci.edu/request/changename.html)

Students should also inform Nursing Science Student Affairs of any changes or updates to their contact information.

**EMAIL**

All students have an email account based on their UCInetID with the Office of Information Technology (OIT). *Faculty, staff, and students will use this address for official communication.* The School of Nursing will frequently communicate with the nursing students through your UCI email. **IT IS IMPORTANT TO CHECK EMAIL DAILY. Students must respond to faculty & staff email within 48 hours.** Additionally, in summer, students are expected to check and respond to their UCI email at least twice a week, as faculty will be communicating critical information regarding clinical placements. Students may direct questions regarding email services to OIT at [oit@uci.edu](mailto:oit@uci.edu).

**ROLE OF THE FACULTY ADVISOR**

All students in the School of Nursing are assigned an advisor upon entry to the graduate program. Faculty advisors are specifically focused on the professional development of students. They are familiar with strategies for program success and can direct students in seeking resources. It is important to meet with your advisor regularly and keep them apprised of your progress in meeting program objectives.

Student Affairs will provide students with their faculty advisor’s contact information during orientation.
HEALTH INSURANCE (UC SHIP)

The University of California requires all students to have major medical health insurance as a non-academic condition of enrollment. All full and part-time undergraduate and graduate students with a USHIP/GSHIP fee assessed are automatically enrolled in, and charged for, the University of California Student Health Insurance Plan (UC SHIP). Students who demonstrate comparable health insurance coverage may submit an online request to waive out of UC SHIP. Note: Once granted, the waiver is in effect for the current term and the remainder of the academic year. A new waiver request must be submitted at the beginning of each academic year.

For details about the program, or waiving out, visit the website at http://www.shs.uci.edu/Health_Insurance_Privacy/Insurance.aspx.

IDENTIFICATION CARDS

A UC Irvine photo ID is required when conducting business with many University offices such as the UCI Libraries and Recreation Facilities. Your initial card is free. Photo I.D. cards can be obtained at the UCI bookstore located in the UCI Student Center. Please know or bring your student ID number when you plan to obtain your photo ID.

LIBRARY CARDS

Library users must have a valid library card to check out material. An individual library card is reserved for your personal use and may not be loaned or transferred. Library cards must be activated in person at any of the UC Irvine Libraries Loan Desks. Possession of a library card does not guarantee access to all library material or services. Please contact the Library at (949) 824-6836 or visit http://www.lib.uci.edu/ for general information. UCI Photo IDs are used as library cards for current UC Irvine students, faculty, and staff. For those without UCI Photo IDs, library cards are issued at no charge. Valid photo identification and proof of current UCI enrollment or employment is required.

REGISTRATION

Students register online through the webreg system which can be accessed through the Registrar’s website. You will need your UCI netID and password to log into the system to register. You can locate your classes through the online Schedule of Classes at: http://websoc.reg.uci.edu/perl/WebSoc. Please select Nursing Science as the department to view Nursing Science courses. Graduate courses are coded 200 to 400. To view your registration window, please access Student Access. http://www.reg.uci.edu/access/student/welcome/

For a video tutorial on how to use the webreg system, please visit the Registrar’s website at: http://www.reg.uci.edu/registrar/soc/webreg.html
TUITION AND FEES

Questions regarding tuition and fees should be directed to Campus Billing Services at (949) 824-2455 or http://www.fs.uci.edu/billing/general-information-about-billing/. Students can also check the UCI Office of the Registrar for information regarding fees and fee deadlines: http://www.reg.uci.edu/navigation/fees.html

UCInetID

Each student that enters UC Irvine is assigned a unique UCInetID that allows access to UCI's various electronic services and resources, including a UCI e-mail account, online registration (WebReg), online student accounts and billing (Zot Account Online), electronic voting, and personal server space for academic projects.

Because UCInetIDs are used to identify and authorize you as a UCI student, you must manually activate it through the OIT website (https://activate.uci.edu/activate/menu.php). You will need your 8-digit Student Identification Number, your date of birth, and the last four digits of your Social Security Number (SSN). Your UCInetID is for your individual use only. You should not share your password with other individuals.

COMPUTER LAB USAGE POLICY

Eligible Users - The computer lab is open only to School of Nursing faculty, staff and currently enrolled students. All other users are asked to use the university’s Office of Information Technology (OIT) open labs. A listing of labs operated by OIT is available on the website at: http://www.oit.uci.edu/labs/.

1. General Usage
   a. The lab is available to students for course work during computer lab hours of operation (Monday-Friday; 8:00 a.m.-4:30 p.m.) and when no classes are scheduled in the room.
   b. Computers are available on a first-come, first-served basis. Computers left unattended for more than 15 minutes will be made available to other users.
   c. Administrative Staff are not available to assist with users’ academic work or other related tasks and cannot do computer work on the users’ behalf.
   d. Problems with computer lab hardware, software or other equipment should be reported to the Assistant Dean in 252G, x4-0696.
   e. Users are to clean up the area around the computer they used as they leave. This includes removing of storage devices, placing trash/paper in bins, and pushing in the chair.
f. Food is not permitted at the computer tables at any time. (Please use the lounge at the back of the room for eating). Water in covered containers or bottles is allowed at the computer tables.
g. The computer resources are for academic purposes only. Use of computer resources for personal, non-University, purposes is prohibited.
h. Persons using the lab assume responsibility for any damage they cause to equipment.
i. Faculty and administrative staff are the appointed enforcers of the lab policy. They are responsible for ensuring that equipment is not being abused and for determining appropriate use of work in the computer lab. Circumstances not covered by this policy shall be at the discretion of the administrative staff.

2. Lab Policies
   a. Users are not permitted to install, modify, or delete any software on lab computers or change the desktop wallpaper, screen saver or add/delete shortcuts or icons.
   b. No user-supplied equipment, other than USB storage devices and audio headphones may be connected to the computers in the lab.
   c. User data files are to be saved to their own storage device such as USB memory stick. Files saved to the local hard drive are subject to deletion at any time without warning.
   d. The School of Nursing is not responsible for any damage to user data files or equipment.
   e. Users are expected to keep noise to a minimum. Cell phones, pagers and mobile communication devices must be turned off or set to vibrate/silent. Calls must be taken outside the lab.

3. Internet and Network Policies
   a. Chatting, instant messaging, and online game playing are strictly prohibited in the lab.
   b. Downloading of copyrighted material or visiting peer-to-peer download sites is strictly prohibited.
   c. Visiting internet sites of an inappropriate nature or those that may be considered offensive by other individuals is strictly prohibited.
   d. Connecting any personal computer equipment except USB devices or audio headphones to the lab’s network can is strictly prohibited.

4. Printing
   a. Printing Services are only available for select courses and/or special activities.
   b. It is requested that large print jobs be printed double-sided.
   c. Printing of all jobs must be completed by closing time.
5. **Resources**

   It is the responsibility of the student to be familiar with the software packages they intend to use. Online help may be the best authority. If all else fails, students should direct their questions to their professor/instructor.

6. **Penalties**

   Users found to be in violation of this policy may be asked to leave the lab, have their privileges revoked, or be referred to the Assistant Dean for review and action.
INTRODUCTION

PURPOSE OF THE STUDENT HANDBOOK

Welcome to the University of California, Irvine, Sue and Bill Gross School of Nursing, Master of Science (MS) in Nursing Science program. The Nurse Practitioner (NP) track, is also called the NP program, and includes the Family Nurse Practitioner (FNP) and the Adult/Gerontological Primary Care Nurse Practitioner (AGPCNP) concentrations.

This handbook will provide you with essential information about the NP program. We urge you to carefully review this document and others provided to you by the University to strengthen your understanding of our philosophy, mission, policies, and procedures. This handbook is prepared in conjunction with the policies expressed in the UC Irvine (UCI) General Catalogue (http://catalogue.uci.edu/), and both serve as excellent resources for students.

PROGRAM DESCRIPTION

The UCI NP program prepares competent nurse practitioners who possess the knowledge, skills, and abilities in physical diagnosis, psycho-social assessment, and management of health and illness needs to assume responsibility for the primary ambulatory health care needs of underserved and insured individuals and family members both autonomously and in collaboration with other healthcare providers. Additionally, the program prepares nurses to evaluate and integrate evidence-based research as a cornerstone of clinical practice, and to function as interdisciplinary consultants and patient advocates.

Registered nurses complete the program with a Master of Science in Nursing Science degree (MS) in one of two population-focused specialties: Family NP or Adult/Gerontological Primary Care NP. The program includes classroom studies, research, laboratory activities, and individual preceptored clinical experiences. Upon completion of the program, NP students are eligible to take the American Nurses Credentialing Center’s or American Academy of Nurse Practitioner’s National Certification Examinations in their area(s) of specialization.

ACCREDITATION & APPROVAL

UCI is fully accredited by the Senior Commission of the Western Association of Schools and Colleges. The UCI Master of Science Program is fully accredited by the Commission on Collegiate Nursing Education (CCNE) http://www.aacn.nche.edu/ccne-accreditation and the Nurse Practitioner Track is approved by the California Board of Registered Nursing.

1 “Accréditation.” UCI General Catalogue, Volume 49.
SCHOOL OF NURSING INFORMATION

MISSION OF THE SCHOOL OF NURSING

Our mission is to advance the science of health and healthcare through innovative research, teaching, and clinical practice, and to educate nursing professionals who inspire optimal health and well-being in individuals, families, and communities.

VISION OF THE SCHOOL OF NURSING

Our vision is to transform the nursing profession by preparing pioneers in research, education, and practice to build innovative, inter-professional models of compassionate community-based health care.

SCHOOL OF NURSING PHILOSOPHY

The philosophy of the Sue and Bill Gross School of Nursing is aligned with the academic goals expressed by UC Irvine and emanates from the mission and goals of both UC Irvine and the University of California; our philosophy applies to both graduate and undergraduate programs.

Nursing is interdisciplinary and collaborative in its art and its science. Together with other health professionals, the professional nurse addresses health care needs of individuals, families, and groups from diverse backgrounds. Health care needs range across the health-illness continuum from health promotion and wellness to intervention, treatment, rehabilitation, restoration, and palliation in response to illness.

Professional nursing practice can occur in any environment and includes clinical practice, research, education, and leadership roles. Nursing practice is guided by a set of ethical principles that include a commitment to service and quality health care for all without regard to culture, race, gender, or social status. Each person with whom nurses interact possesses a unique set of biological, behavioral, socio-cultural, and spiritual characteristics. It is the responsibility of the professional nurse to understand and respect these characteristics and their role in the well-being of the individual. It is the right and responsibility of the individual, family, or group to make autonomous health care decisions and to collaborate with nurses and other health care professionals in their care.

Nursing science and the evidence for nursing practice is derived from research that is both basic and applied. Professional nurses evaluate the evidence when considering care
alternatives. They participate in the research process to advance nursing practice and nursing science.

Nursing students are unique individuals with diverse backgrounds and life experiences, which enrich the educational environment for all students. Nursing students require substantive backgrounds in the theory and practice of nursing as well as in related disciplines including the biological, social, behavioral, medical, pharmaceutical, and biomedical sciences. They also require guidance to achieve increasingly complex levels of socialization, critical thinking, written and oral expression, and research skill based on their educational level. Nursing students have the responsibility to actively participate in their learning. The University provides multiple support systems which students have the responsibility to access when needed. Faculty have the responsibility of structuring the teaching and learning environment to facilitate student learning taking into consideration individual learning styles and personal professional goals.

MASTER OF SCIENCE IN NURSING SCIENCE PROGRAM GOALS

The overall goals of the master’s program are to prepare graduates with expertise in a specialized area of advanced nursing practice; role preparation for the specialized area; leadership and health policy skills, and research skills. The master’s degree program also prepares students for future doctoral work.

EXPECTED STUDENT OUTCOMES, NP TRACK

The nurse practitioner (NP) track prepares graduates for evidence-based practice as advanced practice registered nurses (APRNs). Students choose between two population-focused concentrations, the Family Nurse Practitioner (FNP) or the Adult/Gerontological Primary Care Nurse Practitioner (AGPCNP) concentration.

Expected student outcomes are unique to each concentration. The goals and expected outcomes are consistent with nursing standards and guidelines specific to the specialized area of advanced nursing practice for which individual concentrations prepare students.

Upon completion of the NP track, graduates are prepared to:

1. Conduct comprehensive health and psychosocial assessments in a culturally sensitive manner for a specific population, including a detailed health history and complete physical examination.
2. Order and interpret diagnostic tests and procedures.
3. Differentiate, diagnose, and manage acute and chronic health problems.
4. Prescribe and manage pharmacotherapeutic agents and other therapies.
5. Provide health teaching and supportive counseling with an emphasis on prevention of illness, health maintenance, and disease management.

6. Collaborate with other health care professionals to provide interdisciplinary care.

7. Manage and negotiate a variety of health care systems with an emphasis on medically vulnerable and underserved populations.

8. Evaluate and integrate research evidence as a cornerstone of clinical practice.

9. Demonstrate knowledge and application of legal and regulatory authority for nurse practitioners in the State of California.

10. Analyze local, state, and national health policy, legislative and regulatory trends, and their implications for clinical practice.


**SPECIALTY COMPETENCIES, FNP AND AGPCNP CONCENTRATIONS**

The competencies delineated for each specialty area of practice are intended to be used in conjunction with and build upon the student outcomes and core competencies identified for all NPs. The specialty competencies emphasize the unique philosophy of practice for that specialty and the needs of the populations served. Competencies are listed in the following publication available online: *NONPF Core Competencies for Nurse Practitioners (2012) as well as the NONPF Population-Focused Competencies in Specialty Areas:*


Curriculum plans for the FNP and AGPCNP concentrations are located in Appendices A and B. Course descriptions can be found in the UCI Catalogue [http://catalogue.uci.edu/](http://catalogue.uci.edu/).
UNIVERSITY POLICIES

ACADEMIC CALENDAR

Consult the Registrar’s website at http://www.reg.uci.edu and the UCI Catalog for detailed information on registration procedures and late changes. The School of Nursing follows the academic calendar that is posted on the Registrar’s website.

ACADEMIC DISQUALIFICATION

After consultation with the student’s academic unit, the Dean of the Graduate Division may disqualify a student for academic reasons, including, but not limited to, having a grade point average in graduate courses below 3.0 for two or more successive quarters; failing to pass (or not taking) a required examination or course within the time specified for that graduate program; or not maintaining satisfactory academic progress toward completion of an approved program of study.

ACADEMIC HONESTY

As a member of the UCI academic community, the School of Nursing complies with university-wide policies related to academic honesty. From original research to testing to clinical experiences, academic integrity is expected and required of students in every aspect of the MS program. The UCI Academic Senate outlines a comprehensive policy on academic integrity, available at http://senate.uci.edu/uci-academic-senate-manual/part-iii-appendices-of-the-irvine-division/academic-integrity/

All students are strongly recommended to carefully review these policies; any infraction of university-wide policy will incur consequences and can jeopardize program completion.

Students should pay careful attention to policies related to cheating, plagiarism and academic honesty. Academic dishonesty applied equally to electronic media and print, text, images, and ideas. It includes but is not limited to the following examples:

- Copying from others during an exam
- Communicating exam answers with others during an exam
- Offering another person’s work as one’s own
- Taking an exam for someone else
- Sharing answers or assignments with other students unless specifically authorized by the instructor
- Tampering with an exam after it has been corrected
• Using unauthorized materials, prepared answers, written notes or information during an exam
• Allowing others to do the research and writing of a paper
• Reproducing images of exam content with camera, cell phone, or other recording device

The UCI General Catalogue expands on the policy produced by the Academic Senate, available at: http://catalogue.uci.edu/

For information related specifically to testing, visit the Academic Honesty statement provided by the UCI Testing Office: http://www.testingoffice.uci.edu/academichonesty.html.

The UCI Dean of Students has published an extensive listing of student conduct policies. Students should review these policies, notably those relating to student conduct and discipline: https://aisc.uci.edu/policies/pacaos/grounds-for-discipline.php

Based on student achievement in both the clinical and didactic settings, the School of Nursing requires students to adhere to the aforementioned policies as well as specific conduct expectations.

Students can access numerous resources for aid in the writing process; see the section on Writing Resources (Appendix C) for more information.

As members of the UC Irvine Community, students are expected to be aware of their rights, as well as their responsibilities. Each member of the University shares the responsibility of maintaining conditions conducive to the achievement of the University’s mission. UC Irvine is committed to the Principles of Community which provide for an environment that is purposeful, open, disciplined, just, caring, diverse, and celebrative. Please reference the UCI Office of Academic Integrity & Student Conduct website to reference the official UCI Code of Student Conduct.

ADVANCEMENT TO CANDIDACY

The master’s degree is conferred at the end of the academic quarter in which all requirements have been satisfied, subject to the final approval of the Graduate Division. The student must be advanced to candidacy for the degree prior to the beginning of the final quarter of enrollment. Students will need to complete an application for advancement to candidacy and submit to Nursing Science Student Affairs no later than 30 days before the opening of the quarter in which the degree is expected. An application for advancement to candidacy is usually completed in fall or winter quarter of the second year. The advancement to candidacy form can be located at: http://www.grad.uci.edu/forms/index.html
A Master of Science (M.S.) in Nursing Science degree is awarded upon successful completion of 72 units of course work, as well as 720 hours of clinical practice in the student’s area of emphasis to be eligible for certification.

ENROLLMENT

Full-time enrollment for graduate students is defined as enrollment in at least 12 units of upper-division or graduate academic credit per quarter, including credit for supervised research or teaching. *Please note: Students in the MS in Nursing Science program are approved as full-time status during Fall quarter of the first year and Spring quarter of the second year when they are scheduled to take only 10 units.* Graduate students ordinarily may not receive credit for more than 12 units per quarter in graduate courses, or 16 units in upper-division courses, or a proportionate number in combination. Course loads in excess of 16 units must be approved in advance by the Academic Counselor and the Dean of the Graduate Division. A full-time registration is defined as 1) payment of applicable University fees; and 2) enrollment in at least 12 units.

Part-time status is not available to students in the master’s program. In a particular quarter, part-time status may be authorized if a student has been waived a course via transfer units. This must be approved by the MS/NP Program Director and the Academic Counselor. Part-time status enrollment is defined as enrollment in one to eight units.

FINANCIAL AID

Master’s students should consult the UC Irvine Office of Financial Aid for aid opportunities available to students in the Master’s Degree track: [http://www.ofas.uci.edu/content/](http://www.ofas.uci.edu/content/). Grant and loan opportunities are available. Students must complete the Free Application for Federal Student Aid (FAFSA) to be eligible. The deadline is March 2.

A number of loan, loan repayment, and scholarship opportunities are available to Nurse Practitioner students. Students are responsible for ensuring their capacity to meet financial obligations.

*Loans*

- CitiBank CitiAssist™ Loans
  Students enrolled in the NP program are eligible to qualify for student loans through CitiAssist™. Students should apply online: [https://www.studentloan.com/](https://www.studentloan.com/)
Loan Repayment and Scholarships
Nurse Practitioner students are eligible for various loan repayment and scholarship programs. Students are encouraged to visit the following websites to search for available funds. Please note that the following list is not exhaustive:

- HRSA: Health Resources and Services Administration
  Selective Nursing Scholarship Program awards significant benefits to nursing students who work for at least two years in a health care facility experiencing a nursing shortage

- OSHPD: Office of Statewide Health Planning and Development
  Offers a number of selective scholarship and loan repayment programs.
  [http://www.oshpd.ca.gov/hpef/](http://www.oshpd.ca.gov/hpef/)

- AANP: American Academy of Nurse Practitioners Foundation
  Offers various scholarship and grant opportunities for student-led research.

- Discover Nursing
  Database of scholarships available to nursing students

HOLIDAYS

Holidays corresponding to the UCI calendar will be observed in the program. An academic calendar for the 2017-2018 academic year can be found at the Registrar’s website: [http://reg.uci.edu/calendars/quarterly/2017-2018/quarterly17-18.html](http://reg.uci.edu/calendars/quarterly/2017-2018/quarterly17-18.html)

LAPSE OF STATUS POLICY

A graduate student is required to maintain continuous enrollment during fall, winter, and spring quarters from the beginning of the program of study until awarding of the degree. This policy is designed to eliminate the need for readmission to the program, provide opportunity for continuous use of facilities, including the library, and assure the development of an integrated program, which is adequately supervised and effectively completed within the time limitations allowed. Students who have failed to maintain their graduate student status will be notified in writing by the Graduate Dean. Students should consult the Graduate Division for a full description regarding a Lapse of Status at: [http://www.grad.uci.edu/](http://www.grad.uci.edu/)

A Lapse of Status will occur under any of the following conditions:
• If you fail to register (i.e., pay fees and enroll in units) by the last week of instruction in a given quarter.
• If an academic leave of absence, or permission to pay the Filing Fee in lieu of registration, has not been submitted and approved by the department and Graduate Division.
• If you fail to comply with any provisions of admission to UCI.

**Leave of Absence (LOA) for UCI Graduate Students**

An academic leave of absence is intended to cover the temporary interruption of the student’s academic program. Students are encouraged to meet with their faculty advisor and Student Affairs to discuss the impact of a LOA. The following reasons for requesting a LOA must be consistent with University policy and guidelines as outlined below, and with the School of Nursing:

1. Serious illness or other temporary disability.
2. Concentration on an occupation not directly related to the student’s academic program.
3. Family obligations.
4. Temporary interruption of the student’s academic program for other appropriate reasons.

A LOA does not apply under the following circumstances:

1. Student will be absent from the campus and outside California while continuing to pursue graduate research or scholarly activity (must register In-absentia - see Student Affairs for details).
2. If the student must leave the academic program for more than three quarters (should withdraw and apply for readmission at the time he/she expects to resume graduate study at UCI).
3. If the student requests such action retroactively.
4. If the student has not completed at least one quarter of graduate study at UCI.
5. If the student has not demonstrated satisfactory progress.

UCI graduate students can request a leave of absence for up to one year by submitting a Leave of Absence form to Student Affairs with a written explanation of why they are requesting leave. Procedures for requesting a leave of absence: [http://www.grad.uci.edu/forms/](http://www.grad.uci.edu/forms/)

**Master of Science Transfer Policy**

The General Petition ([http://www.grad.uci.edu/forms/index.html](http://www.grad.uci.edu/forms/index.html)) may be used for purposes of requesting transfer of credit by currently enrolled students only. If official transcripts of academic work are not already in the student’s file, they must be submitted as part of any
petition for transfer credit or course substitution of degree requirements. Petitions for transfer credit will be considered only when the work is necessary to fulfill degree requirements. Up to one-half of the total 72 units required earned during regular academic quarters at another graduate division of the University of California may be transferred. Up to one-fifth of the total 72 units required may be transferred from another institution besides a UC campus. No transfer credit will be allowed for any course in which a grade below B or the equivalent is assigned.

READMISSION POLICY

A graduate student who withdraws and has not been granted a leave of absence approved by the Dean of the Graduate Division and the School of Nursing is considered to have lapsed student status (i.e., no longer has student status). A student whose status has lapsed must reapply to a graduate program and can only resume graduate study if readmitted. Students should refer to the Graduate Division website for information: http://www.grad.uci.edu/

In addition to following the UCI policy regarding readmission, students may apply for readmission after withdrawal from the School of Nursing. Students will be required to meet with the Nursing Science Admission Committee to request or discuss readmission. Students must meet the current admission requirements set by UCI and the School of Nursing. Readmission will be granted by majority vote of the admission committee. Readmission will be granted on an individual basis. Students should consult with Student Affairs regarding program and university policies.

RESIDENCY REQUIREMENTS

A minimum of three quarters in academic residence is required prior to the awarding of the master’s degree. A minimum period of study of one quarter in-residence must intervene between formal advancement to candidacy and the conferring of the master’s degree.

WITHDRAWAL POLICY

UCI Graduate students should consult the Registrar’s office regarding the withdrawal policy at http://www.reg.uci.edu/enrollment/withdrawals/. Students should meet with Student Affairs to discuss UCI and program policies prior to submitting withdrawal forms. Students should consult the registrar’s website for information regarding fee deadlines, refunds, and cancellation/withdrawal policies: http://www.reg.uci.edu/
SCHOOL OF NURSING POLICIES & REQUIREMENTS

ATTENDANCE

Students are expected to be punctual when attending scheduled classes, seminars and clinical assignments. If an absence is necessary in clinical, students must notify the contact person/preceptor in the clinical agency, the UCI Clinical Education Coordinator and the Operational Support Analyst prior to the absence. Students are also required to update their clinical schedule in Typhon NPST when an absence occurs. Students are responsible for meeting unit/content objectives covered and clinical hours missed during their absence. If course requirements cannot be met, a failure, unsatisfactory or an incomplete grade will be given, depending on the circumstances involved. See the UCI Registrar’s policy on incomplete grades: http://www.reg.uci.edu/grades/gradingpolicy.html

BACKGROUND CHECKS

Students will be required to pay for a background check prior to beginning their clinical experience as required by clinical sites. Background check requirements are subject to change, based on the requirements of the clinical facilities. In the event that a student must decelerate their program of study resulting in time away from the program, a new background check is required upon return to the School of Nursing, and prior to clinical placement. A vendor selected by the School of Nursing will perform the background check. If a student has concerns about his or her ability to pass this background check, he or she should contact Nursing Science Student Affairs to discuss available options.

FACULTY COMMITTEES, SCHOOL OF NURSING: STUDENT PARTICIPATION

MS student participation is encouraged on the Graduate Academic Program and Evaluation Committee (GrAPE) and the Student Affairs Committee (SAC). These committees meet periodically throughout the academic year to conduct the business of the School of Nursing. Early in the fall quarter, email notices will be sent to all students soliciting interest in committee participation. Students selected for committees will be required to attend the scheduled committee meetings and participate in all facets of the committee work. The term of service for first year MS graduate students will be 2 years; for second year students, their term will expire upon graduation. Students may be recused from some meetings when confidential issues are being discusses.

COMPLETION REQUIREMENTS

1. Seventy-two (72) quarter units are required for the MS/NP concentrations, which includes 720 hours of clinical experience.
2. Passing Grades in all didactic and clinical courses are required for program completion. Graduate courses require that students pass all courses with at least a grade of B (83% or above) or an “S” (Satisfactory). Grades below 83% and “U” (Unsatisfactory) will NOT be accepted toward program completion.

3. All students must complete the Skills Appraisal Exam and Objective Structured Clinical Exam(s), as well as pass the “Comp Exams” i.e. Clinical Practice Exam and Comprehensive Examination during the program.

4. Students are strongly encouraged to take the American Nurses Credentialing Center (ANCC) or American Academy of Nurse Practitioners Certification Board (AANPCB) national certification exam upon program completion. Failure to do so will compromise your ability to be credentialed by health plans and/or receive payment for services by Medicare, Medi-Cal, and other payers’ as a nurse practitioner. Faculty will provide letters of recommendation upon notification of successful passage of certification examination.

COMPREHENSIVE EXAMINATIONS

A thesis is not required for the MS degree. Students complete a major project in conjunction with the Scholarly Concentration course instead of a thesis. A comprehensive examination will be conducted to prepare graduates for national certification examinations and to determine beginner level competency for practice. As part of the comprehensive examination, students will complete written (web-based) and practical examinations. There is a separate fee associated with these exams. The practical examination, or clinical practice exam (CPX), will be held in the Medical Education Building utilizing standardized patients. If a student fails the written or practical examination, the student must develop a remediation plan to be submitted to the Faculty of Record for that course for approval. If the student successfully remediates on their second attempt, they will be allowed to graduate from the program. However, the need to remediate may impede the student’s ability to participate in Commencement. If the student fails to successfully remediate and pass either portion of the exam (written or practical) on the second attempt, the student will be dismissed from the program. It is important for students to be aware of this policy.

EXAMINATIONS AND ASSIGNMENTS

A minimum score of 83% is required to successfully pass an exam or assignment in all courses. Students who receive less than 83% are expected to work with their faculty to remediate and demonstrate baseline knowledge acquisition of the material for program progression and clinical work. The following policies are outlined for remediation:

1. If a student fails any didactic evaluation component, a make-up exam or other remediation as determined by the faculty must be scheduled with the faculty within two
weeks of the original exam or assignment. It is the student’s responsibility to arrange a remediation plan with the faculty.

2. A minimum score of 83% is required to pass the make-up exam or assignment. Regardless of the score on the make-up exam, the original score on the exam is used to calculate the final grade. The make-up exam is used to determine whether the student has adequate knowledge of the content to safely continue in the clinical setting and progress in the curriculum.

3. Failure to take the Skills Appraisal Exam (SKA), Objective Structured Clinical Exams (OSCE), or the Clinical Practice Exam (CPX) when scheduled will result in a failure of that course.

FAILURE/DISMISSAL

Failure of Advanced Health and Physical Assessment (Lecture or Lab)
- The Skills Appraisal Exam (SKA) is a performance exam in which students perform histories and physical exams on standardized patients at the end of the first quarter, as part of the final grade for this course (230L). Student’s scores are obtained from feedback from trained standardized patients and/or faculty observation.
- Students who fail the Advanced Health and Physical Assessment course (lecture OR lab) will not be allowed to continue in the NP program. They may re-apply the following year. If they are accepted to the program for the following year, they must retake and pass Advanced Health and Physical Assessment.

Failure of Course
For students failing any other course required for the degree with a grade of less than 83% (in a didactic course) or an Unsatisfactory (in a practicum course), the student will be placed on academic probation, and counseled about the deficiency by the Faculty of Record and the Academic Counselor.
- The course must be retaken the following year and successfully passed.
- Students may also be offered the option of taking an equivalent course at an outside university if one can be identified by the student and fits in with the student’s plan of study - details and course approval must be discussed with the Faculty of Record. It is extremely difficult to find an equivalent course; this is the student’s responsibility and must be pre-approved by the Faculty of Record prior to student enrollment. This will not change the original grade but may allow the student to remain in the program until the course can be successfully repeated.
- Failure of a second course will result in dismissal from the program.

Failing to Remain in Good Standing
Consistent with other professional degrees on campus, promotion requirements are as follows: all students must demonstrate satisfactory behavior in personal and professional areas deemed necessary by faculty for academic success and competency in clinical practice. Such areas may include:
- the ability to establish rapport with clients
- ability to work effectively with other members of the healthcare team
- dependability; judgment; integrity; initiative; and interest.
- **In addition to the above, students may be dismissed from the program without remediation for academic failure, academic dishonesty, endangering patients, and/or for inappropriate or unprofessional conduct.**
- MS students dismissed from the program will be refunded according to the UCI policies.

**Grading & Grading Scale for Graduate Nursing Courses**

A grade of 83% or above is required to pass all coursework. Grading guidelines are provided by the individual course faculty as outlined in each syllabus and adheres to University policy.

The didactic work of graduate students shall be reported as one of the following grades A+, A, A-, B+, B and represent satisfactory progress toward advanced degree requirements. Grades below the B level are not satisfactory, and a student’s whose grade point average is below a 3.0 is subject to academic disqualification.

Specific clinical coursework of students may be reported as Satisfactory/Unsatisfactory (S/U). The grade S is awarded only for work that would otherwise receive a grade of B (83 % or higher) (3.0) or better; the grade U is assigned whenever a grade of B- or lower would be otherwise given.

A graduate student may repeat a course one time in which a grade below a B (3.0) or a grade of U was received. Only the most recently earned grade is used when computing the student’s grade point average for the first eight units of repeated work; thereafter both the earlier and the later grades are used. Graduate students are expected to make satisfactory progress toward their degree objective as defined by the School of Nursing in accordance with the Graduate Division. The UC Irvine Academic Senate provides a detailed explanation of grading practices and students are strongly encouraged to read and understand the University policies.

**Incomplete Grades**

The grade “incomplete” (I) is assigned when a student’s work is of **passing** quality but is incomplete because of a personal emergency or other “good causes.” **Good causes will be evaluated by the Faculty of Record.** The decision of the Faculty of Record is final and students may not appeal. The student must make arrangements with their Faculty of Record to complete the coursework within a period of no more than 12 months following the term in which the grade incomplete was originally awarded, or prior to the end of the quarter immediately preceding award of the degree, whichever comes first. The instructor is not obligated to allow the maximum time period. The student should not reenroll in the course to make up the incomplete.
Incomplete (I) grades will convert to a failing grade (F), not pass (NP), or unsatisfactory (U), whichever is appropriate, after remaining on the student’s record for 12 months, as governed by Irvine Academic Senate Regulation IR A345.

An “I” grade can delay a student’s progress toward the degree, since the Registrar’s office will not allow a student to advance to candidacy, apply for filing fee, nor graduate with an incomplete grade. Students will be reminded of the need to remove “I” grades by the Registrar’s office.

For information on incomplete grades, see the following links:
http://reg.uci.edu/grades/gradingpolicy.html
http://senate.uci.edu/uci-academic-senate-manual/part-ii-regulations/

<table>
<thead>
<tr>
<th>Passing</th>
<th>Not Passing</th>
</tr>
</thead>
<tbody>
<tr>
<td>A+</td>
<td>B- 80-82.99</td>
</tr>
<tr>
<td>97-100</td>
<td>C+ 77-79</td>
</tr>
<tr>
<td>A</td>
<td>C 73-76</td>
</tr>
<tr>
<td>93-96</td>
<td>C- 70-72</td>
</tr>
<tr>
<td>A-</td>
<td>D+ 67-69</td>
</tr>
<tr>
<td>90-92</td>
<td>D 63-66</td>
</tr>
<tr>
<td>B+</td>
<td>D- 60-62</td>
</tr>
<tr>
<td>87-89</td>
<td>F 59 and lower</td>
</tr>
<tr>
<td>B</td>
<td></td>
</tr>
<tr>
<td>83-86</td>
<td></td>
</tr>
</tbody>
</table>

**Final Grade Policy**

According to the UC Irvine Academic Senate Manual pertaining to grades: Senate regulations A345 and A365: Final grades, as reported by the instructors, are permanent and final. An instructor may not change a final grade except to correct a clerical or procedural error. Clerical or procedural errors should be corrected within one regular academic quarter after the grade assigned. No grade may be revised/changed by examination or, with the exception of I or IP grades, by completing the additional work. If a student is dissatisfied with a grade, the student should review their work with the instructor and receive an explanation of the grade assigned.

**Health and Other Requirements**

1. Written proof of influenza immunization by December 1st or meet written criteria for exception, prior to starting clinical rotations. Must have the Seasonal Flu vaccine as determined by CDC annual recommendations.
2. Rubella: positive titer
3. Rubeola (Measles): positive titer
4. **Mumps:** positive titer
5. **Tuberculosis (TB):** must provide a report showing a negative TB Skin Test (TST) within past 12 months. It is the student’s responsibility to upload annual negative TST results in Typhon NPST as directed.
   - Positive skin test:
     a. must provide proof of a negative chest x-ray at the start of the program and every 4 years thereafter
     b. Must complete Annual Health Screening Questionnaire for History of Positive TB Skin Test (this form is available in Typhon)
6. **Varicella (Chicken Pox):** positive titer
7. **Hepatitis B vaccination:** positive titer
8. **Proof of pertussis vaccine required (Tdap); if received after the age of 19, this is acceptable
9. **Physical and Mental Health Clearance.** Documentation from your healthcare provider indicating you do not have any health condition(s) that would create a hazard to yourself, employees, or patients. Documentation can be signed by physician, physician’s assistant, or nurse practitioner. Form to have signed is provided by the School of Nursing. See Appendix F.

*If for any reason, a student should have a leave of absence/break in enrollment from the School of Nursing, the School of Nursing reserves the right to require another Physical and Mental Health Clearance be completed within 4 weeks of returning to classes in order for the student to return to clinicals.*

10. When a student notifies faculty of an illness (physical or mental), injury or surgery that impacts student’s ability to function in the clinical setting, students will be directed to provide the approved clearance form (Appendix F) completed by an appropriate healthcare provider that provides information indicating date student is able to return to clinic duties and any physical limitations which may interfere with clinical rotation duties. The reason does not need to be specified. **Any physical or mental limitations noted by the healthcare provider (HCP), which may interfere with clinical duties may make the student ineligible to complete their clinical requirements that quarter.**

11. If clinical agencies have additional health specifications (e.g. drug testing), students who are assigned to those agencies will be required to meet them.

12. Students must have current CPR certification.

13. Students must have current malpractice insurance for NP student

14. Students must have California RN license status (active and unrestricted).

15. Students must have a background check
All the above documents must be uploaded by the student into Typhon by Dec. 1, prior to beginning clinical in winter quarter of students’ first year. Instructions to the Typhon NPST will be provided to students during the first quarter.

**HIPAA ACKNOWLEDGEMENT AND TRAINING**

Patient confidentiality and privacy are critical to maintaining a patient's dignity and autonomy. Information about patients should be shared only with your instructors and other professionals in private settings. Do not discuss your patients in public places in the hospital, or outside the hospital. Sharing of patient information in public places (i.e. with friends, social networking sites, etc.) is a breach of confidentiality and will not be tolerated.

As of August 2013, new federal health mandates require that all NP students complete an online HIPAA training prior to starting clinical rotations. Details on how to obtain the training will be provided prior to the start of the winter quarter of the first year. Students must complete the online training and upload a copy of their certificate to their individual Typhon student account.

*Technology Statement*

Many of the clinical placement sites and facilities have guidelines and policies regarding use of technology and devices while in a clinical setting; students are expected to follow these guidelines and policies. Although cell phones, tablets and other personal devices are useful for searching for information pertinent to patient care, such as drugs, vaccines schedules, risk assessment tools, etc., students must be aware that cell phones and other personal electronic devices can pose a high risk of infection control issues and HIPAA concerns, and students are encouraged to follow the site-specific policies for use of cell phones and other personal electronic devices while in patient care areas. Cell phones should be kept in silent/vibrate mode when in a clinical setting. Students are never to take photos of patients or patient families with cell phones. Please be aware that all social networking sites are public domain, and any post may have legal and/or professional ramifications.

**PROTECTED HEALTH INFORMATION**

Only use Protected Health Information if it’s necessary to perform your job duties. If you don’t ‘need to know’ the information to do your job, you shouldn’t access, view, or use the information. Only use the minimum information necessary to perform your job. If you’re not sure, ask your supervisor for guidance.

1. Only access records for patients who you are caring for (in your current role) or have a need for to do your job. If a student is employed at a clinical facility he/she must use their work level access for work, and their student computer access for all activities related to the clinical rotation.
2. Accessing your own or a family members’ record is against policy. Request for a family member’s information or your own must be processed by HIMs or the physician’s office.

IMPAIRED NURSING STUDENT POLICY

Faculty members recognize that all people are susceptible to illnesses that may impair their ability to function at an optimal level. When a student develops an illness that impairs the ability to learn and provide safe nursing care it is of special concern. In the case of chemical dependence, the University of California recognizes dependency on alcohol and other drugs as a treatable condition and offers programs and services for University students with substance dependency problems. Students are encouraged to seek assistance from health centers, and counseling or psychological services available at University locations or through referral. Information obtained regarding a student during participation in such programs or services will be treated as confidential, in accordance with Federal and State laws.

Impairment is defined as a “clinically significant behavioral or psychological syndrome…that is associated with present distress (e.g. a painful symptoms) or disability (e.g. impairment in one of more important areas of functioning) or with a significantly increased risk of suffering death, pain, disability, or an important loss of freedom….it must currently be considered a manifestation of behavioral, psychological, or biological dysfunction…” (American Psychiatric Association, 1994, p. xxi). Examples of impairment include, but are not limited to, alcohol or drug use in the learning environment (clinical or classroom settings), and symptoms of mental distress (e.g., severe anxiety, depression) that make it hard for students to learn, perform, and/or complete their assignments on time. Impairment is commonly evidenced by poor judgment and decision-making, lack of insight into the problem, and unprofessional behavior. It negatively affects learning and professional performance, and renders students unable to provide safe, effective care. It may be episodic or chronic.

Underlying Assumptions:

- When a student's performance is impaired, safe, effective care is at risk whether it occurs in the classroom, learning skills laboratory, or in the clinical setting.
- Alcohol and drug abuse and addiction are primary illnesses, as are psychiatric and physical illnesses, and can be successfully treated with rehabilitation.
- Students who are willing to cooperate with a program of assistance and accept treatment, rehabilitation, and monitoring can be allowed to continue their nursing education, provided they comply with requirements for treatment and monitoring and provide the nursing program with proof of treatment. This applies for any illness causing impairment.
- Repeated episodes of impairment are cause for disciplinary procedures. Additionally, students identified as impaired or potentially impaired who are unwilling to seek treatment will also be subject to disciplinary procedures.
- Students should not use illegal substances or abuse legal substances in a manner that impairs work performance, scholarly activities, or student life. Students in violation of this policy may be subject to corrective action, up to and including dismissal or may be required, at the discretion of the University, to participate satisfactorily in a treatment program.

The purpose of this policy is to:

- Encourage students who self-identify as having physical, cognitive, or emotional conditions affecting their performance to seek and receive evaluation, treatment, and/or professional counseling.
- Identify and assist students who have not yet recognized signs of potential impairment in themselves or identified themselves as having medical or emotional conditions leading to future impairment.

Procedure:

Potential impairment may be identified by recognition of signs of deteriorating performance, including, but not limited to:

- Problems with tardiness and/or absences from clinical time
- Increasing numbers of incidents or near-misses with potential harm to patients
- Observed or reported incidence of interpersonal conflict
- Excessive procrastination and poorly prepared work
- Inability to pay attention, distractibility, sleepiness
- Deterioration in personal hygiene
- Awkward, ineffective, inaccurate psychomotor skills
- Extreme dependency on the instructor
- Appearing to be under the influence of substances (ie: alcohol, marijuana, or other drugs)

Grounds for immediate dismissal from clinical site, evaluation, and documentation:

- Appears to be under the influence of drugs or alcohol.
- Displays unstable mental, physical, or emotional behavior
- Threatens the physical or psychological safety of themselves or others
- Demonstrates unprofessional behavior that is disruptive to the environment and interferes with the operation of the setting

Self-identification and report:

- The student will be referred to the UC Irvine Counseling Center for professional evaluation and treatment if this is not in process.
• A conference will be arranged with the MS/NP Program Director to decide the following (with input from Academic Counselor):
  o Continued attendance in the nursing program and any necessary restrictions
  o Schedule of reports on progress
  o Plan for relapse prevention (student responsibility)

One time incident:

• The Faculty/clinical instructor/preceptor will observe, assess, and document performance and objective data.
• In the initial student-faculty meeting, the student will be informed of the reasons she/he must leave clinical (symptoms of illness, impairment and lack of required safe, professional behaviors). The student will be removed from clinical for the remainder of the day. At the discretion of the instructor/preceptor, the absence may count as an unexcused absence.
• The clinical instructor/preceptor will arrange for someone to drive the student home and will inform the student of the need for a follow-up meeting at campus.
• The clinical instructor/preceptor will also contact the school and inform the Faculty of Record and the MS/NP Program Director about the impaired student issue.
• At the student-faculty follow-up conference, faculty will provide additional guidance: discuss behavior and/or signs of illness; establish expectations and limits for future behavior of student (designate time period); encourage student to give his/her perception of situation and plans to prevent further unprofessional behaviors.
• Record relevant information, including plan for follow-up with student and Academic Counselor. Give a copy of the plan to the student and send to the MS/NP Program Director. Include in the discussion and documentation the possible need for professional evaluation and support, and any referrals made.

Repeated incident:

• The Faculty witnessing the impairment will consult with the Faculty of Record and the MS/NP Program Director.
• Review all documentation of related incidents. If a pattern of observable behaviors is identified, then arrange for a conference with the student. Prepare for intervention through collaboration with counseling service and Academic Counselor.
• At the conference, inform the student of concern, observed pattern of impairment and need for professional evaluation as a condition of continued professional education. Refer the student for evaluation with a prearranged appointment at the UC Irvine Counseling Center.
• Make a referral to program for ongoing substance abuse remediation and/or ongoing counseling services to support the student.
• If the student refuses referral, disciplinary procedures may be indicated and may necessitate involuntary withdrawal from the School of Nursing.
• The student may not return to the patient care setting until the student is deemed safe to return to patient care activities by the Faculty of Record in collaboration with the MS/NP Program Director.

• After evaluation, the Associate Dean of Academic and Student Affairs in the School of Nursing will meet with the student and their advisor.
  o If an illness is not identified, a contract will be established outlining unacceptable behavior and a time frame for improvement including clear consequences if change does not occur.
  o If the student is identified as chemically dependent or having any other illness or condition that impairs judgment and/or performance, she/he will be asked to enter treatment and/or withdraw and enter treatment and rehabilitation (depends on the severity of the condition and prognosis). Documentation will be maintained in separate, confidential files, and will include conditions for continuing in the program, copies of professional evaluation, diagnosis, and treatment recommendation. The student will be informed of implications for licensure and that they will need to provide evidence of rehabilitation to submit their application for licensure.

• Written plan/contract is sent by Associate Dean of Academic and Student Affairs, with copy to Student Affairs & Support Services, faculty advisor (if appropriate), and student. Plan to include goals and scheduled time for follow-up meetings. A copy of the plan should be given to the student and placed in their file.

• Failure to adhere to the contractual agreement is grounds for dismissal from the School of Nursing.

This policy pertains to lecture classes, not just clinical situations. If a student shows signs of intoxication during lecture, the student will be removed from class and the MS/NP Program Director will be informed.

Resources:

American Nurses Association (2002). The profession’s response to the problems of addictions and psychiatric disorders in nursing.


BRN Position Statement on Impaired Nursing Students - EDP-B-03 (06/09)

Drug and Alcohol resources
http://www.chs.uci.edu/csw/drugs.html

National Council of State Boards of Nursing, Inc. (NCSBN) 2011. Substance Use Disorder
MALPRACTICE INSURANCE

1. Malpractice Insurance: Students must carry their own student NP malpractice insurance as a student nurse practitioner while they are in the program.
2. Copies of insurance should be uploaded to the Typhon NPST.

The three companies listed below currently provide malpractice insurance for Nurse Practitioners. You must obtain malpractice coverage as a student Nurse Practitioner before you are allowed to start your clinical rotation.

NSO (Nursing Service Organization)
800-247-1500
http://www.nso.com/

CM&F (Cottrell, Mitchell & Fifer)
800-221-4904
http://www.cmfgroup.com/

Marsh Affinity Group
800-621-3008
www.proliability.com

PROFESSIONAL CLASSROOM CONDUCT

Classroom conduct: Students are expected to be prompt and knowledgeably prepared for each class at the appointed time. Courtesy is to be extended to all guest lecturers and faculty; talking and disrespect of the guest lecturer or faculty will not be tolerated. Use of cell phones and texting during class and/or use of a computer for anything other than note-taking or research as directed by the instructor is not acceptable professional behavior. Use of substances during class such as tobacco or other substances will result in immediate dismissal from the class. Students who wish to tape the lecture must request permission to record prior to the class.

Professional presentation attire is specific to presentations (in or out of class), ceremonies, job interviews, as well as any activity where a student is representing the nursing profession or the UCI School of Nursing. For women, this may include a business suit or dress, skirt and blouse – no cleavage or midriff showing; for men, a suit or jacket and tie are required. Closed toe shoes are part of professional dress.
Ethical Issues: The program employs an honor system of examination. Students shall adhere to the honor system with any written assignment, exam, or clinical performance exam, taking credit only for work that is their own, not accepting or soliciting help from others during exams and keeping records truthful. This honor system applies to student tracking of clinical hours and clinical record keeping. An infraction may be considered cause for dismissal.

Unprofessional Conduct

The Nurse Practice Act defines unprofessional conduct as failing to meet the minimal standards of acceptable nursing practice. Unprofessional conduct can jeopardize the health, safety, and welfare of the public. For students, unprofessional conduct behaviors include, but are not limited to, the following:

- Disrupting the classroom or clinical site by behaviors such as arriving late, not turning phones to vibrate or silence, not turning off other electronic devices, or actively engaging in non-class/clinical activities during class/clinical time.
- Negative behavior directed toward peers, faculty, patients and others with whom you have contact on campus, at clinical sites or in any setting where the student represents the university and/or the nursing profession.
- Using unsafe judgment, technical skills, or inappropriate interpersonal behaviors in providing nursing care.
- Rude and profane conversation and comments.
- Conduct that distracts or intimidates others such as talking during lectures, bullying, aggressive behaviors, unwarranted comments, and addressing peers or faculty with disrespect.
- Failing to maintain patient confidentiality.
- Speaking about or to patients, staff, or others in a disrespectful or demeaning manner.
- Performing any nursing technique or procedure for which the nurse is unprepared by education or experience.
- Disregarding a patient/client’s dignity, right to privacy, or right to confidentiality.
- Failing to provide nursing care because of diagnosis, age, sex, race, color, or creed.
- Abusing a patient/client verbally, physically, emotionally, or sexually.
- Falsifying, omitting, or destroying documentation of nursing actions on the official patient/client record.
- Abandoning or knowingly neglecting patients/clients requiring nursing care.
- 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.
- Providing one’s license/temporary permit to another individual for any reason.
- Failing to practice nursing in accordance with prevailing nursing standards due to physical or psychological impairment.
- Diverting prescription drugs for own or another person’s use.
- Misappropriating money or property from a patient/client or employee.
**PROCESS FOR ADDRESSING UNPROFESSIONAL CONDUCT**

If unprofessional conduct is observed during clinical/academic activities, the student will be notified by the Faculty of Record and/or the Clinical Education Coordinator. Standard School processes will be implemented to address unprofessional conduct: see flow chart below.

---

**CONSEQUENCES OF UNPROFESSIONAL CONDUCT**

Students are held responsible for content presented in class and clinical. Students who demonstrate unprofessional conduct will receive sanctions, which may include, but are not limited to: class or clinical grade being lowered, failing a course, probation, suspension, or dismissal from the class or program.
GRIEVANCE PROCESS

If a student has questions about a grade, they are encouraged to discuss this with the Faculty of Record for that course. Please note that University policy stipulates that grades are final once posted:
http://senate.uci.edu/uci-academic-senate-manual/part-ii-regulations/#regulationA345

For other issues, unrelated to grades, students may contact the Office of Equal Opportunity and Diversity (OEOD) and/or the Office of the Ombudsman for support.
http://oeod.uci.edu/
http://ombuds.uci.edu/
CLINICAL PRECEPTORSHIP INFORMATION AND POLICIES

The Clinical Practicum component of the Program is comprised of five Advanced Practice Registered Nursing courses, NUR SCI 285 – 289. This portion of the program is designed to maximize clinical learning and skill progression over time. Specific requirements for each clinical course will be provided in the individual course syllabus.

During your clinical rotations you are representing the University of California, Irvine, School of Nursing, Nurse Practitioner Track, as well as Nurse Practitioners in general. You are also establishing a professional network that may impact your future: a clinical preceptor might be a future employer or provide a reference for letters of recommendation.

It is recognized that patient problems encountered in the clinical setting frequently do not coincide with the didactic content. Nonetheless, the student is expected to gather complete subjective and objective data on all patients. Students are not expected to be able to diagnose all problems or to develop treatment plans for all patients depending upon their standing in the program. The student must, however, know and respect his or her limitations in knowledge and consult or refer appropriately to ensure patient safety.

Clinical performance is expected to progress alongside the student’s academic advancement each quarter. The ability to obtain a history, present patient cases, perform physical examinations, interpret findings, integrate lab data, articulate differential diagnoses, and delineate initial management plans is expected to progress with increasing accuracy each quarter.

CLINICAL PLACEMENT PROCESS

- Students will be assigned to clinical placements, considering the following factors in placement:
  - Learning opportunity/value
  - Students strengths/needs in conjunction with clinics/preceptors strengths/needs
  - Bilingual capability
- Students may not decline a clinical placement for any reason.
- The student’s tenure at each site will vary: the usual duration consists of one to three quarters with varied weekly hours.
- Students are strongly recommended to identify two preceptors to augment clinical learning experiences. Refer to “Pearls for Recruiting Preceptors” in Appendix D.
- The minimum patient-encounter goal for all students is 700.
- FNP concentration: the clinical experience must include family practice, adult/gerontological medicine, pediatrics and OB-GYN.
  - Minimum patient encounter goals:
    - Pediatrics: 150
    - Adult: 300
    - Geriatrics: 50
Women’s Health: 200 (a minimum of 50 must be prenatal/postpartum)

- AGPCNP concentration: the clinical experience must include women’s health, adult, and geriatrics.
  - Minimum patient encounter goals:
    - Women’s Health: 150
    - Adult: 300
    - Geriatrics: 250

- Additional rotations in subspecialty practices may be completed in the course of the clinical practicum, but must be approved and arranged by the Clinical Education Coordinator.

- NP students may be mentored by a Nurse Practitioner (NP), Certified Nurse Midwife (CNM), Medical Doctor (MD), or Doctor of Osteopathic Medicine (DO). NP students may NOT be mentored by a Physician Assistant.

- Students with a potential new preceptor should complete the “New Preceptor/Clinical Site Information” for processing as soon as possible. The form is available in Appendix E, and should be submitted to the Operational Support Analyst.

- The Clinical Education Coordinator and the Concentration Coordinators manage student placement in the clinical rotations.

- The School of Nursing will secure all necessary legal affiliation agreements among the clinical sites or preceptors and the University.

- Faculty shall perform a site visit or interview all potential new clinical preceptors prior to student placement.

**Clinical Experience Requirements**

- 720 clinical hours are required for program completion for both NP concentrations.
- Attendance at each scheduled practicum day is expected unless the student has notified the preceptor, the Clinical Education Coordinator and the Operational Support Analyst of an excused absence prior to the beginning of the workday. All schedule changes must be updated in Typhon.
- Inconsistent attendance in clinical may jeopardize the students acquisition of knowledge and skills, impede progression in the program, and result in an “Unsatisfactory” evaluation for the rotation.
- The minimum patient-encounter goal for all students is 700.

**Student Clinical Preceptorship Responsibilities: Getting Started**

- **As soon as you receive your assignment** contact your preceptor by phone or email to introduce yourself. Preceptors may take a week or so to respond. If you are unable to reach a preceptor after 3 attempts within one week, please inform the Operational Support Analyst.
- Arrange a start time, date, and specific location. *Ask about parking.*
Some preceptors may request a telephone or in person interview prior to your first day in clinic. Dress professionally and bring all documentation and CV.

Routinely bring the following documents to clinical sites: copy of your CV/resume, copy of RN license, CPR certificate, TB screening results, malpractice insurance, immunization records. Be sure you keep these records updated throughout the program.

Some facilities will require evidence of a current physical examination (within one year).

Background checks are required prior to clinical placements. (See BACKGROUND CHECKS)

Copies of immunization records, TB screening, RN licensure, malpractice insurance, and CPR certification must be uploaded to a secure database, TYPHON NPST system. Failure to have current documentation of any information will result in removal from the clinical preceptorship site which may delay successful completion of the course and ultimately graduation from this program.

Students must attend clinical rotations as scheduled and must arrange alternate plans when a preceptor is absent from the clinical site.

Students must attend the clinical seminar as scheduled.

Students must wear their UCI name badge and lab coat during clinical rotations.

Students must introduce themselves as a Nurse Practitioner Student to the patient prior to conducting the patient encounter.

Notify the Clinical Education Coordinator immediately of any problems that arise while in the clinical setting. We advise that you contact the UCI faculty by phone as soon as possible and email when you are able.

Some clinical sites will require orientation, completion of web-based modules, and/or EHR instruction prior to starting the clinical preceptorship. Hours spent on this processing are not counted as part of your clinical hours. Clinical hours are defined as direct patient care. The NP faculty and Clinical Education Coordinator are available to answer questions about this as needed.

Equipment: Preparing for Clinical Rotations

1. UCI Nametag to be worn at all times while in clinical settings
2. UCI White Lab Coat (3/4 Length), clean & pressed
3. Stethoscope
4. Watch with second hand
5. Minimal money
6. Clinical Documents: Typhon patient case logs, H & P or Progress Note templates, etc.
7. References: bring your own reference books and/or electronic devices
8. Do not bring your laptop to enter patient data while in clinic, unless you have approval from your preceptor.
9. All patient information data must be de-identified.
CLINICAL PRECEPTORS

A major part of the clinical learning is accomplished under the direction of the community preceptor who is trained and clinically active in the provision of primary health care services. The preceptor helps the student learn clinical skills while applying didactic knowledge to the clinical setting. NPs, CNMs, and physicians (MD/DO) serve as clinical preceptors for the program, providing experience in performing the diagnostic and treatment procedures necessary for Nurse Practitioner practice. It is the goal of the program to educate the student to work in an interdisciplinary team relationship consisting of the NP, the physician, and other healthcare professionals such as PT, pharmacy, mental health professionals, case managers, and social workers, along with the patient, recognizing that they are a team sharing knowledge and responsibility for patient care.

- Nurse Practitioner clinical preceptors must hold an active RN licensure, NP certificate, and NP furnishing number. It is preferred that NP preceptors hold board certification in their area of specialty.
- Certified Nurse Midwives must hold an active RN licensure, CNM certificate, and CNM furnishing number. CNMs must hold national certification.
- Physician clinical preceptors must hold an active MD licensure and appropriate board certification in their specialty.

Evaluation
1. The preceptor shall contribute to the practicum grade by evaluating the student at the end of the clinical rotation; however, the final clinical grade/evaluation is the responsibility of the course Faculty of Record.
2. The student shall evaluate the preceptor and clinical site at the end of the practicum.
3. The Clinical Education Coordinator shall arrange at least one site visit or interview—in person, via email, or telephone—with the preceptor during the quarter to evaluate the student’s progress in the clinical rotation.
4. The Faculty of Record for the clinical preceptorship and the Clinical Education Coordinator shall review all student and preceptor evaluations at the end of the quarter.

Clinical Preceptor Role & Responsibilities
Serving as role models and supervisors for students during clinical rotation, preceptors must guide students in the clinical setting by performing the following responsibilities:
1. Provide adequate clinical space for the student to see patients in their setting
2. Provide a variety of patient encounters for the student to have a balanced learning experience in primary care
3. Supervise, demonstrate, teach, and observe the student in clinical activities to develop the student’s skills and to ensure appropriate patient care
4. Delegate assignments gradually, increasing levels of responsibility to the student for the clinical assessment and management of patients as the student’s skills develop
5. Allow the student to document as appropriate in the patient charts or electronic health record (EHR) or use a chart note simulation in cases in which students may not record the encounter in patient medical records or the EHR.

6. Review and, if necessary, add information to the student’s entry in patient charts/EHR and co-sign all patient records/EHR written by the student.

7. Participate in the evaluation of the student’s clinical skills and didactic knowledge base by:
   - giving direct supervision and observation in the clinical setting
   - giving feedback to the student based on the oral presentation
   - reviewing the student’s chart notes/EHR
   - discussing the student’s progress with faculty electronically or during site visits
   - completing a written evaluation of student

8. Students may NOT make care management recommendations to patients without prior preceptor discussion/review, including diagnostic tests, medications, or referrals

**PROFESSIONAL CONDUCT IN CLINICAL ROTATIONS**

1. Students are expected to interact in a professional, courteous, and responsible manner with staff, patients, colleagues and visitors in the clinical setting. Students will be provided with clinical syllabi and objectives for each quarter. These documents are to be shared with your preceptors at the beginning of the rotation. Students are to assume responsibility for clients only in the designated program settings and under approved supervision. An infraction of this policy is cause for dismissal.

2. Treat this placement as a scheduled class. The preceptor, clinic administration, and UCI faculty expect you to be present in clinic as scheduled. Failure to maintain your clinical rotation schedule as pre-arranged with your preceptor will jeopardize your clinical advancement.

3. Introduce yourself to all staff in the clinical environment, and be sure you introduce yourself as a nurse practitioner student.


5. Punctuality is essential. Arrive early (suggest to arrive 15 minutes early for your clinical day); plan ahead for traffic, etc.

6. Review patient schedule; look up diagnoses and labs before the patient encounter, if you are able to.

7. Preceptors may give students assignments such as research on a particular diagnosis, management of disease, treatment guidelines, etc. It is expected that the student complete these assignments as directed by preceptors. Failure to do so will be reflected on your evaluation.

8. Obtain a cell phone number or contact number of the preceptor in case of absence. You must inform the preceptor prior to the scheduled rotation AND notify the Clinical Education Coordinator for the clinical course in case of absence.
9. Do not conduct personal or business phone calls during your clinical time; this is your time to LEARN; make the most of each day in your clinical experience. Turn all cell phones to SILENT mode.
10. Take initiative and be an assertive, adult learner—students are encouraged to ask to observe particular cases or procedures; always be respectful of patients/colleagues.
11. Be prepared with clinical notes and resources (books, electronic devices). Do not expect the preceptor to have resource material for you to utilize.
12. Conclude your rotation with a meeting with your preceptor to discuss your clinical progress throughout the rotation. A farewell thank-you note is always appreciated as preceptors have VOLUNTEERED their time to mentor you.

**Professional Attire: Please see link below policy**

**A. General Dress Guidelines**
1. Student appearance is a reflection of the individual, the School of Nursing, and the University of California, Irvine. A professional, neat and well-groomed appearance must be maintained at all times.
2. A white lab coat will be rented or purchased by the student which will be embroidered with the University name.
3. Professional business type attire is required for clinical rotations. Scrubs, jeans, hats, and baseball caps are unacceptable for the clinical setting. Men: Shirt and tie required; long pants. Women: Dress or skirt of appropriate length (remember you will be sitting on an exam stool) or dress pants. Casual attire is not acceptable such as stretch pants/leggings, “skinny jeans,” jeans/denim, Capri pants, open toe shoes/flip flops.
4. Both male and female students must wear comfortable, closed-toed shoes in the clinical areas (no sandals).
5. UCI School of Nursing name badges must be worn with the white lab coat at all times in clinical settings.
6. All clothing should be clean, neat, free of wrinkles, and properly fitted.

**B. Other Grooming and Jewelry Guidelines**
1. Hair should be clean and arranged neatly.
2. Appropriate standards of bathing and grooming are expected.
3. Beards/mustaches must be short and neatly trimmed.
4. Nails should be kept clean and short; nail polish should be light-colored or neutral; artificial nails (acrylic or other) are prohibited per UCI policy.
5. Extreme styles of dress, hairdos, and makeup are not permitted.
6. Tattoos must be completely covered in the clinical setting.
7. Students should only wear limited, non-obtrusive jewelry in the clinical setting. Though post-type, non-dangling earrings and small rings are permitted, the student must be cognizant of possible safety risks imposed by the jewelry. Students should keep in mind that rings with stones may be difficult to keep sufficiently clean as bacteria may be
harbored in the settings. Other exposed pierced body sites must therefore be removed during the clinical rotation.

8. Some clinical sites may have other guidelines pertaining to grooming. As a visitor to such sites, students must also adhere to their guidelines.

9. Avoid perfumes, colognes, lotions, and body sprays.

**PATIENT PRIVACY AND SOCIAL NETWORKING**

HIPAA prohibits sharing of a patient’s medical information in all settings and violation may result in federal penalty, including sharing identifiable patient information during clinical seminar and classroom discussion. You may not take pictures of a patient’s condition in the clinical setting. Information about patients should be shared only with your professional colleagues on a need-to-know basis and this should be done in professional/private settings. Do not discuss any patient information in public places such as hallways or break rooms. Sharing of patient information in public places (i.e. with friends, on social networking sites, etc.) is a breach of confidentiality violates patient privacy laws and will not be tolerated.

**PRACTICUM EVALUATION**

Each practicum course must be passed with an 83% (Satisfactory) or better. The student’s final evaluation is completed by the Faculty of Record utilizing multiple evaluation methods which may include standardized patient exams, preceptor evaluations, faculty site visits observations, and assignments by the Faculty of Record as outlined in the practicum syllabus. Students must complete the clinical hour requirements for each practicum by the date specified in the syllabi.

**PRECEPTOR EVALUATIONS OF STUDENT**

The preceptor will formally evaluate the student at the end of the quarter. This evaluation serves as a component of the clinical practicum grade; however, each student is expected to meet with their preceptor informally on a regular basis to discuss clinical progress and achievement of clinical objectives. The student and the preceptor may review the final evaluation together, as time permits. Students are expected to review and sign their evaluation electronically on Typhon. Evaluation forms are sent to the preceptors by the Operational Support Analyst.

If any problems are encountered in clinical venues, the student will be counseled by the Faculty of Record and/or Clinical Education Coordinator. As stipulated in the academic failure/program dismissal policy, students may be dismissed from the program for unprofessional conduct in the clinical practicum rotation or for failure to pass the clinical practicum with an 83% (Satisfactory) or higher.
STANDARDIZED PATIENT EXAMS

Performance exams (SKA, OSCEs and CPX) are used periodically throughout the program to evaluate student’s progress toward achieving clinical competencies. Scoring of these exams is done by trained standardized patients and/or faculty observation. In the event a student does not demonstrate baseline competencies at the expected level on the first attempt at an OSCE or CPX, the Faculty of Record will develop a remediation plan with the student for successful achievement of competencies on a future attempt.

FACULTY CLINICAL SITE VISIT

The Clinical Education Coordinator or designated clinical faculty in Nursing Science will periodically schedule site visits to observe and evaluate the physical site, interaction between the preceptor, student and clients, and the student’s clinical progress. It is also an opportunity to work with the preceptor toward the development of the student’s clinical skills.

During the site visit, the NP Faculty will observe the student in patient encounters, during presentation of cases to preceptor, and will review charting. A written report will be completed by the faculty and placed in the student’s file. In the event the faculty evaluation documents the student is below level of expected performance, the faculty will discuss the results with the student, preceptor, and the Clinical Education Coordinator and a remediation contract will be developed. In the absence of a formal site visit, the Clinical Education Coordinator or designated faculty will communicate by telephone or via electronic means to discuss the student’s progress in the practicum.

RECORD KEEPING

1. All clinical records are to be submitted to the Operational Support Analyst for the clinical course as directed, unless specified otherwise.
2. Your schedule for the clinical rotation for the entire quarter must be logged in Typhon prior to the start of the clinical rotation. If a student’s work schedule prohibits a full 10 week calendar, Typhon must be updated prior to the next clinical day.
3. Any change in the planned schedule (illness, preceptor absence, etc.) must be modified in Typhon within 24 hours.
   1. Seminar/Skills Appraisal/OSCE/Procedures/CPX dates with hours will also be uploaded to Typhon after successful completion of the activity.
4. Typhon NPST system is used to track the Clinical Preceptorship information. Students will be trained in the use of this web-based clinical preceptorship tracking system, and will be required to input clinical and patient data daily. Students will not be authorized to input data after 7 days. If not done in this timeframe, the student will lose the patient encounters for the omitted day(s).
5. All clinical hours must be completed by the end of the quarter. Failure to complete clinical hours and/or concentration population may result in delayed program progression.
6. Inaccurate and/or falsified data entry on clinical logs or in the Typhon NPST system will be considered academic dishonesty and may result in failure of the course and/or dismissal from the program.
7. Students will evaluate each preceptor and site once during the quarter for each clinical rotation; evaluations must be completed by the designated due date.
8. All records must be submitted at the end of each quarter. Failure to do so will result in an “Unsatisfactory” grade for the clinical rotation.

**EXPOSURE GUIDELINES TO BLOODBORNE PATHOGENS (BBP) AND OTHER POTENTIALLY INFECTIOUS MATERIAL (OPIM)**

Participation in direct patient care activities can pose a risk to health care professionals, particularly in terms of exposure to infectious and/or communicable diseases. Costs of testing, diagnosis, and treatment of any infection and/or communicable diseases will be the responsibility of the student. As licensed registered nurses, graduate nursing students have current knowledge of universal safety precautions. Additionally, each student is required to complete an annual bloodborne pathogens training course. It is expected that all students strictly adhere to practices and principles of universal precautions, and routinely use appropriate barrier precautions and appropriate safety devices when occupational exposure to bloodborne pathogens and other potentially infectious material is likely.

Students must maintain adequate health insurance through the academic school year as a prerequisite for clinical placements and as a non-academic condition of enrollment. **Whenever in a clinical placement site, students are advised to keep their health insurance cards with them.**

Upon receipt of the Student Handbook, students must sign a receipt acknowledging that they have read the handbook and intend to follow the guidelines. The receipt then becomes part of their file.

**IF A STUDENT IS INJURED WHILE IN CLINICAL:**

1. The student should immediately notify the clinical instructor/preceptor/faculty member, who will then immediately contact the Faculty of Record for the course.
2. If necessary, the student will be excused from clinical for the day to seek medical treatment. The student remains responsible to fulfill all required clinical hours during the quarter.
3. If required, emergency care will be provided directly at the clinical site, at the student’s expense.
4. The student is responsible for contacting his/her own health care provider immediately following emergent care to arrange for post-injury follow-up.
5. A needle stick is considered an urgent medical concern (see post-exposure guidelines below).

6. All costs that are associated with the immediate and/or follow-up treatment are the responsibility of the student.

POST-EXPOSURE GUIDELINES:

If a student comes in contact with another person’s blood or body fluid (e.g., through a needle stick injury, contact with skin, or mucous membrane splash), take the following steps:

1. Immediately clean wound site with antiseptic soap and flush area with water. Notify preceptor or on-site instructor immediately.

2. Any student who has been exposed to blood or body fluid from a patient who is known to be or suspected to be HIV positive, must be evaluated within one hour post-exposure to obtain the most effective early prophylaxis. Instructor or preceptor should consult with nursing supervisor or medical director immediately for facility’s process. Students will be excused from clinical for the day in order to seek treatment as indicated. Clinical hours missed must be made up later in the quarter.

3. Any student who has been exposed to blood or body fluid from a patient and does not know the patient’s status but who is concerned regarding exposure must also be seen within one-hour post-exposure to obtain the most effective early prophylaxis. Students will be excused from clinical for the day in order to seek treatment as indicated. Clinical hours missed must be made up later in the quarter.

4. After the exposure, the student should document the date and time, patient’s name, identification number, and the unit and clinical site in which the exposure occurred. Keep this information in a secure place. This information should be utilized to complete an incident report per facility requirements. In addition, immediately contact the nursing supervisor or medical director at the clinical site and provide the supervisor or director with the information pertaining to the bloodborne exposure and source patient. If there is a UC Irvine faculty member on-site, s/he should be notified about the incident immediately. The nursing supervisor or medical director should request and obtain a source patient blood sample for Hepatitis B screening, Hepatitis C screening, and HIV screening. The nursing supervisor or medical director is authorized to release the results of the blood tests to the student. The student is responsible for contacting the supervisor or director to obtain this information.

**Note that post-exposure guidelines will vary among clinical sites and agencies; additionally, some clinical venues will have limited ability for on-site laboratory testing. Follow the agency guidelines for the site where the exposure occurs.

- Should the injury take place at UCIMC during clinical: Post-exposure care is provided by Occupational Health Services during business hours. The student is to demonstrate insurance coverage, and is responsible for any costs that may be
incurred for post-exposure treatment. If the incident occurs after hours or on weekends/holidays, the House Supervisor will page the Infectious Disease Fellow on-call to review the details of the incident and estimate the risk of exposure. The Infectious Disease Fellow will discuss the incident, counsel the student, and will call the House Supervisor to order the HIV test on the source patient, if indicated. The University of California, Irvine Healthcare has a Policy and Procedure for EXPOSURE: BLOODBORNE PATHOGEN PREVENTION AND CONTROL PLAN, (2017).

- **Should the injury take place at any other facility other than the UCIMC during clinical:** For cases of exposure occurring outside of UCIMC, the student should still follow steps #1-4 above. UCIMC will not be able to obtain the source patient's lab results. The student is responsible for obtaining these as discussed above. Post-exposure guidelines will vary among clinical sites and agencies; additionally, some clinical venues will have limited ability for on-site laboratory testing. Follow the agency guidelines for the site where the exposure occurs.

- **Post-exposure prophylaxis shall be provided when medically indicated per CDC general guidelines and as prescribed for the individual student by the Occupational Health physician, Infectious Disease physician, or Emergency Room attending.**

**For students with the University of California Student Health Insurance Plan (UC SHIP):** A student who is covered by the UC SHIP and has a needle stick injury at a site other than UCIMC, may be seen and treated at the UCI Student Health Center if the incident is during the UCI Student Health Center's normal business hours. The student must also contact the UC SHIP Insurance Coordinator within 24 hours so that insurance coverage will be authorized and post-exposure follow up arranged at UCI Student Health Services. If the exposure occurs outside of usual business operating hours, please leave a message and follow-up during normal business hours. Otherwise, the insurance provider is not obligated to cover the cost of the initial urgent or immediate evaluation and care post-exposure.

**For students with private health insurance:** For those students who waived out of the UC SHIP, they may also be seen at the UCI Student Health Center during normal operating hours, but are required to pay fee for services. Students may see their personal health care provider for post-exposure evaluation and care. There may be fees for the office visits, lab tests, medications and other procedures which are the responsibility of the student. The students’ private insurance carrier may be billed; however, if the student’s insurance will not accept the facilities’ services, s/he must follow their carrier’s accepted protocol and s/he will be responsible for the cost. Again, it is the student’s responsibility to know his/her benefits, exclusions and limitations. Most insurance plans have provisions which include the need to report the injury to the insurance company within a brief period after the injury.
5. The student must follow-up with their healthcare provider through the “window period” as appropriate: 72 hours, 6 weeks, 12 weeks and 6 months. Refer to CDC guidelines for bloodborne pathogen post-exposure care.

6. The student must contact his/her healthcare provider if any of the tests are positive and must provide them with the supporting documentation. The students’ primary healthcare provider should provide post-test counseling and appropriate intervention.

7. Within 24 hours of the incident, the student should notify the UC Irvine Nursing Sciences Faculty of Record for the Clinical Course, the Clinical Education Coordinator, and the MS/NP Program Director.

References


Additionally, expert consultation may be obtained by calling the National Clinician’s Post-Exposure Prophylaxis Hotline at 888-448-4911 and visiting http://nccc.ucsf.edu/
CAMPUS RESOURCES

ANTLINK
http://www.students.uci.edu

BOOKSTORE
http://www.book.uci.edu/

CAREER CENTER
http://www.career.uci.edu/

CHILD CARE SERVICES
http://www.childcare.uci.edu/

COUNSELING CENTER
http://www.counseling.uci.edu/

CROSS-CULTURAL CENTER
http://www.ccc.uci.edu/

DISABILITY SERVICES CENTER (DSC)
http://www.disability.uci.edu/

ELECTRONIC EDUCATIONAL ENVIRONMENT (EEE/Canvas)
https://eee.uci.edu/

FINANCIAL AID
http://www.ofas.uci.edu/content/

GRADUATE DIVISION
http://www.grad.uci.edu/

GRADUATE RESOURCE CENTER
http://www.grad.uci.edu/services/grc/index.html

HEALTH INSURANCE PLAN FOR GRADUATES (UC SHIP)
http://www.shc.uci.edu/health_insurance_privacy/insurance.aspx#shipplan

HEALTH EDUCATION CENTER
http://www.healtheducation.uci.edu/

HOUSING
http://www.housing.uci.edu/
INTERNATIONAL CENTER  
http://www.ic.uci.edu/

LEARNING AND ACADEMIC RESOURCE CENTER (LARC)  
http://www.larc.uci.edu/

LESBIAN, GAY, BISEXUAL, TRANSGENDER RESOURCE CENTER (LGBT)  
http://www.lgbtrc.uci.edu/

LIBRARIES (MAIN)  
http://www.lib.uci.edu/

SCHOOL OF NURSING (UCI)  
http://www.nursing.uci.edu/

OFFICE OF INFORMATION TECHNOLOGY (formerly known as NACS)  
http://www.oit.uci.edu/

OFFICE OF THE OMBUDSMAN  
http://ombuds.uci.edu/

PARKING AND TRANSPORTATION SERVICES  
http://www.parking.uci.edu/

REGISTRAR'S OFFICE/STUDENT ACCESS/WEBREG/SCHEDULE OF CLASSES  
http://www.reg.uci.edu/

STUDENT HEALTH CENTER  
http://www.shs.uci.edu/

TESTING OFFICE  
http://www.testingcenter.uci.edu/

VOLUNTEER CONNECTION  
http://uci.galaxydigital.com/
# APPENDIX A: CURRICULUM FOR FNP CONCENTRATION

## Full Time

<table>
<thead>
<tr>
<th>Year</th>
<th>Fall Quarter</th>
<th>Winter Quarter</th>
<th>Spring</th>
<th>Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>NS 210 Pathophysiology</td>
<td>3</td>
<td>NS 200 Nursing Research</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>NS 230 Advanced Health and Physical Assessment</td>
<td>3</td>
<td>NS 215 HPDP</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>NS 230L Advanced Health and Physical Assessment Lab</td>
<td>1</td>
<td>NS 245A Primary Care A</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>NS 282 Human Behavior and Mental Health</td>
<td>3</td>
<td>NS 250 Primary Care Women's Health</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>NS 285 Clinical Practicum I</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2nd</td>
<td>NS 225B Pharmacology B</td>
<td>3</td>
<td>NS 255 Primary Care Obstetrics</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>NS 245B Primary Care B</td>
<td>3</td>
<td>NS 281 Frameworks for APN</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>NS 270 Primary Care Pediatrics</td>
<td>3</td>
<td>NS 288 Clinical Practicum IV</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>NS 287 Clinical Practicum III</td>
<td>5</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## APPENDIX B: CURRICULUM FOR AGPCNP CONCENTRATION
### Full Time

<table>
<thead>
<tr>
<th>1st Year</th>
<th>Fall Quarter</th>
<th>Unit</th>
<th>Winter Quarter</th>
<th>Unit</th>
<th>Spring</th>
<th>Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>NS 210 Pathophysiology</td>
<td>3</td>
<td>NS 200 Nursing Research</td>
<td>3</td>
<td>NS 225A Pharmacology A</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>NS 230 Advanced Health and Physical Assessment</td>
<td>3</td>
<td>NS 215 HPDP</td>
<td>3</td>
<td>NS 283 Procedures</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>NS 230L Advanced Health and Physical Assessment Lab</td>
<td>1</td>
<td>NS 245A Primary Care A</td>
<td>3</td>
<td>NS 260A Adult/Gero A</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>NS 282 Human Behavior and Mental Health</td>
<td>3</td>
<td>NS 250 Primary Care Women’s Health</td>
<td>3</td>
<td>NS 286 Clinical Practicum II</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>NS 285 Clinical Practicum I</td>
<td>2</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2nd Year</th>
<th>Fall</th>
<th>Unit</th>
<th>Winter</th>
<th>Unit</th>
<th>Spring</th>
<th>Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>NS 225B Pharmacology B</td>
<td>3</td>
<td>NS 280 Aging &amp; Chronic Illness</td>
<td>3</td>
<td>NS 284 Scholarly Concentration</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>NS 245B Primary Care B</td>
<td>3</td>
<td>NS 281 Frameworks for APN</td>
<td>3</td>
<td>NS 289 Clinical Practicum V</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>NS 260B Adult/Gero B</td>
<td>3</td>
<td>NS 288 Clinical Practicum IV</td>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>NS 287 Clinical Practicum III</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX C: GENERAL WRITING RESOURCES

Online Resources

- Comprehensive “Guide to Grammar and Writing”
  http://grammar.ccc.commnet.edu/grammar/
- Grammatical Exercises
  www.wilbers.com/exercise.htm
- OWL Purdue Online Writing Lab
  http://owlenglish.purdue.edu/exercises/
  (APA Format Guide) http://owlenglish.purdue.edu/owl/resource/560/01/
- On-line Writing Center – SUNY Empire State College
  www.esc.edu/writer
- Writing Resources: Princeton University Writing Center
  http://web.princeton.edu/sites/writing/Writing_Center/WCWritingResources.htm
- Topics on Writing Papers: University of N. Carolina Chapel Hill
  http://writingcenter.unc.edu/
- The Writing Center at Harvard
  http://www.fas.harvard.edu/~wricntr/resources.html

Students should actively and regularly consult with instructors and/or advisers regarding written work produced for NP required courses. It is the student’s responsibility to seek aid with written work. Students should remain cognizant of UCI policies on academic honesty when completing all assignments.
APPENDIX D: PEARLS FOR RECRUITING A PRECEPTOR

Pearls for Recruiting a Preceptor

Welcome Graduate Students to the School of Nursing. We are thrilled you are joining us and would like to give you some information about your clinical experiences that begin in your 2nd quarter.

Your first clinical rotation will begin January 2017. The University of California, Irvine takes pride in selecting and overseeing preceptors and managing student preceptorships to ensure high quality clinical experiences; it is a role we take very seriously. We have some clinical placements available to students in the Orange County area and surrounding counties; however, to make certain each student receives ample clinical experiences, we are asking each student to identify 2 preceptors to augment your clinical learning experiences. One preceptor will ideally be in a primary care clinical site (family medicine/practice, internal medicine, geriatrics and/or a community clinic), the other should be a preceptor who provides obstetrical (pre-natal) care to women or pediatrics. We have had significant challenges identifying preceptors for our students’ OB-pediatrics rotations and as a family nurse practitioner, pre- and post-natal care and pediatrics are an essential experience in your scope of practice. Students may be precepted by MD’s, DO’s, NP’s, and/or CNM’s. Examples of clinical settings include community clinics, private practice sites, group practices, and HMOs. Your clinical rotation experience will begin with primary care. Additional rotations, such as primary care pediatrics and obstetrics, will commence in the second year (September 2017 OR January 2018). The following information will assist you in this effort:

- Suggestions for clinical sites might be your own personal clinician, colleague, or other acquaintances. Most hospital physicians, with whom you may work, have an outpatient practice and may consider precepting an NP student, or may help you to network with colleagues.
- Preceptors are expected to precept a student for approximately 8-16 hours a week (1-2 days) for 10 weeks per quarter. Ideally, a student should remain in the same site for two quarters (5-6 months).
- Preceptors are expected to carry malpractice insurance for themselves and their practices. All students have UCI malpractice insurance which provides coverage only in UCI affiliated clinical sites. You will also be required to purchase your own individual professional malpractice coverage.
- UCI requires that we have an affiliation agreement with each clinical practice. The affiliation agreement will be facilitated by Lila Sapolu, Operational Support Analyst, and the process may take up to 6 months to complete-- so please bear this in mind.
- The preceptor experience is NOT simply a “tag-along” observational experience; the usual routine is to have students observe the preceptor (the first day or so), and then the student is expected to be more independent as the quarter goes on by having a more autonomous role in patient care with direct supervision by the preceptor.
- All medical records will be signed by your preceptor and feedback from the preceptor is expected to make sure the student is progressing.

If you identify a potential preceptor, please complete the New Preceptor and Clinical Site Form and email to Susan Tiso and Lila Sapolu. We will contact the potential preceptor to discuss details. We appreciate your commitment to a rewarding clinical experience as a nurse practitioner student. If you have any questions, please don’t hesitate to contact us.

Susan Tiso
NP Program, Clinical Education Coordinator
stiso@uci.edu
949-824-5056

Lila Sapolu
Operational Support Analyst
clinicalplacements@uci.edu
949-824-3630
# APPENDIX E: NEW PRECEPTOR-CLINICAL SITE FORM

## New Preceptor and Clinical Site Information Form

### Preceptor Information
(Must complete ALL fields)

<table>
<thead>
<tr>
<th>Name:</th>
<th>Position/Title: (MD, NP, etc)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Phone: (Indicate Work, Cell, Home)</th>
<th>Email:</th>
</tr>
</thead>
</table>

### Clinical Site Information
(Must complete ALL fields)

<table>
<thead>
<tr>
<th>Facility Name:</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Type of Facility:</th>
<th>Private Practice?</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Type of Practice:</th>
<th>Quarter Needed: __________________</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Student who identified Preceptor (If Applicable)</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Administrative Person Authorized to Sign: (Volunteer Coordinator and/or Affiliation Agreements)</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Contact:</th>
<th>Position/Title:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Phone:</th>
<th>Email:</th>
</tr>
</thead>
</table>

### NOTES
(Please provide any additional information regarding the Preceptor/Site. E.G., "Must contact administrator first for placement" OR "Preceptor prefers to be contacted by e-mail/ cellphone")

### OFFICE USE ONLY

<table>
<thead>
<tr>
<th>CV Received:</th>
<th>Comments:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>VETTED:</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>RN or MD License:</th>
<th>Comments:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>VETTED:</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>NP BRN Furnishing &amp; Certification:</th>
<th>Comments:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>VETTED:</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>ADMIN RECEIVED DATE / INITIAL</th>
<th></th>
</tr>
</thead>
</table>

PLEASE SUBMIT THIS FORM TO LILA SAPOLU WHEN COMPLETE CLINICALPLACEMENTS@UCLEDU
APPENDIX F: PHYSICAL AND MENTAL HEALTH CLEARANCE FORM

Physical and Mental Health Clearance Form

This is to verify that ______________________ does not have any physical or mental health condition(s) that would create a hazard to themselves, employees or patients during required clinical rotation assignments.

(Print name of Healthcare Provider)

(Signature of Healthcare Provider)

(License #)

(Date)

UCI
University of California, Irvine

Sue & Bill Gross School of Nursing
252 Berk Hall
Irvine, CA, 92697-3959
(949) 824-1514
www.nursing.uci.edu