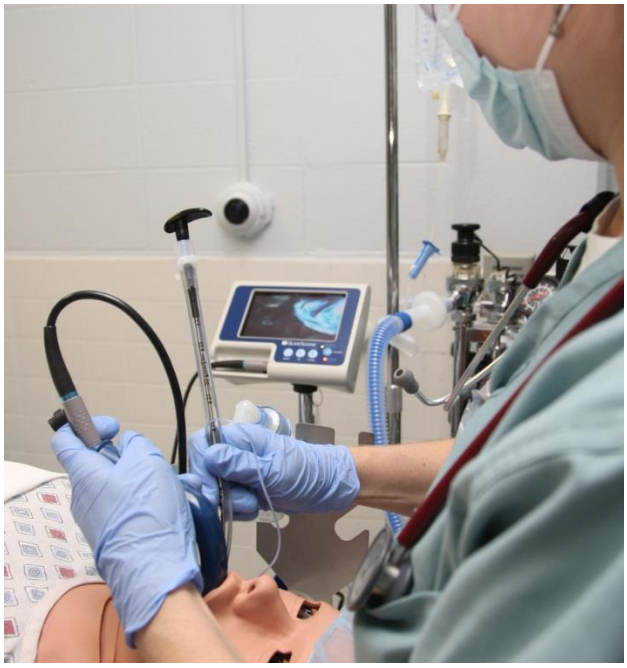
Samford University
Moffett & Sanders School of Nursing



Nurse Anesthesia – Class of 2029
Doctor of Nursing Practice (DNP)
Student Handbook

"He will not forget your work and the love you have shown Him as you have helped His people and continue to help them." Hebrews 6:10

REVIEWED AND REVISED 08/24, 4/25, 4/26

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Samford University
Moffett & Sanders School of Nursing

Dear Students:

Welcome to the Moffett & Sanders School of Nursing (MSSON). On behalf of the faculty and staff, it is my privilege to welcome new and returning students. We are excited that you are pursuing a Doctor of Nursing Practice degree and are honored that you have selected our program. Since the school began in 1922, the MSSON has prepared highly qualified and compassionate nurses to provide care and lead in all sectors of the nursing profession. Our primary focus is to help each one of you to be successful and to create a positive learning environment that assists you in achieving your educational and professional goals.

Consistent with the values of Samford University, the faculty have designed a curriculum that will build upon your strengths and prior educational and clinical experiences and promote the provision of caring, competent, and compassionate service to others. We are prepared to guide, support, and mentor you as you expand your skills and knowledge.

Again, welcome to the nurse anesthesia program at the Moffett & Sanders School of Nursing. We look forward to working with you throughout your journey as a student and having you join the ranks of MSSON alumni who have been and are providing quality, compassionate health care throughout the world! I look forward to meeting each one of you and I wish you much success in your studies as you advance in our profession.

Sincerely,

Melondie R. Carter

Melondie Carter, PhD, RN
Ralph W. Beeson Dean and Professor
Moffett & Sanders School of Nursing

DEPARTMENT OF NURSE ANESTHESIA

Melondie R. Carter, PhD, RN, Dean and Professor

Lora Shelton, DNP, FNP, CNE, Senior Associate Dean and Professor

Lisa Gurley PhD, RN, CNE, COAT, CPHQ, Associate Dean, Graduate Programs and Professor

Terri Cahoon, DNP, CRNA, FAANA, Department Chair and Professor

Lisa Herbinger, DNP, CRNA, FAANA, Associate Department Chair and Associate Professor

Amy Snow, DNP, CRNA, Director of Clinical Services and Assistant Professor

Maria Ledbetter, DNAP, CRNA, CNE, Associate Professor

David Sanford, DNP, CRNA, EMT-P, Associate Professor

David Fort, DNP, CRNA, Adjunct Faculty

Mary Beth Greenway, DNP, CRNA, Simulation Coordinator and Adjunct Faculty

Lauren Barnes, DNP, CRNA, Adjunct Faculty

Nancy Ann Westbrook, DNP, MSNA, CRNA, FNP- BC, Col (Ret) USAF, Adjunct Faculty

Cassandra D. King, DNP, CRNA, Adjunct Faculty

Jamey Roberts, DNP, CRNA, Adjunct Faculty

Becky Morgan, BS, Department Coordinator

FOREWORD

This student handbook has been developed and revised in an effort to acquaint you, the student, with the policies and procedures necessary for effective communication and functioning of the Moffett & Sanders School of Nursing and the Department of Nurse Anesthesia. We hope that each of you will keep this handbook and file it in a place readily available for quick reference when questions arise. Again, welcome and best of wishes to each of you for a most rewarding educational experience in preparation for a rewarding professional and personal life.

NON-DISCRIMINATION STATEMENT

In accordance with applicable federal and state laws, such as Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, the Age Discrimination in Employment Act, and the Americans with Disabilities Act and ADA Amendments, the University does not unlawfully discriminate on the basis of sex, gender, race, color, national origin, age, disability, genetic information, veteran status, religion, or any other protected status under federal, state or local law applicable to the University, in its education policies, programs, and activities, in its admissions policies, in employment policies and practices, and all other areas of the University. As a faith-based institution, the University is exempted from certain laws and regulations concerning discrimination. Inquiries and concerns regarding this policy may be directed to the Office of General Counsel, 302 Samford Hall, Birmingham, AL 35229, 205-726-4502.

ACCOMMODATIONS - AMERICANS WITH DISABILITIES ACT

The Moffett & Sanders School of Nursing (MSSON) endorses the university commitment to students with disabilities. MSSON will provide accessible programs, services, and activities and reasonable accommodations for any student with a disability as defined by Section 504 of the Rehabilitation Act of 1973, and by the Americans with Disabilities Act (ADA) of 1990. Students with disabilities or chronic health conditions who wish to request accommodations should register with the Office of Accessibility and Accommodations (205) 726-4078, access@samford.edu, DBH 203, https://www.samford.edu/departments/disability-resources/. Students are then responsible for sending the course instructor an official notification of their accommodation eligibility through the OAA online portal AND confirming with the course instructor in advance how accommodations can be utilized in this class. Accommodations may not be applied retroactively, and requests made with insufficient notice are typically not possible. Meeting with the course instructor should occur during the first week of the semester.

Nursing is a practice discipline with cognitive, sensory, affective, and psychomotor performance requirements. Qualified individuals are those who satisfy admission requirements and who can perform essential functions of a nursing program with or without reasonable accommodation or modification.

Students must satisfy the Essential Performance Standards of nursing students (pp. 111-113). If these standards cannot be achieved by the student, either unassisted or with dependable use of assistive devices, the faculty reserves the right to withdraw the student from clinical courses.

To be eligible for program accommodation, students must self-identify to the Office of Accessibility and Accommodations, who will determine eligibility for services. Accommodations will not be implemented until the student has met with faculty to review the accommodation letter.

INTRODUCTION AND OVERVIEW

A BRIEF HISTORY OF SAMFORD UNIVERSITY

Samford University is the largest privately supported and fully accredited institution for higher learning in Alabama. Founded by a group of education, economic, and religious leaders, the school was chartered in 1841 and opened its doors on January 3, 1842, in Marion, Alabama as Howard College. It has survived two destructive fires and the partial paralysis of the Civil War and Reconstruction. In 1887 it was relocated to Birmingham, and in 1957 the institution was moved to its present campus. In 1920 Howard College gained membership in the Southern Association of Colleges. The establishment of the Teacher Education Division in 1914 and the Division of Pharmacy in 1927 highlighted the school's continuous growth throughout the years. The historic and renowned Cumberland School of Law, established in 1847 in Lebanon, Tennessee was acquired in 1961.

The University now consists of the Howard College of Arts and Sciences, Brock School of Business, Orlean Beeson School of Education, School of the Arts, Beeson School of Divinity, Cumberland School of Law, and the College of Health Sciences, which includes the Moffett & Sanders School of Nursing (MSSON), McWhorter School of Pharmacy, School of Health Professions, and School of Public Health. Samford University was founded by Baptists of Alabama, and today maintains a close relationship with the Alabama Baptist State Convention. While the University cherishes this relationship and sees its role centered on Christian belief, Samford is open to students of all denominations and faith traditions.

A BRIEF HISTORY OF THE COLLEGE OF HEALTH SCIENCES

Established in 2013, the College of Health Sciences is comprised of four schools— School of Health Professions, Moffett & Sanders School of Nursing, McWhorter School of Pharmacy and School of Public Health. It is also home to the Experiential Learning and Simulation Center. The mission of the college is to prepare graduates in an interprofessional, Christ-centered learning community to promote and improve the health and well-being of individuals and communities. The college emphasizes healing the body, nurturing the mind and inspiring the spirit through rigorous academics, local and global service, and innovative scholarship.

A BRIEF HISTORY OF THE MOFFETT & SANDERS SCHOOL OF NURSING

Ida V. Moffett once said, "Before great things are accomplished, someone has to dream a dream." The Birmingham Baptist Association founded the Birmingham Baptist Hospital School of Nursing in 1922 with the goal of educating nurses to meet a desperate need for skilled practitioners. Originally established as a hospital-based diploma program, the school was renamed Ida V. Moffett School of Nursing in 1968, and it was the first program in Alabama to achieve accreditation by the National League for Nursing. In 1973, following a merger agreement with Baptist Health Systems, the nursing program transferred to Samford University and began offering associate and baccalaureate degrees in nursing. Since that time, the school has grown to include master's and doctoral degrees in nursing. While Moffett & Sanders School of Nursing has experienced significant growth and transformation since its foundation, the

school's objective remains unchanged: to prepare graduates to provide exceptional, compassionate, patient-centered care. The school focuses on four foundational pillars, all of which are based on the vision and passion of legendary nurse Ida Vines Moffett: academic excellence, compassion, caring and service. It is because of this commitment to both the art and science of nursing that Moffett & Sanders School of Nursing is nationally recognized for the strength of its programs and faculty. Three times in its history, the school has received the prestigious Center of Excellence designation from the National League for Nursing. In 2021 and in 2017, for "creating an environment that promotes the pedagogical expertise of faculty" and in 2005, for "creating environments of learning that promotes innovative student learning and professional development." The school also consistently ranks in the top tier in U.S. News & World Report rankings. Since 1922, Moffett & Sanders School of Nursing has continued Mrs. Moffett's legacy of excellence in nursing. Today, thousands of Moffett nurses are impacting the lives of others throughout the United States and around the world.

UNIVERSITY AND SCHOOL OF NURSING AND PROGRAM ACCREDITATION

Samford University is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award associate, baccalaureate, masters, educational specialist, and doctorate degrees. Samford University also may offer credentials such as certificates and diplomas at approved degree levels. Questions about the accreditation of Samford University may be directed in writing to the Southern Association of Colleges and Schools Commission on Colleges at 1866 Southern Lane, Decatur, GA 30033-4097, by calling (404) 679-4500, or by using information available on SACSCOC's website (www.sacscoc.org).

The Moffett & Sanders School of Nursing's baccalaureate, master's, and doctoral degree programs are accredited by The Commission on Collegiate Nursing Education (CCNE), 655 K Street NW, Suite 750, Washington, DC 20001; phone (202) 887-6791. In addition, the nurse anesthesia program is accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA), 10275 W. Higgins Rd., Suite 906, Rosemont, IL 60018-5603 phone: 224-275-9130 http://coacrna.org. The School of Nursing is also approved by the Alabama Board of Nursing.

MISSION STATEMENT OF SAMFORD UNIVERSITY

The mission of Samford University is to nurture persons in their development of intellect, creativity, faith, and personhood. As a Christian university, the community fosters academic, career, and ethical competency, while encouraging social and civic responsibility, and service to others.

The Samford community values lifelong:

- belief in God, the Creator of heaven and earth, and in Jesus Christ, His only Son, our Lord.
- engagement with the life and teachings of Jesus
- learning and responsible freedom of inquiry
- personal empowerment, accountability, and responsibility

- vocational success and civic engagement
- spiritual growth and cultivation of physical well-being
- integrity, honesty, and justice
- appreciation for diverse cultures and convictions
- stewardship of all resources
- service to God, to family, to one another, and to the community.

MISSION STATEMENT OF THE MOFFETT & SANDERS SCHOOL OF NURSING

The mission of the Moffett & Sanders School of Nursing is to prepare caring, competent, and compassionate graduates with a commitment to service, scholarship, lifelong learning, and professional practice by providing a quality nursing education in a nurturing Christian environment.

VISION

In response to the evolving demands of the health care needs of a global society, the MSSON will be a premier faith-based school of nursing that serves as the standard for nursing education and practice.

VALUES

- Christian values
- Advocacy
- Caring and Compassion
- Lifelong Learning
- Academic and Practice Excellence
- Professionalism
- Servant Leadership
- Innovation
- Integrity
- Individual Worth

ORGANIZING FRAMEWORK

The organizing framework for the MSSON provides the overall structure for establishing the curriculum and maintaining its internal consistency. Program goals and student objectives provide general statements regarding the expected results for students and faculty. These values, beliefs, and expected results are operationalized through the standards established by the AACN and published in *The Essentials: Core Competencies for Professional Nursing Education (AACN, 2021)*. This document provides the structural constructs (core knowledge, core skills, and role component) that guide course content, course objectives, and teaching/learning practices within the curriculum. Program quality is maintained through a commitment to continuous quality improvement and is implemented through the Systematic Evaluation Plan.

DNP Program Overview

The Doctor of Nursing practice (DNP) is a terminal degree in nursing. The DNP program fulfills a need within the profession for advanced practice nurses who can provide leadership in the healthcare system of the 21st century. This program prepares graduates to demonstrate competencies, including organizational and systems leadership, advanced clinical skills, the ability to mobilize interprofessional teams, the ability to establish collaborative relationships to solve complex clinical problems, and to initiate policy and programmatic changes. The DNP graduate will be a visionary leader for the practice of nursing and the delivery of health care in all settings.

Graduate Program Outcomes

At the completion of the DNP program, graduates will be able to:

1. Integrate knowledge and evidence from nursing and other sciences into advanced specialty nursing practice.
2. Design evidence-based person-centered care within multiple contexts across the health continuum.
3. Formulate strategies to improve equitable population health outcomes among diverse populations.
4. Engage through scholarship and analytical methods for evidence-based practice to effect optimal health outcomes.
5. Facilitate quality of care and culture of safety at individual and system levels.
6. Collaborate, building on core nursing and interprofessional values, to optimize integrated team-based care.
7. Coordinate innovative system-based solutions to address complex health problems for diverse individuals and populations across settings.
8. Incorporate information systems and technologies for the provision and/or transformation of healthcare delivery and nursing practice.
9. Model nursing's unique professional identity and ethical behaviors across roles, relationships, and settings.
10. Participate in activities and self-reflection that promote well-being, resilience and leadership in self and others.

Department Of Nurse Anesthesia Doctor Of Nursing Practice (DNP) Outcomes

Upon completion of the DNP degree requirements in the Nurse Anesthesia program, the graduate will be prepared to:

1. Deliver safe patient care including the following behaviors:
   a. Be vigilant in the delivery of patient care.
   b. Refrain from engaging in extraneous activities that abandon or minimize vigilance while providing direct patient care (e.g., texting, reading, emailing, etc.)
   c. Conduct a comprehensive equipment check.
   d. Protect patients from iatrogenic complications.

2. Provide perianesthetic management as demonstrated by the ability to:
    a. Provide individualized care throughout the perianesthetic continuum.
    b. Deliver culturally competent perianesthetic care.
    c. Provide anesthesia services to all patients across the lifespan.
    d. Perform a comprehensive history and physical assessment.
    e. Administer general anesthesia to patients with a variety of physical conditions.
    f. Administer general anesthesia for a variety of surgical and medically related procedures.
    g. Administer and manage a variety of regional anesthetics.
    h. Maintain current certification in advanced and pediatric cardiac life support (ACLS and PALS).

3. Employ ethical, critical thinking as demonstrated by the ability to:
    a. Apply knowledge to practice in decision-making and problem solving.
    b. Provide nurse anesthesia services based on evidence-based principles.
    c. Perform a preanesthetic assessment before providing anesthesia services.
    d. Assume responsibility and accountability for diagnosis.
    e. Formulate an anesthesia plan of care before providing anesthesia services.
    f. Identify and take appropriate action when confronted with anesthetic equipment-related malfunctions.
    g. Interpret and utilize data obtained from noninvasive and invasive monitoring modalities.
    h. Calculate, initiate, and manage fluid and blood component therapy.
    i. Recognize, evaluate, and manage the physiological responses coincident to the provision of anesthesia services.
    j. Recognize and appropriately manage complications that occur during the provision of anesthesia services.
    k. Use science-based theories and concepts to analyze new practice approaches.
    l. Pass the National Certification Examination (NCE) administered by NBCRNA.

4. Utilize effective communication skills including the following:
    a. Utilize interpersonal and communication skills that result in the effective exchange of information and collaboration with patients and their families.
    b. Utilize interpersonal and communication skills that result in the effective interprofessional exchange of information and collaboration with other healthcare professionals.
    c. Respect the dignity and privacy of patients while maintaining confidentiality in the delivery of interprofessional care.
    d. Maintain comprehensive, timely, accurate, and legible healthcare records.
    e. Transfer the responsibility for care of the patient to other qualified providers in a manner that assures continuity of care and patient safety.
    f. Teach others.

5. Assume leadership and professional responsibility as demonstrated by the ability to:
    a. Integrate critical and reflective thinking in his or her leadership approach.
    b. Provide leadership that facilitates intraprofessional and interprofessional collaboration.
    c. Adhere to the *Code of Ethics for the Certified Registered Nurse Anesthetist*.
    d. Interact on a professional level with integrity.
    e. Apply ethically sound decision-making processes.
    f. Function within legal and regulatory requirements.
    g. Accept responsibility and accountability for his or her practice.
    h. Provide anesthesia services to patients in a cost-effective manner.
    i. Demonstrate knowledge of wellness and substance use disorder in the anesthesia profession through completion of content in wellness and substance use disorder.
    j. Inform the public of the role and practice of the CRNA.
    k. Evaluate how public policy making strategies impact the financing and delivery of healthcare.
    l. Advocate for health policy change to improve patient care.
    m. Advocate for health policy change to advance the specialty of nurse anesthesia.
    n. Analyze strategies to improve patient outcomes and quality of care.
    o. Analyze health outcomes in a variety of populations.
    p. Analyze health outcomes in a variety of clinical settings.
    q. Analyze health outcomes in a variety of systems.
    r. Disseminate scholarly work.
    s. Use information systems/technology to support and improve patient care.
    t. Use information systems/technology to support and improve healthcare systems.
    u. Analyze business practices encountered in nurse anesthesia delivery settings.

CURRICULAR REQUIREMENTS

The nine-semester curriculum plan is a didactically "front-loaded" design. The first two semesters are designed to allow students to take courses online utilizing distance education principles. The first five semesters consist solely of didactic courses conducted by department and nursing faculty, select academic, clinical, and adjunct university faculty. The courses provide the student with fundamental basic science, clinical, professional, and doctoral education.

FOUNDATIONAL COURSEWORK

Human Anatomy
Human Physiology
Essentials of Population Health
Anesthesia Pharmacology
Advanced Pathophysiology
Anesthesia Principles
Advanced Physical Assessment
Obstetric and Regional Anesthesia
Concepts of Advanced Nursing Practice
Theoretical Principles of Evidence-Based Practice
Systems-Based Practice

The curriculum is offered in a sequential manner with increasing complexity to provide a continuum of increasing knowledge, competencies, and skills to support the clinical practicum

and the DNP project. The sixth semester begins with an overlap of coursework and a full clinical schedule.

Clinical rotations in semesters six through nine enable students to integrate and apply scientific principles to safe anesthetic practice. In addition to clinical courses, the student takes seminar courses in conjunction with clinical practicum. Seminar courses bind the foundational knowledge with ongoing clinical experiences. They are directed toward integration of scientific principles with clinical experiences, evidence-based practice, DNP project development, implementation and evaluation, certification examination preparation, and professional aspects of the nurse anesthesia role.

Clinical courses provide the student with supervised practice and experience in the planning and execution of general and regional anesthesia techniques. Directed clinical experience, seasoned preceptors, and a wide variety of patients and clinical settings add breadth and depth to the graduate students' practicum.

Students will rotate to varied clinical sites. The pace and complexity of clinical experiences will be sequenced to allow achievement of basic skills early on and highly integrated complex skills later in the clinical education. Sequencing these clinical experiences will allow the student to develop technical and critical-thinking skills and analytical decision-making skills appropriate to the student's level of experience. As the student progresses, he/she will assume increasing responsibility for the planning, implementation, and evaluation of anesthesia care. This process will develop a graduate that can engage in the full scope of nurse anesthesia practice.

SERVICE LEARNING EXPERIENCE

The faculty members of the department value learning that comes from serving with a variety of populations, cultures, and passions. The Service-Learning component has been developed to bridge classroom and community-based learning to develop the true professional. A minimum of twenty hours of service to the community or profession, as well as three service-learning reflective self-evaluations, are required prior to graduation. The required twenty hours can be obtained through "Lunch-n-Learns", service in the student's community and/or church, mission trips, and service to nurse anesthesia professional organizations and/or the MSSON. While twenty hours is the minimum requirement, students are encouraged to serve and submit records for every area of service.

MEDICAL MISSION APPROVAL

Nurse anesthesia students are encouraged to participate in medical mission opportunities. Typically, students travel with third-party organizations such as Kenya Relief or Medical Mission Ecuador. To obtain approval and ensure appropriate clinical scheduling, the student is responsible for submitting the required information on the Medical Missions Information form to the department chair before making any travel arrangements. The form can be accessed on

the departmental Canvas page. If funds are requested from the Jackie H. Davis Medical Mission Fund, the student will submit those application materials to the department chair as well.

THRIVE: A WELLNESS INITIATIVE

The *Thrive* initiative is a collaborative effort between faculty and staff from the Counseling and Wellness Department and the Department of Nurse Anesthesia. The goal is to help develop students' coping skills, emotional intelligence, and overall well-being through a variety of targeted strategies. While engagement in *Thrive* is strongly encouraged, participation is completely voluntary.

Studies conducted with SRNAs and CRNAs reveal that ineffective coping skills can lead to higher rates of burnout, intense anxiety, substance use, and depression. With this knowledge, the faculty is proactively working with professionals to provide content each semester to strengthen the skills necessary not just to survive but thrive. New content will be introduced each semester and will be housed in a module in Canvas for access anytime.

DNP PROJECT EXPERIENCE

The DNP project experience is an integration of learning that requires the student to synthesize knowledge and put into practice what has been learned in the program of study. The project should reflect the integration of evidence, research methodology, theory, and advanced nursing practice in nurse anesthesia. Students will work on their project in a mentor / mentee relationship with a doctoral-prepared mentor and team member. All case studies must be approved by the team leader. Students will disseminate project results professionally. The DNP Project Handbook includes the details of the project, its dissemination, and grading, as well as details of a portfolio in which to demonstrate achievement of program outcomes.

INSTITUTIONAL REVIEW BOARD

Single patient, de-identified case studies are designated by Samford University *Policy Number 2.02.12, IRB Review of Case Study Projects*, as not requiring IRB review. "Guidelines for Case Study Projects Federal regulation (45 CFR 46.102) defines research as 'a systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalizable knowledge.' Samford has determined, based on review of the regulations, that a case report of three (3) or fewer cases (with an $n \leq 3$) does not constitute human subjects research and does not require review by the Samford IRB. A case report of one to three cases would likely not contribute or produce 'generalizable knowledge' and therefore does not meet OHRP's definition of human subjects research.

Patients' confidentiality must always be respected when using their personal or medical information. The 18 HIPAA identifiers noted in the HIPAA regulations or other combinations of identifiers, which might easily allow someone to identify a patient, should never be used in a publication or presentation without approval. It is required that patients provide HIPAA authorization to allow information on their case to be published if it is not de-identified in

accordance with 45 CFR 164.514(a). In the case of patients who are deceased, HIPAA authorization is required from the patients' family, with the exception of persons who have been deceased for more than 50 years."

When submitting documentation of IRB status for case study work, the Samford policy regarding non-research standing will be used.

Any proposed project outside of this policy requires review and approval by the IRB where the project will be conducted, as well as Samford's IRB. All research proposals must be directed to the Institutional Review Board for Human Subjects at Samford University for approval. In addition, each proposal must be reviewed and approved by the Institutional Review Board at the organization where the research is being conducted.

ACADEMIC POLICIES

ACADEMIC GOOD STANDING

In order to be a student in good standing in the Samford Nurse Anesthesia Program, students must make a "B" or higher in each course. Students must be in "Good Standing" to progress in the program of study and graduate.

PROGRESSION POLICIES

In order to progress in the Nurse Anesthesia Program in the MSSON, the student must:

- Have a completed Health Data Record (with all required immunizations) upon admission and as required by clinical facilities.
- Carry health insurance while enrolled at Samford. Students in the MSSON are required to provide proof of current personal health insurance coverage. Each semester, students in the MSSON are automatically enrolled in the University-sponsored student health insurance plan unless the student has waived coverage. There is a charge for this coverage. To have the charge removed from his/her Samford account, a nursing student must provide proof of insurance by completing the insurance waiver as instructed in the University Catalog. For additional information you can contact the director of business services at 205-726-2916.
- Provide current documentation of BLS, ACLS, and PALS certification prior to clinical rotations. Certification courses are provided prior to starting clinical rotations.
- Adhere to the Academic Integrity Policy for Graduate and Professional Students as specified in the *Samford University Student Handbook*.
- Possess a current unencumbered **Multi-state Nursing License** (by January 31).
- Submit to background check prior to enrollment and random drug testing.
- Make a grade of "B" or better in each didactic course and a "pass" grade in each clinical course throughout the program.

Nurse Anesthesia students must successfully complete all semester coursework before progressing to the next semester. Individual exceptions may be made by the Department Chair. An incomplete grade (INC) may be awarded if the student has done work that would earn a passing grade in the course but failed to complete some portion of the required work because of an emergency, and the work can be completed without further class attendance. An INC grade automatically becomes an F if not removed by the last day of classes in the next full semester after the grade was given.

DISMISSAL/TERMINATION POLICY

Nurse anesthesia students must receive a "B" or higher grade in every didactic course and a "pass" grade in every clinical course to progress in the program. Students who receive a non-progressing grade may reapply to continue their course of study the following year. Additional remedial courses may be required on a case-by-case basis prior to readmission. Determination for readmission will be made by the Nurse Anesthesia Program faculty with approval of the Dean of the MSSON. There is no guarantee, however, that a student will be readmitted. Students will be obligated for complete tuition payments for any enrolled semester. For students readmitted to the program, tuition costs will be at the tuition rate in place at the time of readmission.

Students must be aware that matters of plagiarism, unapproved use of artificial intelligence (AI), unethical, unprofessional, or unsafe conduct may result in immediate dismissal from the MSSON.

GRADING SCALE

The faculty of the Moffett & Sanders School of Nursing approve the following grading scale:

91-100	A
89-90	B+
82-88	B
80-81	C+
75-79	C
70-74	D
0-69	F
Clinical Failure	F

Faculty members will consider any score at or above .500 to be rounded to the next whole number (Example: 74.511 = 75; 83.566 = 84), if less than .500, the score remains at the current whole number (Example: 74.280 = 74; 83.461 = 83).

PREPARATION FOR CLASS

Students are expected to attend, be punctual, and be prepared for classes, simulation and clinical experiences. Any material(s) assigned by program or clinical faculty as preparatory is the responsibility of the student. Specific assignments are established by each course faculty.

DIDACTIC EVALUATION

Evaluation of didactic performance is based on academic achievement in the classroom and/or assigned work from faculty that culminates in a course grade. Nurse Anesthesia students must obtain a grade of "B" or better in each didactic course to successfully progress in the program.

Students are expected to complete and turn in assignments within the prescribed time frame. Students are expected to discuss any delinquency in turning in assignments with the

appropriate course faculty and arrange for a subsequent deadline, if an extension is granted. The late policy is described in the course syllabi.

GRADE APPEALS

An initial grade may be challenged by a student before the beginning of classes of the next full semester. Summer term grades must be appealed by the beginning of fall term. All petitions must be made first in turn in writing to the instructor, chair, and dean. All appeals must be written and demonstrate and document an unusual circumstance that warrants a review of the grade and evidences of the grade s/he believes should have been given by the instructor. The student must include the full and complete grounds for the appeal in the initial appeal. Each subsequent appeal must include the previous appeals and responses by university representatives. If each of these three in turn denies the appeal, the student may appeal to the university registrar. The registrar will convene a subcommittee of the Faculty Academic Affairs Committee who will weigh the appeal. The results of this subcommittee's decision are final.

While the grade appeal is being considered, a student may attend classes through the first week of the term, which is the add/drop period. The student may not attend classes until the appeal is resolved after that first week. The university will make every effort to resolve the appeal by the end of that first week.

If a student considers either a Title IX or an ADA accommodation complaint to be the basis for the grade appeal, the student should start the appeal with the Title IX coordinator or the Accessibility and Accommodations Office. Until a decision is rendered from the appropriate office regarding the complaint, the assigned grade will be changed to an "I," meaning Incomplete. A finding in favor of the student may result in an educational plan to address changing the grade. A finding denying the appeal will result in the "I" being changed to its original grade. The student may then complete the appeal process outlined above. During the time a grade is reported as an "I," the course will have no impact on GPA or credit hour completion. https://www.samford.edu/departments/registrar/policies-and-definitions ; https://catalog.samford.edu/content.php?catoid=33&navoid=2123#Grading_System_Guidelines_and_Policies

PROBLEM-SOLVING CHANNELS

Students should initially discuss problems/issues/concerns with the faculty member teaching the course or providing clinical supervision. If a matter remains unresolved, the student should contact the Nurse Anesthesia Department Chair. If the issue remains unresolved, the student should schedule an appointment with the Graduate Associate Dean, and then the Dean of the School of Nursing. The Provost for Academic Affairs is the next contact if matters are not resolved.

ACADEMIC INTEGRITY

The University catalog provides that “students, upon enrollment, enter into voluntary association with Samford University. They must be willing to observe high standards of intellectual integrity; they must respect knowledge and practice academic honesty.” Unless an

instructor provides specific instructions to the contrary, students are expected to conduct their course work independently. In no event may students cheat, copy, or plagiarize the work of others (**including unauthorized use of artificial intelligence tools**). When drawing from various resources for assignments, students shall provide proper citations, footnotes, and bibliographic information.

The more dependence on cheating, the more inevitable ultimate failure becomes, often accompanied by public disgrace. Any act to obtain an unfair academic advantage is considered dishonest. The instructor of a course reserves the right to issue an academic penalty to students who are found responsible for violations of Samford's policy on academic integrity (graduate and professional programs). Academic penalties assigned by the instructor may include, but are not limited to, a grade of zero for the assignment/assessment and/or a lowered cumulative course grade. Academic penalties issued by the instructor are separate and apart from any sanction issued by the honor council.

Academic integrity violations shall be governed by the policy that applies in the school or program in whose course or activity the alleged violation occurred. Additional information on academic integrity and examples of academic integrity violations can be found in the *Samford University Academic Integrity Policy Governing Graduate & Professional Students in the College of Health Sciences School of Health Professions, School of Nursing, School of Public Health*, found in the Nurse Anesthesia DNP Student Handbook and on the Department of Nurse Anesthesia Canvas page.

PROFESSIONAL CONDUCT POLICY

Samford students and future advanced practice nurses are expected to conduct themselves in a professional manner, and uphold high standards of honesty and ethical behavior in study and clinical practice. Samford University considers cheating an example of deficiency "in the scholarly maturity necessary for college study" (*Samford University Graduate Catalog*). Unethical or unprofessional behavior in the clinical setting demonstrates the lack of integrity needed for advanced practice nursing.

When a faculty member determines a student's behavior reflects decision making resulting in unsafe or unethical nursing practice, lack of adherence to established policies and procedures, and/or unprofessional conduct, the MSSON faculty reserves the right to immediately assign a course grade of "F" and the student will be administratively withdrawn from the course at that point. Administrative withdrawal prohibits the student from further attendance and/or participation in class or clinical. Such behaviors may include, but are not limited to:

- Committing fraud or deceit while enrolled in the MSSON, including falsifying, plagiarizing, or in a negligent manner making incorrect entries on records or any other written work.
- Committing a HIPAA violation including engaging in activities that breach client confidentiality, such as unauthorized access to clients' charts, photocopying documents

from the clients' chart, verbally communicating with unauthorized individuals, and communicating to others about client information in public places.

- Participating in disorderly conduct or breach of the peace, such as obstruction or disruption of teaching, physical or verbal abuse, or detention of any person while engaged in any MSSON activity. This includes unprofessional and/or inappropriate communication with faculty, staff, clients, or peers.
- Negligently or willfully implementing nursing care in a manner that fails to meet generally accepted standards for the students' level of preparation, such as recommendation for or administration of inappropriate or dangerous medications or performance of procedures without supervision or outside the scope of practice.
- Negligently or willfully violating any rule, regulation, or policy of the MSSON such as unexcused clinical absence or excessive unexcused clinical tardiness.
- Exhibiting a physical, mental, or emotional behavior which renders the student unable to provide nursing care with appropriate skill and safety in accordance with course objectives and clinical facility policies and procedures.
- Negligently or willingly acting in a manner inconsistent with the health or safety of others.

VALUE VIOLATIONS

An academic integrity value violation is defined as the act of lying, cheating, or stealing academic information to gain academic advantage for oneself or another. As a Samford University student, one is expected neither to commit nor assist another in committing an academic integrity value violation. Additionally, it is the student's responsibility to report observed academic integrity violations. As stated in the *Samford University Student Handbook,* violations of the Academic Integrity Values Statement include but are not limited to:

Taking Information

- Copying graded homework
- Working together on a take-home test or homework when specifically prohibited by the professor
- Looking at another student's paper during an exam
- Looking at your notes when prohibited
- Acquiring a term paper written by someone else
- Taking an exam out of the classroom when prohibited
- Removing resource material from the University Library without authorization

Tendering Information

- Giving your work to another to be copied
- Giving someone answers to exam questions during the exam
- After taking an exam, informing a person of questions that appeared on the exam
- Giving or selling a term paper or class work to another student

Plagiarism

- Copying homework answers from your text and handing them in for a grade

- Quoting text or other works on an exam, term paper or homework without citing the source
- Submitting a paper purchased from a term paper service or acquired or generated from any Internet source (**including unauthorized use of artificial intelligence tools**)
- Submitting another's paper/project as your own
- Taking a paper from an organization's files and handing it in as your own

Conspiracy

- Planning with one or more students to commit a violations of the Academic Integrity Values Statement
- Giving your term paper/project to another student who you know will plagiarize

Misrepresentation

- Having another person do your computer program, course project or lab experiment
- Lying to a professor to increase your grade

ATTENDANCE – CLASS AND CLINICAL

Students are expected to attend, be punctual and be prepared for classes, laboratory, and clinical experiences. Specific attendance requirements are established by each course and are indicated in the course syllabus. Ultimately, each student bears the responsibility to be aware of and adhere to attendance and punctuality requirements. Students are responsible for contacting the course instructor via email when an absence has occurred or if an unavoidable absence is anticipated. The student remains responsible for any material covered, assignments or testing missed.

If the graduate student is currently engaged in the clinical practicum, the clinical attendance policy is in effect. Students are responsible for personally contacting the site Clinical Coordinator and the Director of Clinical Services to report any absence or if an unavoidable absence is anticipated. Students are to follow each clinical site's policy for informing the hospital/anesthesia department of an absence or need to be late in arriving for the assigned clinical assignment. This must be done each day of the absence. **All clinical days missed by absences are deducted from available personal/vacation days.**

Extenuating circumstances that require extended periods of absence, such as illness, personal circumstances, maternity, etc. will be considered and handled on a case-by-case basis by the Department Chair.

Patterns of excessive absences, in classes or clinical, are not permitted and may result in disciplinary action, including dismissal from the program.

In the event of inclement weather that results in unsafe travel conditions to the clinical site, the student should contact the clinical site as soon as possible. If the inclement weather subsides and safe travel conditions are restored, the student should contact the Clinical Coordinator to determine if they should/are expected to present themselves for clinical. If it is unsafe to travel, the Director of Clinical Services should be emailed immediately. The student is to follow the

inclement weather policy of Samford University during the didactic portion of the program. Information regarding the status of the university is communicated via RAVE.

Students are responsible for retrieving electronic messages from their Samford University e-mail account. It is expected that students will respond to all messages in a timely manner.

ONLINE ATTENDANCE POLICY

Students enrolled in web-enhanced or online courses are expected to complete all required coursework through electronic forums. Students are expected to participate in all class discussions. In the event of extenuating circumstances, students should notify the professor prior to class and make arrangements for any make-up work. Failure to do so may affect the course grade. Online class attendance will be assessed by completion of all course assignments by the published due date and time.

TECHNOLOGY REQUIREMENTS

Because of the possibility of a student needing to participate in a course virtually at some point during the semester, all students should have the following technology available to them: OR Participation in an online course will require the following technology:

- A Windows 11 or Macintosh (macOS version 14 or higher) desktop or laptop computer; although Chromebooks and mobile devices are capable of accessing the Canvas learning management system, they may not be compatible with certain third-party software.
- Although Chromebooks and mobile devices are capable of accessing the Canvas learning management system, they may not be compatible with certain third-party software.
- A web cam if needed (built into most modern laptops)
- A microphone and speakers, headphones, or earbuds (also built into most modern laptops)
- The most recent version of the Chrome or Firefox Web browser; the Safari browser can be particularly problematic when accessing online courses.
- A stable Internet connection capable of at least 2 Mbps upstream and 5 Mbps downstream. Students may test the speed of their connection at http://speedtest.net
- Samford Bulldog Email and Canvas accounts (required)
- Microsoft Office products (e.g. – MS Word, PowerPoint, Excel, etc.)
    - It is expected that all written assignments be completed with Microsoft Word.
    - Microsoft Office 365 is available for free download to all current faculty, staff, and students. This can be downloaded from the Technology Services website. You will need to sign in with your Samford User Name and Password to download and use this software.
- Lecture Capture: Ownership of information should be considered prior to use. Classroom lecture material may not be recorded or dispersed without prior consent from course faculty. Any approved material is to be used for the individual student's learning purposes only.

- *ECHO 360*: Class recordings should be downloaded to the student's computer or device instead of streaming the materials each time it is viewed.
- *Examplify*: On-campus exams will be taken on the student's personal laptop via Examplify. It is the student's responsibility to have Examplify loaded onto his/her personal laptop prior to the first exam. It is also the student's responsibility to install periodic updates to Examplify when notified.
    - *Support for all ExamSoft products is available 24/7 by calling 866-429-8889 or emailing ExamSoft support at support@examsoft.com or https://support.examsoft.com*

Technology Services offers telephone, email, and in-person support to all Samford student and employees. Technology Services is located in the lower level of University Library, Room 012. Hours of operation are:

In person: University Library, Room 012, Monday-Friday, 7 a.m.-5 p.m.
Email: support@samford.edu, Monday-Friday, 7 a.m.-5 p.m.
Phone: 205-726-2662, 7 days a week, 24 hours
Web address: Technology Services Home Page

Canvas Support Contact Information:
Technical support for Canvas is available 24/7 by phone at (833) 741-0037 or at support@instructure.com

Technology can be problematic: Internet connections can be slow or down; computers may malfunction; power outages can cause delays or the inability to connect. Technological issues are not acceptable excuses for late assignments. Be prepared and have a backup plan.

FORMAT FOR WRITING PAPERS

The Department of Nurse Anesthesia uses American Medical Association (AMA) citation style in agreement with all major anesthesia journals. Reference: Christiansen SL, Iverson C, Flanagin A, et al. *American Medical Association Manual of Style*. 11th ed. New York: Oxford University Press; 2020.

Example citations:

1. Ramesh AS, Krishna SG, Denman WT, Tobias JD. An in…endotracheal tubes. *Pediatr Anesth*. 2014;24(9):1005-1008. (<6 authors, volume & issue)
2. Krishna SG, Ramesh AS, Jatana KR, et al. A technique to measure…accuracy. *Pediatr Anesth*. 2014;24:999–1004. (>6 authors, no issue)
3. Khine HH, Corddry DH, Kettrick, RG, et al. Comparison of…general anesthesia. *Anesthesiology.* 1997;86(3):627-631. (>6 authors, 1-word journal title)
4. Litman RS, Fiadjoe JE, Sticker PA, Cote CJ. The pediatric airway. In: Cote CJ, Lerman J, Anderson JA, eds. *A Practice of Anesthesia for Infants and Children*, 5th ed. Saunders Elsevier; 2013:237-276. (chapter, edited text)

5. Australian New Zealand Clinical Trials Registry. Cuffed versus uncuffed endotracheal tubes…longer term ventilation. Accessed February 1, 2017. https://www.anzctr.org.au/Trial/Registration/TrialReview.aspx?id=367700 (online, group author, URL)
6. Khemani RG, Randolph A, Markovitz B. Corticosteroids for…adults. *Cochrane Database Syst Rev*. 2011. doi:10.1002/14651858.CD001000.pub3 (online, doi)

EXAMSOFT - STUDENT RESPONSIBILITIES

Introduction

- MSSON has contracted with the vendor ExamSoft to administer electronic exams.
- ExamSoft uses *Examplify* as the software program for students to complete an electronic assessment (e.g., exam, quiz).
- Any deviation from testing policy or special circumstances regarding testing must be by written request from the student for consideration at least a week before the exam.

Before the Exam

- All nurse anesthesia students are required to have an operating laptop.
- Students are required to maintain their laptop with the most current operating system and update software programs (e.g., pdf reader, *Examplify*).
- The laptop battery should be charged to last for the entire exam. A power cord may be used.
- A privacy filter for the laptop screen (with at least 60-degree security) is **REQUIRED** for all exams/assessments.
- Students are responsible for taking an *Examplify* mock exam to test the functionality of *Examplify* on their computer prior to the first exam in their courses, so that any troubleshooting that is required can be accomplished. A mock exam for this purpose can be found in *Examplify* for Spring semester.
- Students are required to take proctored course exams on the exact date and time specified in each course.
- Exams will be available for download prior to the exam date. ***The student is required to download the exam in advance of the exam start day and time***. Students must ensure that the exam is downloaded, and all technology problems are resolved before the exam begins. If any issues arise in downloading, students should contact the ExamSoft Support using this link: **https://support.examsoft.com**
- Students must have their laptop turned on, muted and ready before the scheduled start time for the exam.
- All phones must be turned off and stored; all smart watches must be removed and stored.
- It is recommended that the students disable or turn off their antivirus programs before opening *Examplify*. This will help reduce potential issues during and after their exam. This will also reduce time as *Examplify* will attempt to disable the antivirus program

prior to starting the exam. The link for instructions on how to disable Anti-Virus software is here https://examsoft.force.com/etcommunity/s/article/Disabling-Anti-Virus-Software.

During the Exam

- No food is allowed during the exam.
- Students may not wear a hoodie, hat, ball cap, watch, or bracelet during the exam.
- Students may use foam or moldable earplugs during the exam. No personal earbuds or headphones of any type are allowed.
- Students may use a single sheet of blank scratch paper provided during the exam. Write your name on it and turn it in prior to leaving the exam.
- For the exam to start on time, all students must have their scratch sheet, must be seated, and must have their privacy screen up (if on-campus) and laptop ready before the exam scheduled start time. Once the exam starts, students may not leave the room until the exam is uploaded.
- If the laptop is not functioning properly, notify the exam proctor immediately. Attempts to restore/resolve laptop functionality/problems will be conducted on a case-by-case basis.
- Students will use the calculator provided by *Examplify* during the exam. Students may also use the highlighter and strike through functions in *Examplify*.
- Students will be allowed to use a computer mouse (attached). Bluetooth devices will be disabled by *ExamMonitor*.
- Students need to be aware that questions may contain an attachment that requires the student to scroll down to see the attachment.
- If a student's computer is stuck attempting to load the quiz/exam for several minutes, then the student can hold the power button for 10 seconds to force a shutdown and reboot their computer and attempt to re-enter the exam.
- If a student's computer is frozen during the exam where they are unable to proceed, then the student will have to shut down and reboot their computer. They will NOT lose any saved answers and will be able to continue after rebooting. The student can hold the power button for 10 seconds to force a shutdown and reboot their computer and attempt to re-enter the exam.
- Answering exam questions: Click on an answer choice to select it, and you will see it highlights that option. You can click on the answer choice again to deselect the answer choice. On multiple choice questions, you will also see an 'X' beside the answer choices. You can select the X to strike out that option. Once you answer a question, click Next.
- **Backward navigation will not be permitted.**

After the Exam

- Upon submitting the exam, the student may be allowed to review missed questions. The review will likely be for a limited time (5-8 minutes). Take advantage of this time as individual opportunities to review later is at the instructor's discretion. No writing of notes is allowed during this time.

- Upon completion of the exam, the student must upload the exam; a GREEN screen indicates that the upload was successful.
- Students MUST show the GREEN screen to the proctor before leaving the exam room.
- Students MUST turn in their scratch paper to the proctor before leaving the exam room.
- Once the exam is uploaded, the student will not be allowed to access any other material on their laptop. The student will leave the exam room and the surrounding area immediately.

The ExamSoft Student Responsibilities can be found on the Department Canvas page.

FULL TIME VS. PART TIME STATUS

For Financial Aid purposes, students must register for a minimum of three credits to be considered full- time. If a student fails to register for one semester, that student will be considered inactive.

LEAVE OF ABSENCE

Students should write a letter requesting a leave of absence for any semester in which they do not intend to enroll or if the student should choose to withdraw from Samford University, with intent to return. Leave of absence requests should be directed to the attention of the Nurse Anesthesia Department Chair. Students who wish to drop all courses for a semester should formally withdraw in Student Records.

Students who take a leave of absence or withdraw from the program may reapply to continue their course of study the following year. Readmission is NOT guaranteed. Additional remedial courses may be required on a case-by-case basis prior to readmission. Determination for readmission will be made by the Nurse Anesthesia Program faculty with approval of the Dean of the MSSON.

FORMAL COMPLAINT

Formal complaint is defined as a student's grievance about his/her perceived treatment/interaction with a member of the university community or a service offered at the university. To file a formal complaint, proceed to https://www.samford.edu/departments/student-support/, then go to "Help Us Help You" section where there is a link to the Student Complaint Form.

INDEPENDENT STUDY PROSPECTUS

Guidelines for graduate students' independent study are available online. Independent study should be discussed with the faculty advisor and a written contract completed in advance of enrollment. Student's registering for an Independent Study must submit an Independent Study Contract to the faculty member overseeing the independent study.

REGISTRATION

The Director of Graduate Students Services is responsible for coordinating the registration process for graduate nursing students. The Graduate Student Services Office will register the student each semester and will send an email to their Samford email account indicating when the process is completed.

SCHEDULE ADJUSTMENT AND WITHDRAWAL

Students should notify the Department Chair as soon as possible if there is a problem that might involve an immediate interruption in attendance. The refund policy can be found in the Samford University catalog.

TRANSFER OF GRADUATE CREDIT

Graduate students are permitted to transfer a maximum of twelve hours of graduate credit from an accredited college or university. To do so, students should complete a course substitution form (available online) and attach a copy of the syllabus. Transfer credits will be evaluated by the Department Chair and the individual course instructor for applicability to the graduate program and final approval will be determined by the Dean.

EVALUATIONS

Formal evaluation forms are available online near the end of each course to all graduate students. The purposes of these evaluations are to foster student contributions to the planning and revising of curriculum and to indicate areas of change that would enhance the learning environment. These evaluations provide a mechanism for direct communication with administration regarding the curriculum. After completion, evaluations are submitted on-line. In the past, input from these evaluations has made it possible for the faculty to document changes that are suggested by students.

Additionally, faculty responsible for a course may administer informal course evaluations. Students are encouraged to thoughtfully complete these forms. The course faculty utilize student input in the ongoing development and refinement of courses.

EXIT AND GRADUATE EVALUATIONS

Prior to graduation, students should receive a Final Semester Student Evaluation form on-line. On this evaluation form, students will be asked to evaluate their entire program of study and their achievement of the goals and competencies of their particular program. A year after graduation, a one-year follow-up alumni survey evaluation form will be sent to DNP graduates. This form and an employer survey will be similar to other evaluations, but they will allow the faculty to gain graduates' and employers' perspectives about the programs of study after graduates have had time to apply the competencies, knowledge and skills obtained during the educational experience.

GRADUATION AND COMMENCEMENT

Commencement exercises are held at the end of the Spring Semester. A student is required to meet all requirements for graduation as set forth in *The Moffett & Sanders School of Nursing DNP (Nurse Anesthesia) Handbook* and the *Samford University Graduate Catalog* in effect at the time of entrance into the program. Later changes in the requirements for graduation are not applicable to students who proceed without interruption through their chosen program of studies.

It is the MSSON's responsibility to notify the Office of the Registrar of the candidates for graduation each term. The candidate will then receive information regarding graduation via email directly from the Office of the Registrar. It is the responsibility of the graduate student to see that all requirements for graduation are met. Students must have a 3.0 GPA to graduate.

CRITERIA FOR GRADUATION

A student will be eligible to graduate and take the National Certification Examination (NCE) administered by the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA) after they have met all graduation criteria.

- Completion of all courses with the minimum GPA of 3.0 or pass grade in each course.
- Successful completion of all requirements pertaining to the DNP project and portfolio.
- Achievement of all outcome criteria and terminal objectives of the program as described in the program materials.
- Successful completion of all clinical requirements.
- Completion of requirements of the Service Learning component
- Current BLS, ACLS and PALS provider status.
- Program property returned (nerve stimulator, library material, etc.)
- Forwarding address left with the program coordinator.
- Required evaluations completed.
- Final case record totals submitted.
- Successful completion of the APEX Review.

Nurse Anesthesia students are expected to complete all graduation requirements in the 36 months allotted to the program. In the event that extenuating circumstances are present, the student may request deferral of graduation with approval of the Department Chair. Nurse anesthesia students will also complete 20 service learning hours prior to graduation.

LICENSURE

Graduate students enrolled in all graduate nursing courses must hold an unencumbered multi-state license as a registered nurse to practice professional nursing. It is the student's responsibility to obtain and maintain licensure and certification. It is the student's responsibility to immediately notify the School of Nursing of any encumbrance that is placed on any license.

The address for the Alabama Board of Nursing is:

Alabama Board of Nursing
RSA Plaza, Suite 250
770 Washington Avenue
Montgomery, AL 36104
Telephone (800) 656-5318
https://www.abn.alabama.gov/

STUDENT EMPLOYMENT

After the initial two online semesters, students are discouraged from working while in the Nurse Anesthesia Program. In addition, students may not accept employment as a nurse anesthetist or represent himself or herself as a nurse anesthetist by title or function while enrolled in the program. Students may not perform any function deemed to be interpreted as within the scope of practice of a CRNA when not participating in a nurse anesthesia clinical practicum. Further, any student employed as a nurse anesthetist by title or function while enrolled in the program will be dismissed.

HONORS AND AWARDS

Each year, a number of awards are given to honor students who have excelled in the areas of caring, scholarship, leadership and service to others in the University, churches, local and world community, and the nursing profession.

DEPARTMENT AWARDS

The **Agatha Hodgins Award** is a specific award, given upon program completion, to the nurse anesthesia student who demonstrates excellent clinical practice, service, and leadership skills established by an early nurse anesthesia pioneer, Agatha Hodgins. The award is given to a student who has a GPA in the upper 25th percentile of the class.

The **Dr. Resa Culpepper Professionalism Award** is given to the graduating nurse anesthesia student who best exemplifies professionalism and service as an anesthesia student. Students are encouraged to begin thinking about, and striving for, these awards early in their academic career.

Academic Achievement Award – graduating nurse anesthesia student with the highest Samford GPA

CAMPUS SERVICES AND INFORMATION

BOOKS AND SUPPLIES

All books and supplies are available online or at the Samford Shop located on the first floor of the University Center. Required books are identified on a shelf card listing the course name, number and professor's name. Used books are sometimes available. Fall and spring hours are: 8:00 a.m. – 5:00 p.m. on Monday to Thursday; from 8:00 a.m. – 4:00 p.m. on Friday and 10:00 am – 2:00 pm on Saturday. Summer store hours vary: 10:00 a.m. -3:00 pm Monday to Thursday; 10:00 a.m. -2:00 p.m. Friday; closed Saturday. Students can view a list of required textbooks and materials prior to each term at https://www.bkstr.com/samfordstore/shop/textbooks-and-course-materials.

CAMPUS SAFETY

The Department of Public Safety and Emergency Management is staffed 24 hours a day, providing immediate availability for emergency response, performance of security patrols, monitoring of persons on campus, lockouts, dead batteries, and providing other services to the campus community. Public Safety may be reached at 726-2020. In the event of a health or campus emergency, please refer to the public safety website as a mechanism for official communication and resources: http://www.samford.edu/departments/public-safety/.

INCLEMENT WEATHER POLICIES

Announcements of the closing of the University campus are reported through the RAVE notification system. In addition, the Public Relations Office of the University notifies local television and radio station of the closing. Any campus closings related to weather or safety situations are communicated via email and text message.

NOTIFICATION OF EMERGENCY

RAVE is the primary method of communication used by Samford University during a campus emergency. All students and employees are automatically enrolled to receive RAVE alerts on their Samford email address and cannot be removed from that list. You can also add 2 more email addresses and 3 mobile phones. If you have not registered for RAVE alerts, please go to mySamford at https://my.samford.edu, then click on Quick Links and My RAVE Emergency Alert Info to update your RAVE Emergency Alert Information. Note that the RAVE Emergency Alert Information link is also accessible on mySamford under Tools, My Personal Information and Tools, Emergency Resources.

Samford University utilizes *Samford Alert* for desktop, laptop, tablet, and mobile devices to provide students with information, procedures, and links about what to do in the event of a variety of emergency situations that could occur on our campus. If you do not already have the *Samford Alert* app on your mobile device, laptop, desktop, or tablet, please go to mySamford at https://my.samford.edu and navigate to Tools, Emergency Resources, Alert Samford: Get the App for instructions on downloading the app. Once you have downloaded the App, please take

time to review the information provided, it is important that you know what to do in the case of a campus emergency. https://www.samford.edu/emergency/default#personal-preparedness

Electronic Mail

Every Samford student is assigned an email account. Students are required to read their Samford email every day and to maintain an email mailbox that is not "full" to accept incoming emails. The School does not use personal email accounts to communicate with enrolled students.

Samford Campus Portal

Students are encouraged to take advantage of all the services offered through the campus portal. By clicking on the Banner button, students may obtain important information such as: transcripts, grades, class schedules, and financial aid information.

Family Educational Rights and Privacy Act

The Family Educational Rights and Privacy Act [FERPA] is a federal law designed to protect the privacy of a student's education records. The rights of the FERPA heretofore assigned to parents are now transferred to their college students. These rights are:

1. Eligible students have the right to inspect and review all of the student's educational records maintained by the school. The student must contact the dean of academic services and registrar office to make an appointment to view their academic record.
2. Eligible students have the right to request that a school correct records believed to be inaccurate or misleading. If the school refuses to change the records, the eligible student then has the right to a formal hearing. After the hearing, if the school still refuses the correction, the eligible student has the right to place a statement in the records commenting on the contested information in the records.
3. Generally, Samford University must have written permission from the eligible student before releasing any information from a student's record. However, the law allows schools to disclose records, without consent, to the following parties: school employees who have a need to know, other schools to which a student is transferring, parents when a student over 18 is still a dependent, certain government officials in order to carry out lawful functions, appropriate parties in connection with financial aid to a student, organizations doing certain studies for the school, accrediting organizations, individuals who have obtained court orders or subpoenas, persons who need to know in cases of health and safety emergencies, state and local authorities to whom disclosure is required by state laws adopted before November 19, 1974.

Schools may also disclose, without consent, "directory type" information, such as a student's name, address, e-mail address, and telephone number. Samford University has designated the following as directory information: student name, address, telephone number, date and place of birth, enrollment status, major field of study, participation in officially recognized activities and sports, weight and height of members of athletic teams, dates of attendance, honors, degrees and awards received, most recent previous school attended, and photograph. *An*

eligible student who does not wish for this information to be released without prior written consent must notify in writing the Office of the Registrar by the last day to Drop/Add without financial penalty in a semester or term.

STUDENT RIGHTS AND RESPONSIBILITIES

All graduate students are expected to comply with the behavioral expectations and values as stated in the *SU Student Handbook*. Some stated policies may not apply to graduate, non-resident students, i.e., issues related to residence halls, notification of parents etc. However, the Values Violation Process does apply to students in the DNP Program. See Clinical Student Rights and Responsibilities.

STUDENT CONDUCT

Students in the School of Nursing must adhere to the standards of conduct specified in the current *SU Student Handbook*, as well as to certain standards of behavior appropriate for all health professionals. The information contained in the Handbook can be accessed online. Students shall comply with legal, moral, and legislative standards, which determine acceptable behavior of the registered nurse. Noncompliance may be cause for suspension or dismissal from the School of Nursing.

FOOD SERVICES

In the College of Health Sciences buildings, Freshens is available on the Atrium level of Building 2. A student kitchen area and vending machines are located in Building 1 near 1253. The University Center Cafeteria offers Caf Passes which gives unlimited access to any venue in The Caf during a meal period such as breakfast, lunch, and dinner. Students must bring their Samford ID to each meal. For students seeking a la carte items such as sandwiches, drinks and snacks, the Food Court is located on the ground floor of the University Center. Students may put money on their Samford card to use in the Caf, Food Court, Bookstore or copy machines. The Food Court accepts Cash, Debit/Credit cards and Samford cards.

LIBRARY

The Samford University Library is the primary library for all students, faculty, and staff. Samford offers a wealth of library resources featuring extensive print and electronic collections, as well as multimedia resources that include microfilm, music scores, and audio and video recordings. The online catalog and other electronic resources are available to students 24/7 via the Internet. Other libraries in the Birmingham area cooperate with Samford on a reciprocal basis, increasing the variety of resources directly available to the Samford community.

A computer laboratory, computer classroom, individual and group study rooms, multimedia viewing and listening rooms, meeting rooms with advanced presentation capabilities, and a patron-lounge area are available for patron use. The Alfa Presentation Practice Room on the Library's second floor allows students to practice and record presentations individually or as a

group. Einstein Bros Bagels, on the library's first floor, offers the perfect spot for refreshment, studying, and meeting with friends and classmates.

For more information, see the Library Web page at http://library.samford.edu/.
For more information about specific library resources just for nurse anesthesia students see the Anesthesia Research Guide at http://samford.libguides.com/anesthesia.
For assistance with any research endeavors, please contact the Nursing Library Liaison, Lauren M. Young, at (205)726-2079 or lyoung2@samford.edu.

SIMULATION CENTER

The Simulation Center is located on third floor of CHS Building 1. The human patient simulation center is located in the corner with an observation room. Equipment needed to simulate anesthesia care, including the anesthesia machines, task trainers for airway management, central venous line insertion, and epidural and spinal administration are available for proctored use. Any person or group using classrooms, laboratories, and/or equipment is responsible for leaving them orderly and ready for the next user. Nametags are required in the Simulation Center. No food or drink (except water bottles) is allowed. CHS Simulation Center Student Guidelines may be accessed through the departmental Canvas.

MAILING ADDRESS/NAME CHANGES

Students must notify the Department Chair, Department Coordinator, the AANA, Board(s) of Nursing, Samford OneStop, and Samford University Office of the Registrar should their address and/or name change. In the event that a student does not submit a change of address, important information may not be received. Changes are the student's responsibility and should be made via the Samford Portal. Change of name requires a copy of the marriage certificate or other legal document and must be completed by Student Financial Services. It is also the student's responsibility to notify the MSSON office of Graduate Student Services of any changes. For the AANA: Send student associate membership number, old information and new information.

PARKING

Vehicles must display a Samford University parking decal if parked on campus. Decals may be obtained for a fee. All motor vehicles operated on campus must be registered with the Department of Transportation Services, in the transportation services menu in https://www.samford.edu/departments/transportation/registration. Parking permits expire yearly on August 31. Zone: **Blue:** CHS Commuter (only CHS Commuter permits are allowed to park at the College of Health Sciences)

STUDENT SERVICES

Samford Student Services (https://www.samford.edu/students/services) are available to support online, hybrid, and on-campus faculty and students, regardless of their physical location. This student services website provides a convenient list of resources available with links and how each resource can be accessed by all students enrolled, even in online offerings. Academic Success Center, Communication Resource Center, Counseling Services, and Office of

Accessibility and Accommodations are support services available for your academic, spiritual, and physical success here at Samford University.

Confidential counseling services are available free to enrolled Samford students. Counselors have experience and training in a wide range of issues. In addition to individual counseling, counselors provide relationship counseling, group counseling, academic skills assistance, referral information and crisis intervention. Counseling Services is located at the Health & Wellness Center. For more information, or to make an appointment, e-mail counseling@samford.edu or call 205-726-4083. Additional information and resources might be found on their website: https://www.samford.edu/departments/counseling/.

HEALTH SERVICES

Conveniently located at the Louise H. & John G. Beard Health & Wellness Center on the first floor of the Dwight and Lucille Beeson Alumni Center, University Health Services has three examination rooms, a treatment room, triage area and on-site CLIA-certified lab and x-ray. MedHelp at Samford is a fully-functional health care facility providing urgent care, primary medical care, preventive health care, and wellness services. In partnership with MedHelp, Samford's on-campus Health Center is staffed by a Physician and a Nurse Practitioner during regular operating hours, and students and staff have access to MedHelp's five locations in Birmingham after hours and on weekends. Walk-ins are welcome or call 205-726-2835 to schedule an appointment. SUhealth@samford.edu
https://www.samford.edu/departments/health-services/

ACCESSIBILITY AND ACCOMMODATIONS

Samford University complies with Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. Students with disabilities or chronic health conditions who wish to request accommodations should register with the Office of Accessibility and Accommodations (205) 726-4078, access@samford.edu, DBH 203, https://www.samford.edu/departments/disability-resources/. Students who are registered with OAA are responsible for sending the official notification of their accommodations through the OAA online portal to the instructor. Accommodations will be implemented after the student and instructor discuss how they apply in the course. Accommodations may not be applied retroactively and should not alter fundamental course outcomes. Meeting with the course instructor should occur during the first week of the semester.

TITLE IX

Samford University and its faculty are committed to creating and maintaining a safe learning environment for all students and the entire University community. If you or someone you know has experienced sexual harassment, sexual assault, relationship violence, stalking, or discrimination based on sex or gender, please know that help and support are available. Samford University strongly encourages all community members to report incidents of sexual misconduct to the Title IX Office. You may contact the Title IX Office at 205-726-2764 or titleix@samford.edu.

Please be aware that all faculty members are required to disclose information concerning suspected or alleged sexual harassment or other violations of the Samford University Sexual Misconduct Policy to the Title IX Office. You can also make a disclosure yourself, including an anonymous report, through the Sexual Misconduct Report Form accessible on the Title IX website at https://www.samford.edu/students/title-ix/. If the Title IX Office receives information about an incident, they will reach out to offer information about resources, rights, and available procedural options. It is a student's choice whether they wish to engage or respond to that outreach.

If you, or another student you know, wishes to speak with a confidential resource who is not obligated to report information to the Title IX Coordinator, please reference the list of confidential resources in the online student handbook. You can also connect with a confidential resource through the Counseling Office at 205-726-4083 or the Office of Spiritual Life at 205-726-2825.

Student Committee Members of School of Nursing Committees

Graduate students have the opportunity to provide perspectives and assist in shaping policies through membership on MSSON committees as designated. Faculty committees will have student representation as appropriate. Invitations will be extended to both undergraduate and graduate students to participate as non-voting members of the Academic Affairs committee. Students shall serve one year, with an option for reappointment for an additional year. Online students may participate in committee work via video conferencing.

Nurse Anesthesia Evaluation Committee

The purpose of this committee is to regularly evaluate processes and outcomes related to the Nurse Anesthesia Program. Members: Department Chair, Associate Department Chair, Director of Clinical Services, student representatives from each cohort, program faculty.

The Evaluation Committee reviews:

- Student evaluations of clinical sites and clinical instructors
- Summaries of course evaluations
- Student clinical and didactic grades
- Student graduation rates
- Student employment rates
- Student semester program evaluations
- National Certification Examination and SEE pass rates and mean scores
- Graduate evaluations
- Graduate employer evaluations
- Alumni surveys
- Program textbooks

The Evaluation Committee will meet once each year, during the fall semester. Student committee members will be excused for discussions regarding specific student grades or evaluations.

a. The Evaluation Committee makes recommendations regarding improvements and changes to the evaluation process as indicated.
b. Based on student, faculty and graduate evaluations, course completion rates, program completion rates, and committee member input, the Evaluation Committee addresses and responds to matters regarding major programmatic revisions to the curriculum, proposes appropriate faculty or student development activities, and helps determine changes to program policy and procedures.
c. Based on student, faculty and graduate evaluations and committee member input, the Evaluation Committee evaluates the program's quality and integrity and determines whether the terminal objectives of the program are being met.

PROFESSIONAL ORGANIZATIONS WITH CAMPUS CHARTERS

SIGMA THETA TAU

The Gamma Eta Chapter of SIGMA (Sigma Theta Tau) International is an honor society for nursing students and nurses. The organization is dedicated to promoting high professional standards. Membership includes graduate and advanced graduate men and women in nursing with excellence in studies, qualities of leadership, capacity for professional growth and desirable personal characteristics. Invitation to membership occurs in the Fall and Spring Semesters and chapter inductions are held.

PHI KAPPA PHI

Recognizes and encourages superior scholarship in all academic disciplines. Nominations are made by graduate faculty during the Spring Semester.

OMICRON DELTA KAPPA

Recognizes that leadership of exceptional quality and versatility in college should be recognized, that representatives in all phases of college life should cooperate in worthwhile endeavors, and that outstanding students, faculty, and administrators should meet on a basis of mutual interest, understanding, and helpfulness.

FINANCIAL SERVICES

BILLING

Notification that a new statement has been generated will be sent to the student via the Samford University email account, which is considered the official means of communication with students, so it is important to check this account regularly. Paper billing statements will not be provided. Students and authorized users may also access the statement system at any time via the Samford University web portal.

Students registering during the early registration period will receive a statement at least 15 days prior to the payment due date. The statement reflects activity up to the date the statement was generated. Any activity transpiring after the statement generation date can be viewed on the Current Activity section of the online statement system. The Current Activity page provides the current account balance that is due including any unbilled charges and payments. To review the detail by term, select the appropriate term from the drop-down box. Payment for a term statement will be due in accordance with the schedule included within this policy. Students who register/make schedule changes/add room and board, etc., after the statement generation date must consult the online system to view their account summary and make payment arrangements for all charges by the due date for the term regardless of whether or not the charge(s) have been billed. There are payment plan options available: go to the link for more information. http://www.samford.edu/admission/graduate/payment-plans

There is one payment due date at the start of each term for all Samford students. It is the first business day after the drop/add period has ended for undergraduate students. You may choose to pay the full balance at this time or enroll into a payment plan. Students who register/make schedule changes/add room and board, etc. after the e-bill generation date must consult the online system to view their account summary and arrange payment for all charges by the due date for the term regardless of whether or not the charge(s) have been billed. Dropping students from classes due to non-payment remains in effect, and if you wish to be reinstated you will be charged a $100 “Reinstatement Fee.” If you are enrolled into a payment plan and miss the payment deadline, you will be charged a $150 “Payment Plan Late Fee,” per each missed deadline.

CANCELLATION AND REINSTATEMENT

Students not paying their bill by the due date are subject to having their registration cancelled until payment in full is received. Student financial services will forward a clearance slip to the registrar's office to re-establish the student's class schedule. Statement generation, payment and registration cancellation dates for each semester/monthly statement are noted on the payment schedule.

FINANCIAL AID, SCHOLARSHIPS AND LOANS

The Samford One Stop is located on the ground floor of Ingalls Hall. Office hours are from 0800-1630, M-F. Phone: 205-726-2905. Nursing students have the ability to utilize Stafford Loans and

Grad PLUS Loans. As a Nursing student, a FAFSA (https://studentaid.gov/h/apply-for-aid/fafsa) is required to receive either of these loans. A $20,500 annual, maximum limit is enforced for Stafford Loans. Grad PLUS Loans are limited only by other aid already received, credit decisions and the total annual financial aid maximum.

Please note that students beginning the program AFTER July 1, 2026 will not be eligible to receive the Grad PLUS Loan and will therefore need to seek a private loan lender for your remaining costs. Samford provides two options for loan comparison. One is provided by a company called Credible and the other is provided by a company called Elm. Credible acts like a Kayak of student loans. You will be able to compare interest rates for loans designed specifically for the borrower and then apply for the loan that best meets the needs of the borrower. Elm is a historical listing of loan providers who have served Samford students in recent history.

Complete financial aid information for nursing students is available through the One Stop (205)726-2905, onestop@samford.edu or http://www.samford.edu/departments/financial-services/ or https://www.samford.edu/admission/graduate/student-loans. Billing and payment information is available through the One Stop as well.

ALABAMA BOARD OF NURSING SCHOLARSHIP

On June 15, 1977, the State of Alabama signed into law an act providing scholarships for post-baccalaureate nursing education. The scholarships are awarded by the Board of Nursing contingent upon annual appropriation of funds by the legislature. In 2016, a tuition reimbursement opportunity was introduced for advanced practice nurses who agree to work in underserved areas in Alabama. Application period opens July 1 each year. For additional information see the Alabama Board of Nursing website: https://www.abn.alabama.gov/abn-nursing-excellence/abn-loans-and-scholarships/abn-scholarships/.

NURSES EDUCATIONAL FUNDS, INC.

NEF Scholarships are for Master's and Doctoral degree study in Nursing. Applications open 10/2024 until 2/3/2025. Should you have any questions or concerns about the Application process, contact http://www.n-e-f.org/index.php/apply.html
Requirements - The following criteria must be met for eligibility:
Post-baccalaureate doctoral students

- Enrolled full- **OR** part-time in a post-baccalaureate doctoral program in nursing
- Applicants must have completed 45 credit
- Maintain a minimum GPA of 3.6

AANA FOUNDATION

The AANA Foundation offers student scholarships to individuals in accredited CRNA programs. To apply for a scholarship, a first-year student must be an AANA member and have completed at least six months of courses in an accredited CRNA program by the application deadline date. Second-year students must have completed at least one year of courses in an accredited CRNA

program by the application deadline date, March 1. https://www.aana.com/resident-hub/education-grants-and-scholarships/foundation-scholarship/

ALANA FOUNDATION

The ALANA Foundation offers student scholarships to students in each of the CRNA programs in Alabama. Additional information will be distributed when the application opens each year.

FUNDERBURG SCHOLARSHIP

The Funderburg Scholarship is awarded each year in honor of Dr. Lonnie Funderburg, to the student who shows a commitment to practice in rural or underserved areas.
Criteria for the scholarship include:

1. Registered nurse enrolled in the Samford University Nurse Anesthesia Program.
2. Undergraduate grade point average equal to or greater than 3.0.
3. Previous work as a nurse for a year in a rural or underserved area OR commitment to work in a rural or underserved community (http://muafind.hrsa.gov/) after graduation.
4. Short essay (maximum 2 typed pages) regarding the student's commitment to the rural underserved community, personal interest in becoming a nurse anesthetist, and long term goals after graduation from the nurse anesthesia program.

ADDITIONAL SCHOLARSHIP OPPORTUNITIES LISTED ON THE SIGMA THETA TAU WEBSITE

Eligible students must be enrolled in either an Accelerated Second Degree or Doctor of Nursing Practice program at an accredited US school of nursing. Funding is up to $5,000 per academic year. All applications must be submitted via the online submission system. A link to the application will be available in January 2025.
https://www.sigmanursing.org/advance-elevate/scholarships
Additional nursing scholarship opportunities are available from different organizations listed:
https://www.sigmanursing.org/advance-elevate/scholarships/nursing-scholarship-opportunities

NURSE FACULTY LOAN PROGRAM – HRSA GRANT INFORMATION

The Nurse Faculty Loan Program (NFLP) is a federal program designed to increase the number of nursing students who pursue careers as full-time faculty teaching in schools of nursing. It also promotes the precepting of advanced practice nursing (APRN) students by advanced practice nurses such as certified nurse anesthetists. The program **provides funds to eligible schools** of nursing to prepare graduates to serve as academic nursing faculty or clinical preceptors. Funds from the program are administered by the Bureau of Health Professions, Health Resources and Service Administration (HRSA). The NFLP is a loan program that offers significant loan forgiveness to students in Master's and Doctoral nursing programs who:

- Undergo specified educational coursework relevant to the nurse faculty role, and

- Commit to work for an accredited school of nursing as a full-time nurse faculty member or via a joint appointment at a clinical facility to serve as a preceptor for advanced education nursing students in nurse anesthesia (CRNA) programs upon graduation.

Following graduation and upon full-time employment as a CRNA in a clinical site with precepting opportunities within twelve months of graduation, the borrower might cancel up to 20% per year for a maximum of 85 percent of the total NFLP loan (years 1, 2, 3: 20%; year 4: 25%). BSN to DNP nurse anesthesia students must complete [in addition to the prescribed nurse anesthesia curriculum plan] the nurse educator concentration courses, which includes 9 semester hours. **The NFLP program is currently paused.**

INFORMATION PERTAINING TO CLINICAL SITES

POLICIES OF AGENCIES

Graduate students are expected to become familiar with and adhere to the policies and documentation requirements of each agency or institution used for learning experiences.

BEHAVIOR IN THE PRACTICE SETTING

Clinical faculty have the right to dismiss students from the clinical setting if there is behavior that indicates that the student is unprepared and not capable of providing safe care to assigned patients.

LIABILITY INSURANCE

Professional liability insurance for clinical practice is required for all nurse anesthesia graduate students. Liability insurance meets the following requirements:

1. be an occurrence type policy
2. have minimum coverage limits of $1,000,000/$3,000,000

Samford University purchases liability insurance for all students enrolled in a clinical program. The coverage is continuous, not dependent on the academic calendar. Samford University has coverage for liability arising from the rendering or failure to render professional medical services. Faculty and students are covered while working for Samford within the scope of their duties as faculty or as currently enrolled students. The policy is on a "claims made" form that means any claims must occur and be recorded while the policy is in force. If the coverage is discontinued, the University may arrange an extended reporting endorsement.

HEALTH DATA AND IMMUNIZATION REQUIREMENTS

Graduate nursing students in the MSSON are responsible for maintaining health requirements. Each student is required to have a physical examination, proof of immunity or documentation of the following vaccinations: measles, rubella, varicella, Tdap, and hepatitis B. In addition, the student is required to provide documentation of tuberculin testing and documentation of influenza vaccination. Upon the request of the Facility, the University agrees to require the student to furnish the Facility with any documentation required by the Facility evidencing that the student is in compliance with the University's immunization requirements. As part of the Progression Policy, all health forms, immunization information, and licensure will be submitted by the student for compliance accountability. Compliance information will be maintained in the student's Typhon account, which will indicate expiration dates.

Some clinical placement sites may require MSSON students to have certain immunizations or tests that are not compulsory pursuant to Samford's policies and irrespective of any medical or religious exemption. In such circumstances, MSSON students who decline vaccines or tests required by a specific clinical site may elect to "opt-out" of such placement site and request the Director of Clinical Services (DCS) for the Department of Nurse Anesthesia to attempt to identify a comparable clinical experience. Samford University makes no representation and

offers no assurance that any alternative clinical placements can or will be available. MSSON students in such circumstances are also advised that alternative clinical placements may affect the students' academic status (e.g. full time versus part time), eligibility for financial aid, academic schedule, graduation date, licensure eligibility and employment prospects.

Students are responsible for keeping current all licensures and immunizations. Before registration each semester, the student is responsible for updating all required health information in Typhon through the end of the term. Registration for subsequent semesters will be held if compliance is incomplete. Failure to do so while in the clinical portion of the program will result in loss of privileges at the site until compliance is verified. Days not attended will be subtracted from available vacation days.

The student must submit the following:

Credential or Document Type	Guideline	Validation Period
Certification	Must be BLS certified prior to entering the program. *ACLS/PALS certified prior to beginning clinical experience	Valid within 2 years
Mantoux TB skin test	Date rec'd and date read must be listed.	Valid within 1 year, required every year
Hepatitis B Vaccination series	Proof of vaccinations signed by physician, PA, or CRNP; need all 3 dates listed or titer	
MMR	Provide date signed by physician, PA, or CRNP on physical form or proof of MMR; must be two step or titer	
Tetanus (TDAP)	Provide date signed by physician, PA, or CRNP on physical form or proof of TDAP	Within 10 years
Varicella	Immunization date or varicella titer signed by physician, PA, or CRNP on physical form OR date of disease	
Flu shot	In fall prior to November (2nd fall semester) - Provide proof of Flu Shot Vaccine	*Required by clinical sites
Student Health Form	Must be on College of Health Sciences Health Form and signed by physician, PA, or CRNP	
Nursing License	Must be active and unencumbered – Multi-state RN license required by January 31 of first spring semester	

CLINICAL STANDING

Students are evaluated continuously during a clinical rotation. If the Director of Clinical Services (DCS) determines that the student is not meeting clinical standards and/or if patient safety is at risk, the student may be dismissed from the program or counseled and provided guidance for improvement.

If performance continues below the established standards and/or if patient safety is at risk, the student may be placed on clinical probation or dismissed from the program. When the student is placed on clinical probation, specific criteria will be prescribed that will measure the improvement in student clinical performance over a specified period of time. If these criteria are not successfully met, the student's likelihood of future success will be evaluated by the faculty and a decision made regarding future status in the program.

CONFERENCE TIME

Conference time will not be deducted from the student's personal time bank. Attendance at the AANA Annual Congress can be a valuable educational experience, and students are allowed conference time to attend. A travel day to and a travel day from the Annual Congress will be provided. Students are required to attend the Alabama Association of Nurse Anesthetists Fall Meeting, if it is held within 60 miles of Birmingham.

One conference day in addition to one day for travel will be allowed for senior students who are registered for a board review class.

VACATION AND HOLIDAYS

The Department of Nurse Anesthesia academic and clinical training extends throughout the year, and often through published University break periods. Semester 1-5 are solely didactic. Semesters 6-9 are predominantly clinical.

Semesters 1-5
The student follows the Nurse Anesthesia Program calendar during the first two phases.
Semesters 6-9 – see details in Clinical Policy

- Winter Break, which is the week of Christmas (No clinical or Seminar) and New Years (No Seminar).
- Ten days of excused personal time (including vacation, interviews, bereavement days, and sick days).
- Students will observe the holiday schedule of the clinical site where they are rotating.
- Vacation time will not be granted during clinical rotations 1 and 2. Rare, extenuating circumstances may be considered and must be discussed in advance with the DCS.

RELEASE OF INFORMATION TO CREDENTIALING AGENCIES AND STATE BOARDS OF NURSING

Students, who wish to have academic information shared with credentialing agencies or boards of nursing, must complete the Authorization to Release Information to Certification Agencies and State Boards of Nursing form before the School of Nursing faculty or administrators may release information about students.

SEXUAL HARASSMENT POLICY

As a Christian institution of higher education, Samford University has a moral commitment to the worth and dignity of all individuals. Consequently, sexual harassment is deemed unacceptable and will not be tolerated. Samford's policy of opposition to sexual harassment is not only a legal responsibility and practical utility, but stems from the university's profound commitment to Christian and moral values as expressed in its mission and purpose. See *Samford University Student Handbook* https://www.samford.edu/files/Student-Handbook.pdf

SUBSTANCE ABUSE POLICY AND PROCEDURE

The Moffett & Sanders School of Nursing recognizes its responsibility to provide a healthy environment within which students may learn and prepare themselves to become members of the nursing profession. The School is committed to protecting the safety, health, and welfare of its faculty, staff, and students and people who come in contact with its faculty, staff, and students during scheduled learning experiences. The MSSON strictly prohibits the illicit use, possession, sale, conveyance, distribution and manufacture of illegal drugs, intoxicants, or controlled substances in any amount or in any manner and the abuse of non-prescription and prescription drugs. Any nurse or nursing student who tests non-negative for illegal, controlled, or abuse-potential substances and who cannot produce a valid and current prescription for the drug is at risk of being in violation of the Nurse Practice Act and State Board of Nursing Rules and Regulations.

Furthermore, any nurse or nursing student who is aware that another nurse or nursing student has violated a provision of the Nurse Practice Act is obligated to report that nurse to the Board of Nursing. A failure to do so in and of itself is a violation of the Nurse Practice Act and the Board of Nursing Rules and Regulations. Similar professional expectations apply to nursing students. Any nursing student who is aware that another nursing student is using or is in possession of illegal drugs, intoxicants, or controlled substances is obligated to report this information to an MSSON faculty member.

STATEMENT OF PURPOSE

The intent of the Substance Abuse Policy is twofold: to identify students who are chemically impaired and help them to return to a competent and safe level of practice. Emphasis is on deterrence, education, and reintegration. All aspects of the policy are conducted in good faith and with compassion, dignity, and confidentiality.

The Substance Abuse Policy and Procedure of the Moffett & Sanders School of Nursing, Samford University is found in its entirety in this handbook. An abbreviated statement is included in the *Samford University Graduate Catalog.*

TESTING PROCEDURES

When. The MSSON requires the student to submit to drug testing under any or all of the following circumstances:

- Random testing as required by the clinical partners of the MSSON
- For cause (see Testing for Cause Statement); and
- Part of a substance abuse recovery program.

Failure to comply. Failure to comply with random drug testing at the specified time without administrative permission will result in suspension from clinical attendance until testing is complete.

Cost. The cost for random screening is included in the student's clinical fee. The student who is tested for cause will be responsible for paying the cost for the urine drug screen at the time the test is administered.

Facility. The Moffett & Sanders School of Nursing utilizes a compliance vendor for collection of specimens and screening. Screening will be performed utilizing the vendor's laboratory policies.

Sample Collection. The collection techniques will adhere to the guidelines in accordance with U.S. Department of Transportation 49 CFR Part 40 following chain of custody protocol. The compliance vendor will collect urine samples on a schedule determined by the dean of the Moffett & Sanders School of Nursing. The process and procedure for sample collection will adhere to the contract.

Substances. Substance-related disorders are listed in the *Diagnostic and Statistical Manual of Mental Disorders*, fifth edition, (DSM-V). Substances of abuse are grouped into ten classes: alcohol, amphetamines or similarly acting sympathomimetics, caffeine, cannabis, cocaine, hallucinogens, inhalants, nicotine, opioids, phencyclidine (PCP) or similarly acting arylcyclohexylamines and sedatives, hypnotics, or anxiolytics and other or unknown substances. Testing may include any of these drug categories. The School of Nursing shall have the authority to change the panel of tests without notice to include other substances as suggested by local and national reports or circumstances.

Non-negative Results. If a non-negative result is obtained, the student will have the opportunity to request that the original sample be retested. All non-negative results will be forwarded to the Medical Review Officer (MRO) who will contact the student. After review by the (MRO), non-negative results will then be reported to the appropriate associate dean and/or department chair. Any student whose urine sample has a non-negative result will be unable to progress in the nursing program.

Testing for Cause.

Any nursing student suspected of abuse related to the use of drugs, including but not limited to alcohol, may be subjected to testing. The decision to drug test for cause will be drawn from those facts in light of the experience of the observers and may be based on, but not limited to:

- Observable phenomena such as direct observation of drug use and/or physical symptoms or manifestations of being under the influence of a drug
- Erratic behavior, slurred speech, staggered gait, flushed face, dilated/pinpoint pupils, wide mood swings, absenteeism, tardiness, and deterioration of work performance
- A report of drug use provided by reliable and credible sources which have been independently corroborated
- Information that a student has caused or contributed to an accident that resulted in injury requiring treatment by a licensed health care professional
- Evidence of involvement in the use, possession, sale, solicitation or transfer of drugs while on a clinical site premise
- Conviction by a court, or being found guilty of a drug, alcohol or controlled substance in another legitimate jurisdiction.

Testing for cause will be conducted using the following procedure:

1. The faculty member or designated preceptor will have another health care provider confirm the suspicious behavior.
2. The student will be asked to leave the area and go with a faculty member or individual designated by the faculty and a witness to discuss the situation in a location ensuring privacy and confidentiality. The discussion will be documented, and the decision to drug test will be made after conferring with a department chair, associate dean and/or dean.
3. If warranted, the student will submit appropriate laboratory specimens in accordance with the Substance Abuse Policy and clinical site policies.
4. The student will be suspended from all clinical activities until the case has been reviewed by the appropriate personnel designated by the dean of the Moffett & Sanders School of Nursing.
5. If the lab test is negative for substances classified in the *Diagnostic and/or Clinical Statistical Manual of Mental Disorders*, the student will be allowed to return to clinical activities without penalty. Arrangements to make up missed work must be initiated by the student on the first day back to class or clinical (whichever comes first).
6. If any part of the lab test is non-negative for substances classified in the *Diagnostic and/or Clinical Statistical Manual of Mental Disorders*, the student is in violation of the Moffett & Sanders School of Nursing Substance Abuse Policy and the Samford University Drug and Alcohol Policy. As provided in this policy in the section entitled, “Non-negative Drug Screen, Sanctions, Treatment, Referral, Re-application, Opportunity for a Re-Test”, violations will result in the imposition of disciplinary sanctions up to and including expulsion of the student (*Samford University Student Handbook*).
7. Confidentiality will be maintained.

8. Failure to comply with “for cause” drug testing will result in immediate administrative withdrawal and a course grade of “F”.

CONFIDENTIALITY

All testing information, interviews, reports, statements and test results specifically related to the individual are confidential. Drug screening results will be sent to the appropriate associate dean and/or department chair in the School of Nursing. Records will be maintained electronically in a secured location. While the issues of screening are confidential within the University community, the information regarding substance abuse pursuant to the appropriate Board of Nursing requirements, must be shared with that Board of Nursing when the graduate applies for a license. The information may be shared with a parent or legal guardian as provided in the following paragraph:

Pursuant to the Family Educational Responsibility and Privacy Act (20 USC 1232g) Samford University may disclose, to a parent or legal guardian of a student, information regarding any violation of a Federal, State or local law, or of any rule or policy of the institution, governing the use or possession of alcohol or a controlled substance, regardless of whether that information is contained in the student’s education records, if (A) the student is under the age of 21; and (B) the institution determines that the student has committed a disciplinary violation with respect to such use or abuse.

Non-Negative Drug Screen and Opportunity for a Re-Test:

1. **Moffett & Sanders School of Nursing**

   In order to assure patient safety at clinical sites, a non-negative drug screen will be considered evidence of drug use/abuse by the student. A non-negative drug screen of any substance, including but not limited to the following, will result in immediate dismissal from the Moffett & Sanders School of Nursing: alcohol, amphetamines or similarly acting sympathomimetics, cannabis (marijuana metabolites), cocaine, hallucinogens, inhalants, opioids (methadone, codeine, hydrocodone, hydromorphone, morphine, oxycodone, propoxyphene), phencyclidine (PCP) or similarly acting arylcyclohexylamines and sedatives, hypnotics, or anxiolytics (methaqualone, barbiturates, benzodiazepines) and other and unknown substances. Action taken under the Drug and Alcohol Policy will be independent of action taken, if any, through the Student Conduct process. Dismissal from the Moffett & Sanders School of Nursing is not automatically a dismissal from Samford University. The student will be ineligible to receive a letter of good standing from the dean of the nursing program.

2. Samford University

Violations of the Samford University Alcohol and Drug Policy will result in the imposition of disciplinary sanctions up to and including expulsion of the student, as printed in the *Samford University Student Handbook*. Results of a non-negative drug screen will be referred by the dean of nursing to the Office of Student Conduct. Action taken through the Student Conduct process will be independent of action taken, if any, under the Substance Abuse Policy of the MSSON.

OPPORTUNITY TO REQUEST A RE-TEST

If a drug screen result is non-negative, the student may request a re-screen of the original urine sample. A student who desires to have the original sample re-tested must file a written request with the dean of the Moffett & Sanders School of Nursing within three (3) business days following notification of a positive drug test result. The student will be responsible for all costs of the re-screen. If the re-screen is negative, the student will be reinstated.

STUDENT RELEASE FORM

As a condition of progression**,** each student will sign the following **"**Substance Abuse Policy Release Form" (included in this handbook), agreeing to adhere to the terms and conditions of the Substance Abuse Policy and Procedure.

Revised 04/2026

SUBSTANCE ABUSE POLICY RELEASE FORM

I,_____, have read the Substance Abuse Policy of the Moffett & Sanders School of Nursing, Samford University, and agree as a student in the Moffett & Sanders School of Nursing to comply with all aspects of the policy as written including urine screening.

I agree that the MSSON contracted compliance company is authorized by me to provide the results of this test to the Dean of the Moffett & Sanders School of Nursing for use in enforcing the Substance Abuse Policy and Procedure.

I agree to indemnify and hold the MSSON contracted compliance company and its directors, officers, employees and agents harmless from and against any and all liabilities or judgments arising out of any claim related to 1) compliance of Samford University with federal and state law and 2) Samford University's interpretation, use and confidentiality of the test results, except with First Advantage is found to have acted negligently with respect to such matters.

I agree to indemnify and hold Samford University and its trustees, officers, employees and agents harmless from and against any and all liabilities or judgments arising out of any claim related to 1) compliance of the MSSON contracted compliance company with federal and state law and 2) the MSSON contracted compliance company's interpretation, use and confidentiality of the test results**.**

I further understand, acknowledge and agree that my failure to adhere to the conditions specified in this policy will result in my dismissal from the Moffett & Sanders School of Nursing. Furthermore, I agree to abide by the provisions for determining dismissal and to follow the conditions of re-acceptance as outlined.

I acknowledge that under the Family Education Responsibility and Privacy Act, 20 USC Section 1232g, Samford University may disclose, to a parent or legal guardian of a student, information regarding any violation of any Federal, State or local law, or of any rule or policy of the institution, governing the use or possession of alcohol or a controlled substance, regardless of whether that information is contained in the student's education record, if (A) the student is under the age of 21; and (B) the institution determines that the student has committed a disciplinary violation with respect to such use or possession. I agree that a positive drug screen will be considered a determination by Samford University that I have committed a disciplinary violation with respect to such use or possession and if I am under the age of 21 years Samford University may disclose such information to my parent(s) or legal guardian.

I represent and certify that as of the date of my execution of this document I am _____ years of age**.** Failure to comply with random drug screening at the specified time without administrative permission will result in suspension from clinical attendance until screening is complete. Failure to comply with "for cause" drug testing will result in immediate administrative withdrawal and a course grade of "F".

_____

Student printed name Student signature Date

_____

Witness Date

Revised 8/2025.

CLINICAL POLICY & PROCEDURES

CLINICAL MILESTONES

Clinical milestones are specified, time specific knowledge and skill sets that a graduate nurse anesthesia student will evidence mastery of prior to advancing to the next clinical practicum course.

These serve as a guide for the clinical preceptor in evaluating a student's clinical performance at various points in their clinical experience.

CLINICAL MILESTONES—LEVEL ONE (ROTATIONS 1, 2 – LESS THAN 500 CLINICAL HOURS)

1. Demonstrate the ability to perform a comprehensive history and physical assessment, chart review, preanesthetic physical examination and obtain an informed consent in preparation for anesthesia.
2. Demonstrate the ability to successfully obtain intravenous access in a variety of patients and calculate, initiate and manage fluid and blood component therapy.
3. Demonstrate individualized planning and management skills throughout the perianesthesia continuum that demonstrate an evidence-based integration of nursing science and the biophysical, psychosocial, analytical, organizational and public health sciences, as well as utilization of accepted standards of care.
4. Demonstrate understanding of the function and use of the anesthesia machine, including the FDA recommended checkout procedure, as well as operation of physiological monitoring systems, anesthesia ventilators, drug delivery systems, and fluid/blood delivery systems.
5. Demonstrate proficiencies with technical skills of airway management, to include mask management, LMA insertion and laryngoscopy with endotracheal intubation.
6. Demonstrate mastery of all common anesthetic drugs, including doses, toxicology, pharmacodynamic and pharmacokinetic profiles.

CLINICAL MILESTONES—LEVEL TWO (ROTATIONS 3, 4 – 500-1000 CLINICAL HOURS)

1. Maintain proficiency in all Level One milestones.
2. Demonstrate ability to formulate and implement anesthesia plans of care for adult patients (ASA I & II), before providing anesthesia services for elective procedures of low to moderate risk. The plans must be individualized, culturally competent and based on rational assessment of preexisting disease and surgical requirements.
3. Demonstrate basic abilities to recognize, evaluate and manage the physiologic responses to anesthesia and surgery and begin to multitask interventions in a smooth, relevant, consistent, and prioritized manner.

CLINICAL MILESTONES—LEVEL THREE (ROTATIONS 5, 6, 7 –1000-1800 CLINICAL HOURS)

1. Maintain proficiency in all Level II milestones.
2. Consistently demonstrate timely and appropriate airway evaluations and interventions for normal and abnormal presentations.
3. Demonstrate the ability to formulate more complex evidence-based anesthesia care plans for ASA class I-V patients across the lifespan: including, pediatric, geriatric, obstetric, and other specialty areas.
4. Demonstrate proficiency in insertion and management of invasive physiological monitoring systems including the interpretation and utilization of data obtained.
5. Demonstrate proficiency in managing and administering spinal, epidural and peripheral nerve blocks.

CLINICAL MILESTONES—LEVEL FOUR (ROTATIONS 8, 9 - 1800-2000+ CLINICAL HOURS)

1. Maintain proficiency in all Level III milestones.
2. Competently plan, manage and evaluate anesthetic care for all patient classifications, risk categories and age groups.
3. Demonstrate proficient use of critical thinking skills to apply knowledge to practice in clinical decision-making, problem solving and increasing levels of independence in patient care.
4. Demonstrate communication skills that result in effective information exchange and collaboration with patients, their families and other healthcare professionals.

DEPARTMENT OF NURSE ANESTHESIA DOCTOR OF NURSING PRACTICE (DNP) OUTCOMES

Clinical experiences are designed to equip the student to meet all of these expectations upon graduation from the nurse anesthesia educational program:

1. Deliver safe patient care including the following behaviors:

a. Be vigilant in the delivery of patient care.

b. Refrain from engaging in extraneous activities that abandon or minimize vigilance while providing direct patient care (e.g., texting, reading, emailing, etc.)

c. Conduct a comprehensive equipment check.

d. Protect patients from iatrogenic complications.

2. Provide perianesthetic management as demonstrated by the ability to:

a. Provide individualized care throughout the perianesthetic continuum.

b. Deliver culturally competent perianesthetic care.

c. Provide anesthesia services to all patients across the lifespan.

d. Perform a comprehensive history and physical assessment.

e. Administer general anesthesia to patients with a variety of physical conditions.

f. Administer general anesthesia for a variety of surgical and medically related procedures.

g. Administer and manage a variety of regional anesthetics.

h. Maintain current certification in advanced and pediatric cardiac life support (ACLS and PALS).

3. Employ ethical, critical thinking as demonstrated by the ability to:

a. Apply knowledge to practice in decision-making and problem solving.

b. Provide nurse anesthesia services based on evidence based principles.

c. Perform a preanesthetic assessment prior to providing anesthesia services.

d. Assume responsibility and accountability for diagnosis.

e. Formulate an anesthesia plan of care prior to providing anesthesia services.

f. Identify and take appropriate action when confronted with anesthetic equipment-related malfunctions.

g. Interpret and utilize data obtained from noninvasive and invasive monitoring modalities.

h. Calculate, initiate, and manage fluid and blood component therapy.

i. Recognize, evaluate, and manage the physiological responses coincident to the provision of anesthesia services.

j. Recognize and appropriately manage complications that occur during the provision of anesthesia services.

k. Use science-based theories and concepts to analyze new practice approaches.

l. Pass the national certification examination (NCE) administered by NBCRNA.

4. Utilize effective communication skills including the following:

a. Utilize interpersonal and communication skills that result in the effective exchange of information and collaboration with patients and their families.

b. Utilize interpersonal and communication skills that result in the effective interprofessional exchange of information and collaboration with other healthcare professionals.

c. Respect the dignity and privacy of patients while maintaining confidentiality in the delivery of interprofessional care.

d. Maintain comprehensive, timely, accurate, and legible healthcare records.

e. Transfer the responsibility for care of the patient to other qualified providers in a manner that assures continuity of care and patient safety.

f. Teach others.

5. Assume leadership and professional responsibility as demonstrated by the ability to:

a. Integrate critical and reflective thinking in his or her leadership approach.

b. Provide leadership that facilitates intraprofessional and interprofessional collaboration.

c. Adhere to the Code of Ethics for the Certified Registered Nurse Anesthetist.

d. Interact on a professional level with integrity.

e. Apply ethically sound decision-making processes.

f. Function within legal and regulatory requirements.

g. Accept responsibility and accountability for his or her practice.

h. Provide anesthesia services to patients in a cost-effective manner.

i. Demonstrate knowledge of wellness and chemical dependency in the anesthesia profession through completion of content in wellness and chemical dependency.

j. Inform the public of the role and practice of the CRNA.

k. Evaluate how public policy making strategies impact the financing and delivery of healthcare.

l. Advocate for health policy change to improve patient care.

m. Advocate for health policy change to advance the specialty of nurse anesthesia.

n. Analyze strategies to improve patient outcomes and quality of care.

o. Analyze health outcomes in a variety of populations.

p. Analyze health outcomes in a variety of clinical settings.

q. Analyze health outcomes in a variety of systems.

r. Disseminate research evidence.

s. Use information systems/technology to support and improve patient care.

t. Use information systems/technology to support and improve healthcare systems.

u. Analyze business practices encountered in nurse anesthesia delivery settings.

STUDENT CLINICAL RIGHTS AND RESPONSIBILITIES

Enrollment in a program of nurse anesthesia grants certain rights and responsibilities to the student. Student rights and responsibilities should be fully understood and complied with.

STUDENT RESPONSIBILITIES

The Department of Nurse Anesthesia expects an acceptable quality of work and mature professional behavior from every student enrolled in the program. Student responsibilities include, but are not limited to the following:

Dependability in Program Assignments

1. Arrive at the clinical site on time.
2. Remain in the area until dismissed by the clinical preceptor/clinical coordinator.
3. Refrain from requesting to leave the clinical area to attend to personal business.
4. Follow the "work" schedule that the clinical coordinator provides without "frivolous" requests for changes.
5. Follow each clinical site's policies as outlined by the respective clinical coordinator for informing the hospital/anesthesia department of an absence or need to be late in arriving for assigned clinical assignment.
6. Carry out assignments without excessive reminders (e.g., clinical case recording in Typhon, daily evaluations, clinical preceptor evaluations, clinical site evaluations, and self-evaluations).

Personal Responsibility

1. Prior to the beginning of the clinical experience, review identified personal goals, clinical goals, and experience level with the preceptor.
2. Maintain accountability for own learning activities.
3. Communicate with preceptor, patients, faculty and others effectively.
4. Wear name badge and make introductions as a graduate student nurse anesthetist to **every** patient.
5. Demonstrate preparation for clinical experiences, including developing a plan of care for every patient.
6. Maintain patient safety at all times.
7. Act professionally and ethically at all times.
8. Accept constructive criticism and use it to improve performance.
9. Ensure preceptor's supervision when performing procedures.
10. Respect the confidential nature of all information obtained during clinical experience.

11. Perform a post-anesthesia assessment on **every** anesthetized patient, unless the patient is discharged early or the anesthetic was for an outpatient procedure.

STUDENT RIGHTS

Students in a clinical learning environment should expect the following:

1. To learn in a non-threatening environment.
2. To maximize opportunity to obtain clinical experiences.
3. To be respected as a licensed registered nurse.
4. To be communicated with clearly, honestly, and in a timely manner.
5. To have personal property respected.
6. To have all student/preceptor communication conducted in appropriate locations and kept confidential.

Should a student encounter a situation in the clinical area in which they feel that these rights are being violated, the student should immediately call the Director of Clinical Services for resolution of the matter.

CLINICAL PRECEPTOR EXPECTATIONS

Preceptors have many expectations about how learners will perform. Communication with the preceptor will make their expectations clear. The preceptor can expect the student:

1. To have successfully completed all of the academic preparation required prior to entrance to the clinical courses.
2. To behave in a professional manner and be receptive to educational experiences.
3. To be prepared for the daily clinical experiences.
4. To communicate clearly, honestly and in a timely manner with the preceptor.
5. To not be exploited relative to time commitment for pay or profit of the conducting institution.

AMERICAN HOSPITAL ASSOCIATION - A PATIENT'S BILL OF RIGHTS

INTRODUCTION

Effective health care requires collaboration between patients and physicians and other health care professionals. Open and honest communication, respect for personal and professional values, and sensitivity to differences are integral to optimal patient care. As the setting for the provision of health services, hospitals must provide a foundation for understanding and respecting the rights and responsibilities of patients, their families, physicians, and other caregivers. Hospitals must ensure a health care ethic that respects the role of patients in decision making about treatment choices and other aspects of their care. Hospitals must be sensitive to cultural, racial, linguistic, religious, age, gender, and other differences as well as the needs of persons with disabilities.

The American Hospital Association presents A Patient's Bill of Rights with the expectation that it will contribute to more effective patient care and be supported by the hospital on behalf of the institution, its medical staff, employees, and patients. The American Hospital Association encourages health care institutions to tailor this bill of rights to their patient community by translating and/or simplifying the language of this bill of rights as may be necessary to ensure that patients and their families understand their rights and responsibilities.

BILL OF RIGHTS

These rights can be exercised on the patient's behalf by a designated surrogate or proxy decision maker if the patient lacks decision-making capacity, is legally incompetent, or is a minor.

1. The patient has the right to considerate and respectful care.
2. The patient has the right to and is encouraged to obtain from physicians and other direct caregivers relevant, current, and understandable information concerning diagnosis, treatment, and prognosis.
   Except in emergencies when the patient lacks decision-making capacity and the need for treatment is urgent, the patient is entitled to the opportunity to discuss and request information related to the specific procedures and/or treatments, the risks involved, the possible length of recuperation, and the medically reasonable alternatives and their accompanying risks and benefits.
   Patients have the right to know the identity of physicians, nurses, and others involved in their care, as well as when those involved are students, residents, or other trainees. The patient also has the right to know the immediate and long-term financial implications of treatment choices, insofar as they are known.
3. The patient has the right to make decisions about the plan of care prior to and during the course of treatment and to refuse a recommended treatment or plan of care to the extent permitted by law and hospital policy and to be informed of the medical consequences of this action. In case of such refusal, the patient is entitled to other

appropriate care and services that the hospital provides or transfer to another hospital. The hospital should notify patients of any policy that might affect patient choice within the institution.

4. The patient has the right to have an advance directive (such as a living will, health care proxy, or durable power of attorney for health care) concerning treatment or designating a surrogate decision maker with the expectation that the hospital will honor the intent of that directive to the extent permitted by law and hospital policy.

   Health care institutions must advise patients of their rights under state law and hospital policy to make informed medical choices, ask if the patient has an advance directive, and include that information in patient records. The patient has the right to timely information about hospital policy that may limit its ability to implement fully a legally valid advance directive.

5. The patient has the right to every consideration of privacy. Case discussion, consultation, examination, and treatment should be conducted so as to protect each patient's privacy.

6. The patient has the right to expect that all communications and records pertaining to his/her care will be treated as confidential by the hospital, except in cases such as suspected abuse and public health hazards when reporting is permitted or required by law. The patient has the right to expect that the hospital will emphasize the confidentiality of this information when it releases it to any other parties entitled to review information in these records.

7. The patient has the right to review the records pertaining to his/her medical care and to have the information explained or interpreted as necessary, except when restricted by law.

8. The patient has the right to expect that, within its capacity and policies, a hospital will make reasonable response to the request of a patient for appropriate and medically indicated care and services. The hospital must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically appropriate and legally permissible, or when a patient has so requested, a patient may be transferred to another facility. The institution to which the patient is to be transferred must first have accepted the patient for transfer. The patient must also have the benefit of complete information and explanation concerning the need for, risks, benefits, and alternatives to such a transfer.

9. The patient has the right to ask and be informed of the existence of business relationships among the hospital, educational institutions, other health care providers, or payers that may influence the patient's treatment and care.

10. The patient has the right to consent to or decline to participate in proposed research studies or human experimentation affecting care and treatment or requiring direct patient involvement, and to have those studies fully explained prior to consent. A

patient who declines to participate in research or experimentation is entitled to the most effective care that the hospital can otherwise provide.

11. The patient has the right to expect reasonable continuity of care when appropriate and to be informed by physicians and other caregivers of available and realistic patient care options when hospital care is no longer appropriate.
12. The patient has the right to be informed of hospital policies and practices that relate to patient care, treatment, and responsibilities. The patient has the right to be informed of available resources for resolving disputes, grievances, and conflicts, such as ethics committees, patient representatives, or other mechanisms available in the institution. The patient has the right to be informed of the hospital's charges for services and available payment methods.

The collaborative nature of health care requires that patients, or their families/surrogates, participate in their care. The effectiveness of care and patient satisfaction with the course of treatment depends, in part, on the patient fulfilling certain responsibilities. Patients are responsible for providing information about past illnesses, hospitalizations, medications, and other matters related to health status. To participate effectively in decision making, patients must be encouraged to take responsibility for requesting additional information or clarification about their health status or treatment when they do not fully understand information and instructions. Patients are also responsible for ensuring that the health care institution has a copy of their written advance directive if they have one. Patients are responsible for informing their physicians and other caregivers if they anticipate problems in following prescribed treatment.

Patients should also be aware of the hospital's obligation to be reasonably efficient and equitable in providing care to other patients and the community. The hospital's rules and regulations are designed to help the hospital meet this obligation. Patients and their families are responsible for making reasonable accommodations to the needs of the hospital, other patients, medical staff, and hospital employees. Patients are responsible for providing necessary information for insurance claims and for working with the hospital to make payment arrangements, when necessary.

A person's health depends on much more than health care service. Patients are responsible for recognizing the impact of their life-style on their personal health.

CONCLUSION

Hospitals have many functions to perform, including the enhancement of health status, health promotion, and the prevention and treatment of injury and disease; the immediate and ongoing care and rehabilitation of patients; the education of health professionals, patients, and the community; and research. All these activities must be conducted with an overriding concern for the values and dignity of patients.

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Samford University
Moffett & Sanders School of Nursing

POLICY: CLINICAL SCHEDULE

CLINICAL SCHEDULES

The Department of Nurse Anesthesia clinical training extends over four semesters.

SEMESTERS 6, 7, 8, 9

During these semesters, the graduate student will be allowed the following time off of clinical:
The week of Christmas.
Holidays as observed by the clinical site.

Scheduled vacation is allowed after completion of the second clinical rotation. (See Clinical Attendance Policy to request)

1. Ten days of excused personal time (including vacation, interviews, bereavement days, and sick days).
2. Time for job interviews will be considered personal time.
3. No vacation can be taken during the first week of a clinical rotation or during clinical rotations to:
   Alabama Colorectal Clinic
   OB rotations at any site
4. Time off allowed for the AANA Annual Congress, including one day travel prior to meeting and one day travel home.

Students will observe the holiday schedule of the clinical site where they are rotating.

One day will be allowed to travel to out-of-state professional meetings, except Annual Congress (see #4)

One conference day, in addition to one day for travel, will be allowed for senior students who are registered for a board review class.

Clinical schedules for semesters 6, 7, 8, and 9 will be provided to students by the DCS during semester 5. Requests to change the schedule provided are allowed, although requested changes are not guaranteed. Schedule requests should be submitted through the appropriate clinical course in Canvas using the "Schedule Change Request Form."

ADDITONAL DAYS TO VACATION "BANK"

After transitioning to the Senior Level and at appropriate clinical sites, additional clinical experience may be obtained on days not previously scheduled. For each full day of clinical experience, an additional day will be added to your vacation bank, with a maximum accumulation of **eight days** to your vacation bank. It is the student's responsibility to discuss projected additional experiences with the DCS for each rotation prior to engaging in the experience. An email to the DCS to report additional time after completion is necessary to record the experience.

If you miss Seminar class or "call in" the week before OR week after your additional experience, you forfeit the opportunity to earn any additional days for three months. This opportunity will be at the discretion of the DCS related to overall clinical time and performance (both clinically and in other courses). It may be revoked, and notification will be provided.

COMPLETION OF CLINICAL EXPERIENCE

Clinical experience may be completed:

1. One week prior to graduation and all required experiences are achieved.
2. Once 2200 clinical hours are reached, all required experiences are achieved, remaining vacation time is available (subtracted from one week prior to graduation), Typhon records are up to date, and clinical performance is meeting expectations.

Samford University
Moffett & Sanders School of Nursing

POLICY: CLINICAL ATTENDANCE

ATTENDANCE

UNPLANNED/RECORDED AS A "CALL IN"

Students are expected to attend, be punctual and prepared for the clinical experience. Students are responsible for **emailing** the Director of Clinical Services (DCS) to report any unplanned clinical absence by 8 am of the missed day. This must be done **each** day of the absence. Communication via text **does not** complete the requirement.

Further, the student should follow each clinical site's policies as outlined by the Clinical Coordinator (CC) for informing the hospital/anesthesia department of an absence or late arrival for clinical assignment.

DO NOT report to the clinical area when ill. This includes an elevated temperature above 100.5, vomiting, etc. Students are responsible for notifying the DCS and the CC **each day** by 8:00 am of the absence. You must send an **email** regarding your illness; a text does not complete the requirement.

PLANNED/RECORDED AS "VACATION"

Students are provided with 10 vacation days, in addition to the Winter Break. To request vacation, students are to:
1) Email the DCS to **request** dates desired and the clinical site where attending during those dates at least one week prior to requested date.
2) Once dates are approved by the DCS, the student may then notify the CC of approval by the DCS and request permission from the CC.

The request should be sent to the DCS the week prior to the request. Vacation will be granted ONLY if case tracking is up to date.

EXTENDED ABSENCE

Extenuating circumstances that require extended periods of absence, such as illness, personal circumstances, maternity, etc. will be considered excused absences and handled on a case-by-case basis by the Department Chair.

MEDICAL LEAVE OF ABSENCE

If the need is for an extended illness, a student can apply for a **medical leave of**

absence. Documentation from a physician will be required for granting medical leave. Students who return to the program after a leave may not be able to resume their clinical activities at the point where they left, due to the curriculum plan and close correlation of clinical and didactic activities.

NON-MEDICAL LEAVE OF ABSENCE

Non-medical leave requests are at the discretion of the Department Chair on a case-by-case basis. Students who return to the program after a leave may not be able to resume their clinical activities at the point where they left, due to the curriculum plan and close correlation of clinical and didactic activities.

UNEXCUSED CLINICAL ABSENCES

Patterns of unplanned clinical absences are not permitted and may result in disciplinary action, including dismissal from the program. Scheduled absences will occasionally be allowed for other approved educational opportunities, family emergencies, or military service.

INCLEMENT WEATHER ATTENDANCE

In the event of inclement weather, where travel to the clinical site is not safe, the student should email the DCS and call the clinical site as soon as possible. If the inclement weather subsides and safe travel conditions are restored, the student should contact the CC at the clinical site to determine if they should/are expected to present themselves for clinical.

Samford University
Moffett & Sanders School of Nursing

POLICY: CLINICAL ATTIRE

Name badges, with the picture/name identifier facing outward, must be worn at all times whenever in the clinical facility.

Dress codes in the OR Suite and the hospital policy regarding scrubs must be followed at all times; this includes the wearing of scrub caps and artificial nails.

Beards and mustaches must be kept clean and neatly trimmed at all times. They are to be covered when in the operating room.

Extremes in style or clothing, which may be offensive or immodest, are not appropriate. Inappropriate clothing includes shorts, sweat suits of any type, exercise apparel, low cut shirts, tank tops, and clothing containing inappropriate language.

Jewelry should not be distracting or dangling. Each clinical site may exercise discretion in deciding the appropriateness of jewelry in their facility.

Personal protective equipment such as goggles, face shield and/or respirator shall be worn when there is danger of exposure to blood or body fluids, including infectious aerosolized particles.

Tattoos are to be covered at all times.

Samford University
Moffett & Sanders School of Nursing

POLICY: CALL ASSIGNMENTS

All students will have clinical call experience. The Standards for Accreditation of Nurse Anesthesia Education Programs defines call as a "*Call is a planned clinical experience outside the normal operating hours of the clinical facility, for example, after 5 p.m. and before 7 a.m., Monday through Friday, and on weekends. Assigned duty on shifts falling within these hours is considered the equivalent of an anesthesia call, during which a student is afforded the opportunity to gain experience with emergency cases. Although a student may be assigned to a 24 hour call experience, at no time may a student provide direct patient care for a period longer than 16 continuous hours."*

The CC at a clinical site may assign one or more call days as a component of the student's rotation. The hours of that call assignment will be at the discretion of the CC but must be within the defined limitations.

The program limits students' commitment to the program to less than 64 hours per week on average. The Standards for Accreditation of Nurse Anesthesia Programs: Practice Doctorate defines reasonable time commitment as: "*A reasonable number of hours to ensure patient safety and promote effective student learning should not exceed 64 hours per week. This time commitment includes the sum of the hours spent in class and all clinical hours averaged over 4 weeks. Students must have a 10-hour rest period between scheduled clinical duty periods (i.e., assigned continuous clinical hours). At no time may a student provide direct patient care for a period longer than 16 continuous hours.*"

Revised 04/2020

POLICY: STUDENT EMPLOYMENT

EMPLOYMENT

Students are strongly discouraged from working while in the program.

The Department of Nurse Anesthesia, Moffett & Sanders School of Nursing, Samford University forbids the employment of nurse anesthesia students as nurse anesthetists by title or function.

POLICY: CLINICAL EQUIPMENT

EQUIPMENT

Each student should be prepared with a binaural stethoscope, goggles, scissors, writing pen and personal electronic device each clinical day.

In the operating room, personal electronic devices or "smart phones" are only appropriate for activities related to patient care. Students must follow the clinical site's policy regarding the use of such devices.

POLICY: CLINICAL GRADING / EVALUATION

GRADING/EVALUATION

The assignment of either "Pass" or "Fail" for the clinical course is based upon written summative clinical evaluations and direct feedback from the clinical faculty. Grades are assigned by the DCS.

Nursing is a practice discipline. Regardless of the grade on clinical evaluation tools and other written work, it is possible to fail a course as a result of unsafe/unsatisfactory practice or interactions.

Clinical grades are on a Pass/Fail basis based on the student's clinical performance. Daily evaluations are completed by the clinical preceptor and are accompanied by a discussion of performance, which provides information necessary to complete a summative evaluation at the end of the clinical rotation. Summative evaluations are provided to the student for review.

The Department of Nurse Anesthesia requires a "Pass" grade in each clinical course to successfully progress in the program.

Students must complete all semester coursework before progressing to the next semester. An incomplete grade (INC) may be awarded if the student has done work that would earn a passing grade in the course but has failed to complete some portion of the required work because of an emergency. An "INC" grade automatically becomes an "F" if not removed by the last day of classes in the next full semester after the grade was given.

DAILY EVALUATIONS

Formative Evaluations: The clinical preceptor should review the anesthetic management with the student at the end of each clinical day. This is an informal opportunity for discussion of strengths and weaknesses observed and suggestions for improvement. It is the student's responsibility to request an evaluation from the clinical preceptor each clinical day. If a student is unable to obtain an evaluation after 2 requests of the preceptor, the student is to notify the DCS via email with the date and name of the CRNA. Failure to request clinical evaluations every day or communicate appropriately with the DCS may result in a failing grade.

The daily evaluation is done via case management system website. Paper evaluations are not accepted. **The clinical preceptor, not the student, must complete the on-line form.**

SUMMATIVE EVALUATIONS

Daily evaluations and direct clinical faculty feedback provide the information necessary to complete a summative evaluation at the end of the clinical rotation. Consultation with the clinical preceptor(s) and the site CC may be considered in determining the summative evaluation and semester grade. The summative evaluation is returned to the CC for review and comment, prior to submission for graduate student review.

SELF-EVALUATION

The student will complete a self-evaluation form at the **end of every clinical rotation** and midway through the clinical portion of the program.

CLINICAL SITE EVALUATION

At the **end of each clinical rotation**, the student will complete an anonymous evaluation of the clinical site, addressing its strengths and weaknesses. Evaluations are returned to each site at the end of the year for their review.

CLINICAL PRECEPTOR EVALUATION

At the **end of each clinical rotation**, the student will complete an anonymous evaluation of at least three clinical preceptors. Evaluations are returned to each site for their review at the end of the year.

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POLICY: CREDENTIALLING PROCESS

Students in the MSSON are responsible for maintaining health requirements. Each student is required to have a physical examination, proof of immunity or documentation of the following vaccinations: measles, rubella, varicella, Tdap, and hepatitis B. In addition, the student is required to provide documentation of tuberculin testing and documentation of influenza vaccination. Upon the request of a clinical facility, the University agrees to require the student to furnish the facility with any documentation required by the facility evidencing that the student is in compliance with the University's immunization requirements. As part of the Progression Policy, all health forms, immunization information, and licensure will be submitted by the student to Graduate Student Services for compliance accountability. All documentation must be submitted **before the first day of class**.

Compliance information will be maintained in the student's Typhon account, which will indicate expiration dates. Students are responsible for keeping current all licensures and immunizations. Registration for subsequent semesters will be held if compliance is incomplete. Failure to do so while in the clinical portion of the program will result in loss of privileges at the site until compliance is verified. Days not attended will be subtracted from available vacation days. The student must submit:

Credential or Document Type	Guideline	Validation Period
Certification	Must be BLS certified prior to entering the program. *BLS/ACLS/PALS certified prior to beginning clinicals; this opportunity provided prior to beginning clinicals.	Valid within 2 years
Mantoux TB skin test	Date rec'd and date read must be listed.	Valid within 1 year, required every year
Hepatitis B Vaccination series	Proof of vaccinations signed by physician, PA, or CRNP; need all 3 dates listed or titer	
MMR	Provide date signed by physician, PA, or CRNP on physical form or proof of MMR; must be two step or titer	
Tetanus (TDAP)	Provide date signed by physician, PA, or CRNP on physical form or proof of TDAP	Within 10 years
Varicella	Immunization date or varicella titer signed by physician, PA, or CRNP on physical form OR date of disease	
Flu shot	In fall prior to November (2nd fall semester) - Provide proof of Flu Shot Vaccine	*Required by clinical sites
Student Health Form	Must be on College of Health Sciences Health Form and signed by physician, PA, or CRNP	
Nursing License	Must be active and unencumbered – Multi-state RN license required by January 31 of first spring semester	

Some clinical placement sites may require MSSON students to have certain immunizations or tests that are not compulsory pursuant to Samford's policies and irrespective of any medical or religious exemption. In such circumstances, MSSON students who decline vaccines or tests required by a specific clinical site may elect to "opt-out" of such placement site and request the DCS for the Department of Nurse Anesthesia to attempt to identify a comparable clinical experience. Samford University makes no representation and offers no assurance that any alternative clinical placements can or will be available. MSSON students in such circumstances are also advised that alternative clinical placements may affect the students' academic status (e.g. full time versus part time), eligibility for financial aid, academic schedule, graduation date, licensure eligibility and employment prospects.

Revised 5/23 tmc

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POLICY: HIPAA (HEALTH INSURANCE PORTABILITY & ACCOUNTABILITY ACT)

To remain in compliance with HIPAA regulations, graduate students may not keep any patient protected health information (PHI) including patient photos to complete daily and summative case counts, care plans, case presentations or any other type of assignment.

Unauthorized disclosure of patient information may violate state or federal laws, and unauthorized release of information may result in dismissal from school and legal action taken against the student.

No photos are to be taken of any patient or patient records. No information related to clinical patients may be posted on social media.

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POLICY: CLINICAL INCIDENT REPORTING

It is the responsibility of the student to immediately notify the DCS of any incident that places the patient, the student, the clinical preceptor, or the University at risk. This can include but is not limited to patient issues, needle sticks, drug errors, or disagreements with clinical preceptors. If the student is unsure if an incident is of a reportable nature, it should be reported. The DCS will determine the nature of the incident and direct the student to the appropriate subsequent procedures. Failure to immediately report the incident can result in suspension from clinical, dismissal from the program, and loss of liability protection.

The following procedure is to be instituted:

1. notify the preceptor/CC of the incident
2. follow the policy and procedures for incident reporting at the institution
3. call the DCS to notify the Department of Nurse Anesthesia
4. notify the liability insurance provider as directed by the DCS

Students must complete required incidence reporting forms **within 24 hours** and submit them to the DCS. The DCS will notify the Samford University Risk Management Office within 48 hours of the incident.

CLINICAL AREA ILLNESS OR INJURY

Students who are injured or become ill while providing patient care MUST notify the assigned preceptor and the DCS immediately. The CC of the site needs to be notified within 24 hours.

1. Follow the agency's policy and procedure for injury or illness, if appropriate.
2. Clinical agencies will not provide medical care free of charge for students who are injured or become ill during the clinical experience. Students are responsible for any expense incurred. Each student is required to carry personal health care coverage.

POLICY: STUDENT CLINICAL IDENTIFICATION

CLINICAL IDENTIFICATION

Students are expected to wear their name badges in a visible location at all times while in the clinical area. Most clinical sites prefer the title of “graduate student nurse anesthetist” for introductions.

All patients have the right to refuse participation in the nurse anesthesia clinical education process. This right must be respected by the student during their clinical experience.

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POLICY: CASE TRACKING

CASE TRACKING

Case tracking is done via the student's personal account or in Typhon's website.

All cases and experiences should be recorded accurately via Typhon **at least once a week**.

The COA Guidelines for Counting Clinical Experiences, accessible in Typhon, should be used as a resource to ensure accurate recording.

Electronic case recording is not acceptable while providing patient care.

DAILY EVALUATIONS

The daily evaluation is done via Typhon's website through the preceptor's personal link.. Paper evaluations are not accepted. **The clinical preceptor, not the student, must complete the online form.**

It is the student's responsibility to request that an evaluation be completed by their preceptor each day. If the preceptor does not have a link for the evaluation tool, the student should email the DCS with the clinical site name, name of the preceptor, and the preceptor's email address. The DCS will use this information to send the preceptor a personal link for evaluations. **If a student is unable to obtain an evaluation after 2 requests of the preceptor, the student must email the DCS and include the name of the CRNA and the date worked with.**

Daily evaluations and direct clinical faculty communication provide the information necessary to complete a summative evaluation at the end of the clinical rotation.

POLICY: CLINICAL CERTIFICATIONS

BLS & ACLS & PALS

Prior to beginning clinical courses, each student will be required to demonstrate evidence of current Basic Life Support (BLS), Advanced Cardiac Life Support (ACLS) and Pediatric Advanced Life Support (PALS) certification. Courses for these certifications are provided during the Fall semester prior to clinical experience.

Each student will be responsible for maintaining current certifications during their entire clinical curriculum up to and including graduation.

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POLICY: TRAVEL FOR CLINICAL ASSIGNMENTS

An integral part of the clinical component of the program is the access to rural and specialty clinical sites for clinical experiences. The benefit of these clinical sites is the diversity that they provide in the student's clinical education.

Students will be assigned to several "out of town" clinical sites. Clinical sites may be a significant distance from the Samford University campus. A multistate RN license is required for students to obtain all case requirements. All state licenses must be current and unencumbered for in state and out-of-state clinical rotations.

When a student is assigned to one of these sites, the expense of travel to the site and/or housing while assigned to the distant site will be the responsibility of the student.

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POLICY: VALUE STATEMENTS AND CLINICAL BEHAVIOR

VALUE STATEMENT

Students in the MSSON must adhere to the standards of conduct specified in the Samford University Student Handbook as well as Academic Integrity Policy in the College of Health Sciences, and certain standards of behavior appropriate for all health professionals. Students shall comply with legal, moral, and legislative standards that determine acceptable behavior of the nurse. Noncompliance may be cause for suspension/dismissal from the nursing school.

The student will be expected to adhere to all value statements (Samford University Student Handbook) as they apply to the clinical arena, including respect for others, ethical practice, ethical personal behavior, and patient confidentiality. Students documented to have demonstrated unethical, unprofessional, or unsafe conduct merit immediate probation or dismissal from the nursing school.

CLINICAL BEHAVIORS

A student may be dismissed from the program for any but not limited to the following clinical practices:

1. unsafe practice
2. clinical error or poor clinical judgment affecting patient safety
3. inability to cooperate with supervisors, clinical preceptors, peers, or hospital staff
4. habitual tardiness or absenteeism
5. administering anesthesia outside the confines of the anesthesia program
6. consistent lack of preparation for clinical practicum
7. evidence of drug or alcohol abuse
8. falsification of records
9. medication diversion
10. unprofessional behavior

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POLICY: CLINICAL SUPERVISION

CLINICAL SUPERVISION

Clinical instruction (supervision) is normally provided on a one student to one preceptor ratio. When clinical preceptors determine that a student's level of clinical competence allows less supervision, 2:1 (students to instructor) supervision may be considered under some conditions. At no time will the ratio of supervision exceed two students to one preceptor. At no time is 2:1 supervision used for the convenience of the clinical facility to the detriment of the student's educational experience or patient safety.

Clinical supervision of nurse anesthesia graduate students is restricted to CRNAs and/or anesthesiologists with staff privileges who are immediately available at all times. At no time may an anesthesiology assistant or anesthesiology resident provide supervision for the student.

The Standards for Accreditation of Nurse Anesthesia Programs: Practice Doctorate defines: *"Clinical supervision of students must not exceed (1) 2 students to 1 CRNA, or (2) 2 students to 1 physician anesthesiologist, if no CRNA is involved. The CRNA and/or physician anesthesiologist are the only individual(s) with responsibility for anesthesia care of the patient, and have responsibilities including, but not limited to: providing direct guidance to the student; evaluating student performance; and approving a student's plan of care. There may be extenuating circumstances where supervision ratios may be exceeded for brief periods of time (e.g., life-threatening situations); however, the program must demonstrate that this is a rare situation for which contingency plans are in place (e.g., additional CRNA or physician anesthesiologist called in, hospital diverts emergency cases to maximize patient safety). Clinical supervision must be consistent with the COA Standards (i.e., clinical oversight is the responsibility of a CRNA or physician anesthesiologist only). The program is responsible for ensuring its clinical supervision requirements are consistent with the COA Standards and that students are aware of these requirements and know who is supervising them in the clinical area."*

The program restricts clinical supervision in non-anesthetizing areas to credentialed experts who are authorized to assume responsibility for the student.

The Standards for Accreditation of Nurse Anesthesia Programs: Practice Doctorate defines: *"Credentialed expert - An individual awarded a certificate, letter, or other testimonial to practice a skill in an institution is a credentialed expert. The credential must attest to the bearer's right and authority to provide services in the area of specialization for which he or she has been trained. Examples are: a pulmonologist who is an expert in airway management, an emergency room physician authorized by an anesthesia department to assume responsibility for airway management, or a neonatologist who is an expert in airway management."*

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POLICY: CLINICAL STANDING / PROBATION / PROGRESSION

CLINICAL STANDING/PERFORMANCE EVALUATION

Students are evaluated daily during a clinical rotation and a summative evaluation is completed at the end of a clinical rotation.

If a preceptor and/or CC determine that clinical expectations are not being met, the student will be counseled by the preceptor, CC, and/or the DCS.

If performance does not improve, the DCS in consultation with the Department Chair will make the judgment as to placing the student on clinical probation or program dismissal.

CLINICAL PROBATION

Clinical Probation is a period designed to remediate and evaluate the clinical performance of a student who has not satisfactorily met the semester's clinical objectives.

When the student is placed on clinical probation, a *Probation Action Form-Part A* will be completed, outlining the reasons for probation and the necessary actions to correct the stated problem(s). A probationary clinical site will be assigned by the DCS. Specific preceptors may be identified to work with and evaluate the student's performance. The student's clinical progress will also continually be monitored by the DCS and Department Chair.

Specific criteria may be prescribed to measure the improvement in student clinical performance over a specified period of time. A *Preceptor Evaluation Form-Part B* will be completed by the clinical preceptor(s) and forwarded to the DCS.

At the end of the probation period, the student will be re-evaluated and if there is still a deficiency the student will either be dismissed from the program or allowed a second probationary period. After careful evaluation of the documentation of performance, student conference(s) and input from the clinical site, the Department Chair and DCS will make a decision as to the student's clinical progression.

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POLICY: SERVICE LEARNING

The Nurse Anesthesia Program faculty members value the learning that comes from serving with a variety of populations, cultures, and passions. The component of Service Learning has developed from the desire to bridge classroom learning with opportunities to serve our communities and profession to more comprehensively develop the true professional.

A minimum of twenty hours of service to the community or profession are required prior to graduation. The required twenty hours can be obtained through "Lunch-n-Learns", service in the student's community and/or church, through mission trips, and through service to nurse anesthesia professional organizations and/or the MSSON. While twenty hours is the minimum requirement, students are encouraged to serve and submit records for every area of service in which they participate. Completion of service hours are submitted to the Coordinator for the Department of Nurse Anesthesia and the appropriate form is found in the Service Learning portion of the departmental Canvas page.

Requirements are as follows:

Prior to starting clinical	5 hours served and submitted
Completion of NUNA 750	Minimum of 10 hours total served and submitted*
Completion of NUNA 751	Minimum of 15 hours total served and submitted*
Completion of NUNA 752	Minimum of 20 hours total served and submitted *

* If a mission trip is scheduled, this requirement can be waved.
Three service learning reflective self-evaluations will be included in your portfolio. Further guidance will be provided.

If a desired service opportunity occurs during clinical hours, the student may request prior approval to be absent from clinical to participate. The following conditions must be met:

- The service time will be a minimum of 6 hours
- A ½ page reflection paper is submitted within one week of the event. It will answer one of the three questions required for the Reflective Paper
- Photographs are also submitted
- This may occur once during the clinical experience

There will be several opportunities to participate in "Lunch n Learns" during Fall and Spring semesters. These events provide speakers that share information about ways to serve in specific organizations. Students will sign in to receive credit for attendance.

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POLICY: THRIVE: A WELLNESS INITIATIVE

The faculty of the nurse anesthesia department recognizes that a 3-year program to earn a DNP and complete all didactic and clinical requirements to sit for the national certification exam is challenging emotionally, mentally, and physically.

The *Thrive* initiative is a collaborative effort between faculty and staff of the Counseling and Wellness Department and the Department of Nurse Anesthesia. The goal is to assist in developing students' coping skills, emotional intelligence, and overall well-being with a variety of focused strategies. While engagement in *Thrive* is highly encouraged, participation is completely voluntary.

Studies conducted with SRNAs and CRNAs reveal that ineffective coping skills can lead to higher rates of burnout, intense anxiety, substance use, and depression. With this knowledge, the faculty is proactively working with professionals to provide content each semester to strengthen the skills necessary not just to survive but thrive. New content will be introduced each semester and will be housed in a module in Canvas for access anytime.

Upon completion of the 9-semester modules, the students will earn a digital badge that can be attached to their social media profiles and listed on their resume. The badge, issued through the Academic Affair's Office of Online and Professional Studies, illustrates that additional training was pursued and completed related to emotional intelligence, effective stress and anxiety management, and communication.

You are invited to join this supportive community where you will be encouraged, stretched, and hopefully grow as you fulfill the Lord's calling for your life. We are honored to partner with you through *Thrive*.

"He is like a tree
  planted by streams of water
that yields its fruit in its season,
  and its leaf does not wither.
In all that he does, he prospers." Psalm 1:3

CLINICAL COORDINATOR RIGHTS AND RESPONSIBILITIES

CLINICAL COORDINATOR RESPONSIBILITIES

The Director of Clinical Services for the Department of Nurse Anesthesia expects a Clinical Coordinator to promote the educational goals and objectives of the Department; promote effective communication between the program faculty, university, and hospital staffs; and be responsible for the orientation, coordination, and guidance of the student's clinical experience at the clinical site.

Major tasks and responsibilities include, but are not limited to the following:

- Acts as a liaison with anesthesiologists, CRNAs, and other members of the medical staff in matters relating to clinical site issues.
- Consults with and advises the DCS in regards to program direction, evaluation, and policy formation.
- Familiarizes self with the graduate nursing program including course of study and evaluation policies for the student experience.
- Assigns surgical cases to students based on student need.
- Ensures that a student to preceptor ratio of two to one is not exceeded and determines the ratio of students to preceptors in the clinical area based on the:
    - student's knowledge and ability
    - physical status of the patient,
    - complexity of the anesthetic and/or surgical procedure
    - experience of the preceptor.
- Participates in the orientation of nurse anesthetist students to the clinical setting.
- Evaluates students based on specific semester clinical behavioral objectives.
- Holds conferences with student(s) regularly to assess progress and determine needs; counsels student(s) as appropriate.
- Assists other clinical faculty in the clinical evaluation process.
- Makes certain that the clinical supervision of students in anesthetic and nonanesthetic situations is restricted only to CRNAs and/or anesthesiologists with staff privileges who are immediately available and assume responsibility for the student. (Instruction by graduate registered nurse anesthetists is prohibited if they act as the sole agents responsible for the students.)
- Provides DCS with written annual assurance that certification and licensure of clinical faculty is up-to-date and current.
- Confers with DCS as necessary, regarding student progress.
- Ensures, and provides DCS with documentation, that all clinical preceptors are currently licensed as registered professional nurses and are certified/recertified by the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA).

CLINICAL COORDINATOR RIGHTS

The Clinical Coordinator should expect the following:

- Communication from the DCS and the Department of Nurse Anesthesia in a timely, thorough manner.
- Access to the DCS and the Department in a reasonable, timely manner.
- Information of department policies including evaluations, time commitment, student assignments, call assignments, clinical milestones, and performance objectives.
- Communication from clinical students regarding an absence **each day** of the absence.
- Receipt of the summative evaluation after each clinical rotation to review and add comments before returning to the DCS for the student's clinical file.
- Notification within 24 hours if a student is injured or becomes ill while providing patient care to help guide the process of following agency's policy and procedure, if appropriate.

CLINICAL APPENDICES

Department of Nurse Anesthesia
Moffett & Sanders School of Nursing - Samford University

DAILY CLINICAL EVALUATION

NAME_____ DATE_____

CLINICAL SITE/ROTATION_____CLINICAL COURSE _____

Evaluate performance in each of the following areas by placing an "X" in the box that, in your best judgment, represents the student's performance.

	CLINICAL SKILL	**Does Not Meet Expectations (1)**	**Meets Expectations (2)**	**Not able to evaluate (N/A)**
1.	Select and set up appropriate equipment; perform FDA and manufacture recommended equipment safety checks			
2.	Perform complete preoperative interview and assessment, assign physical risk, select appropriate anesthetic technique for the procedure and communicate plan of care			
3.	Provide for safety of patient, self, and others. Position patient to prevent injury. Use universal infection control procedures.			
4.	Calculate, initiate, and manage fluid and blood replacement therapy including the use of various infusion devices.			
5.	Demonstrate organization skills necessary for effective anesthetic care			
6.	Demonstrate knowledge of anesthetic and adjunctive drugs including dose, drug classification, anesthetic implications, and pharmacologic rationale for interventions			
7.	Demonstrate technical proficiency in establishing peripheral venous access and invasive monitoring techniques			
8.	Demonstrate proper mask technique, laryngoscopy, intubating techniques, LMA insertion and airway management during emergence			
9.	Demonstrate knowledge of intraoperative case management by applying interpretation of monitoring equipment and maintaining vigilance			
10.	Constantly assess patient during emergence and transport. Report anesthetic implications and patient's physical status to appropriate post-anesthetic health care providers			

11.	Synthesize and suggest an impression of the problem and possible solutions/alternatives to the responsible staff anesthesiologist and nurse anesthetists for judgment and definitive action			
12.	Record keeping is timely, legible, accurate and complete			
13.	Respond effectively to stressful situations and recognize the need for assistance			
14.	Accept constructive criticism, and assume responsibility for his/her actions			
15.	Demonstrate an eagerness to learn with evidence of personal motivation by seeking new opportunities and assuming responsibility for own learning			
16.	Demonstrate personal and professional integrity and the ability to interact and communicate on a professional level			
17.	Recognize the importance of participating as a team member with appropriate utilization of time			

Please write any comments regarding clinical strengths and/or weaknesses below:

EVALUATOR SIGNATURE_____

DATE_____

*****Clinical Coordinators evaluate students on the following in the Summative Evaluation, completed at the end of each rotation.**

- Utilize critical reasoning and judgement in the management of simple to complex situations consistently
    - Meets Expectations
    - Does Not Meet Expectations
    - Not Able to Evaluate

Department of Nurse Anesthesia
Moffett & Sanders School of Nursing - Samford University

CRNA CLINICAL PRECEPTOR EVALUATION

CRNA Name: *(include first, last)*	I have worked with this instructor (circle) **<5 times 5-10 times >10 times**	Student Level:

Select the score that best describes this individual in each of the 4 categories. Examples of desired behaviors are listed.

Rating Scale: 2=Poor 3=Fair 4=Good 5=Excellent N/A=no information

	Rating Scale
Provides guidance and clinical teaching.	2 3 4 5 N/A

Examples:

Prepares me for clinical situations and potential difficulties I might not expect.
Demonstrates clinical procedures and techniques as needed.
Provides guidance with technical skills.
Uses clear explanations and information to relate theory into practice.
Assists me in finding learning experiences.
Answers my questions or refers me to an appropriate source.

Defines expectations and assesses knowledge.	2 3 4 5 N/A

Examples:

Apprises me of what is expected from my performance.
Questions me to elicit adequacy of knowledge and rationale for actions.
Allows me to function independently appropriate to my developmental level.

Promotes motivation and provides support.	2 3 4 5 N/A

Examples:

Conveys enthusiasm and interest in teaching.
Encourages me to ask questions and express ideas.
Motivates me to function to the best of my ability.
Provides professional support and encouragement.
Promotes a climate of mutual respect.
Encourages me to demonstrate ethical and professional behaviors.

Completes evaluations and provides feedback.	2 3 4 5 N/A

Examples:

Is available for perioperative consultation.
Critiques my anesthetic management plan, verbal or written.
Accepts points of view other than their own.
Discusses my progress with me.
Completes written evaluations in a timely manner.
Provides constructive ways to improve my performance.
Maintains confidentiality.

DEPARTMENT OF NURSE ANESTHESIA

MOFFETT & SANDERS SCHOOL OF NURSING - SAMFORD UNIVERSITY

CLINICAL SITE EVALUATION

SITE NAME:

Category	Poor	Fair	Good	Excellent	NA
Variety of cases					
Variety of special cases					
Availability of ASA Class 3-4 cases					
Availability of geriatric cases					
Availability of trauma cases					
Availability of pediatric cases					
Diversity of equipment					
Adequacy of equipment					
Appropriate autonomy encouraged					
Encourages interprofessional and intraprofessional collaboration					
Knowledge of CRNAs					
Knowledge of MDAs					
Attitude of CRNAs toward students					
Attitude of MDAs toward students					
Overall attitude of hospital personnel toward students					
Orientation to clinical site					
Timely evaluations of performance					
Overall evaluation of the clinical site					

List the strengths of the clinical site:

List any areas of improvement that would make this clinical site a better learning experience:

Department of Nurse Anesthesia
Moffett & Sanders School of Nursing - Samford University
STUDENT SELF-EVALUATION

Instructions: This self-evaluation form is to be completed at the end of every other clinical rotation. The form will be submitted to the Director of Clinical Anesthesia Services and be reviewed at the student/faculty summative clinical evaluation conference.

	Needs Remediation	Below Average	Average	Above Average	Excellent	Comments
DIDACTIC KNOWLEDGE (applicable to just completed rotation)						
Anatomy						
Physiology / Pathophysiology						
Pharmacology						
Anesthesia Principles/Techniques						
CLINICAL SKILLS						
Starting IV's						
Complete History & Physical						
Pre-Anesthetic Assessment						
Induction Management						
Mask Management						
Endotracheal Intubation						
Monitor Use						
Insertion Invasive Monitors						
Monitor Interpretation						
Maintenance Management						
Management Emergence						
Spinal Technique						
Epidural Technique						
Axillary Technique						
Other block types (write in)						
Resuscitation Techniques						

ANESTHESIA COMPETENTCY						
	Needs Remediation	**Below Average**	**Average**	**Above Average**	**Excellent**	**Comments**
General Surgery						
Pediatrics						
OB						
CV						

Neurosurgery						
Trauma						
Thoracic						
Outpatient						
Vascular						
Orthopedics						

NON-TECHNICAL SKILLS	**Needs Remediation**	**Below Average**	**Average**	**Above Average**	**Excellent**	**Comments**
Apply knowledge to practice in decision making and problem solving						
Assume responsibility and accountability for diagnosis						
Recognize and appropriately manage complications that occur during provision of anesthesia services						
Communication skills with patients						
Communication, collaboration with healthcare professionals						
Integrate critical and reflective thinking in his or her leadership approach						
Analyze strategies to improve patient outcomes and quality of care						
Analyze health outcomes in a variety of populations, a variety of clinical settings, a variety of systems						

DEPARTMENT OF NURSE ANESTHESIA
MOFFETT & SANDERS SCHOOL OF NURSING
SAMFORD UNIVERSITY
PROBATIONARY ACTION FORM - Part A

Student Name:

Date:

Probationary Period: _____ to _____

REASON(S) FOR PROBATION:

PROPOSED REMEDIAL ACTIONS:

STUDENT COMMENTS:

_____

Student

_____

Director of Clinical Services

_____

Department Chair

DEPARTMENT OF NURSE ANESTHESIA
MOFFETT & SANDERS SCHOOL OF NURSING
SAMFORD UNIVERSITY
PROBATIONARY ACTION FORM -- PART B

Student Name:

Date:

Probationary Period: _____ to _____

Clinical Sites involved during probation: _____

1. Areas identified as needing further improvement:

2. Areas that have improved and are meeting expectations as specified:

3. Overall impression and recommendations following probation period:

4. Student Comments:

_____

Student

_____

Director of Clinical Services

_____

Department Chair

MINIMUM REQUIRED AND PREFERRED CASES

Minimum number of clinical hours: 2000

CLINICAL EXPERIENCES	Minimum REQUIRED	PREFERRED
Total Cases	650	700
Classes III - IV (total of a, b, c & d)	200	300
a. Class III	50	100
b. Class IV	10	100
c. Class V	0	5
d. Class VI		
Patient Assessment		
Initial preanesthetic assessment	50	100
Postanesthetic assessment	50	150
Comprehensive history and physical		
a. Actual		
b. Simulated		
Special Cases		
Geriatric	100	200
Pediatric		
2-12 years	30	75
Less than 2 years	10	25
Neonate (less than 4 weeks)		5
Trauma / Emergency (E)	30	50
Obstetrical management (total of a & b)	30	40
a. Cesarean delivery	10	15
b. Analgesia for Labor	10	15
Pain Management Encounters	15	50
Anatomical Categories		
Intra-abdominal	75	
Intracranial (includes open)	5	20
Open	3	10
Oropharyngeal	20	
Intrathoracic (total of a, b & c)	15	40
a. Heart		
1. Open heart cases (total of a & b)	5	10
a) With cardiopulmonary bypass		
b) Without cardiopulmonary bypass		
2. Closed heart cases		10
b. Lung	5	
Neck	5	10
Neuroskeletal	20	
Vascular	10	30

Methods of Anesthesia		
General Anesthesia	400	
Perform a general anesthetic induction with minimal or no assistance	50	100
Inhalation induction	25	40
Mask management[2]	25	35
Supraglottic airway devices (total of a & b)	35	50
a. Laryngeal mask		
b. Other		
Tracheal intubation (total of a & b)	250	
a. Oral		
b. Nasal		5
Alternative tracheal intubation/endoscopic techniques[3] (total a & b)	25	50
a. Endoscopic techniques[4] (total of 1& 2)	5	15
1. Actual placement		
2. Simulated placement		
3. Airway assessment		
b. Other techniques	5	25
Emergence from anesthesia	300	
Regional techniques		
Actual Administration (total of a, b, c & d)	35	
a. Spinal (total of 1 & 2)	10	50
1. Anesthesia		
2. Pain management		
b. Epidural (total of 1 & 2)	10	50
1. Anesthesia		
2. Pain management		
c. Peripheral[4] (total of 1 & 2)	10	50
1. Anesthesia		
Upper		
Lower		
2. Pain management		
Upper		
Lower		
d. Other[5] (total of 1 & 2)		
1. Anesthesia		
2. Pain management		

[2] A general anesthetic that is administered by mask, exclusive of induction.

[3]Tracheal intubations accomplished via alternative techniques should be counted in both tracheal intubation and the alternative tracheal intubation categories.

[4]Simple models and simulation experiences may be used to satisfy part of this requirement. No clinical experiences can be obtained by simulation alone.

[5]Examples include truncal, cutaneous, head, and neck blocks (e.g, transversus abdominis plane, rectus sheath, ilioinguinal, iliohypogastric, oral, and maxillofacial blocks).

Management (total of 1 & 2)	35	50
1. Anesthesia		
2. Pain management		
Moderate / deep sedation	25	50
Arterial Technique		
Arterial puncture / catheter insertion	25	
Intra-arterial BP monitoring	30	
Central Venous Catheter		
Placement[6] – Non-PICC (total of a & b)	10	15
a. Actual		5
b. Simulated		
Placement –PICC (total of a & b)		
a. Actual		
b. Simulated		
Monitoring	15	
Pulmonary Artery Catheter		
Placement		5
Monitoring		10
Other		
Ultrasound guided techniques (total of a & b)	20	
a. Regional[7]	10	
1. Actual regional		
2. Simulated regional		
b. Vascular[8]	10	
1. Actual vascular		
2. Simulated vascular		
Point of Care Ultrasound (POCUS)[9]		
a. Actual		
b. Simulated		
IV catheter placement	100	
Advanced noninvasive hemodynamic monitoring		
Assessment of chest X-ray[10]	5	10

[6]Simple models and simulated experiences may be used to satisfy this requirement. For students enrolled on or after 1/1/2020, no clinical experiences can be obtained by simulation alone. Insertion of peripherally inserted central catheters (PICC) does not meet the requirements for central line placement.

[7]Regional includes neuraxial, truncal, and peripheral nerve blocks. No clinical experiences can be obtained by simulation alone.

[8] Vascular includes arterial, peripherally inserted central catheters, central venous, and peripheral access. No clinical experiences can be obtained by simulation alone.

[9] Refers to the use of portable ultrasonography at a patient's bedside for diagnostic (e.g., symptom or sign-based examination) purposes. This is exclusive of using ultrasound for image-guidance purposes such as for regional anesthesia or vascular access.

[10] This experience can be gained in a healthcare institution, classroom, simulation center, or by using online resources. One case should be counted as the evaluation of one chest x-ray, regardless of the number of items assessed on that x-ray.

BACKGROUND CHECK

The MSSON institutes background checks on all nursing students. Students selected for admission to the MSSON are admitted pending the results of a background check. Each student is required to have a background check, and submit to, as requested, any additional checks once enrolled in the nursing program. The MSSON must certify to all clinical agencies where students practice that each student has had an acceptable background check. Students are required to follow the procedures established by the School of Nursing.

Students must report any arrests or legal convictions that occur prior to or during their nursing education. Reportable examples include, but are not limited to, misdemeanors, felonies, sexual offender convictions or governmental sanctions. The MSSON reserves the right to release information regarding the student's criminal history to appropriate clinical agency representatives. If a student is deemed ineligible for clinical placement in any contracted clinical agency of the School of Nursing, the student will receive a course failure and dismissal from the nursing program. Failure to report arrests or legal convictions will result in dismissal from the School of Nursing. A student's admission may be withdrawn, or the student may be dismissed from the School of Nursing due to findings from the background check. Students dismissed will be considered for readmission on a case-by-case basis depending on the particular situation.

Some clinical sites require an updated background check for their credentialling process. The DCS will submit the request and alert you when necessary.

CONSENT AND RELEASE AUTHORIZATION

COLLEGE OF HEALTH SCIENCES

SAMFORD UNIVERSITY

I authorize Samford University and its employees, agents, and other persons professionally affiliated with the University, including those employed by its College of Health Sciences (hereinafter referred to as "University"), to release my background check and the drug screening reports to clinical facilities and training sites to which I am or may be assigned for clinical education. I understand that any statements I have placed in my records commenting on contested information contained in the records listed above will be released along with the records to which they relate and waive all personal and legal rights to confidentiality and privacy.

It is possible that participation at a particular facility may necessitate additional screening or that additional screening may be required during the course of the program (this may incur an additional cost at that time for which I am responsible for).

I release Samford University and its trustees, officers, directors, employees and agents from any liability or damage in connection with the release of my background check and drug screen reports.

I agree to the above statement:

_____ _____

Signature Date

_____

SU ID

CONFIDENTIALITY STATEMENT

MOFFETT & SANDERS SCHOOL OF NURSING
SAMFORD UNIVERSITY

I hereby agree to hold in confidence any information that I am made aware of pertaining to patients and/or their families during all of my clinical experiences while I am a student in the Moffett & Sanders School of Nursing. I recognize that patient records and patient interviews are confidential and private and that I will share information only with those authorized to have the information as necessary to care for the patient/family. I will not disclose any information to any unauthorized person, or permit any person to examine or make copies of any report or document prepared by me, coming into my possession or to which I have access. I will not use patient names or other identifying information on assignments that I submit to fulfill course requirements. I further agree never to use any information for my advantage or personal gain. I realize that the unauthorized disclosure of information by me may violate state or federal laws, and that unauthorized release of information may result in my dismissal from school and legal action against me.

I have read this agreement, understand it, and agree to abide by it.

_____ _____
Signature Date

_____
Witness

Samford University
Academic Integrity Policy
Governing Graduate & Professional Students in the College of Health Sciences
School of Health Professions, School of Nursing, School of Public Health

The School of Pharmacy will follow the current *Code of Ethical and Professional Conduct* outlined in the School of Pharmacy's Student Handbook (pg. 28) for any allegation of an academic integrity violation related to courses within the School of Pharmacy.

Pharmacy students enrolled in courses in the Schools of Health Professions, Nursing or Public Health will be held to the Academic Integrity Policy governing graduate and professional students in the College of Health Sciences.

Effective Date: October 1, 2019

ARTICLE I: PREAMBLE

A degree from Samford University is evidence of achievement in scholarship and citizenship. Activities and attitudes should be consistent with high academic standards and Christian commitment and should be in keeping with the philosophy and mission of the University. At Samford, academic integrity is expected of every community member in all endeavors and includes a commitment to honesty, fairness, trustworthiness, and respect.

The University Statement on Academic Dishonesty is as follows: students, upon enrollment, enter into a voluntary association with Samford University. They must be willing to observe high standards of intellectual integrity, respect knowledge, and practice academic honesty. Those who cheat on an examination or class assignment are not only academically dishonest, but also are deficient in the scholarly maturity necessary for college study. Those who engage in academic dishonesty are subject to severe punishment. Any act to obtain an unfair academic advantage like the acts described in Article VIII is considered dishonest.

ARTICLE II: SCOPE OF APPLICABILITY

2.1 General Applicability

Articles I through III of this policy apply to students enrolled in the following graduate programs at Samford University: Master of Science in Nursing, Doctor of Nursing Practice, Master of Athletic Training, Master of Science in Speech Language Pathology, Doctor of Physical Therapy, Master of Science in Physician Assistant Studies, Doctor of Audiology, Dietetic Internship, Master of Healthcare Administration, Master of Health Informatics and Analytics, Master of Public Health, Master of Science in Nutrition, Master of Social Work, and Doctor of Public Health. Articles IV-IX apply to students enrolled in any of those listed graduate programs that are not governed by a school-specific academic integrity policy that has been approved by the Provost and the General Counsel of Samford University.

2.2 Approval of School-Specific Academic Integrity Policies and Procedures

Specific schools and colleges of Samford University may adopt their own school-specific academic integrity policies and procedures. After August 1, 2021, no school-specific policy may be used unless it was previously approved by the Provost and General Counsel of Samford University. In order to obtain

approval of a school-specific policy, the dean of the school must submit a written copy of the proposed policy to the provost of the university and the general counsel. The general counsel shall approve or disapprove the policy within 60 days of receipt. If the general counsel disapproves the policy, he or she shall communicate to the dean the reasons for the policy's disapproved. If they wish, a school and dean may revise a disapproved policy (perhaps in consultation with the general counsel) and resubmit it.

2.3 **Applicability of Various Academic Integrity Policies**
In determining which of various academic integrity polices governs an academic integrity violation, all allegations of academic integrity violations shall be governed by the policy that applies in the school or program in whose course or activity the alleged violation occurred.

ARTICLE III: REPORT OF ACADEMIC INTEGRITY TO THE ACADEMIC INTEGRITY OFFICER

3.1 Academic Integrity Officer
The University Registrar or his designee shall serve as the Academic Integrity Officer (AIO).

3.2 Report of Academic Integrity Violations to the AIO by Faculty
All final determinations of an academic integrity violation by a student in a graduate or professional program must be reported to the AIO as follows:

(a) By Faculty. Any faculty member (including faculty in schools that have an approved school-specific academic integrity policy) who finally determines that a student committed an academic integrity violation (as defined by the applicable academic integrity policy) and who adjusts any grade based on the violation must report the violation to the AIO.

(b) By School-Specific Academic Dishonesty Hearing Bodies. If the hearing body or other entity authorized by an approved school-specific academic integrity policy finally determines that a student committed an academic integrity violation (as defined by the applicable policy), the entity must report the violation to the AIO.

(c) By the Graduate Academic Council. If pursuant to this policy the Graduate Academic Council determines that a student committed an academic integrity violation, the GAC must report the violation to the AIO.

(d) Nature of the Report to the AIO. A report of academic dishonesty to the AIO pursuant to this section shall (i) identify the student who committed the violation and the school and academic program in which the violation occurred, and (ii) briefly describe the violation.

3.3 Repository of Academic Violation Reports
The AIO shall create a repository to maintain reports of academic integrity violations submitted pursuant to this section and identify instances in which a student is found guilty of multiple academic integrity violations.

ARTICLE IV: GRADUATE ACADEMIC COUNCIL

4.1 Composition
The Graduate Academic Council (GAC) shall be composed of one (1) faculty member from each of the university's schools that have graduate/professional degree programs ((*Howard College of Arts & Sciences, Moffett & Sanders School of Nursing, Brock School of Business, Orlean Beason School of*

Education, McWhorter School of Pharmacy, School of Public Health, School of Health Professions and School of the Arts) and the University Library and one student from each school.

Faculty members must be full-time faculty with at least three years of instructional or library experience at Samford University. Each student member must have a cumulative grade point average of 3.0 or higher at the time of the appointment and during service. The student members shall be appointed annually by the deans of the participating schools. Faculty members shall be appointed for three-year terms by their respective deans.

A chairperson shall be selected each year by the faculty members of the Graduate Academic Council. The same person may be elected chairperson in multiple and back-to-back years.

4.2 Jurisdiction

The GAC shall have exclusive jurisdiction to decide all academic integrity matters brought before it pursuant to the procedures set forth in section 6.1 of this policy.

4.3 Duties

The GAC shall have the following duties:

(a) Conduct investigations and hold hearings pursuant to the procedures set forth in this policy to determine whether an accused student committed an academic integrity violation.

(b) Impose sanctions on students who it finds to be guilty of repeated or severe academic integrity violations.

(c) Communicate its decisions as set forth in these policies.

ARTICLE V: ACADEMIC INTEGRITY VIOLATIONS

5.1 Definition of Academic Integrity Violations

Academic Integrity Violations are acts of academic misconduct. The term academic integrity violation includes, but is not limited to, the following acts:

(a) Offering for course credit as one's own work, in whole or in part, the work of another.

(b) Plagiarism, that is, incorporating into one's work and submitting to others (either for course credit or some other university sanctioned purpose) passages taken either word for word or in substance from a work of another, unless the student credits the original author and identifies the original author's work with appropriate quotation marks, footnotes, or other appropriate written explanation.

(c) Offering one's work for course credit or other university sanctioned purpose work that one previously offered for course credit in another course or other university sanctioned activity, unless one secures permission to do so prior to submission from the instructor in whose course the work is being offered or the person in charge of the activity.

(d) Obtaining an unauthorized copy of a test or assignment in advance of its scheduled administration.

(e) Taking an examination (or other evaluative instrument, exercise, or competition) for another student or knowingly permitting another person to take an examination (or other evaluative instrument, exercise, or competition) for oneself.

(f) Giving, receiving, or obtaining information pertaining to an examination (or other evaluative instrument, exercise, or competition) during an examination or exercise period, unless such action is authorized by the instructor giving the examination or the person in charge of the exercise or competition.

(g) Divulging the contents of an essay or objective examination or other evaluative exercise or competition to a student who has not taken the exam or engaged in the exercise or competition.

(h) Taking, keeping, misplacing, or tampering with the property of Samford University, a faculty member, or another student, if one knows or should reasonably know that one would, by such conduct, obtain an unfair academic advantage. This section is intended to include, but not be limited to, material in a university library.

(i) Failing to follow the instructions of a professor in completing an assignment or examination or of a person or entity in charge of an exercise or competition, if one knows or should reasonably know that one would, by such conduct, obtain an unfair academic advantage.

(j) Witnessing conduct which one knows or should reasonably know is dishonorable and failing to report it.

(k) Altering or falsifying academic or student record documents such as transcripts, change of grade forms, University excuses, and add/drop forms.

(l) Giving or receiving unauthorized assistance on an examination, assignment, project, or other academic assignment.

(m) Making a false report of academic dishonesty.

(n) Fabricating, falsifying, or misrepresenting data, results, analyses, or other studies, presenting the results of research or studies not actually performed, or manipulating or altering data to achieve a desired result, including the failure to report or suppressing conflicting or unwanted data.

(o) Violating a Code of Conduct applicable to a program in which the student is enrolled that relates to academic integrity.

(p) Violation of HIPPA Rules.

(q) Falsifying clinical records (Case numbers, hours practice, etc.) and clinical evaluations.

ARTICLE VI: PROCEDURES FOR ADDRESSING REPORTING ACADEMIC INTEGRITY VIOLATIONS

6.1 Faculty Actions Based on a Suspected Academic Integrity Violation

If a faculty member believes that a student committed an academic integrity violation in a course or activity for which the faculty member is responsible, the faculty member shall follow the following procedures:

(a) Meeting with the Student. The faculty member must meet with the student within 15 university working days after discovering the alleged violation. Based on the situation, the faculty member should consider having a witness at the meeting with the student. The faculty member should seek in the meeting to determine whether the student admits or denies the alleged violation. At some point in the discussion, the faculty member must describe the alleged violation and ask if the student committed it. Once a faculty member has charged a student with an academic integrity violation, the student may not withdraw from or change status in the course until the matter is resolved.

(b) Consultation and Advice. The faculty member is encouraged to consult with his or her department chair and or dean and may disclose information necessary for the chair and/or dean to provide guidance as a school official with a legitimate educational interest. The faculty member may also consult with colleagues about the suspected academic integrity violation. All such communications shall comply with FERPA. Faculty members may also consult with the AIO regarding a suspected violation.

(c) Student Admission of Violation. If the student admits the academic integrity violation, the faculty member shall adjust the student's grade on the assignment or in the course as the faculty member deems appropriate. The faculty may also submit the matter to the AIO and request that the GAC review the matter to consider sanctions beyond a grade adjustment due to the seriousness of the violation. In that event, the faculty member shall prepare a report to the AIO describing the violation and related circumstances.

(d) Faculty Determination of No Violation. If, after further review, the faculty member is satisfied that no academic integrity violation occurred, then the allegations are dismissed, no report shall be filed, and the matter is closed.

(e) Student Contests Violation. If after further review the faculty member determines that an academic integrity violation occurred, but the student denies the violation, then the faculty member shall adjust the student's grade on the assignment or in the course as the member the faculty member deems appropriate. The faculty member shall in that event prepare a report that (i) states he or she found an academic integrity violation, (ii) describes the violation, and (iii) describes the grade sanction, if any, that he or she imposed. The faculty member shall provide a copy of the report to both the student and the AIO. If the student wishes to contest the faculty member's determination or the grade sanction imposed, the student may file an appeal with the AIO pursuant to section 7.1 of this policy stating why the student believes the faculty member's determination or sanction is inappropriate. The student may not withdraw from the course during this process and should continue to attend the course and complete all necessary assignments.

6.2 Reports of Alleged Academic Integrity Violations by Other Members of the University Community.

Any member of the Samford community who suspects that a graduate or professional student has committed an academic integrity violation shall report the allegation to the faculty member in whose course the alleged violation occurred. If the alleged violation did not occur in a course, the allegation shall be reported to the AIO.

ARTICLE VII. GRADUATE ACADEMIC COUNCIL PROCEDURES

7.1 AIO Referrals to the Graduate Academic Council

Within five (5) business days of receiving a report or allegation of an alleged academic integrity violation, the AIO shall in the following instances refer the matter to the chairperson of the GAC:

(a) When a student files an appeal of a faculty member's determination of an academic integrity violation or the grade sanction imposed based on the violation.

(b) When a faculty member requests GAC review of an academic integrity violation pursuant to section 6.1(c) for consideration of sanctions beyond a grade adjustment due to the seriousness of the violation.

(c) When the AIO determines that an alleged academic integrity violation would be the student's second or subsequent violation.

(c) When another member of the Samford community reports an alleged academic integrity violation pursuant to section 6.2 that did not occur in a course.

7.2 Referrals Reviewed by the Chairperson of the GAC

Within ten (10) business days after the AIO refers an alleged academic integrity violation to the GAC chairperson, the chairperson shall review the allegation, report, and any other material submitted and determine if there are reasonable grounds to believe that an academic violation occurred. If the chairperson determines such grounds do not exist, the chairperson shall report to the AIO within those ten (10) days that the allegations are dismissed. The chairperson may request assistance from legal counsel and other university departments as appropriate.

7.3 Assembling a GAC Hearing Panel

(a) Composition. Within 10 business days after the AIO refers an alleged academic integrity violation to the GAC chairperson, the shall appoint a Hearing Panel. The Hearing Panel shall consist of three faculty and two student members of the GAC selected by the chairperson. In selecting the faculty members of the hearing panel, the chairperson shall give preference to appointing the GAC representative from the school in whose program the alleged violation occurred. The Hearing Panel shall by majority vote select one of its faculty members to serve as its presiding member who shall assure the panel proceeds in a manner that is timely and consistent with these procedures.

(b) Recusal. A member of the Hearing Panel shall recuse himself or herself if he or she believes that he or she cannot decide the matter before the panel based on the evidence or without bias or prejudice. The Hearing Panel may, by majority vote, recuse one of its members from sitting on a hearing if that recusal would best serve the interests of the university.

(c) Notice to Student. If the GAC chairperson determines that reasonable grounds exist to believe an academic violation occurred, then the chairperson shall within five (5) business days notify the student alleged to have committed the violation that GAC proceedings are being instituted to address the allegation. The notification shall be in writing and shall describe the specific violations alleged.

7.5 Hearing Panel Proceedings

(a) Initial Panel Deliberation. The Hearing Panel must convene (this may occur face to face, WebEx or other electronic means) and begin deliberations within fourteen (14) days after their appointment. The panel shall at that time review the allegations and all material submitted to the AIO and the GAC chairperson. The Hearing Panel may by majority vote decide to dismiss the allegation, investigate further, or proceed to a hearing of the matter.

(b) Investigation. If the Hearing Panel believes further investigation is needed, it may interview any member of the Samford community who may have knowledge of relevant facts or request any materials that relate to the alleged violation.

(c) Scheduling a Hearing. If after completing any needed investigation, the Hearing Panel does not decide to dismiss the allegation, it shall schedule a hearing of the matter. The hearing must be held within 20 days after the Hearing Panel was appointed.

(d) Notice of Hearing. The panel must provide written notice of the hearing to the accused student no less than ten (10) days before the hearing. The notice must set forth:

(i) the date, time, and place of the hearing;
(ii) the specific violations alleged;
(iii) the names of all witnesses whom the panel consulted or on whose statements the panel has relied; and
(iv) a list (and copies when available) of all materials relating to the violation on which the panel relied; and
(v) a copy of this policy and any related written procedures.

(e) Hearing. At the hearing, the Hearing Panel may hear the testimony of any witnesses and consider any documents it deems relevant to the allegation. The accused student has the right to be present at the hearing, to act as his or her own counsel, to be assisted by a member of the Samford community of his or her choice, to obtain copies of all testimony or reports relied upon by the Hearing Panel; to ask questions of all witnesses who testify at the hearing; and to present evidence in his or her defense.

(e) Panel Deliberations. After the hearing concludes, the Hearing Panel shall deliberate and determine (i) whether the student committed academic integrity violations; and (ii) what sanctions, if any, should be imposed.

(f) Sanctions. The Hearing Panel may impose the following sanctions:

(1) Official reprimand that will be made part of the student's record;

(2) Removal of awards or honors received by the student as a result of the violation;

(3) A requirement that the student engage in community service, educational classes, or other appropriate activity;

(4) Probation (a period in which the student is restricted from participating in all or designated co-curricular or other activities).

(5) Suspension (termination of student status at the university for a specified period);

(6) Expulsion (termination of student status at the university for an indefinite period or permanently).

(g) Notice of Decision. Within five (5) business days, the chairperson of the Hearing Panel shall communicate its decision in writing to the AIO who will provide a copy of the decision to the accused student, the affected faculty member, and—in the case of a violation—the dean(s) of the appropriate school(s).

(h) Panel Requests for Assistance. The Hearing Panel may at any point during its work request assistance from legal counsel as appropriate. It may also confer with the AIO regarding consistency of decisions and sanctions.

ARTICLE VIII: APPEAL OF SANCTIONS

8.1 Grade Appeals.
Any grade adjustment made pursuant to these policies may be appealed through the grade appeals process otherwise applicable in the school.

8.2 Appeal of Non-Grade Sanctions.
If a student disputes the sanction(s) imposed by the GAC, he or she may appeal the sanction decision in writing to the AIO within five university working days of the date he or she receives notice of the Hearing Panel decision. The AIO (in discussion with the Provost and Executive Vice President) may review the record of the hearing and the student's academic and disciplinary records, and based upon this review, decide to:

1. Allow the sanction(s) to stand.
2. Modify the sanction(s) or impose a different sanction(s).
3. Suspend the sanction(s).

For issues regarding the same academic integrity incident, the AIO and Provost will consider a grade appeal and an appeal of the University Academic Council's decision on additional sanctions at the same time. The decision of the AIO and Provost as to the appropriateness of the sanction(s) is final.

ARTICLE IX: CONFIDENTIALITY

9.1 Confidentiality. The proceedings of the Graduate Academic Council and Hearing Panel are confidential and are subject to the provisions of the Family Educational Rights and Privacy Act and its implementing regulations.

Approval for Schools of Nursing, Health Professions and Public Health: August 2019
Final Edits: 9/4/2019
Effective date: October 1, 2019

Admission/Progression of Persons with Disabilities to the Moffett & Sanders School of Nursing

Students with disabilities are considered for acceptance to the Moffett & Sanders School of Nursing (MSSON) on the basis of their ability to meet the objectives of the program and to perform required activities.

MSSON ADA Awareness Statement

MSSON endorses the university commitment to students with disabilities. MSSON will provide accessible programs, services, and activities and reasonable accommodations for any student with a disability as defined by Section 504 of the Rehabilitation Act of 1973, and by the Americans with Disabilities Act (ADA) of 1990.

Nursing is a practice discipline with cognitive, sensory, affective, and psychomotor performance requirements. Qualified individuals are those who satisfy admission requirements and who can perform essential functions of a nursing program with or without reasonable accommodation or modification.

Students must satisfy the Essential Performance Standards of nursing students.

To be eligible for program accommodation, students must self-identify to the Office of Accessibility & Accommodations, who will determine eligibility for services. Once eligibility for accommodations is determined by DR, it is the students' responsibility to request appropriate accommodations. If these standards cannot be achieved by the student, either unassisted or with dependable use of assistive devices, the faculty RESERVES the right to withdraw the student from clinical courses.

Clinical Practicum/Lab Course Standards		
Issue	**Standard**	**Some Examples of Necessary Activities (not all-inclusive)**
Critical Thinking	Critical thinking ability sufficient for clinical judgment	Identify cause/effect relationships in clinical situations, develop nursing care plans, ability to make safe judgments when planning and implementing all psychomotor nursing prescriptions
Interpersonal	Interpersonal abilities sufficient to interact with individuals, families, and groups from diverse backgrounds	Establish rapport with patients and colleagues; negotiate interpersonal conflict; respect differences in clients; respect the cultural diversity of clients and co-workers
Communication	Communication abilities (hearing, speaking, reading, and writing) sufficient for interaction	Explain treatment procedures, initiate health teaching, document and interpret nursing actions and patient responses.

	with others in verbal and written form	
Issue	**Standard**	**Some Examples of Necessary Activities (not all-inclusive)**
Mobility	Physical abilities sufficient to move from room to room and maneuver in small spaces	Move around in patients' rooms, work spaces, and treatment areas; administer CPR, assist in ambulation, have sufficient mobility and stamina to function over an 8-12 hour period in a hospital setting (twist, bend stoop/squat, move quickly, climb, walk).
Motor Skills	Gross and fine motor abilities sufficient to provide safe and effective nursing care	Calibrate and properly use equipment (blood pressure cuffs and syringes); position, lift, and transfer patients; ability to lift up to 50 pounds; obtain and process specimens; insert catheter; administer injections; use a computer; twist or squeeze with fingers; stand and maintain balance; reach and bend; move within confined spaces
Physical Strength and Endurance	Physical stamina sufficient to perform full range of required client care activities for entire length of work role	Sustain repetitive movements; maintain physical tolerance; lift; push and pull; support 25 pounds; move heavy objects weighing 10-50 pounds; defend self against combative client; carry equipment; use upper body strength
Emotional Stability	Able to assume responsibility and accountability for own actions	Establish therapeutic boundaries; provide client with emotional support; adapt to stress; deal with the unexpected; perform multiple responsibilities concurrently; handle strong emotion
Hearing	Auditory ability sufficient for observation and assessment necessary in nursing care	Hear verbal exchanges among health care personnel and patients, monitors alarms, emergency signals, auscultator sounds, cries for help; ability to hear in situations when not able to see lips of speaker; ability to hear sounds of a normal or faint volume level
Visual	Visual ability sufficient for observation and assessment necessary in nursing care	Able to read handwritten documents (chart data); able to see small calibrations on syringes; sphygmomanometer, thermometers; observe patient responses to interventions and/or health problems; ability to detect subtle color changes
Tactile	Tactile ability sufficient for physical assessment	Perform palpation; functions of physical examination and/or those related to

		therapeutic intervention, e.g., pulse, body parts, temperature of skin or fluids
Distance-Accessible Course Standards		
Issue	**Standard**	**Some Examples of Necessary Activities (not all-inclusive)**
Critical Thinking	Critical Thinking ability sufficient for clinical judgment	Synthesize reading assignments, able to write course assignments
Interpersonal	Interpersonal abilities sufficient to interact with individuals and groups from diverse backgrounds	Interact with classmates and course instructors on course related subjects; able to work with other students on a group project
Communication	Communication abilities (hearing, speaking, reading, and writing) sufficient for interaction with others in verbal and written form	Communicate with faculty and other students via e-mail and electronic threaded discussions
Motor Skills	Physical abilities sufficient to use a computer	Complete written assignments and examinations by typing on the computer
Hearing	Auditory ability sufficient to complete class assignments	Listen to online audiovisual presentations
Visual	Visual ability sufficient to participate in course activities	Complete reading assignments and watch audiovisual presentations

NOTE: It is important for nursing students to have a realistic view of the demanding curriculum before deciding to pursue the degree. Students are encouraged to contact the School of Nursing if there are questions about his/her abilities to function in the clinical settings.

_____ I meet all Performance Standards required by the School of Nursing.

_____ I do not/ _____ am not sure that I meet all Performance Standards required by the School of Nursing. I understand that I must meet with the Associate Dean for the Graduate Program, to discuss/clarify before I am allowed to progress in the School of Nursing.

All information I have provided is complete and accurate.

_____ _____

Student Signature Date

_____

Printed Name

College of Health Sciences Simulation Center
Confidentiality Agreement

As a participant in a simulated patient care environment, I understand that the objective of this training program is to train individuals to better assess and improve their performance in difficult patient care situations. Simulation-based training is designed to challenge participants. It is a safe environment where mistakes are expected, and participants and observers will learn from their own as well as others' mistakes.

Because of this, I will maintain strict confidentiality regarding both my performance as well as the performance of others, whether witnessed in real time or on media. I understand that failure to maintain confidentiality may result in unwarranted and unfair defamation of character of the participants. This would seriously impair the effectiveness of this simulation-based training program. I understand that repercussions of breaking confidentiality are decided upon by individual faculty members.

In order for every participant to achieve the best learning environment, I understand and will observe strict simulated patient and peer confidentiality about the details of the scenario, team member actions, and the debriefing discussions, at all times to which I am both directly and indirectly exposed.

Signature_____ Date_____

Print Name_____

CHS Simulation Center
Consent for Participation and Audiovisual/Photography

As a participant in training in a simulated patient care environment, I understand that I will be both an active participant in realistic scenarios and an observer of others immersed in similar situations (either in real time or in media form). I understand that participating in simulation-based training is part of my clinical learning experience. I will engage in and participate in the simulation fully as a professional and treat it as a realistic patient care experience.

As a learner in the CHS Simulation Center, I acknowledge understanding that audio and video surveillance is present throughout the floor. I also understand that while participating in simulation-based training, participants involved in the scenario will be recorded for educational purposes only. Photographs and live video may be taken of any activity in the Simulation Center by approved persons only. This material may be used for the Samford University website and/or promotional purposes. I understand that I will not be compensated in any way for the use of my image.

My signature acknowledges that I have read and understand these statements.

Signature_____ Date_____

Print Name_____

RECEIPT OF STUDENT HANDBOOK FORM

I, (please print) _____, am aware the Moffett & Sanders School of Nursing Student Handbook is online and acknowledge responsibility for reviewing the contents contained therein. I will clarify with my advisor, any part(s) I do not understand. I further understand that failure to follow these rules and regulations contained in the handbook may result in various consequences, according to the infraction.

Student's Signature _____ Date _____

PERMISSION TO PROVIDE REFERENCES

I, (please print) _____ , realize that in the future, references will be requested by potential employers. I give permission to the Moffett & Sanders School of Nursing administration and/or faculty to provide the requested information. A copy will also be directed to the Student File.

Student's Signature_____Date _____

PERMISSION TO DISPLAY/PRESENT WORK

I, (please print) _____ , hereby give the Moffett & Sanders School of Nursing permission to display and/or present examples of my work as part of a program review process by accrediting or approving organizations and their designated personnel.

Student's Signature_____ Date _____