

UCI Sue & Bill Gross
School of Nursing

Doctor of Nursing Practice

**Student Handbook
2024-2025**

University of California, Irvine

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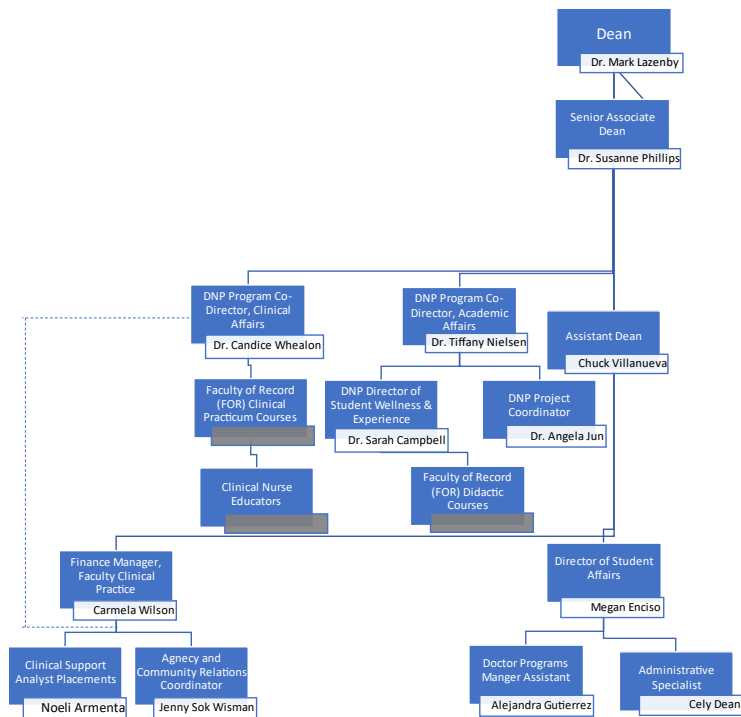
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SECTION I: DNP STUDENT HANDBOOK

FACULTY DIRECTORY

Please see the following link for faculty: <https://nursing.uci.edu/faculty/>

DNP PROGRAM ORGANIZATIONAL CHART



DNP LEADERSHIP

DNP Program Co-Director of Clinical Affairs:

- Manage all aspects of clinical placement of FNP students across the curriculum.
- Serve as a liaison between the SON administration, clinic administrative team, clinicians, and community partners when necessary.
- Assist with the development of interprofessional education (IPE) opportunities at the School and COHS colleagues.
- Collaborate with the Assistant Director of DNP Student Experience to assess the instructional needs of students in the program, including students at risk for poor performance, and organize and coordinate a plan to address these needs.
- Collaborate with the Co-Director of Academic Affairs and DNP faculty responsible for DNP project courses to provide input on DNP project sites and stakeholder relations.
- Review all clinical course, student, preceptor, and clinical site evaluations at the end of each quarter, meet with students, clinical nurse educators or faculty, and conduct appropriate consultation.

DNP Program Co-Director of Academic Affairs:

- Develop academic programs and associated curricula.
- Lead the faculty in the training of all relevant academic policies and pedagogy.
- Lead major curriculum revisions and oversee implementation.
- Collaborate with the Assistant Director of DNP Student Experience to assess the instructional needs of students in the program, including students at risk for poor performance, and organize and coordinate a plan to address these needs.
- Collaborate with the Assistant Director of DNP Student Experience, Student Affairs, and DNP faculty responsible for DNP project courses to provide input on DNP chair assignments, nature/type, process, and progress of DNP projects.
- Review all didactic course evaluations at the end of each quarter, meet with faculty, and conduct appropriate consultation.

Assistant Director of DNP Student Wellness & Engagement:

- Collaborate with the DNP Co-Director of Academic Affairs to assess the instructional needs of students in the program, including students at risk for poor performance, and organize and coordinate a plan to address these needs.
- Assist in meeting student retention goals and anticipated academic progress.
- Serve as the academic advisor for all 1st year DNP students and assist them in adapting to the academic program and college life.
- Serve as the academic advisor for vulnerable students and provide applicable resources. assist them in adapting to the academic program and college life.
- Monitor compliance with the University's Student Honor Code. Emphasize professionalism and the importance of ethical and responsible behavior.
- Assist in reviewing student award applications.

- Coordinate with DNP Co-Director of Academic Affairs during the addition process.
- Coordinate with the DNP Project Faculty Administrator & DNP Co-Director of Academic Affairs to assign DNP SP Faculty Chairs based on students' interests and faculty expertise.
- Develop and oversee on-campus student experiences and social events. Create opportunities for supplemental learning activities both virtually and in person.

DNP Project Faculty Administrator:

- Coordinate all aspects of the DNP Project.
- Manage all aspects of DNP Project practicum placements in collaboration with the Clinical Support Unit.

NURSING STUDENT AFFAIRS

Nursing Science Student Affairs is a primary resource for student information, advising, and assistance. Academic Advisors advise current and prospective students on admission and academics in person, on the phone, or by email. Academic Advisors are aware of all University policies and School requirements. Academic Advisors review and provide expert counseling on most of your paperwork during your program of study and can assist with situations such as leave of absences or waivers of coursework. Academic Advisors are available to discuss any issue related to your matriculation as a graduate student at UC Irvine. They refer students to appropriate campus resources at UCI to support student success and wellbeing, including assistance with learning skills, mental health support, financial aid, student disability issues, or other resources.

LOCATION:

Student Affairs is located in Suite #2300 on the second floor of the Sue & Bill Gross Nursing and Health Sciences Hall in the Susan & Henry Samueli College of Health Sciences located on the corner of Bison and California.

OFFICE HOURS:

Monday through Friday: 9:00 am to 12:00 and 1:00pm to 4:00pm

Closed from 12:00 to 1:00 pm for lunch

Please email gnsao@uci.edu to make an appointment.

WEBSITE:

<https://nursing.uci.edu/students/>

Find up to date forms, curriculum charts, resources, and other student services on our website

EMAIL:

Graduate Programs Email Address:

gnsao@uci.edu

STUDENT AFFAIRS STAFF CONTACT INFORMATION:

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NURSING CLINICAL SUPPORT UNIT

The Clinical Support Unit (CSU) supports the clinical learning experience across all School of Nursing programs through facilitation of clinical placements and serving as liaison to clinical facilities. The CSU communicates to students with clinical site-specific compliance requirements necessary for timely start of each clinical rotation. We work synchronously with Student Affairs to prepare nursing students complete their clinical training and function as independent Nurse Practitioners.

LOCATION:

Student Affairs is located in Suite #2300 on the second floor of the Sue & Bill Gross Nursing and Health Sciences Hall in the Susan & Henry Samueli College of Health Sciences located on the corner of Bison and California.

OFFICE HOURS:

Monday through Friday: 9:00 am to 12:00 and 1:00pm to 4:00pm

Closed from 12:00 to 1:00 pm for lunch

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Clinical Support Unit Email Address:

NursingCSU@hs.uci.edu

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INTRODUCTION

Purpose of the Student Handbook

Welcome to the University of California, Irvine: Sue & Bill Gross School of Nursing, Doctor of Nursing Practice (DNP) Program.

This handbook will provide you with essential information about the DNP program. We urge you to carefully review this document and others provided to you by the University to strengthen your understanding of our philosophy, mission, policies, and procedures. This handbook is prepared in conjunction with the policies expressed in the UC Irvine (UCI) [General Catalogue](#) and the Graduate Policies and Procedures, and both serve as excellent resources for students.

Program Description

The Doctor of Nursing Practice degree is the new scholarly standard for advanced practice nursing and for nurses seeking a practice focused doctorate. Our future DNP graduates will be accomplished practitioners of translational research for evidence-based practice, advocates of innovative policy, and leaders of interdisciplinary health care teams.

Mission of the School of Nursing

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

Vision of the School of Nursing

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

Philosophy of the School of Nursing

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

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

Professional nursing practice can occur in any environment and includes research, clinical practice, education, and leadership roles. Nursing practice is guided by a set of ethical principles that include a commitment to service and quality health care for all people regardless of their culture, race, gender, or social status. Each person with whom nurses interact possesses a unique set of biological, behavioral, socio-cultural, and spiritual characteristics. It is the responsibility of the professional nurse to understand and respect these characteristics and their role in the well-being of the individual. It is the right and responsibility of the individual, family, or group to make autonomous health care decisions and to collaborate with nurses and other health care professionals in their care.

Nursing research and scholarship provides the evidence for nursing practice and is both basic and applied. Professional nurses evaluate the evidence when considering care alternatives. They participate in research to advance scholarly nursing practice that is founded on scientific principles.

Nursing students are unique individuals with diverse backgrounds and life experiences that enrich the educational environment for all students. Nursing students require substantive backgrounds in the theory and practice of nursing as well as in related disciplines including the biological, social, behavioral, medical, pharmaceutical, and biomedical sciences. They also require guidance to achieve increasingly

complex levels of socialization, critical thinking, written and oral expression, and research skill based on their educational level. Nursing students have the responsibility to actively participate in their learning. The University provides multiple support systems which students have the responsibility to access when needed. Faculty have the responsibility of structuring the teaching and learning environment to facilitate student learning taking into consideration individual learning styles and personal professional goals.

Doctor of Nursing Practice (DNP) Background

The DNP degree is a professional practice-focused doctorate designed to develop competencies for advanced clinical and leadership roles in nursing and healthcare. This program will increase opportunities to prepare nurses to meet the demands of an increasingly complex and changing healthcare landscape. The need for a practice-focused doctoral program was highlighted in 2004 when the American Association of Colleges of Nursing (AACN) recommended the establishment of the DNP as the professional, practice-focused doctoral degree in nursing. The AACN recommended that the DNP be the required credential for nurses seeking Advanced Practice Registered Nursing (APRN) certification, including the roles of Clinical Nurse Specialist, Nurse Practitioner, Certified Nurse Midwife and Certified Registered Nurse Anesthetist. Additionally, other nurses in the United States seeking a practice-focused doctoral degree in nursing, rather than a research-focused doctoral degree, are selecting the DNP degree as a terminal degree.

DNP-FNP

The Doctor of Nursing Practice degree with a Family Nurse Practitioner concentration is the first and only program of its kind currently offered by a University of California campus. Our program is designed for BS and MS prepared nurses to achieve a doctoral degree with a FNP concentration in a compact and comprehensive three-year program. As rigorous as it is rewarding, the DNP – FNP program prepares graduates for autonomous family practice and interprofessional leadership at the highest level.

The DNP – FNP program, for both BS and MS applicants, is a three-year hybrid commitment. This means students will participate online in asynchronous and synchronous sessions in addition to on campus intensives with the faculty and cohort. The intensives are highly focused on-campus sessions held once during most quarters along with mandatory attendance to the Prologue, Intersession, and Epilogue for the didactic portion of the program. Additionally, for students in the DNP-FNP track, there are two required advanced physical assessment in-person competency sessions in the fall quarter of Year 2.

The DNP – FNP curriculum provides education in organizational and systems leadership, research and analytical methods, health care policy, interprofessional practice, clinical prevention, and population health to prepare our graduates for a multi-faceted and rounded approach to health care improvement. They will apply their knowledge in the DNP Scholarly Project – a capstone project of original work that establishes the student as a UCI Sue & Bill Gross School of Nursing clinical scholar. Practice expertise in patient care is incorporated throughout the program. Students will complete a total of 1,020 hours of clinical and professional practice.

DNP (Post-Master's)

The Doctor of Nursing Practice program, for post-master's applicants, is a two-year online and hybrid commitment. This means students will participate online in asynchronous and synchronous sessions in addition to on campus intensives with the professors and cohort, which includes mandatory attendance of the Prologue, Intersession, and Epilogue portions of the program.

The DNP program curriculum provides education in organizational and systems leadership for quality improvement, research and analytical methods for evidence-based practice, education, policy, and population health. Students will develop their abilities throughout the program and through 540 – 1,020 hours of project practicum. DNP Post-Master's students may bring in a maximum of 500 hours from their master's program. Student must prove they have had supervised hours in their master's program by submitting a letter from their university to the Student Affairs Office upon matriculation. Students who are board-certified NP's may receive 500 hours.

A total of 1,020 hours is required for UCI's Post-Master's program. 150 hours are accumulated through the DNP application courses. They will apply their knowledge in the DNP Scholarly Project – a capstone project of original work that establishes the student as a UCI Sue & Bill Gross School of Nursing clinical scholar.

Doctor of Nursing Practice (DNP) Program Goals

Learning Outcomes of the DNP Program: Upon completion of the DNP Program curriculum, and as consistent with AACN expectations and standards, the DNP graduate will be able to:

1. Demonstrate advanced levels of clinical judgment, systems thinking and accountability in designing, delivering, and evaluating evidence-based care to improve patient outcomes.
2. Integrate nursing science, science-based theory, and systems knowledge into the development and evaluation of new practice approaches to care.
3. Employ advanced communication skills and processes to lead quality improvement and safety initiatives.
4. Apply analytic methods to the critical appraisal of literature and other evidence to develop and support best practice.
5. Disseminate data from evidence-based practice and research to support improvements in health outcomes.
6. Convene and lead interprofessional, collaborative stakeholder teams to create change and advance positive health outcomes.
7. Generate, evaluate, and articulate innovative solutions to complex care issues.
8. Analyze the impact of local, national, and global health policy on determinants of care decisions.
9. Support cost and resource efficiency, quality, and accessibility of health care for diverse client groups.
10. Advocate for nursing and socially and ethically relevant policy in health care design and delivery.
11. Support and effectively lead quality improvement initiatives that enhance safe, high quality, and evidence-driven care.
12. Effectively synthesize data from research, practice evidence, and other credible sources to drive care recommendations and policy.

Doctor of Nursing Practice (DNP-FNP) Program Goals

1. Conduct comprehensive health and psychosocial assessments in a culturally sensitive manner for a specific population, including a detailed health history and complete physical examination.
2. Order and interpret diagnostic tests and procedures.
3. Differentiate, diagnose, and manage acute and chronic health problems.
4. Prescribe and manage pharmacotherapeutic agents and other therapies.
5. Provide health teaching and supportive counseling with an emphasis on development, prevention of illness, health maintenance, and chronic disease management.
6. Apply a holistic perspective to form therapeutic partnerships to facilitate informed decision making, positive lifestyle change, and appropriate self-care.
7. Manage and negotiate a variety of healthcare systems with an emphasis on vulnerable and underserved populations.

DNP ACADEMIC REQUIREMENTS AND STEPS TO SUCCESSFUL PROGRAM COMPLETION

DNP - FNP Curriculum

The DNP Program requires a combination of didactic and clinical content with additional doctoral practicum units. The DNP- FNP track requires eleven (11) quarters for completion and may be completed in less than 3 calendar years. DNP - FNP students are required to complete 98 quarter units of formal coursework, consisting of DNP core courses, APRN (NP Role) courses, and DNP APRN Practicum courses. Education focus courses are available as electives.

DNP (Post-Master's) Curriculum

The DNP Program requires a combination of didactic and clinical content with additional doctoral practicum units. The DNP Post-Master's track requires seven (7) quarters for completion and can be completed in less than 2 calendar years. DNP (Post-Master's) students are required to complete 53 quarter units of formal coursework, consisting of DNP core courses, education focused course, and DNP practicum courses. Education focus courses are required in this curriculum. The curricular unit load and duration of the track is consistent with other established DNP programs.

Required Courses

To see course descriptions please access the [General Catalogue](#).

See the curriculum plan for your specific track:

- DNP-FNP: <https://nursing.uci.edu/wp-content/uploads/2023/09/DNP-FNP-Course-Planner-23-24-Updated-9.26.2023.pdf>
- DNP (Post-Master's): <https://nursing.uci.edu/wp-content/uploads/2023/09/DNP-PM-Course-Planner-23-24-Updated-9.22.2023.pdf>

Waiver or Transfer of Units or Courses

Courses taken toward a graduate degree at another institution cannot be transferred for credit toward a DNP or PhD at UCI. However, a course requirement may be waived if a similar course was taken at another institution and substituted with another course. The *General Petition* should be used for all requests for waivers of coursework and is initiated by Student Affairs.

Per university policy, all DNP students must graduate with the specified number of units required in their doctoral degree program, which is 98 units for DNP – FNP or 53 units for DNP (Post- Master’s). A course waiver may be obtained for a maximum of 2 DNP courses.

To obtain a course waiver for potential course equivalencies, students must provide a full description of the course, the transcript and syllabus for the course. Additional course documents may be requested by the faculty reviewing the waiver. If the course is determined to be equivalent by the faculty reviewing the course, it will be submitted to the Graduate Division with the General Petition form for review and approval. However, you must take another course in our DNP program to earn the requisite number of units for the program. One of the two education-focused electives will fulfill that requirement for DNP – FNP students; for DNP (Post-Master’s) students, additional courses may be taken from the DNP-FNP curriculum. Additionally, please be advised that course waivers do not provide a tuition fee reduction.

The Faculty Advisor

All DNP students in the School of Nursing are assigned an academic faculty advisor focused on their professional development and familiar with strategies for program success. Graduate students receive their advisor assignment upon entry to the graduate program. It is essential for students to meet with their faculty advisor as needed and keep them updated on their progress in meeting program objectives. Initially, the *Assistant Director of DNP Student Wellness & Experience* will serve as the faculty advisor for all DNP students during their first year. Once students begin their DNP project studies, the DNP Chair will take over as their faculty advisor. Students have the option to change their DNP Chair or Faculty Advisor during the program with the permission of the DNP Program Co-Director of Academic Affairs and the DNP Project Faculty Administrator. It is recommended that students discuss any advisor change requests with the DNP Project Faculty Administrator before submitting the appropriate form to the Student Affairs department. Students should familiarize themselves with the [UCI Graduate Division website](#), which offers information on all graduate policies.

Evaluation of Student Progress

DNP students will be evaluated periodically for progress towards the degree. The DNP Program Co-Directors will review the students’ academic record to determine whether they are progressing adequately in their studies. If students are not making satisfactory progress, they will be counseled and may be placed on academic conditional status.

COMPUTER LITERARY AND TECHNOLOGY REQUIREMENTS

Canvas: For best performance, Canvas should be used on the current or first previous major release of Chrome, Firefox, Edge, or Safari. Up-to-date versions of Google Chrome or Mozilla Firefox are known for working particularly well. Canvas does not support Internet Explorer.

Canvas runs on Windows, Mac, Linux, iOS, Android, or any other device with a modern web browser. Canvas only requires an operating system that can run the latest compatible web browsers. Your computer operating system should be kept up to date with the latest recommended security updates and upgrades.

High speed internet connection: A reliable, high speed internet connection is required.

Please consider the following while participating in online/hybrid courses:

Using a shared Internet connection will impact connectivity. Additional household members streaming video content, gaming, and other internet usage may impact your internet speed and connection.

Wireless connections may be impacted by the distance from the router and interference from other electronics.

Web cam, speakers and mic: You will need a webcam (either built-in or external-preferred), microphone, and speakers for communicating, viewing course content, assignments and potentially for online proctored exams.

Desktop or laptop computer required. Courses are best engaged with on a desktop or laptop computer, not a phone or tablet/iPad. Canvas, Zoom, and other learning technologies do not have full functionality on these devices. You will need access to a laptop or desktop computer to be sure you are able to engage with courses efficiently and effectively.

You should be proficient in the following:

- basic computer skills
- sending and receiving email and attachments
- using a web browser
- finding resources through internet search engines
- downloading and installing software
- familiarity with using browser plug-ins (e.g., PDF reader, video and audio software)
- using a word processor, presentation software (such as PowerPoint or Keynote), or other productivity applications
- experience or familiarity with a variety of file formats such as: ".pdf", ".jpeg", ".doc" or ".docx" and ".txt"
- the ability to be self-directed in learning new technology skills (e.g., finding resources, following a step-by-step tutorial, online video help, or access to support to learn necessary skills)

Virtual Course Delivery

What is distance learning?

Definitions:

- **Synchronous:** A learning event in which everyone is participating together at the same time. You'll see synchronous often used to refer to Zoom classes, because everyone meets together at the same time to discuss and learn.
- **Asynchronous:** Learning that takes place when it's convenient for you. Deadlines might be involved, like watching a set of lecture recordings before class, but you'll be able to watch those videos any time that works for you before then.
- **Hybrid:** Learning that takes place synchronously and asynchronously online in addition to on-site intensives or practicum
- **Module:** A module is an organized learning unit. Courses are often broken down by week (Week 1, Week 2, etc.), with each week including readings, assignments, expected class meetings, etc. These can be thought of as weekly learning modules. However, sometimes courses will be broken down into more thematic modules.
- **Yuja:** Yuja is UCI's video capture software. As a UCI student you will be able to activate and use a personal Yuja account where you can record and share videos.
- **Canvas:** Canvas is the web-based Learning Management System (LMS) used by UC Irvine. It is used by learning institutions, educators, and students to access and manage online course learning materials, communicate, and house courses.

School of Nursing DNP Course Delivery

Overview: Courses are delivered using a combination of learning formats, including on-site intensive experiences, with the remainder of the coursework completed using distance learning technologies.

- It is the student's responsibility to stay up to date on courses. Students should check their UCI email and Canvas courses every day for important communications from instructors, administrators, and the School or University.

Learning Management System – Canvas

Canvas is the web-based Learning Management System (LMS) used by UC Irvine. It is used by instructors and students to access and manage online course learning materials, communicate, and house courses. You can access Canvas at: <https://canvas.eee.uci.edu/>

- Canvas is where you will access weekly course content, turn in assignments, participate in online discussion boards, and take exams.
- You should check your course spaces every day for possible announcements from the instructor.
- For best performance, Canvas should be used on the current or previous major releases of Chrome, Firefox, Edge, or Safari. Canvas is not compatible with Internet Explorer.

Zoom

Many of your classes will meet virtually on Zoom, which serves as an interactive learning environment. Zoom class sessions are discussion and collaboration based. Attending Zoom class sessions are mandatory for DNP- FNP students unless otherwise stated by the instructor. *Sessions may not be recorded by students without explicit consent of the instructor or a letter from UC Irvine's Disability Services Center.*

Proctoring and Plagiarism Software

Testing preparation: *Student Responsibilities*

- Remote proctoring will be utilized for all online examinations as instructed by faculty. Students must take the online remotely proctored exam using the designated software during the scheduled exam time noted within the course. Students must abide by the guidelines outlined below:
 - Exams should be taken at a secure location that meets the testing area requirements.
 - Students are responsible for taking a practice exam within one week prior to all remotely proctored examinations to troubleshoot any potential obstacles. Completing these practice exams will decrease unanticipated functionality issues at the time of the exam.
 - Students should have faculty and tech support information available prior to taking an exam.
 - Students must follow the instructions outlined in the online proctoring module. Information will be provided in the course and on the DNP Hub.
- Testing Requirements:
 - The online testing environment should mimic the in person testing environment. All requirements must be followed and the [UCI Academic Integrity Policy](#) must be upheld.
 - Sit at a clean desk free from books, papers, notebooks, calculators, phones, tablets, etc., unless permitted by [UCI DSC](#).
 - Ensure the camera view is free from obstruction or limitation of view.
 - No writing on desk, papers, or walls.
 - Other computer monitors, screens, tablets, etc., are not permitted during the exam.
 - No watches (of any type) are allowed to be worn during the exam.
 - No use of headsets, earbuds, or ear plugs are permitted (unless permitted by UCI DSC).
 - No computer programs should be open while remote proctoring is in use.
 - Adequate and bright room lighting that would be considered “daylight” quality is required.
 - No radio, television, or other noises should be operating in the background.
 - No other persons except the test taker should be in the room during testing. There should be no communication with others by any means during the exam.
- Plagiarism software will be utilized at the discretion of the faculty for all written assignments. Faculty will review the report and maintain the authority to follow up within a range of options, including notifying students or reporting any concerns to the office of academic integrity and student conduct.

Student Conduct and Behavior

- Students should adhere to the professional dress code for all course activities.
- Students will adhere to all policies within the [UCI Office of Academic Integrity and Student Conduct](#) wherein no exam items should be copied, saved, or shared during or following the exam. Screenshots of exam information is prohibited.
- Policy violations recognized by the proctor will be flagged and the faculty will be notified.

- Any minor or major violation may result in consequences ranging from student notification to the reporting of an honor code violation, which may result in dismissal from the university. All UCI policies will be followed.

PROGRESSION THROUGH THE DNP PROGRAM

Students are expected to progress through the curriculum as designed. Many courses provide foundational content for subsequent courses, so completing courses in sequence is required. Courses are taught once per year. Students who do not complete courses sequentially may significantly delay their time for program completion.

DNP Scholarly Project

As a professional practice-focused degree the Doctor of Nursing Practice (DNP) differs from a PhD in Nursing in that DNP students will complete a Scholarly Project instead of a research-based dissertation. The DNP Project requires a synthesis of leadership, policy, quality, management, and practice learning experiences.

Students will develop their abilities throughout the program and apply their knowledge in the DNP Scholarly Project – a capstone project of original work that establishes the student as a UCI Sue & Bill Gross School of Nursing clinical scholar. Each student will collaborate with an agency, ideally their current clinical setting to address a real-world problem or health issue. Strong professional writing and public speaking skills are expected as part of the DNP Project. Students are encouraged to focus their scholarly project in the following areas:

1. Quality improvement project implementation
2. Health care policy project implementation
3. Evidence-based practice project implementation

Each student will be matched with a DNP Scholarly Project Chair who is a doctoral-prepared faculty member in the SON. Ideally, the DNP student's interest will align with the SON faculty's scholarly interest. That faculty member will mentor and guide the student in their Scholarly Project through completion. If at any point a student wishes to change their chair, they must complete a change of chair form to be submitted to the DNP Program Co-Director of Academic Affairs and DNP Project Faculty Administrator for approval. An additional DNP Scholarly Project Team Member is required. It is strongly encouraged that this individual be doctorally prepared. They may hold an academic appointment from any accredited university or may be a practice/content expert from academia or the community. In some instances, additional experts/mentors/partners/facilitators can be formal or informal collaborators and may provide intermittent or limited support throughout the project stages as needed. Students should select a DNP scholarly project site mentor who has specific expertise in the setting of implementation. The project site mentor must be from the project implementation institution.

In preparation for conducting the DNP Scholarly Project, students will develop a DNP Project proposal and present this to their DNP Chair and Team Members. The project site mentor, stakeholders, faculty, and colleagues can be invited. Institutional Review Board (IRB) registration for non-human subjects

research from UCI, and the proposed clinical site approval of the DNP Project, if indicated, will be required for the respective students in accordance with policy and requirements at each setting.

Copies of all IRB registration and / or site approval associated with the DNP Project shall be provided to and maintained securely on file with UCI DNP Degree program materials.

Advancement to Candidacy

A student may start implementing their project and advance to candidacy after successful completion of core coursework and submission of the DNP Form I after successful project proposal presentation.

Students typically are allowed to start implementing the project during fall quarter of the last year in the specific program, providing there are no other deficiencies, e.g., incomplete grades. At least one quarter of study in registered student status must elapse between submission of the DNP form I advancement to candidacy and conferral of the degree.

The student will complete a formal final presentation of completed work to the DNP Scholarly Project Team and stakeholders.

Students must decide whether they will file their final DNP manuscript internally or submit to the [UCI Library \(ProQuest\)](#).

DNP Program Completion Timeline

The normative time to complete the requirements for the DNP - FNP is 11 quarters and for the DNP (Post-Master's) degree it is 7 quarters. Once assigned, students should meet with their DNP Chair at least once a quarter/term. Satisfactory academic progress is marked by timely and successful completion of all courses, with grades of "B" or better in all required courses, and cumulative GPA of 3.0 or above in all coursework. Substandard work or unprofessional conduct (as reported by course instructors, preceptors or project chairs) would constitute unsatisfactory progress as would failing grades in any DNP program courses.

Completion of Degree

The DNP degree is conferred at the end of the final academic quarter in which all requirements have been satisfied including the submission of DNP form II. All documents are subject to the final approval of the Graduate Division

A DNP degree is awarded upon successful completion of 98 units of coursework for DNP FNP and 53 units of coursework for DNP Post Masters, as well as the required clinical practicum hours and DNP Scholarly Project.

Maximum Time Frame (Pace)

The normative time from matriculation to degree is 11 quarters for DNP-FNP and seven quarters for PM. The maximum time for degree completion is 5 years for DNP-FNP and 4 years for PM.

Periods of non-matriculated study, leaves of absence and periods of inactive status are not included in the maximum time frame (pace).

Lapse of Status Policy

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

Leave of Absence (LOA) for UCI Graduate Students

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

1. Serious illness or other temporary disability.
2. Family obligations.
3. Temporary interruption of the student's academic program for other appropriate reasons.

An LOA does not apply under the following circumstances:

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

UCI graduate students can request a leave of absence for up to one year by submitting a Leave of Absence form to Student Affairs with a written explanation of why they are requesting leave. Procedures for requesting a leave of absence can be found here: https://grad.uci.edu/wp-content/uploads/2021/10/Academic_Leave_of_Absence_Policy.pdf

Readmission Policy

A graduate student who withdraws and has not been granted a leave of absence approved by the Dean of the Graduate Division and the School of Nursing is considered to have lapsed student status (i.e., no longer has student status). A student whose status has lapsed must re-apply to a graduate program and can only resume graduate study if readmitted. Students should refer to the [Graduate Division website](#) for information.

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

Withdrawal Policy

UCI Graduate students should consult the Registrar's office regarding the [withdrawal policy](#). Students should meet with Student Affairs to discuss UCI and School policies prior to submitting withdrawal forms. Students should consult the [Registrar's website](#) for information regarding fee deadlines, refunds, and cancellation/withdrawal policies.

Disqualification vs. Dismissal

Disqualification means that, for one or more of the academic reasons listed below, a student is no longer eligible to continue graduate study in his/her graduate program at the University of California, Irvine. The term "dismissal" should not be confused with "disqualification." Dismissal is an administrative action resulting in removal from graduate study based on behavior or conduct (see section on Unprofessional Conduct below for more details). Authority to terminate student status because of disciplinary proceedings rests with the Dean in the SON or the Dean of Students.

Academic Conditional Status and Academic Disqualification

Students may be placed on academic conditional status for unsatisfactory progress toward the completion of degree requirements. Unsatisfactory progress may include, but not be limited to the following:

- an overall grade point average below 3.0 (83.5%).
- failure to complete courses or examinations satisfactorily within the period specified by the graduate program.
- Failure of both the preceptor evaluation and standardized patient exam in two clinical practicums

For students failing any course with a grade of less than 83.5%, the student will be placed on academic conditional status, and counseled about the deficiency by the Faculty of Record and the Doctoral Programs Manager. The course must be retaken the following year and successfully passed. Failure of a second course will result in dismissal from the program.

The DNP Program Co-Directors in consultation with student's Graduate Advisor and Faculty may initiate procedures to place the student on academic conditional status. In such cases the student typically will receive written notice of the deficiencies and a deadline for remedying these deficiencies (i.e., for completing specific degree requirements). The Assistant Director of Student Wellness and Experience will meet with the student, along with Student Affairs, to discuss the deficiencies and process. Failure to meet this deadline would result in a petition to the Dean of Graduate Division for disqualification from the academic program.

See [Graduate Policies and Procedures](#) for more details.

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

Professional Conduct

Netiquette: "Net etiquette" describes professional communication, behavior, and collaboration in online environments. In an electronic environment, the benefit of face-to-face signaling that occurs through body language, intonation, pausing, facial expressions, and gestures may not be present or as readily clear. As a result, please be aware of the possibility of miscommunication and compose comments in a positive, supportive, and constructive manner. It is expected that conduct online reflects UC Irvine's Principles of Community, which states that "activities, programs, classes, workshops, lectures, and everyday interactions are enriched by our acceptance of one another, and we strive to learn from each other in an atmosphere of positive engagement and mutual respect."

Classroom conduct: Students are expected to be prompt and knowledgeably prepared for each class at the appointed time. Courtesy is to be extended to all faculty and guest lecturers; disrespect or behavior that doesn't adhere to UC Irvine's Principles of Community will not be tolerated. Use of cell phones and texting during class and/or use of a computer for anything other than note-taking or research as directed by the instructor is not acceptable, professional behavior. Use of substances during class such as tobacco or other substances will result in immediate dismissal from the class. Students who wish to record the lecture must request permission to record prior to the class or provide a letter from UC Irvine's Disability Services Center.

The following are examples of classroom conduct which are considered unprofessional:

- Disrupting the classroom by behaviors such as arriving late, not turning phones to vibrate or silence, not turning off other electronic devices, or actively engaging in non-class activities

during class time.

- Negative behavior directed toward peers, faculty, patients, and others with whom you have contact online, on campus, or in any setting where the student represents the university and/or the nursing profession.
- Conduct that distracts or intimidates others such as talking during lectures or presentations, bullying, aggressive behaviors, unwarranted comments, and addressing peers or faculty with disrespect.

Virtual Classroom Professionalism

- Cameras should remain on during the entirety of class. This helps your peers and instructors connect with you, and you to them.
- Virtual background filters may be utilized for a professional presentation.
- Choose an appropriate setting for attending class or instructor office hours; at home or a quiet, private space is expected. Attending class from a café, car, work, or other public setting is distracting, unprofessional, and violates student and patient privacy.
- The learning environment should be free of distractions. A learning environment with loud noises, children, guests, and other active conversations, pedestrians, automobiles, and other disruptions interferes with student learning and may violate student and patient privacy.
- Phones and tablets do not allow for full functionality of the virtual classroom, a laptop or desktop computer should be used to attend virtual classes.
- Students should be punctual and arrive to class by the scheduled class time.
- Before class, create a space that is conducive to focus and learning. As with an in-person lecture, come prepared with questions and comments on that week's course material. Have materials ready to jot down ideas and take notes. Make sure family, friends, and work know this is a time you won't be communicating so you can focus on class. You should treat Zoom class like a regular class - come prepared, ask questions, take notes, and participate actively.

Dress Guidelines: Professional attire should be worn for presentations, ceremonies, job interviews, as well as any activity where a student is representing the nursing profession or the UCI School of Nursing. This may include a business suit or dress, skirt or dress slacks and blouse, or a suit or jacket and tie. Closed toe shoes are part of professional dress. In live, online class sessions students may wear professional but comfortable clothes. The type and fit of clothing should reflect an understanding of the classroom as a professional setting. See the *DNP Clinical Guidelines* for information on appropriate dress in the clinical setting.

Unprofessional Conduct

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

- Using unsafe judgment, technical skills, or inappropriate interpersonal behaviors in providing nursing care.
- Rude and profane conversation and comments.
- Failing to maintain patient confidentiality.
- Speaking about or to patients, staff, or others in a disrespectful or demeaning manner.
- Disregarding a patient/client's dignity, right to privacy, or right to confidentiality.

- Failing to provide nursing care because of diagnosis, age, sex, race, color, or creed.
- Abusing a patient/client/ colleague/ instructor verbally, physically, emotionally, or sexually.
- Consistent lack of punctuality.
- Frequent unexcused absences.
- Unprofessional attire.
- Dismissal from a clinical site.
- Violation of a clinical contract.

Process for Addressing Unprofessional Conduct

Students are held responsible for content presented in class or clinical settings. Students who demonstrate unprofessional conduct during academic or clinical activities, will be notified by the Faculty of Record and will be required to follow the steps in the Unprofessional Conduct Policy (see Appendix L). Students may be placed on a Professionalism Contract and violation of that contract may result in being placed on academic conditional status or dismissal from the program.

SCHOOL AND UNIVERSITY POLICIES

Residency Requirements

In accordance with University of California policy, a minimum of six quarters in academic residence is required prior to awarding the DNP. It is the responsibility of the academic unit to inform the student upon admission to the program of the expected degree time. If a student does not meet the departmental expected degree time, not including the first three Academic Leave of Absence quarters, a letter is sent to the student and to the department requiring that the student contact her/his Faculty Advisor and set a completion date.

Grading Scale for Graduate Nursing Courses

A grade of 83.5% or above is required to pass all graduate courses. Grading for nursing courses is outlined in each syllabus and adheres to university policy. Grading may consist of independent writing components such as case studies, evidence-based practice guidelines, annotated bibliographies, and article/research critiques. Grading guidelines are provided by the individual course faculty. The final grade is determined by the combination of all course requirements.

Remediation Policy

Each element (aggregated assignments) of the course must be passed with an average of 83.5%, as well as the course total passed at an 83.5%. Only ONE assignment of a course may be remediated. The method of remediation for an assignment within a course is at the discretion of the faculty. The student must arrange for remediation within three (3) business days of receiving a grade for that assignment. The instructor will outline required remediation and work with the student to establish a mutually agreed upon period to complete. The minimum passing grade of 83.5% is the highest possible grade that can be achieved upon successful remediation. If a student does not comply with the remediation policy, the original grade will stand.

Grievance Process

If a student has questions about a grade, they are encouraged to discuss this with the Faculty of Record for that course. Please note that University policy under Regulation A345 stipulates that grades are final once posted. For other issues, unrelated to grades, students may contact the Office of Equal Opportunity and Diversity ([OEOD](#)) and/or the [Office of the Ombudsman](#) for support. Students wishing to appeal a grade or file other grievances should first contact the Student Affairs office to begin the process. Appeals will start with the faculty of record, and if escalation is needed will then rise to the Program Co-Directors and then the Senior Associate Dean for academic, clinical, and student affairs. If needed, the Office of the Ombudsman may be called in to mediate (<https://ombuds.uci.edu/>)

Academic Integrity

As stated in [UC Irvine's Statement of Ethical Values](#), "members of the University of California community are committed to the highest ethical standards in furtherance of our mission of teaching, research and public service." Academic integrity is a community value shared by instructors, staff, and students alike in furtherance of the University's commitment to integrity, respect, and excellence.

As outlined in UC Irvine's Academic Integrity Policy, no student shall engage in any activity that involves attempting to receive a grade by means other than honest effort and shall not aid another student who is attempting to do so. For more information see the [University's Academic Integrity Policy](#).

[Academic misconduct](#) includes sharing answers, using unauthorized materials, helping others to cheat, and passing off as your own the ideas or words of another.

Attendance Policy

Students are expected to be punctual when attending scheduled classes, seminars, and any related assignments, whether this is virtual or face-to-face. Students are responsible for meeting unit/content objectives covered during their absence. If course requirements cannot be met, a failure or an incomplete grade will be given, depending on the circumstances involved. See the UCI Registrar's policy on extenuating circumstances warranting [incomplete grades](#).

Faculty Committees, School of Nursing: Student Participation

DNP student participation is encouraged on the DNP Program and Evaluation Committee. This committee meets periodically throughout the academic year to conduct the business of the School of Nursing. Early in the fall quarter, email notices will be sent to all students soliciting interest in volunteering as a student representative for their respective cohort, of which 2nd and 3rd year students will serve on the DNP Program and Evaluation Committee. Students selected for the committee will be required to attend the scheduled committee meetings and participate in all facets of the committee work. The term of service for DNP students will be 1 year. Students may be recused from some meetings when confidential issues are being discussed.

Enrollment

A full-time registration is defined as 1) payment of applicable University fees; and 2) enrollment in specified units for student's program of study. The curriculum for both the DNP - FNP and DNP Post-Master's is sequence based on course content and complexity. Each course occurs once annually.

PRACTICALITIES

Academic Calendar

Consult the website and the UCI Catalog for detailed information on registration procedures and late changes. The School of Nursing follows the academic calendar that is posted on the Registrar's website. <https://www.reg.uci.edu/navigation/calendars.html>

Change of Address, Phone or Name

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

Students who need to change their name on UCI records should refer to this [website](#) for instructions.

Students should contact the Student Affairs Office if there are questions regarding any changes or updates to their contact information.

UCInetID

Each student that enters UC Irvine is assigned a unique UCInetID that allows access to UCI's various electronic services and resources, including a UCI e-mail account, online registration (WebReg), online student accounts and billing (Zot Account Online), and personal server space for academic projects. Because UCInetIDs are used to identify and authorize you as a UCI student, you must manually activate it through the [OIT website](#). You will need your 8-digit Student Identification Number, your date of birth, and the last four digits of your Social Security Number (SSN). Your UCInetID is for **your individual use only**. You should not share your password with anybody else.

Identification Cards

A UC Irvine photo identification card is required when conducting business with many University offices such as the UCI Libraries and Recreation Facilities. The ZotKey is obtained online. You can find more information here: <https://zotkey.uci.edu/faq>

Email

All students have an email account based on their UCInetID with the Office of Information Technology (OIT). **Faculty, staff, and students will use this address for official communication.** The School of Nursing will frequently communicate with the nursing students through your UCI email, so **IT IS IMPORTANT TO CHECK EMAIL DAILY**. Students may direct questions regarding email services to OIT at

oit@uci.edu. We do not recommend forwarding your UCI email to a personal email address, as this may result in spam filters or bounce back emails.

Registration

Students register online through the WebReg system which can be accessed through the Registrar's website. You will need your UCInetID and password to log into the system to register. You can locate your classes through the online [Schedule of Classes](#). Please select Nursing Science as the department to view Nursing Science Courses. Graduate courses are coded 200 to 400. To view your registration window, please access [Student Access](#).

For a video tutorial on how to use the WebReg system, please visit the [Registrar's](#) website.

Tuition and Fees

Questions regarding tuition and fees should be directed to [Campus Billing Services](#) at (949) 824-2455. Students can also check the UCI Office of the Registrar for information regarding fees and fee deadlines. Please note that students returning to the program after an approved withdrawal or leave of absence, or readmission, must pay the current tuition and fees rate as posted on the Registrar's Office website: <http://reg.uci.edu/fees/>. The DNP program does not approve part-time fees, and students must pay full-time tuition regardless of the number of units enrolled.

Reimbursement for Withdrawal/Dropping/Circumstances

Please follow this [link](#) for more information.

Course Refund Policy

New Graduate Students

Prior to and including the first day of instruction, fees are refunded in full. On the second day of instruction and after, the Schedule of Refunds is applied to the balance of registration fees paid. Refer to the Standard Refund Schedule below for refund percentages. New students receiving Federal Financial Aid follow a different refund schedule, as shown in the second schedule.

Continuing Undergraduate and Continuing Graduate Students

Prior to and including the first day of instruction, fees are refunded in full, less a \$10 service charge. On the second day of instruction and after, the Schedule of Refunds is applied to the balance of registration fees paid. Refer to the Standard Refund Schedule below for refund percentages.

Calendar days	Percentage refunded
On or before first day of instruction	100%
2-7	90%
8-18	50%
19-35	25%
over 35	0%

Further Information

For further information regarding policies not specific to the School of Nursing, please refer to the UCI General Catalogue or the UCI website (<https://www.uci.edu/>). For Nursing Science-specific questions not answered in this handbook, refer to the School of Nursing website (<http://www.nursing.uci.edu>), the Nursing Student Affairs website (<https://nursing.uci.edu/students/>), the individual course syllabi, or contact Student Affairs listed at the front of this handbook.

SECTION II: THE DNP SCHOLARLY PROJECT ROADMAP

UCI Sue & Bill Gross
School of Nursing



SECTION II: The DNP Scholarly Project Roadmap

2024 - 2025

DNP Scholarly Project Chair

Each DNP student will be matched with a DNP scholarly project chair. The DNP student's chair must be:

1. A faculty member in the SON, and
2. Have earned a doctoral-level degree (DNP, Ph.D., EdD, PsyD, MD, etc.)

The DNP Program Co-Director of Academic Affairs and DNP Project Faculty Administrator will attempt to match the student's scholarly interest with the SONs faculty's scholarly interest and expertise. Factors that are considered when assigning a chair include faculty's other commitments and workload.

The role of the DNP project chair is to provide general oversight, facilitate project development, and support the student's project through completion. This includes offering direction or advice, reading drafts, providing academic and professional mentorship, offering resources as appropriate, and meeting as needed to support the student. The DNP project chair is not an editor, and students are encouraged to utilize all resources, including the [UCI Center for Excellence in Writing and Communication](#). Chairs are required to grade and approve a project proposal presentation, final project manuscript, final presentation, and other required assignments in the DNP project courses. DNP project chairs also are responsible for signing all required forms (DNP Form I and II) from Graduate Division. The Chair must attend the student's DNP scholarly project proposal presentation (virtually or in-person) and final project presentation in person during NS 243 DNP Epilogue.

DNP Scholarly Project Team Member

The scholarly project team member may hold an academic appointment from any accredited university or may be a practice/content expert from academia or the community. (DNP, Ph.D., EdD, PsyD, MD, etc.). It is strongly recommended the team member be doctorally prepared. DNP chairs, in collaboration with DNP Program Co-Director of Academic Affairs, DNP Project Faculty Administrator, and student, may request a faculty member to serve as a DNP Scholarly Project team member. This request may be granted at the purview of the DNP Chair. The purpose of the team member is to provide additional support and/or to serve as a content expert for the student's scholarly project. The DNP scholarly project team member will participate in the initial planning and throughout the development and implementation of the project but will not provide feedback on written documents or proposals. The team member will attend the proposal and final project presentation. Additionally, the team member will need to complete documents requiring DNP scholarly team member's signatures (DNP Form I and DNP Form II).

DNP Scholarly Project Site Mentor

All DNP students should identify a DNP scholarly project site mentor at their DNP project site. These experts have specific expertise in the student's area of scholarship to serve as an additional content expert and to provide oversight around the DNP project planning and implementation. The site mentor must hold a master's or higher academic degree. They will provide mentorship and guidance to the student in a more informal role and are not required to sign university documents for their degree conferral.

Faculty of Record for DNP Scholarly Project Courses

The faculty of record (FOR) for the DNP scholarly project courses has overall responsibility for the development and implementation of the course syllabus, the day-to-day delivery of the course, ensuring course learning outcomes are covered and assessed, and the confirmation that grades have been submitted by the DNP chairs. The FOR also serves as a resource expert for DNP chairs and DNP students.

THE DNP SCHOLARLY PROJECT – CURRICULUM

DNP scholars achieve mastery of the UCI Sue & Bill Gross School of Nursing DNP Program Learning Outcomes (PLOs) and the nationally recognized DNP Essentials of Doctoral Education (Essentials) competencies through completion of a carefully constructed curriculum.

The following courses prepare the student through the DNP project process, ultimately culminating in dissemination of their final DNP scholarly project.

NS 231 DNP Prologue - (2 units - Intensive - On Campus – Beginning of the first year)

An onsite 2–3-day immersive experience introduces DNP scholarship and foundations essential for academic success in a doctoral program. Preparatory activities and onsite individual and group assignments are completed.

NS 235 DNP Scholarly Project I – Conceptualization & Planning (1 unit – Online Seminar)

Students gain the knowledge, skills, and abilities necessary to develop an evidence-based project, QI, or policy plan and complete half of a proposal draft, including background, problem statement, PICOT, project framework, synthesis of literature for the potential intervention for problem, and recommendation for the project. This occurs through structured resources organized by the faculty of record. Project conceptualization and development will occur under the direction of the DNP chair and team member. This is the first of four DNP scholarly project courses. Students are required to complete a minimum of 30 scholarly project hours over and above the time spent on course work. These hours will be confirmed by students' DNP chair and credit awarded by the faculty of record.

NS 237 DNP Intersession (2 units – Intensive – On-Campus – Summer of final year)

An onsite 2-day immersive experience provides DNP students an opportunity to present and receive faculty and peer feedback on their DNP project plan. Recommendations related to methodology and practical data collection, information gathering approaches, and data analysis are also emphasized.

NS 240 DNP Scholarly Project II – Proposal (1 unit – Online Seminar)

This is the second of four DNP scholarly project courses. Students will complete a full proposal that reflects a synthesis of the student's knowledge from prior coursework and work in an area of interest or expertise under the direction of the DNP chair, team member, faculty of record for this course, and the DNP project site mentor. Students will present their project proposal to their DNP project team. DNP chair and team member will grade the proposal presentation. A successful proposal presentation as determined by the DNP project chair/ team member is necessary for Graduate Division's DNP Form I (See below for Proposal Requirements). Please note that both DNP-FNP clinical and scholarly hours need to be logged in in the corresponding clinical practicum course (NS 288) in the Typhon. Postmaster students should log their DNP scholarly hours into a corresponding DNP practicum courses NS 291.

NS 241 DNP Scholarly Project III – Implementation & Evaluation (1 unit – Online Seminar)

In this course, students continue developing knowledge, skills, and abilities as they implement and evaluate their DNP project implementation. Students receive direction from their DNP chair and/or faculty team member, faculty of record for this course, and DNP scholarly project site mentor as they b implement their DNP scholarly project. Please note that DNP-FNP students will log both clinical and scholarly project hours in the corresponding clinical practicum course (NS 289) in Typhon. Postmaster students should log their DNP scholarly hours into a corresponding DNP practicum courses NS 292.

NS 242 DNP Scholarly Project IV – Implications (1 unit – Online Seminar)

Students will analyze the outcome measures of their DNP Scholarly Project and complete their final DNP scholarly project presentation of their completed work to their DNP project team. The DNP chair and team member will grade the final project presentation. Successful final presentation as determined by the DNP project chair/ team member is necessary for Graduate Division's DNP Form II. This course includes reflection and mapping of the DNP scholarly project with DNP Essentials as published (See below for details regarding the Final Project Requirements). Please note that DNP-FNP students will log clinical and scholarly project hours in the corresponding clinical practicum course (NS 290) in Typhon. Post-Master's students should log their DNP scholarly hours into a corresponding DNP practicum courses NS 293.

NS 243 DNP Epilogue (2 units – Intensive – On-Campus, End of a final quarter)

This is an on-site 2–3-day intensive experience where DNP students disseminate the findings of their project to colleagues, faculty, and stakeholders (dissemination). In preparation of scholarship, students will complete a manuscript for their project, formatted for a professional journal of their choosing. Journal submission of the manuscript is not a mandatory requirement. internal filing of the manuscript approved by the DNP chair or ProQuest submission of the additional project paper written per UCI Library requirement is necessary for Graduate Division's DNP Form II.

The following courses provide the student an opportunity to develop and master DNP competencies through didactic and experiential learning in preparation for development, implementation, and dissemination of the DNP Project. Students must document 30 DNP practicum hours in hybrid courses (NS 232, 234, 239, 239) in Typhon.

NS 232 Leadership & Professional Collaboration in Healthcare (3 + 1 units – Hybrid Course)

Explore and debate the relationship between various leadership and collaboration models, theories in health care practice, and outcomes. Prepares DNP graduates to assume leadership roles across the healthcare spectrum. Students will log 30 scholarly project hours in Typhon for this course.

NS 233 Appraisal & Translation of Evidence for Practice (3 units – Online Course)

Provides advanced concepts on research methods and measurement strategies that are applicable to support the advanced practice nurse to access, evaluate, and utilize data from various sources including research, quality improvement initiatives, and information technology origins to achieve improvements.

NS 234 Health Politics & Policy (3 + 1 units – Hybrid Course)

Participants will analyze, apply, and evaluate current health policy-related literature, engage in the process of health policy development within professional, regulatory, or administrative environments, and develop an evidence-based health policy proposal across the spectrum of health care systems. Students will log 30 scholarly project hours in Typhon for this course.

NS 222A Seminar in Clinical Translational Science (2 units – Online Course)

This course centers on discussion of clinical translational science methods in the context of nursing science research. Emphasis placed on interdisciplinary and community participatory research approaches.

NS 236 Social Determinants of Health & Health Equity (2 + 1 – Hybrid Course)

This course includes a focus on the four components of the Clinical Prevention and Population Health Framework: evidence-based practice, clinical preventive service and health promotion, health systems and policy, and population health and community aspects of practice with emphasis on ethical care delivery. Students will log 30 scholarly project hours in Typhon for this course.

NS 238 Foundations of Health Systems & Health Economics (3 units – Online Course)

Students will learn foundational understanding of healthcare finance in the U.S. and explore economic

theories and policies, various types of healthcare organizations, and healthcare delivery systems. Healthcare finance is discussed at national and practice levels.

NS 239 The Science of Change, Quality Improvement & Program Evaluation (3 + 1 – Hybrid Course)

This course introduces the science of quality improvement and program evaluation. The focus is on information system technology and its application in quality improvement. Emphasis is placed on the role of the advanced practice nurse leader in developing and leading clinical quality and safety initiatives. Students will log 30 scholarly project hours in Typhon for this course.

DNP Scholarly Project Practicum

A minimum of 1,020 post-baccalaureate supervised practicum hours are required to graduate from the Post-Master's DNP program, and a minimum of 1,020 post-baccalaureate supervised practicum hours are required to graduate from the DNP-FNP program.

DNP-Post-Master's students may enter the program with at maximum of 500 documented supervised practicum hours completed in their master's degree in nursing program, if approved by the UCI SON. The balance of a minimum of 540 practicum experience hours are completed as the student plans, implements, and evaluates the scholarly project, in addition to completing practicum experiences in leadership (NS 232), health policy (NS 234), social determinants of health (NS 236), and the science of change, quality improvement, and program evaluation (NS 239). DNP chair supervises and monitors completion of practicum activities and will ultimately sign all documents required for graduation. If a DNP Post-Master's student enters the program without documented supervised practicum hours from their master's program, they are required to complete a minimum of 1,020 supervised practicum hours.

The DNP-FNP student completes a minimum of 720 direct patient care hours and a minimum of 300 scholarly project hours. The balance of required practicum hours for DNP-FNP students are completed as the student plans, implements, and evaluates the scholarly project, in addition to completing practicum experiences in leadership (NS 232), health policy (NS 234), social determinants of health (NS 236), and the science of change, quality improvement, and program evaluation (NS 239). DNP faculty chair supervises and monitors completion of practicum activities and will ultimately sign all documents required for graduation.

Please refer to Appendix E for instructions on how to log DNP scholarly project hours.

DNP SCHOLARLY PROJECT – CONCEPTUALIZATION/PLANNING, PROPOSAL, IMPLEMENTATION, EVALUATION & DISSEMINATION

UCI DNP Proposal and Final Project Template

The DNP scholars are encouraged to use the UCI PPT template for their project proposal and final presentation. If a student writes a final project paper in addition to a manuscript required by the program and desires to submit the paper to ProQuest via UCI Library, students must adhere to the university formatting and submission requirements of the graduate project. [UCI Libraries](#) maintain the templates to assist in formatting the graduate manuscript. The DNP scholar will utilize the School of Nursing DNP template that will be provided in the scholarly project course, NS 243. This template adheres to the university requirements.

Project Identification/Conceptualization/Planning

Students are strongly encouraged to identify a potential project site where students develop clinical or practice-based scholarly inquiry to build on the *NS 233 Appraisal and Translation of Evidence* course. Students will consider project options, such as a quality, safety or practice improvement initiative, development of a healthcare program or healthcare delivery innovation, or a health policy evaluation or initiative within the potential project site. Regardless of the project type, evidence synthesis, leadership, and measurement of outcomes are incorporated. Students are encouraged to consider how they will address the following within their project: “EC as PIE: Enhancing outcomes (health/practice/policy), Culmination of practice inquiry, Partnership engagement, Implementing evidence, and Evaluation of outcome” (Waldrop, Caruso, Fuchs, and Hypes, 2014).

In the first DNP scholarly project series course, NS 235, students will conceptualize their project, by developing project question in PICOT, background, project framework, literature review/synthesis, and recommendation for the problem they would like to address. At this time, students will assume a leadership role to identify and secure necessary resources for completion of their project as well as ongoing project leadership necessary for successful completion of their project. Students must seek approval of the potential project site (micro and/or macrosystem such as hospital, community organization, or agency), in which they will implement their project, secure an affiliation agreement, if necessary, identify their site mentor, stakeholders (including inter- or intra-professional collaborations), and identify their team member with collaboration with their DNP chair. In NS 237, the Summer Intersession, students continue to conceptualize the project by drafting a method section of the project.

Project Proposal & Concurrent DNP or DNP-FNP Practicum

In the second DNP project series course, NS 240, students will finalize the project details of the proposal, mobilize resources to facilitate successful implementation, and complete a full proposal based on course guidelines.

Implementation & Evaluation and Concurrent DNP or DNP-FNP Practicum

The third project series course, NS 241, provides faculty support and guidance to the student as they assume leadership roles within the organization or setting to implement their project and collect their data. During and upon the completion of implementation, students should perform evaluation of

program implementation (formative and summative evaluations).

Evaluation of Outcomes Measures/Dissemination and Concurrent DNP or DNP-FNP Practicum

The fourth and final project series course, NS 242, provides faculty support and guidance to the student as they complete their project. Students will start analyzing collected data and find answers for their project questions. DNP projects are designed to assess percent improvement of the practice change. Quality or performance improvement projects should assess percent improvement or attainment of benchmarks. The DNP student is not required to utilize advanced statistical software programs or complete an advanced statistical analysis. The students will have an opportunity to disseminate the project results within UCI SON and will complete their final project manuscript in NS 243.

DNP Scholarly Project: Proposal Requirements

Students must successfully complete each of the activities below to receive course credit and continue to Implementation/Evaluation:

1. Students must receive a passing grade for the DNP scholarly project proposal presentation.
2. Students will present their proposal to the project team via a Zoom. The project chair and team member may or may not provide final approval of the proposal presentation.
3. As soon as the student has final approval of their proposal presentation, the DNP Form I will be initiated by Student Affairs. The DNP Form I needs to be filled out and signed by DNP chair, team member, the student, and program co-director. The project site mentor's signature is not required. UCI Graduate Division's deadlines will be followed: <https://grad.uci.edu/current-students/filing-deadlines/>
4. After the student has received email confirmation of successful completion of project proposal presentation from Graduate Division, students need to register their project at UCI Quali IRB site as non-human subject research (NHSR). (See IRB process below.).
5. UCI IRB does not send an email confirmation of the registration. However, students can download the entire document upon submission as needed. Once students register their project, they may begin implementing their project.
6. If the project site requires UCI IRB document first prior to approving the project, students are responsible for notifying their chair and faculty of the record for the DNP project courses to prepare the early UCI IRB registration of their project.

DNP Scholarly Project: Final Project Requirements

Following proposal approval, students will complete their project and work on final products, including a concise written report of project findings and implications to be shared with community partner/agency and materials for initial dissemination of project findings. Students must successfully complete each of the below activities to receive course credit:

1. Implement DNP scholarly project in collaboration with the community partner/agency.
2. Complete a scholarly manuscript for the DNP project using guidelines from a selected professional journal and receive a passing grade from their DNP chair (NS 243)
3. Develop a final project presentation PPT file and distribute it to their DNP chair/team members, and the community partner/agency at least one week prior to the final project presentation and receive a passing grade. May substitute an abstract for a full final presentation file to the community partner/agency only. (NS 242)
4. Present the final DNP Project Presentation to their DNP Chair, Team Member, Site Mentor, and/or community partners and receiving a passing grade (NS 242).
5. As soon as the student has final approval of their oral presentation, the DNP Form II will be initiated by Student Affairs. The DNP Form II needs to be filled out and signed by the DNP chair, team member, student, and DNP program co-director of academic affairs. The project site mentor's signature is not required.
6. Participate in a poster presentation of DNP scholarly project on the scheduled Poster Presentation Day (NS 243).
7. The final DNP manuscript must be uploaded to the student's portfolio for internal filing.
8. Final degree paper work (DNP Form II and ProQuest Receipt if library submission completed: refer to the ProQuest section below for further information) must be submitted to Graduate Division along with any payment according to Graduate Division deadlines, available here: <https://grad.uci.edu/current-students/filing-deadlines/>

DNP SCHOLARLY PROJECT: IRB REQUIREMENTS (UCI AND COMMUNITY)

All UCI faculty, staff, and students may log into [Kuali Research Protocols \(KRP\)](#) and follow the steps to complete their application for registration of their project. This tool is now online, and no paper versions are needed.

All DNP projects should fall under non-human subjects research which is considered QI project by the UCI IRB.

Students are to add an IRB recommended phrase at the beginning of non-technical summary when registering their project. "It is UCI School of Nursing's position that DNP Scholarly Project constitutes Quality Improvement activities and are not considered research as they do not contribute to generalizable knowledge."

**** Students may also be asked to complete IRB approval at their DNP project site. All requirements and committee submissions are the responsibility of the student. Students are encouraged to identify all project needs early as the process may take several months to complete.

Human Research Protection ([HRP](#)) staff also hold **office hours on Zoom every day of the week**. If students have any questions regarding their project, they may join any office hours without an appointment: <https://research.uci.edu/human-research-protections/contact-hrp-staff/hrp-office-hours/>
Students are strongly encouraged to consult with their chair and faculty of record for DNP project courses first before consulting with UCI IRB.

More resources for IRB:

- [UCI IRB Guidance-Do You Need IRB Review?](#)

- [Quality Improvement Projects vs Quality Improvement Research Activities](#)

DNP STATISTICS

The completion of a basic statistics course within 5 years is a prerequisite for the DNP program. DNP projects are designed to assess percent improvement of the practice change. Quality or performance improvement projects should assess percent improvement or attainment of benchmarks. The DNP student is not required to utilize advanced statistical software programs or complete an advanced statistical analysis.

PROQUEST DISSERTATIONS & THESES A & I

ProQuest Dissertations & Theses A&I (abstracts and indices) is an online database within ProQuest that allows users to search for written dissertations and theses. UCI SON does not require a DNP project manuscript to be submitted to this database. Please note that ProQuest has their own formatting style that is not consistent with the manuscript required by UCI SON. Therefore, if a student and their chair desire to submit their project manuscript to ProQuest through the UCI Library, their decision should be made in NS 240 before submitting DNP form I and the manuscript paper must follow all formatting requirements set forth in the UCI Formatting manual. It is the responsibility of the student to ensure that the manuscript paper appears as originally intended when it is accessed or printed. DNP students must utilize the DNP project paper template approved by UCI library. The template is available in NS 240 upon request.

Students will adhere to the [university requirements and deadlines](#).

DNP PORTFOLIO

The DNP Portfolio is an electronic platform that includes course signature assignments or reflections demonstrating competency in all domains of DNP practice, as outlined in 1) the American Association of Colleges of Nursing Essentials of Doctoral Education for Advanced Nurse Practice, 2) Program Learning Outcomes, and 3) the DNP Core Competencies established by the National Association of Nurse Practitioner Faculties (DNP/FNP only).. See below for instructions.

DNP Practicum Onboarding Requirements

Students may be required to complete onboarding requirements for on-site DNP practicum work. There will be minimum required documentation to be uploaded to Typhon and students will be required to maintain up to date records.

Minimum Records and Documentation:

1. **Typhon Account and Student Information:** Students will be required to create a Typhon account ([Typhon Group: Log In](#)). Typhon is the online system that students will use

throughout the program to securely upload health records and required documentation. Students will be required to pay a one-time account creation fee.

Students will also be required to upload the following information to Typhon for clinical documentation and placement purposes.

- Contact information (phone number)
- emergency contact
- Additional email address (non-UCI email)
- Language (spoken and medical)
- License information
- RN experience/specialty

2. **Physical and Mental Health Clearance:** Documentation from your healthcare provider indicating you do not have any health condition(s) that would create a hazard to yourself, employees, or patients. Documentation can be signed by physician, physician's assistant, or nurse practitioner. Form to have signed is provided by the School of Nursing. See Appendix E. **This is an annual requirement.**

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

Please note: Specific agencies may require annual physical and mental health clearance.

3. **CPR/BLS Certification:** You must have a current American Heart Association Basic Life Support (BLS/CPR) certification throughout the program. Certifications are typically valid for 1-2 years. You are responsible for maintaining current certifications throughout the program and updating your documentation and expiration date in Typhon.
4. **California RN License:** You are required to upload a copy of your active, unrestricted RN license information of your state where you work as a RN to Typhon. You must maintain an active and unrestricted RN License throughout the program and update documentation and expiration date in Typhon.
5. **Driver's License:** You are required to upload a copy of your active, current Driver's License to Typhon.
6. **Resume/Curriculum Vitae:** Upload document in Typhon, this document should be revised as needed throughout program, so it remains a current reflection of your education, work history, skills, volunteerism, awards and distinctions
7. **Other Agency Specific Requirements:** Community partners and agencies may require other forms of identification to provide clearance prior to scholarly on-site work. Forms such the following may be requested by Clinical Support Unit:
 - Social Security number and/or card
 - Passport and/or passport-style photo

- Auto insurance information and/or card
- Health insurance information and/or card

Vaccinations, Boosters, and Titers (Evidence of Immunity):

1. **Influenza Vaccination (Annual Flu Shot):** Please complete the annual flu vaccine each fall as soon as it becomes available (typically late summer). Upload proof of influenza immunization to Typhon. **This is an annual requirement.**
2. **COVID 19 Vaccine and Boosters:** Written proof of receiving the recommended COVID-19 vaccine and recommended boosters. Upload proof of influenza immunization to Typhon.
3. **Measles, Mumps, and Rubella (MMR):** Laboratory evidence of immunity (titer) is the **ONLY** acceptable document for this requirement. Upload a copy of your titer/evidence of immunity to Typhon. This is a **one-time** requirement only.
 - **If your titer results are negative immunity/non- responsive, you must complete the three-step vaccination and complete another titer a month following your last shot in the series and show positive immunity. This is a one-time requirement only. You will be required to upload a copy of your titer/evidence of immunity to Typhon. You must show immunity for all three. Childhood vaccinations are not sufficient to meet this requirement.**
4. **Tuberculosis (TB)** –Quantiferon Gold / T-Spot (IGRA Blood) Test: Submit proof of negative Tuberculosis (TB) Quantiferon Gold/Blood Test or T-Spot (IGRA Blood) test result. Skin tests and chest X-rays are not acceptable. **This is an annual requirement.** Upload a copy of your test results to Typhon.
5. **Varicella (Chicken Pox):** Laboratory evidence of immunity (titer) is required. If your titer results show lack of immunity and your healthcare provider requires you to complete a booster/vaccination for this, please notify Clinical Support Unit. You will need to complete an additional titer after completing your booster. **This is a one-time requirement only.** You will be required to upload a copy of your titer/evidence of immunity and vaccination/booster to Typhon. Childhood vaccinations are not sufficient to meet this requirement.

Hepatitis B vaccination: Submit laboratory evidence of Hepatitis B immunity (titer) within the last year. If titer results show lack of immunity, then complete the three-step vaccination and complete another titer a month following your last shot in the series and show positive immunity. Upload all records (original titer, booster, and follow-up titer) to Typhon. Laboratory evidence of immunity (titer) is the **ONLY** acceptable document for this requirement. If you completed the 3-dose Hep B and follow-up titer still resulted a negative immunity, please contact Clinical Support Unit nursingCSU@hs.uci.edu for next steps. **This is a one-time requirement only for UCI;** however, community partners may require more recent and frequent evidence.

Please note: Clinical sites may require repeat titer just prior to the start of on-site

practicum work. Agencies may also require BOTH proof of vaccination (2 dose HEPLISAV-B or 3 dose series completion dates) and positive Hep B titer (with quantitative value)

6. **Tetanus (Td/Tdap):** You must have a record of a booster within the last 10 years. Either your original vaccination or your most recent booster must be Tdap. If you had a Tdap vaccination as a child, your booster can be Td. **This is a one-time requirement only.** You will be required to upload a copy of your booster record to Typhon.
7. Be sure you keep all health records and minimum required documents updated throughout the program. Failure to maintain current documentation of any required records, training, screening, etc. will result in removal from potential delay in successful completion of the scholarly course work.

All the above documents must be uploaded by the student into Typhon, the student tracking system for health education, by **September 1st**. Instructions on use of the Typhon NPST will be provided to students prior to starting their scholarly on-site work.

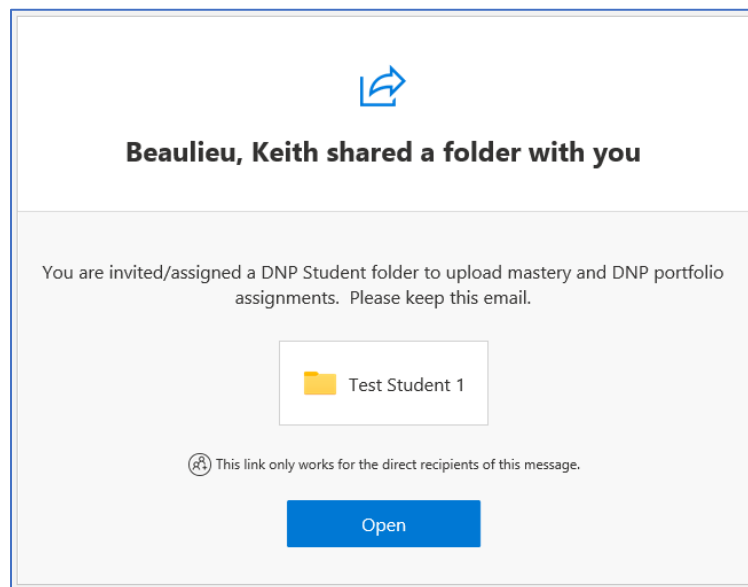
Doctor of Nursing Practice (DNP) Program

DNP Portfolios

Instructions for Accessing Student Folders

All DNP Students will be given a Microsoft® OneDrive folder to upload mastery and portfolio assignments.

Students will receive a folder invite during the first quarter of your program via UCI e-mail for access to their folder.



Please note: Only the individual student, Program Director, and Accreditations and Data Officer has access to the student folder.

This OneDrive folder is part of the UCI IT Architecture and contains all necessary protections and firewalls.

These records will follow the University of California Records Retention Schedule based on [RMP-1](#), "University Records Management Program".

Once the student accesses their folder, they will see a list of courses. Student can then upload documents/assignments into Required documents to be uploaded to your OneDrive Portfolio folder can

be found in Appendix G.

Any questions regarding this process, please contact the Program Co-Director of Academic Affairs.
Any issues regarding access, please contact, Keith Beaulieu, Accreditation and Operations Manager,
kbeaulie@hs.uci.edu

SECTION III: STUDENT GUIDELINES FOR CLINICAL ROTATIONS

UCI Sue & Bill Gross
School of Nursing



SECTION III: Student Guidelines
for Clinical Rotations

2024 - 2025

Clinical Preceptorship Information and Policies

The Clinical Practicum component of the Program is comprised of six Advanced Practice Registered Nursing courses, NUR SCI 285 – 290. This portion of the program is designed to maximize clinical learning and skill progression over time. Specific requirements for each clinical course will be provided in the individual course syllabus.

During your clinical rotations you are representing the University of California, Irvine, School of Nursing, Family Nurse Practitioner Track, as well as the nurse practitioner profession. You are also establishing a professional network for your future: a clinical preceptor might be a future employer or provide a reference for letters of recommendation.

It is recognized that patient problems encountered in the clinical setting frequently do not coincide with the didactic content. Nonetheless, the student is expected to gather complete subjective and objective data on all patients. All students are required to demonstrate knowledge, critical thinking, and clinical skills within the practice setting. Students are not expected to be able to diagnose all problems or to develop treatment plans for all patients depending upon their standing in the program; however, the student must know and respect their limitations in knowledge and consult or refer appropriately to ensure patient safety. Every effort to critically think and contribute to the plan of care for each patient encounter should be employed.

Clinical performance is expected to progress alongside the student's academic advancement each quarter. The ability to obtain a history, present patient cases, perform physical examinations, interpret findings, integrate lab data, articulate differential diagnoses, and delineate initial management plans is expected to progress with increasing accuracy each quarter. Upon graduation from UCI's DNP/ FNP program, the student will be prepared to care for individuals and families across the lifespan with a focus on delivering patient centered care.

Clinical Placement Process

Clinical practicums provide experiences that build on each student's knowledge and skills as they progress through the program. The clinical placement process is fluid and dynamic and is secured through a partnership with students, faculty, preceptors, and healthcare organizations. Students are expected to actively partner with the Clinical Support Unit and make referrals of clinicians within their community with whom they have a professional relationship and that may serve as a preceptor.

As active participants in the placement process, students are to provide all available information they may have regarding referrals, contacts, or potential preceptors. (Refer to "Pearls for Recruiting Preceptors" in Appendix D). Students with a potential new preceptor should complete the "New Preceptor/Clinical Site Information" form for processing as soon as possible. The form is available in Appendix E and should be submitted to the Clinical Support Unit. The DNP Co-Director overseeing clinical affairs will review and approve all potential clinical sites and potential preceptors for their ability to support students in meeting course objectives. Upon approval efforts will be made to secure an affiliation agreement if such an agreement is not currently in place and active. This process is laborious, requiring extensive review by Risk Management and Regulatory Affairs at UCI Health and approval by

the Dean, so it is to the student's benefit to submit requests as soon as the opportunity presents itself. Clinical placement sites will, ideally, be in the primary care setting and align with our mission and vision to prepare the future advanced practice nursing workforce to provide healthcare to vulnerable populations.

- Students will be assigned to approved clinical placements, considering the following factors:
 - Learning opportunity
 - Specific advanced practice registered nursing course learning objectives
 - Students' strengths and learning needs in conjunction with clinics/preceptors' strengths and requirements
 - Preceptor/site availability
 - Bilingual capability
- Students **may not decline a clinical placement for any reason**; clinical placement selections are a collaborative effort involving multiple factors.
 - For your rights, options, and resources regarding religious accommodations (based on a held religious belief, practice, or observance), please contact the Office of Equal Opportunity and Diversity (OEOD) at oeod@uci.edu.
 - For your rights, options, and resources regarding pregnancy related accommodations (including pre-pregnancy, pregnancy, post-partum, and pregnancy loss), please contact the Office of Equal Opportunity and Diversity (OEOD) at oeod@uci.edu.
- Although faculty and staff will make every effort to identify sites for precepted rotations as close to the student's place of residence as possible, statutory regulations, UCI Health policies and procedures, requirements of health care provider sites, competition for sites, etc., may limit the location and selection of sites.
 - Students need to be prepared to travel up to 100 miles and have flexible schedules to accommodate clinical experiences.
 - In some cases, additional travel distance may be necessary to secure a clinical site that can provide learning experiences aligned with program objectives
- The student's tenure at each site will vary: the usual duration consists of one to three quarters with varied weekly hours.
 - While it is ideal for one preceptor to provide all required clinical experiences each practicum, it is not uncommon to have 2-3 preceptors assigned per quarter to ensure there are ample opportunities to meet course requirements.
- The clinical experience includes family practice, adult/gerontological medicine, pediatrics, and OB-GYN.
- Additional rotations in subspecialty practices may be completed during the clinical practicum. Specialty sites will be considered for placements but must provide learning opportunities aligned with advanced practice registered nursing course objectives and be approved by the DNP Co-Director overseeing clinical affairs. The DNP Co-Director manages student placements throughout clinical rotations in partnership with the faculty of record.
 - Site visits, interviews, and meetings with preceptors will be conducted as necessary to ensure clinical sites provide appropriate learning value.
- The School of Nursing will secure all necessary legal affiliation agreements among the clinical sites and/or preceptors and the University.
 - Each clinical site requires an active affiliation agreement.
 - The Affiliation Agreement must be in place prior to a student beginning a clinical rotation. The student may NOT attend clinical at a site without an active affiliation.

- Upon approval of the clinical site, the Clinical Support Unit will work with the administrative team to secure an affiliation, however, the outcome is not guaranteed.
- Students will receive correspondence from the Clinical Support Unit with information regarding their assigned clinical site and preceptor before the start of the term, when possible.
 - While every effort is made to achieve 100% successful placement, on-time placement is not guaranteed.
 - Placement delays include but are not limited to lack of available preceptors, extensive onboarding requirements, insufficient medical records, unexpected public health restrictions, etc.
- Students are expected to respond to communication regarding clinical placements within 48 business hours.
 - Failure to respond to communication pertaining to a clinical placement can result in unfavorable consequences including but not limited to a delayed start and loss of a clinical placement.

Health and Other Requirements

Vaccinations, Boosters, and Titers (Evidence of Immunity):

1. **Influenza Vaccination (Annual Flu Shot):** Please complete the annual flu vaccine each fall as soon as it becomes available (typically late summer). Upload proof of influenza immunization to Typhon. This is an annual requirement starting in Year 2. You should plan to complete this twice: the summer between Year 1 and 2 and then again during the summer between Year 2 and 3.
2. **COVID 19 Vaccine and Boosters:** Written proof of receiving the recommended COVID-19 vaccine and recommended boosters. Upload proof of influenza immunization to Typhon.
3. **Measles, Mumps, and Rubella (MMR):** Laboratory evidence of immunity (titer) is the ONLY acceptable document for this requirement. Upload a copy of your titer/evidence of immunity to Typhon. This is a **one-time** requirement only.
 - If your titer results are negative immunity/non-responsive, you must complete the three-step vaccination and complete another titer a month following your last shot in the series and show positive immunity. This is a one-time requirement only. You will be required to upload a copy of your titer/evidence of immunity to Typhon. **You must show immunity for all three. Childhood vaccinations are not sufficient to meet this requirement.**
4. **Tuberculosis (TB) –Quantiferon Gold / T-Spot (IGRA Blood) Test:** Submit proof of negative Tuberculosis (TB) Quantiferon Gold/Blood Test or T-Spot (IGRA Blood) test result. Skin tests and chest X-rays are not acceptable. This is an **annual** requirement starting in Year 2. You should plan to complete this twice: the summer between Year 1 and 2 and then again during the summer between Year 2 and 3. Upload a copy of your test results to Typhon. **Varicella (Chicken Pox):**

Laboratory evidence of immunity (titer) is required. If your titer results show lack of immunity and your healthcare provider requires you to complete a booster/vaccination for this, please notify Clinical Support Unit. You will need to complete an additional titer after completing your booster. This is a one-time requirement only. You will be required to upload a copy of your titer/evidence of immunity and vaccination/booster to Typhon. Childhood vaccinations are not sufficient to meet this requirement.

5. **Hepatitis B vaccination:** Submit laboratory evidence of Hepatitis B immunity (titer) within the last year. If titer results show lack of immunity, then complete the three-step vaccination and complete another titer a month following your last shot in the series and show positive immunity. Upload all records (original titer, booster and follow-up titer) to Typhon. Laboratory evidence of immunity (titer) is the ONLY acceptable document for this requirement. If you completed the 3-dose Hep B and follow-up titer still resulted a negative immunity, please contact Clinical Support Unit nursingCSU@hs.uci.edu for next steps. This is a **one-time requirement only for UCI; however, community partners may require more recent and frequent evidence.**

Please note: Clinical sites may require repeat titer just prior to the start of clinic. Clinical sites may also require BOTH proof of vaccination (2 dose HEPLISAV-B or 3 dose series completion dates) and positive Hep B titer (with quantitative value)

6. **Tetanus (Td/Tdap):** You must have a record of a booster within the last 10 years. Either your original vaccination or your most recent booster must be Tdap. If you had a Tdap vaccination as a child, your booster can be Td. This is a one-time requirement only. You will be required to upload a copy of your booster record to Typhon.

Other Requirements:

7. **Typhon Account and Student Information:** Students will be required to create a Typhon account ([Typhon Group: Log In](#)). Typhon is the online system that students will use throughout the program to securely upload health records and required documentation. Students will be required to pay a one-time account creation fee.

Students will also be required to upload the following information to Typhon for clinical documentation and placement purposes.

- Contact information (phone number)
 - emergency contact
 - Additional email address
 - Language (spoken and medical)
 - License information
 - RN experience/specialty
8. **Physical and Mental Health Clearance:** Documentation from your healthcare provider indicating you do not have any health condition(s) that would create a hazard to yourself, employees, or patients. Documentation can be signed by physician, physician's assistant, or nurse practitioner. Form to have signed is provided by the School of Nursing. See Appendix E.

If for any reason, a student should have a leave of absence/break in enrollment from the School of Nursing, the School of Nursing reserves the right to require another Physical and Mental

Health Clearance be completed within 4 weeks of returning to classes for the student to return to clinical rotations.

Please note: Specific organizations may require annual physical and mental health clearance.

CPR/BLS Certification: You must have a current American Heart Association Basic Life Support (BLS/CPR) certification throughout the program. Certifications are typically valid for 1-2 years. You are responsible for maintaining current certifications throughout the program and updating your documentation and expiration date in Typhon.

9. **Proof of Malpractice Insurance:** You are required to obtain Malpractice Insurance during the clinical portion of the program (starting in January of Year 2). NSO is the organization that most DNP students use. Students can go to www.nso.com to obtain a quote using the following information:

- Profession: Nurse Practitioner
- Specialty: Family Practice
- Employment Status: Student

In Year 2 of the program, you will be required to upload a copy of your proof of insurance to Typhon.

10. **California DFEH Sexual Harassment Prevention Training:** You must maintain current certification throughout the program: <https://calcivilrights.ca.gov/shpt/> Certifications are typically valid for 2 years. We recommend completing this in December of Year 2 in the program. At the end of the training, you will have the option to utilize a certificate of completion. You will need to save, print, take a screenshot, or take a photo of the certificate, then upload the certificate to Typhon.

11. **HIPPA Training:** Complete via UC Learning Center (UCLC) (<https://uclc.uci.edu>) Upload certificate and note completion date in Typhon.

12. **EPIC Training:** Complete via UC Learning Center (UCLC) (<https://uclc.uci.edu>). Upload certificate and signed EPIC attestation to Typhon. Note completion date in Typhon

13. **California RN License:** You are required to upload a copy of your active, unrestricted CA RN License information to Typhon. You must maintain an active and unrestricted CA RN License throughout the program and update documentation and expiration date in Typhon

14. **Driver's License:** You are required to upload a copy of your active, current Driver's License to Typhon.

15. **Other Clinical Agency Requirements:** Clinical agencies may require other forms of identification to provide clearance prior to the clinical rotation. Forms such the following may be requested by Clinical Support Unit:

- Social Security number and/or card
- Passport and/or passport-style photo
- Auto insurance information and/or card

- Health insurance information and/or card

16. **Background Check and Drug Screen:** You will order a background check and a drug screen via <http://ucibackground.com/> This is a one-time requirement; Upload a copy of your background check and drug screen report to Typhon.

If for any reason, a student should have a leave of absence/break in enrollment from the School of Nursing, the School of Nursing reserves the right to require another background check and drug screen be completed within 4 weeks of returning to classes for the student to return to clinical rotations.

17. **Additional Background Check:** Clinical agencies may require their own background check as part of the clinical site onboarding requirement the Clinical Support Unit will work with individual students as required by the clinical site.

18. **Resume/Curriculum Vitae:** Upload document in Typhon, this document should be revised as needed throughout the program, so it remains a current reflection of your education, work history, skills, volunteerism, awards and distinctions.

19. Be sure you keep all health records and clearance documents updated throughout the program. Failure to maintain current documentation of any required records, training, screening, etc. will result in removal from the clinical site and potentially delay successful completion of the course.

20. When a student notifies faculty of an illness (physical or mental), injury or surgery that impacts student's ability to function in the clinical setting, students will be directed to provide the approved.

clearance form (Appendix E) completed by an appropriate healthcare provider that provides information indicating date student is able to return to clinic duties and any physical limitations which may interfere with clinical rotation duties. The reason does not need to be specified. **Any physical or mental limitations noted by the healthcare provider (HCP), which may interfere with clinical duties may make the student ineligible to complete their clinical requirements that quarter.**

21. If clinical agencies have additional health specifications (e.g., drug testing, additional proof of vaccination, repeat Hepatitis C titer, repeat TB test, etc.), students who are assigned to those agencies will be required to meet them.

All the above documents must be **uploaded by the student into Typhon, the student tracking system for health education, by September 1st**. *Instructions on use of the Typhon NPST will be provided to students prior to starting their clinical rotations.*

Student Clinical Preceptorship Responsibilities: Getting Started

- **As soon as you receive your assignment** contact your preceptor by phone or email to introduce yourself. Preceptors may take a week or so to respond. If you are unable to reach a preceptor after 2 attempts within one week, please inform the Clinical Support Unit.
- Arrange a start time, date, and specific location. **Ask about parking.**
 - *UCI does not provide a stipend for parking or meals while at clinical.*
- Some preceptors may request a telephone or in-person interview prior to your first day in clinic.
 - If a request is made, this meeting should be treated as a job interview and scheduled promptly. Arrive 15 minutes early, wear professional attire, and bring a copy of your resume.
- If a site requires additional prerequisites including but not limited to additional titers, EHR training, orientation, completion of web-based modules, etc. this must be completed at the student's expense and done prior to beginning a clinical rotation.
 - Hours spent on these processes are not counted as part of your clinical hours.
 - **Clinical hours are defined as direct patient care time: Hours in which direct clinical care is provided to individuals, families, and groups in one of the populations focused areas of NP practice and in primary care or acute care as appropriate.**
- It is the student's responsibility to maintain communication with the site and placement team and ensure prerequisite training and documentation is completed to the site's satisfaction.
 - All communication pertaining to the clinical site must be sent via a UCI email address and responses must be received within 48 hours (about 2 days)
Failure to meet site requirements or maintain communication with assigned preceptor/clinical site may result in loss of clinical placement.
 - ***IF placement is lost due to student unresponsiveness or unprofessional behavior, it is the student's responsibility to secure an alternate preceptor at a UCI affiliated site meeting program requirements for placement.***
- Students **must** attend clinical rotations as scheduled and must arrange alternate plans when a preceptor is absent from the clinical site.
- Students **must** attend the clinical seminar sessions as scheduled.
- Students **must** wear their UCI name badge and lab coat during clinical rotations.
- Students **must** introduce themselves as a Nurse Practitioner Student to the patient prior to conducting the patient encounter.
- Students **must** notify their assigned Clinical Nurse Educator immediately of any problems that arise while in the clinical setting.

Equipment: Preparing for Clinical Rotations

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

10. Professional attire (scrubs are unacceptable unless specifically requested by one's preceptor)

Clinical Experience Requirements

While in the clinical practicum courses, students should expect to spend several days per week in clinical. Most clinical sites operate between the hours of 8-5pm Monday through Friday; however, providers may split their days commonly working in four-hour blocks, hold hours in the evening, or on weekends. Students are expected to be available when their preceptor can accommodate them in the clinical setting while enrolled in a practicum course.

- Students must be enrolled to participate in direct patient care.
 - Students may not attend clinical after the course has ended unless the student has a documented "incomplete" for the course, is actively enrolled in the DNP-FNP program, and has approval from the DNP Co-Director and Student Affairs.
- Students may not attend clinical prior to the start of the term.
- Students may not attend clinic during required synchronous class time without specific permission from their faculty of record.
- Students cannot attend clinic between academic quarters or when the University is closed for a holiday.
- 720 direct patient care hours are required for program completion in the DNP-FNP track see appendix E for details.
 - All hours must be accounted for on a preceptor signed clinical log and within the student tracking system for health education with all required patient demographic, payer, and visit information reported.
- The minimum patient encounter goal for all students is 700. All patient encounters must be recorded with required demographics, payer type, and visit details in Typhon, the student tracking system for health education.
 - To obtain credit for direct patient care hours, demographic, payer, and visit details must be documented in the student tracking system.
- The expectation is that students see one to two patients an hour **at minimum**, as time management is an essential skill for advance practice registered nurses in the FNP concentration.
- Students are expected to start their clinical hours by Week 2 of the quarter.
- Every attempt should be made to evenly distribute the scheduling of clinical hours to span the entire quarter. This ensures that appropriately paced clinical learning can occur throughout the 10-week course.
 - Exceptions may be made at the discretion of the Preceptor, Faculty of record, and DNP Co-Director in the face of extenuating circumstance.

Clinical Preceptors

A major part of the clinical learning is accomplished under the direction of the community preceptor who is trained and clinically active in the provision of health care services. The preceptor helps the student learn clinical skills while applying didactic knowledge to the clinical setting. Ideally, students will be placed with a NP; however, students may be placed with other care providers. NP students may be

precepted by a board- certified (AANP or ANCC) Nurse Practitioner (NP), Certified Nurse Midwife (CNM), Medical Doctor (MD), or Doctor of Osteopathic Medicine (DO). NP students may also be precepted by licensed clinical professionals such as PAs, Optometrists, Podiatrists, Clinical Nurse Specialists, etc., as approved by the DNP Co-Director. Clinical preceptors for the program provide experience in performing the diagnostic and treatment procedures necessary for nurse practitioner practice.

It is the goal of the program to educate the student to work within an interdisciplinary team consisting of the NP, PA, physician, and/or other healthcare professionals such as physical therapists, pharmacists, mental health professionals, case managers, and social workers, along with the patient and their family, sharing knowledge and responsibility for patient care.

- Nurse Practitioner clinical preceptors must hold an active RN licensure, NP certificate, and NP furnishing number. It is preferred that NP preceptors hold board certification in their area of specialty.
- Certified Nurse Midwives must hold an active RN licensure, CNM certificate, and CNM furnishing number. CNMs must hold national certification.
- Physician clinical preceptors must hold an active MD or DO licensure, board certification in specialty is preferred.
- All other licensed healthcare professionals that may precept with must hold an active California license in their discipline and appropriate board certification.

Evaluation

1. The preceptor shall contribute to the practicum grade by evaluating the student at the end of the clinical rotation; we also encourage students to ask preceptors for feedback on their performance mid-way through the quarter, however, the final clinical grade/evaluation is the responsibility of the course Faculty of Record.
2. The student shall evaluate the preceptor and clinical site at the end of the practicum.
3. The Faculty of Record shall review all student and preceptor evaluations at the end of the quarter.
 - a. Any concerns regarding a student's attainment of competency and/or satisfactory performance in clinical will be brought to the DNP Co-Directors overseeing clinical affairs.
4. The Clinical Nurse Educator and/or Faculty will also conduct site visits, interviews, and maintain regular communication with preceptors throughout the quarter to ensure students are progressing as expected.

Clinical Preceptor Role & Responsibilities

Serving as role models and supervisors for students during clinical rotation, preceptors must guide students in the clinical setting by performing the following responsibilities:

1. Provide adequate clinical space for the student to see patients in their setting.
2. Provide a variety of patient encounters for the student to have a balanced learning experience.
3. Supervise, demonstrate, teach, and observe the student in clinical activities to develop the student's skills and to ensure appropriate patient care.
 - a. All intimate physical exams must be chaperoned by a licensed clinician.
4. Delegate assignments gradually, increasing levels of responsibility to the student for the clinical assessment and management of patients as the student's skills develop.

5. Allow the student to document, as appropriate, in the patient charts or electronic health record (EHR) or use a chart note simulation in cases in which students may not record the encounter in patient medical records or the EHR.
6. Review and, if necessary, add information to the student's entry in patient charts/EHR and co-sign all patient records/EHR written by the student.
7. Participate in the evaluation of the student's clinical skills and didactic knowledge base by:
 - giving direct supervision and observation in the clinical setting
 - giving feedback to the student based on the oral case presentation
 - reviewing the student's chart notes/EHR
 - discussing the student's progress with faculty electronically, by phone, email, or in person during site visits
 - a. Students should have a clear understanding of their performance throughout the quarter, so their final evaluation is of no surprise
 - completing a written (online) evaluation of student
8. Students **may NOT** make care management recommendations to patients or initiate treatment without prior preceptor discussion/review, including diagnostic tests, medications, or referrals

Professional Conduct in Clinical Rotations

All students are expected to interact in a professional, courteous, and responsible manner with staff, patients, colleagues, and visitors in the clinical setting. As a UCI DNP/ FNP student, you are an ambassador for the university and will be representing yourself as a future nurse leader and DNP.

Adherence to the American Nursing Association (ANA) Code of Ethics and the Standards of Professional Practice is an expectation. The code of ethics will serve as an ethical standard for the profession and will guide the student with ethical analysis and decision- making.

- **ANA CODE OF ETHICS FOR NURSES**
 - The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
 - The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
 - The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
 - The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and acts consistent with the obligation to promote health and to provide optimal care.
 - The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
 - The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.
 - The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
 - The nurse collaborates with other health professionals and the public to protect human

rights, promote health diplomacy, and reduce health disparities.

- The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy

- **PROFESSIONAL COMMUNICATION & BEHAVIOR**

In addition to adhering to the ANA Code of Ethics and Standards for Professional Practice, the student must adhere to all policies outlined in the [UCI Code of Student Conduct](#). These *Policies* address the rights and responsibilities of members of the University community as well as others while on University property. These Policies also address the responsibilities of students as defined herein and provide University wide standards for campus implementing regulations as a means of sustaining this community.

Each member of the University shares in the responsibility for maintaining this unique community so that the University's mission of teaching, research, and public service can be achieved. These *Policies* and their campus implementing regulations are designed to protect and promote the rights of members of the University, prevent interference with university functions or activities, and assure compliance with all pertinent laws and other applicable University policies.

- **PROFESSIONALISM IN THE CLINICAL SETTING**

Students will be provided with clinical syllabi and objectives for each quarter. These documents are to be shared with your preceptors at the beginning of the rotation. Students are to assume responsibility for patients only in the designated program settings and under approved supervision. Students are not permitted to initiate care of a patient without the direct supervision of their preceptor. An infraction of this policy is cause for dismissal from the program.

1. Introduce yourself to all staff in the clinical environment and be sure you introduce yourself as a nurse practitioner student.
2. Dress: must follow Professional Attire Guidelines; see below.
3. Punctuality is essential. Arrive early (suggest arriving 15 minutes early for your clinical day); plan for traffic, etc.
4. Review patient schedule: look up diagnoses and labs before the patient encounters when possible.
5. Preceptors may give students assignments such as research on a particular diagnosis, management of disease, treatment guidelines, etc. It is expected that the student completes these assignments as directed by preceptors. Failure to do so will be reflected on your evaluation.
6. Obtain a cell phone number or contact number of the preceptor/clinic in case of absence. You must inform the preceptor prior to the scheduled rotation AND notify your assigned Clinical Nurse Educator
 1. Changes to your clinical schedule must be approved by your assigned preceptor and submitted to your Clinical Nurse Educator
7. Do not conduct personal or business phone calls during your clinical time; this is your time to LEARN; make the most of each day in your clinical experience. Turn all cell phones to

SILENT mode.

8. Take initiative and be an assertive, adult learner—students are encouraged to ask to observe cases or procedures; always be respectful of patients/colleagues.
9. Be prepared with clinical notes and resources (books, electronic devices). Do not expect the preceptor to have resource material for you to utilize.
10. Conclude your rotation with a meeting with your preceptor to discuss your clinical progress throughout the rotation. A farewell thank-you note is always appreciated as preceptors have VOLUNTEERED their time to mentor you.

- **PROFESSIONAL DRESS AND PERSONAL APPEARANCE**

A. General Dress Guidelines

1. Student appearance reflects the individual, the School of Nursing, and the University of California, Irvine. A professional, neat, and well-groomed appearance must be always maintained.
2. A white lab coat will be purchased by the student through a UCI School of Nursing vendor which will be embroidered with the University name.
 - a. Professional business type attire is required for clinical rotations. *Casual attire is not acceptable such as stretch pants/leggings, “skinny jeans,” jeans/denim, Capri pants, open toe shoes/flip flops, hats. **Scrubs should only be worn if specifically asked.*** Appropriate attire includes shirt and tie, long pants. Dress or skirt of appropriate length (remember you will be sitting on an exam stool) or dress pants and blouse.
3. Wear comfortable, closed-toed shoes in the clinical areas (**no sandals**).
4. UCI School of Nursing name badges must be worn with the white lab coat in clinical settings.
5. All clothing should be clean, neat, free of wrinkles, and properly fitted.

B. Other Grooming and Personal Appearance Guidelines

1. Hair should be clean and arranged neatly.
2. Appropriate standards of bathing and grooming are expected.
3. Beards/mustaches must be short and neatly trimmed.
4. Nails should be kept clean and short; nail polish should be light-colored or neutral; artificial nails (acrylic or other) are prohibited per UCI policy.
5. Extreme styles of dress, hairdos, and makeup are not permitted.
6. Students should only wear limited, non-obtrusive jewelry in the clinical setting, the student must be cognizant of safety risks imposed by the jewelry.
7. Some clinical sites may have other guidelines pertaining to grooming. As a visitor to such sites, students must also adhere to their guidelines. Tattoos and piercings may be required to be covered by clothing/adhesive.
8. Avoid perfumes, colognes, lotions, and body sprays.

Attendance Policy

Consistent, punctual, and regular attendance to all clinical and course days is an essential requirement of the program. Students must present to clinic on time, prepared, and ready to begin patient care.

Students are expected to remain at the clinical site for the duration of their preceptor's workday. It is an expectation that students schedule any personal or medical appointments on days and times that do not conflict with class or clinical days.

Students must comply with the attendance policy as it is outlined below:

- Attendance on each scheduled practicum day is expected unless the student has notified the preceptor and their assigned clinical nurse educator of an excused absence prior to the beginning of the workday (Refer to the attendance policy)
 - Unexpected absences should be reported as soon as possible to the preceptor, clinical nurse educator, and faculty of record
- Inconsistent attendance to clinical may jeopardize the students' acquisition of knowledge and skills, impede progression in the program, and result in an "Unsatisfactory" evaluation for the rotation.
- If a student misses a clinical day for an unavoidable and serious reason, an excused absence can be obtained.
- If a student maintains employment, flexibility with scheduling is necessary to fulfill clinical and academic requirements. **Work obligations are not excused absences.**
- Failure to comply with the attendance policy may result in appropriate corrective action, including and not limited to failure of the clinical practicum course.

Patient Privacy and Social Networking

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

Incidents in Clinical Settings

It is the student's responsibility to report any problems that are encountered in clinical immediately. The student will be counseled by their assigned Clinical Nurse Educator and Faculty of Record and corrective action will be taken. Any problems that cannot be immediately resolved by the Clinical Nurse Educator and/or Faculty of Record will be reported to the DNP Co-Director overseeing clinical affairs.

As stipulated in the DNP program disqualification policy, students may be dismissed from the program for unprofessional conduct in the clinical practicum rotation. Examples of such conduct may include, but are not limited to unprofessional conduct in the clinic setting including consistent lack of punctuality, frequent unexcused absences, unprofessional attire, dismissal from a clinical site for HIPAA violations, unsafe practices, violation of a clinical contract and disrespectful behavior/encounters with members of the healthcare team etc.

Standardized Patient Exams

Clinical competency performance exams: Skills Appraisal Exam (SKA), Objective Structured Clinical Exams (OSCEs), and Clinical Practice Exams (CPX) are used periodically throughout the program to evaluate student's progress toward achieving clinical competencies. The use of these standardized patient exams follows national best practices as defined by the National Task Force and in alignment with the 2022 Standards for Quality Nurse Practitioner Education are **not** included in the minimum direct patient care hours.

Scoring of these exams is done by trained standardized patients and/or faculty observation. In the event a student does not demonstrate baseline competencies at the expected level on the first attempt at a SKA or OSCE, the Faculty of Record will develop a remediation plan with the student for successful achievement of competencies. Remediation plans are to be determined by the faculty of record in conjunction with the DNP Co-Director overseeing clinical affairs and may include but are not limited to additional clinical hours, repeat assessment, additional in-person site visit, etc.

The Clinical Practice Examination (CPX) is a comprehensive performance (practical) exam administered in Practicum V and is used as one measure of a student's overall competency prior to graduation. It is an exam utilizing standardized patients. Students are required to perform an appropriate history, physical exam, and psychosocial assessment, and create a diagnosis and management plan. In the event the student does not demonstrate baseline competency at the expected level on the CPX (Clinical Practice Exam), the student will be required to remediate as determined by the faculty of record in conjunction with the DNP Co-Director overseeing clinical affairs.

If the SKA, OSCE, or CPX is missed for any reason, the course requirements will be considered unmet. If the absence is excused by the faculty of record, a make-up assignment must be arranged, and a passing grade obtained to complete the course and progress in the program. It is understood that the need to take the CPX at an alternative date and time may delay graduation.

Practicum Evaluation

Each practicum course must be passed with an 83.5% (Satisfactory) or better. The student's final evaluation is completed by the Faculty of Record utilizing multiple evaluation methods which may include standardized patient exams, preceptor evaluations, faculty site visits observations, and assignments by the Faculty of Record as outlined in the practicum syllabus. Students must complete the clinical hour requirements for each practicum by the date specified in the syllabus to obtain a satisfactory grade in the course.

Remediation and Grounds for Dismissal and Academic Disqualification in Practicums

Students must pass both the preceptor evaluation and standardized patient exam for each clinical practicum with an 83.5% or higher. Failure to pass either the standardized patient exam or the

preceptor evaluation will require remediation at faculty discretion, which may include repeating additional clinical hours.

Prior to graduation students are required to take and pass a written comprehensive exam with an adjusted score of 83.5% or higher. Failure to pass will require remediation at faculty discretion, which may include repeating additional course work, clinical hours, practice tests, and the comprehensive exam.

Failure of any clinical practicum course will result in academic conditional status. Failure of a second course in the program is grounds for academic disqualification from the program.

Additionally, unprofessional behavior resulting in dismissal from a clinical site is grounds for dismissal from the program.

Faculty Clinical Site Visit

The DNP Co-Director, Faculty of Record, Clinical Nurse Educator, or designated clinical instructor or faculty within Nursing Science will periodically schedule site visits, virtually or in-person, to observe and evaluate the physical site, interaction between the preceptor, student and patients, and the student's clinical progress. It is also an opportunity to work with the preceptor toward the development of the student's clinical skills.

During the site visit, the faculty/clinical nurse educator/clinical instructor may observe the student in patient encounters, during presentation of cases to preceptor, and will review charting. A written report will be completed by the faculty and placed in the student's file in Typhon. In the event the faculty evaluation documents the student is below level of expected performance, the faculty will discuss the results with the student, preceptor, faculty of record, and the DNP Co-Director and a remediation plan will be developed.

Record Keeping

1. A schedule for the clinical rotation for the entire quarter should be mapped out and submitted to the faculty of record to ensure timely completion of all required clinical hours.
2. Typhon NPST system is used to track the Clinical Preceptorship information. Students will be trained in the use of this web-based clinical preceptorship tracking system and will be required to input clinical and patient data daily. **Students will not be authorized to input data after 7 days.** If not done in this timeframe, the student will lose the time and patient encounters for the omitted day(s).
3. All clinical hours must be completed by the end of the quarter. Failure to complete clinical hours in a particular population may result in delayed program progression.
 - a. Direct Patient Care Time as defined by National Task Force on Quality Nurse Practitioner Education (2021) as Hours/time in which direct clinical care is provided to individuals, families, and groups in one (1) of the six (6) population-focused areas of NP practice and in primary care or acute care as appropriate
4. Inaccurate and/or falsified data entry on clinical logs or in the Typhon NPST system will be considered academic dishonesty and will be reported to the UCI Office of Academic Integrity & Student Conduct and may result in academic disqualification or academic conditional status.

5. Students will evaluate each preceptor and site **once** during the quarter for each clinical rotation; evaluations must be completed by the designated due date.
6. All records must be submitted at the end of each quarter. Failure to do so will result in an **“Unsatisfactory”** grade for the clinical rotation.

Exposure Guidelines to Bloodborne Pathogens (BBP) and Other Potentially Infectious material (OPIM)

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

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

Upon receipt of the Nurse Practitioner Track Student Guidelines for Clinical Rotations, students must sign a receipt acknowledging that they have read the guidelines and intend to follow them. The receipt then becomes part of their file.

IF A STUDENT IS INJURED WHILE IN CLINICAL:

1. The student should immediately notify the clinical preceptor and their assigned Clinical Nurse Educator and/or Faculty of Record for the course.
2. If necessary, the student will be excused from clinical for the day to seek medical treatment. The student remains responsible to fulfill all required clinical hours during the quarter.
3. If required, emergency care may be provided directly at the clinical site, at the student's expense.
4. The student is responsible for contacting his/her own health care provider following emergent care to arrange for post-injury follow-up.
5. A needle stick is considered an urgent medical concern (see post-exposure guidelines below).
6. All costs that are associated with the immediate and/or follow-up treatment are the responsibility of the student.

POST-EXPOSURE GUIDELINES: BLOODBORNE PATHOGENS

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

1. Immediately clean wound site with antiseptic soap and flush area with water. Notify preceptor

immediately.

2. Any student exposed to blood or body fluid from a patient must be evaluated within **one-hour** post-exposure to obtain the most effective early prophylaxis. Preceptor should consult with the nursing supervisor or medical director immediately for facility's process. Students will be excused from clinical for the day to seek treatment as indicated. Clinical hours missed must be made up later in the quarter.
3. After the exposure, the student should document the date and time, patient's name, identification number, and the clinical site in which the exposure occurred. Keep this information in a secure place. This information should be utilized to complete an incident report per facility requirements. In addition, **immediately contact the nursing supervisor or medical director at the clinical site** and provide the supervisor or director with the information pertaining to the blood borne exposure and source patient. If there is a UC Irvine faculty member on-site, s/he should be notified about the incident immediately. The nursing supervisor or medical director should request and obtain a source patient blood sample for Hepatitis B screening, Hepatitis C screening, and HIV screening. The nursing supervisor or medical director is authorized to release the results of the blood tests to the student. The student is responsible for contacting the supervisor or director to obtain this information.

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

- **Should the injury take place at UCIMC or a UCI Healthcare Facility during clinical:** post-exposure care is provided by Occupational Health Services during business hours. The student is to demonstrate insurance coverage and is responsible for any costs that may be incurred for post-exposure treatment. If the incident occurs after hours or on weekends/holidays, the House Supervisor will page the Infectious Disease Fellow on-call to review the details of the incident and estimate the risk of exposure. The Infectious Disease Fellow will discuss the incident, counsel the student, and will call the House Supervisor to order the HIV test on the source patient, if indicated. The University of California, Irvine Healthcare has a Policy and Procedure for **EXPOSURE: BLOODBORNE PATHOGEN PREVENTION AND CONTROL PLAN, (2017)**.
- **Should the injury take place at any other facility other than UCI Health during clinical:** For cases of exposure occurring outside of UCI, the student should still follow steps #1-3 above. UCIMC will not be able to obtain the source patient's lab results. The student is responsible for obtaining these as discussed above. Post-exposure guidelines will vary among clinical sites and agencies; additionally, some clinical venues will have limited ability for on-site laboratory testing. Follow the agency guidelines for the site where the exposure occurs.
- Post-exposure prophylaxis shall be provided when medically indicated per CDC general guidelines and as prescribed for the individual student by the Occupational Health advanced practice provider, Infectious Disease advanced practice provider, or Emergency Room advanced practice provider.

For students with private health insurance: Students may see their personal health care provider for post-exposure evaluation and care. There may be fees for the office visits, lab tests, medications and other procedures which are the responsibility of the student. The students' private insurance carrier may be billed; however, if the student's insurance will not accept the facilities' services, s/he must follow their carrier's accepted protocol and s/he will be responsible for the cost. Again, it is the

student's responsibility to know his/her benefits, exclusions, and limitations. Most insurance plans have provisions which include the need to report the injury to the insurance company within a brief period after the injury.

4. The student must follow-up with their healthcare provider through the "window period" as appropriate: 72 hours (about 3 days), 6 weeks (about 1 and a half months), 12 weeks (about 3 months) and 6 months. Refer to CDC guidelines for bloodborne pathogen post-exposure care.
5. The student must contact his/her healthcare provider if any of the tests are positive and must provide them with the supporting documentation. The students' primary healthcare provider should provide post-test counseling and appropriate intervention.
6. Within 24 hours of the incident, the student should notify the UC Irvine School of Nursing Clinical Nurse Educator and the Faculty of Record for the course.

Post-Exposure Guidelines: COVID-19

Please refer to UCI Covid Case Information

<https://www.hr.uci.edu/reportcovid/>

For additional information please refer to the CDC for exposure guidelines:

<https://www.cdc.gov/covid/index.html>

Caring for Patients with Respiratory Complaints During COVID-19 PANDEMIC

Once a student has been vaccinated for COVID-19 with recommended boosters, and it has been 14 days since the last dose in the recommended series, they may care for patients with respiratory complaints. Upon receiving the final dose of COVID-19 vaccine proof of vaccination must be uploaded to Typhon. Documentation in Typhon is required prior to seeing patients with respiratory complaints.

REFERENCES

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Moran, K., Burson, R., & Conrad, D. (2019). *The doctor of nursing practice project: A framework for success*, (3rd edition.). Jones & Bartlett Learning: Burlington, MA. ISBN-13 978-1284156959

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<https://cdn.ymaws.com/www.nonpf.org/resource/resmgr/imported/scholarlyprojectcriteria.pdf>

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UCI Exposure Control Plan: Bloodborne Pathogen and Aerosol Transmissible Diseases (2017)

<http://www.ehs.uci.edu/programs/biosafety/UCIBBPEXposureControlPlan.doc>

APPENDIX A: RESOURCES FOR GRADUATE STUDENTS

Graduate & Postdoctoral Scholar Resource Center

The Graduate & Postdoctoral Scholar Resource Center (GPSRC) is dedicated to supporting the academic and professional success of all UC Irvine graduate students. The GPSRC offers a wide range of workshops and programs designed to support professional and career development, the preparation of grant and fellowship funding applications, wellness and work-life balance, writing tutorial services, and mentoring. Individual and group study space is available. One of their most popular workshops is the Dissertation Boot Camp, an intensive weekend writing opportunity for students in the writing stage of their dissertation. The Boot Camp helps writers overcome blocks, develop skills, and make significant progress in a short period of time.

3100 Gateway Study Center
949-824-3849
GPSRC@uci.edu

Division of Career Pathways

The School of Nursing does not have an in-house advisor dedicated to career advising, but there are multiple resources available on campus. The UCI Division of Career Pathways has a dedicated career advisor for graduate students, though you are welcome to see any of the career advisors for assistance. The Career Pathways also offers mock interviews on camera, resume/CV assistance, and workshops on the job search process for academic and non-academic positions. Drop-in career advising is available every week in the Graduate & Postdoctoral Scholar Resource Center (check the GPSRC website for current hours).

Financial Aid

DNP students should consult the [UC Irvine Office of Financial Aid](#) for aid opportunities available to students. Grant and loan opportunities are available. Students must complete the Free Application for Federal Student Aid (FAFSA) to be eligible. The suggested deadline is March 2. New students should also complete the [Statement of Legal Residence](#) with the Registrar's Office to ensure their information is up to date for financial aid. Information on External Scholarship Opportunities can be found [here](#) (Click on the Nursing tab to view these scholarships). Make sure to check your email consistently for scholarship opportunities as well.

Library Resources: Your Librarians

Becca Gates, MLIS
Research Librarian for Health Sciences
Science Library
949-824-7309 * rmgates@uci.edu

Linda Murphy, MLIS
Research Librarian for Health Sciences

Science Library/Grunigen Medical Library
949-824-6419 * 714-456-5583 * Imurphy@uci.edu

Library Locations of Nursing Resources

Print textbooks, reference works, etc. - Call number WY ...

- i. Science Library (Irvine Campus) - 6th floor Bar (A few reference works located in the 2nd floor Reference Collection)
- ii. Grunigen Medical Library (GML) (UCI Medical Center)

Print journals - Call number W1 ...

- i. Science Library (Irvine Campus) - 4th & 5th floor Drum (Some current unbound issues in the 2nd floor Current Periodicals shelved by title)
- ii. Grunigen Medical Library (UCIMC) - Shelved by full title

Online Resources - Journals, eBooks, and others

- i. Grunigen Medical Library Website - <https://grunigen.lib.uci.edu/>
- ii. Library Search - <http://lib.uci.edu/search>
- iii. Nursing Subject Guide - <https://guides.lib.uci.edu/nursing>

Remote and Wi-Fi Access – 949-824-2222 (Helpline), oit@uci.edu

The UCI Libraries provide access to thousands of online resources including eBooks, full-text journals, article databases, point-of-care reference tools, and much, much more.

These resources may be accessed directly from any of the UCI computer networks, and remotely via simple authentication using your UCINetID.

The VPN (Virtual Private Network) - <https://www.lib.uci.edu/connect>

- i. You may connect to these online resources from off-campus using the VPN. We strongly suggest using the software option (Cisco AnyConnect VPN Client) which is available for current Windows, macOS, and Linux operating systems. There are also options available for several popular mobile devices (iOS, Android, Chromebook). This option will give you access to the largest number of our online resources from home, or your favorite coffee shop.

For more information on obtaining and installing the VPN software go to <https://www.oit.uci.edu/services/security/vpn/>. Follow the installation instructions closely. Be sure to select UCIFULL (Route all traffic through the UCI VPN) from the Group drop-down menu the first time that you open the VPN software after installation.

- ii. A second option is the WebVPN. This merely requires that you go to the webpage at <https://shib.service.uci.edu/idp/profile/SAML2/Redirect/SSO?execution=e1s2> and login

with your UCINetID. You will then be taken to a second webpage with links back to the UCI Libraries. We do not encourage this option as there are some resources, notably PubMed, which may not work well (or at all) with the WebVPN. However, this may be the only method to use if you are not able to install the VPN software on the device you are using such as a computer at a public library, hospital computer lab, etc.

- iii. Go to <https://ucinetid.service.uci.edu/activate/menu.php> for more information on the UCINetID.

Wireless Access

- i. UCI offers mobile Internet access via Wi-Fi across many locations on campus. UCInet Mobile Access provides UCI affiliates and visitors a fast and convenient way to connect to the web with mobile computers and devices. Go to <https://www.oit.uci.edu/mobile/> or more information.
- ii. Wi-Fi access at the UCI Medical Center is provided by the UC Irvine Health Information Services. For more information, please go to <https://it.health.uci.edu/Network/Wireless-Connection-Guest.asp>

Lactation Rooms at the UCI Campus

There are several lactation rooms throughout the UCI Campus for your convenience:

- **College of Health Sciences, 1st Floor Room 1207**
Open to all COHS students.
- **The Center for Student Wellness & Health Promotion, G319 Student Center**
Open M-F, 8 a.m. - 5 p.m. on a first come, first served basis, with a 30-minute time allotment.
- **McGaugh Hall, Biological Sciences II, Room 1301**
Open 24/7.
- **School of Social Ecology, Social Ecology I, Room 261**
Open M-F, 7 a.m. - 11 p.m. Email Rick Orth (rorth@uci.edu) or visit the Social Ecology Student Service Office to request a key code.

Campus Resources

ANTLINK :	https://students.uci.edu/
BOOKSTORE :	https://uci.bncollege.com/
CAREER PATHWAYS :	https://career.uci.edu/
CHILD CARE SERVICES	https://childcare.uci.edu/
COUNSELING CENTER:	https://counseling.uci.edu/
CROSS-CULTURAL CENTER:	https://ccc.uci.edu/
DISABILITY SERVICES CENTER:	https://dsc.uci.edu/
ELECTRONIC EDUCATIONAL ENVIRONMENT (EEE/Canvas):	https://canvas.eee.uci.edu/
FACULTY	https://nursing.uci.edu/nursing-faculty/
FINANCIAL AID:	https://www.ofas.uci.edu/
GRADUATE DIVISION:	https://grad.uci.edu/
GRADUATE & POSTDOCTORAL RESOURCE CENTER:	https://grad.uci.edu/professional-development/graduate-and-postdoctoral-scholar-resource-center/
LESBIAN, GAY, BISEXUAL, TRANSGENDER RESOURCE CENTER:	https://lgbtrc.uci.edu/
LIBRARIES (MAIN):	https://www.lib.uci.edu/
OFFICE OF EQUAL OPPORTUNITY & DIVERSITY	https://www.oeod.uci.edu/
OFFICE OF INFORMATION TECHNOLOGY:	https://www.oit.uci.edu/
OFFICE OF THE OMBUDSMAN:	https://ombuds.uci.edu/
PARKING AND TRANSPORTATION SERVICES:	https://parking.uci.edu/
REGISTRAR'S OFFICE /SCHEDULE OF CLASSES:	https://reg.uci.edu/
SCHOOL OF NURSING (UCI):	https://nursing.uci.edu/
VETERAN SERVICES	https://veteran.uci.edu/

For your rights, options, and resources regarding pregnancy related accommodations (including pre-pregnancy, pregnancy, post-partum, and pregnancy loss), please contact the Office of Equal Opportunity and Diversity (OEOD) at oeod@uci.edu.

For additional resources and support services, please visit our Student Affairs website:

<https://nursing.uci.edu/students/>

APPENDIX B: DNP SCHOLARLY PROJECT TIMELINE FOR COMPLETION & ADVANCEMENT BENCHMARKS

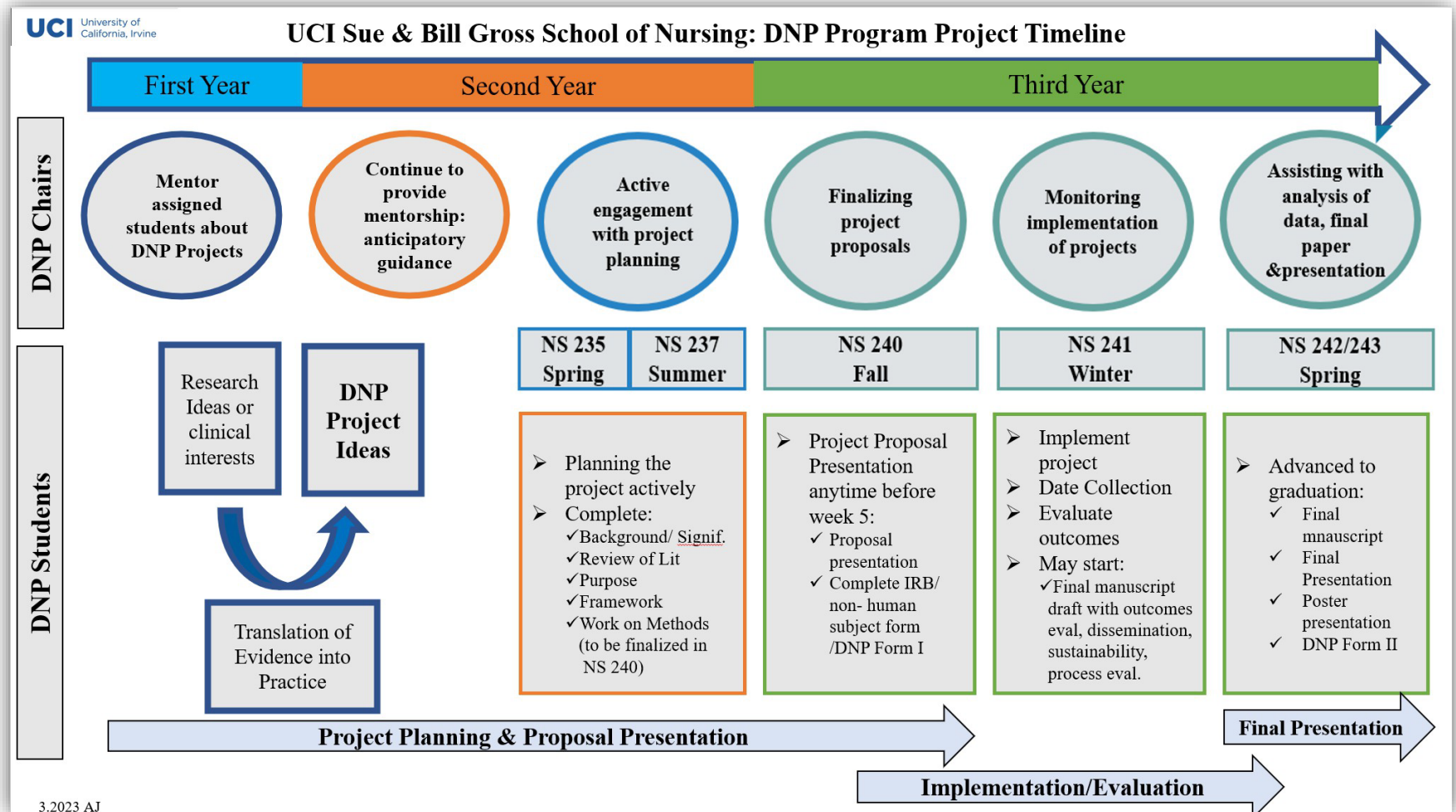
DNP Post-Master's Program

Quarter	Course	Deliverable/Benchmark
Winter Quarter 2	NS 233	Develop PICO question, literature review, begin planning concept
Spring Quarter 3	NS 235	Update PICO question and literature review; conceptualization, framework, and detailed timeline of the project Obtain support letter and COI. Inquire about DNP project process and approval at project site.
Intersession Quarter 4	NS 237	Formulate Project Details Consider feasibility, logistics and draft proposal
Fall Quarter 5	NS 240	Finalize proposal and present at beginning or middle of quarter (revise as needed). Submit to UCI Quali IRB as NHR AFTER successful proposal presentation. Complete the project site approval process AFTER successful proposal presentation.
Winter Quarter 6	NS 241	Implement project at project site and evaluate results
Spring Quarter 7	NS 242 NS 243	Analyze outcomes and implications of the project, finalize the written final paper including the abstract and final presentation PPT file. Dissemination/presentation to cohort, SON faculty, stakeholders, community; disseminate the final PPT file or abstract to partner agency; DNP Portfolio Evaluation; plan additional dissemination (meetings, conference, electronic repository, submission for publication, etc.)

DNP Family Nurse Practitioner Program

Quarter	Course	Deliverable/Benchmark
Winter Quarter 2	NS 233	Develop PICO question, literature review, begin planning concept
Spring Quarter 7	NS 235	Update PICO question and literature review; conceptualization, framework, and detailed timeline of the project. Obtain support letter and COI. Inquire about DNP project process and approval at project site.
Interession Quarter 8	NS 237	Formulate Project Details Consider feasibility, logistics and draft proposal
Fall Quarter 9	NS 240	Finalize proposal and present at beginning or middle of quarter (revise as needed). Submit to UCI Quali IRB as NHR AFTER successful proposal presentation. Complete the project site approval process AFTER successful proposal presentation.
Winter Quarter 10	NS 241	Implement project at project site and evaluate results
Spring Quarter 11	NS 242 NS 243	Analyze outcome and implications of the project, finalize the written final paper including the abstract and final presentation PPT file. Dissemination/presentation to cohort, SON faculty, stakeholders, community; disseminate the final PPT file or abstract to partner agency; DNP Portfolio Evaluation; plan additional dissemination (meetings, conference, electronic repository, submission for publication, etc.)

DNP- FNP Program Project Timeline



APPENDIX C: UCI DNP PROGRAM TERMINOLOGY GUIDE

	QI	EBP	Research
Starting point	Identification of a gap in practice -> You start with preexisting problems that you would like to address to improve the quality of care	Identification of a better way to practice-> You have identified evidence that can improve care. (i.e., There is a better way of doing things.)	Identification of a gap in knowledge-> Generating new knowledge
Type of Project	Performance/ Quality Improvement Project	EBP project	Research Project
How do we describe the work	Project	Project	Study
Person who oversees project	Project Leader	Change Agent	Investigator
Person who is participating	Participant (patient and/ or staff)	Participant (patient and/ or staff)	Participant/ subject
Framework	Model: Johns Hopkins, PDSA (Shewart, Deming), Logic Model	Model: Iowa Model Johns Hopkins	Theoretical Model of Choice
What's being delivered	Practice Improvement	Practice Change	Intervention
What are we evaluating	Indicator of success	Indicator of success	Dependent Variables
Where do we start	PICO Question	PICO Question	Research Question Hypothesis
What are we looking at	Evaluation of Indicator	Evaluation of Indicator	Results or Findings
What are we assessing	Output/Metric	Output/Metric	Result
What are we assessing	Process Measures and Pt/Fam/Staff/Finance Outcomes	Process Measures and Pt/Fam/Staff/Finance Outcomes	Results
Stats	Percent improvement Attainment of Benchmarks	Percent improvement	Statistical Analysis
How are we going to do it	Description of Practice Improvement	Description of Practice Change	Method or Protocol
Formative and Summative Evaluation	Evaluation before and after practice improvement	Evaluation before and after practice change	Cross sectional cohort Randomized

How would we describe the project?	Pilot Project	Pilot Project	Pilot Study
Type of Methodology (I.e., Program Eval)	Use of pre-existing data collected for the routine purpose of quality monitoring	Use of pre-existing data collected for the routine purpose of quality monitoring	Retrospective study
Do we agree on the findings	Attribute Agreement Analysis	Attribute Agreement Analysis	Inter-rater reliability
What is our intent	Intent is to improve local practice	Intent is to bring a tested new practice and monitor transition to standard of care	Intent is to explore or test something novel or new or in new populations

(*terminology utilized for QI and EBP are often interchangeable)

Adapted with permission by j davidson@ucsd.edu

Dr. Judy E. Davidson DNP, RN, MCCM, FAAN Nurse Scientist, UC San Diego Health

UC San Diego School of Medicine, Department of Psychiatry

APPENDIX D: EXAMPLES OF DNP PROJECTS

At UCI, DNP students will focus on these broad areas for their individual projects:

- Quality improvement project implementation
- Health care policy project implementation
- Evidence-based practice project implementation

Examples of DNP scholarly projects are listed below; however, UCI DNP students are expected to adhere to our program focus outlined above.

National Organization for Nurse Practitioner Faculties (NONPF) DNP Scholarly Recommendations

NONPF Recommended Criteria for NP Scholarly Projects in the Practice Doctorate Program

1. The project is related to advanced practice in the nursing specialty and benefits a group, population, or community rather than an individual patient.
 - Often arises from clinical practice
 - May be done in partnership with another entity: clinical agency, school, health department, church, government, voluntary organization, or community group, etc.
2. The project leadership may be solo or collaborative depending on scope of the project and university requirements.
3. The scholarly project addresses identified needs.
4. The literature review suggests an evidence base for the project or supports the need for the project.
5. Description of the innovation is adequate for others to use (essential components for success, cost, etc.)
6. A systematic approach is used, and data are collected using methods and tools that meet accepted standards.
7. Expected outcomes are defined and measured (quality improvement, cost savings, etc.).
8. The project is conducted according to ethical principles.
9. Dissemination modes are professional and public (peer review is included).

Types of Scholarly Projects include but are not limited to:

The following includes a list of general topics and the grouping of projects by category. This is not an exhaustive list of projects or of categories.

- Evaluate interventions, innovations in care techniques
- Obtain baseline data, design an evidence-based intervention and plan and evaluate
- Collaborate with other NPs or other professional colleagues to compare/ evaluate group visits
- Capture data on common problems and effectiveness of treatments with recommendations for change
- Evaluate management of psychiatric patients (protocols, meds, metabolic monitoring)
- Evaluate peer led support groups and their impact
- Evaluate pain control in palliative care
- Promote patient safety by reducing errors in medications
- Evaluate home care comparing satisfaction with physician and NP care

Health Promotion & Community Health: Epidemiology and Continuity of Care

- Compare strategies for health promotion / disease prevention (community, schools, churches, etc.)
- Identify trends in patient visits, outreach programs
- Launch collaborative new health promotion program in vulnerable community population and evaluate it
- Develop and evaluate monitoring tools or screening programs

- Evaluate screening protocols
- Evaluate programs (care, training volunteers, education)
- Evaluate community responses to disasters
- Develop and evaluate the impact of self-care models
- Develop and test transition protocols to promote continuity of care across settings
- Evaluate high-risk patients and develop approaches for risk reduction (child and elder abuse) for policy or care improvement

Policy-Related Scholarly Projects

- Implement new policy collaboratively by designing and evaluating HPV vaccination for 6th grade girls
- to prevent cancer (partnering with School/ Health Dept., etc.)
- Evaluate or compare nursing home policies for treating chronic pain
- Evaluate students at risk (school dropouts, depressed, substance users, pregnant) and recommend policy change, programs
- Evaluate employer policies regarding health and potential cost savings of new policies
- Evaluate the effect of evidence-based policy in NICU
- Evaluate inconsistencies in scope of practice issues and use evidence-based knowledge and to recommend changes

Integration of Technology in Care and Informatics Related Projects

- Create a database for monitoring childhood injuries in urgent care and evaluate its impact
- Use technology to improve care (telehealth consultation, interactive “home” visits, etc.) and evaluate results
- Evaluate technology’s impact on care (information transfer to point of care, etc.)
- Establish protocols that integrate use of technology in patient assessment in urgent care and evaluate their impact

Acknowledgment: The above examples were developed and generalized from several sources including publications, web sites, and information shared by deans of various Nursing Practice Doctorate programs. Some examples were common to several schools and others were unique to specific programs. NONPF would like to acknowledge the following schools whose projects are reflected in the list above: Medical College of Georgia; Rush University; Oregon Health and Science University; University of Tennessee, Memphis; University of Arizona; University of Kentucky; and University of Washington.

DNP Project Examples

See links below to DNP Project examples and resources: <https://nursing.uci.edu/programs/doctor-nursing-practice-family-nurse-practitioner/dnp-projects/>
<http://www.doctorsofnursingpractice.org/project-repository/>
<https://www.aacnnursing.org/Portals/42/DNP/DNP-Implementation.pdf>
<https://nursing.jhu.edu/programs/doctoral/dnp/projects/>

Note: The above examples were developed by students at various universities across the nation. All UCI DNP students must adhere to our standards and expectations as a graduate student at UCI.

APPENDIX E: TYPHON DNP SCHOLARLY PROJECT HOURS

Course	DNP/ FNP	DNP- PM
NS232	30h	30h
NS234	30h	30h
NS236	30h	30h
NS239	30h	30h
NS 249	ELECTIVE – 30 h	30h
NS 235	30h	30h
NS288/291	NS 288: 60h	NS291: 120-270h (*4-9 units)
NS289/292	NS 289: 60h	NS292: 150-330h (*5-11 units)
NS290/293	NS 290: 30h	NS293: 120-270h (*4-9 units)

APPENDIX F: SCHOLARLY WRITING RESOURCES

DNP students are encouraged to utilize the UCI writing center as part of their strategy to strengthen their writing skills.

[UCI Center for Excellence in Writing and Communication](#)

Resources for Students

Here is a list of resources to help you with your writing needs, compiled by the Center for Excellence in Writing and Communication.

Writing Center Materials

- [Writing Tutorial Referral Form](#): Bring this form to the Center if you want to give your instructor a report on what was covered during the consultation.
- [Resources for Sentence-level Choices](#): This page contains resources for composing and reading sentences.

Comprehensive Writing Guides

- [University of North Carolina at Chapel Hill Writing Center Tip sheets](#): UNC Chapel Hill's website has a variety of helpful tip sheets and videos on grammar and essay development.
- [University of Wisconsin Writer's Handbook](#): This student writer's handbook has a variety of tips on everything from style to essay development to grammar and punctuation.
- [Writing Across the Curriculum: Links for Writers](#): This collection of web-based resources covers a variety of topics, including business writing, citation guides, grammar guides, and resumes and cover letters.
- [Purdue OWL](#): This page is a resource for any grammar topic as well as a guide to editing, subject-specific writing, and correct use of citations.

APPENDIX G:

DNP & DNP FNP SIGNATURE ASSIGNMENTS FOR STUDENT PORTFOLIO

Program Learning Outcomes (PLOs) and Essentials Crosswalk

DNP

Course Number	Course Title	Signature Assignment	DNP PLO	2021 AACN Essential Domains, Advanced-Level
NS 222A	Clinical Translational Science	Stakeholder DNP Proposal	2, 4	1, 4, 6, 8, 9
NS 234	Health Politics and Policy	Policy Brief	8, 10	2, 3, 7, 9
NS 235	DNP Scholarly Project I: Conceptualization & Planning	Synthesis of the Literature & Project Recommendation	1, 2, 3, 4, 6, 7, 10, 11, 12	1, 2, 3, 4, 5, 6, 7, 8
NS 236	Social Determinants of Health	Community Plan	1, 8, 9, 17, 18	1, 2, 3, 7, 8, 9
NS 238	Foundations of Health Systems and Health Economies	Final Business Proposal	1, 2, 9, 11	2, 5, 6, 7, 8
NS 239	Science of Change, QI, and Program Evaluation	Personal QI Project	3, 4, 12	4, 5, 8, 10
NS 240	DNP Scholarly Project II: Proposal	DNP Scholarly Project Proposal PPT	1, 2, 3, 4, 6, 7, 8, 10, 11, 12	1, 2, 3, 4, 5, 6, 7, 8, 9, 10
NS 242	Scholarly Project IV: Implications	DNP Scholarly Project Presentation PPT	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12	1, 2, 3, 4, 5, 6, 7, 8, 9, 10
NS 243	Epilogue	DNP Scholarly Project Manuscript & Poster Presentation	1, 5, 6, 7, 9, 10, 11	1, 2, 3, 4, 5, 6, 7, 8, 9, 10

DNP FNP

Course Number	Course Title	Signature Assignment	DNP PLO	2021 AACN Essential Domains, Advanced-Level
NS 289	DNP APRN Practicum V	Clinical Practice Exam	13-16	1, 2, 3, 5, 6, 9, 10
NS 290	DNP APRN Practicum VI	Written Comprehensive Examination	14-17	1, 2, 3, 5, 6, 9, 10
NS 290	DNP APRN Practicum VI	Reflection	13 - 18	All

APPENDIX H: PEARLS FOR RECRUITING A PRECEPTOR

Welcome DNP-FNP Students to the School of Nursing. We are thrilled you are joining us; here is some information about your clinical experiences that begin in your 2nd year, winter quarter.

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

The following information will assist you in this effort:

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

If you identify a potential preceptor, please complete the [New Preceptor and Clinical Site Form](#) and email to Candice Whealon. The SON will contact the potential preceptor directly to discuss details. We appreciate your commitment to a rewarding clinical experience as a nurse practitioner student. If you have any questions, please don't hesitate to contact us.

APPENDIX I: NEW PRECEPTOR AND CLINICAL SITE INFORMATION FORM

New Preceptor and Clinical Site Information Form			
Preceptor Information (Must complete ALL fields)			
Name:		Position/Title: (MD, NP, etc.)	
Phone: (Indicate Work, Cell, Home)		Email:	
Clinical Site Information (Must complete ALL fields)			
Facility Name:			
Address:			
Type of Facility:		Private Practice? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Type of Practice:		Quarter Needed: _____	
Name of Student who identified Preceptor (If Applicable)			
Administrative Person Authorized to Sign: (Volunteer Coordinator and/or Affiliation Agreements)			
Contact:		Position/Title:	
Phone:		Email:	
NOTES (Please provide any additional information regarding the Preceptor/Site. E.G., "Must contact administrator first for placement" OR "Preceptor prefers to be contacted by e-mail/ cellphone")			
OFFICE USE ONLY			
CV Received:		Comments:	
VETTED: YES <input type="checkbox"/> NO <input type="checkbox"/>			
RN or MD License:		Comments:	
VETTED: YES <input type="checkbox"/> NO <input type="checkbox"/>			
NP BRN Furnishing & Certification:		Comments:	
VETTED: YES <input type="checkbox"/> NO <input type="checkbox"/>			
ADMIN RECEIVED DATE / INITIAL _____			

APPENDIX J: DNP FNP CLINICAL HOURS BY ACADEMIC QUARTER

NS 285	DNP APRN Practicum I	0	2	60	Direct Patient Care
NS 286	DNP APRN Practicum II	0	2	60	Direct Patient Care
NS 287	DNP APRN Practicum III	0	6	180	Direct Patient Care
NS 288	DNP APRN Practicum IV	0	5	150	Direct Patient Care
NS 288	DNP APRN Practicum IV	0	2	60	Scholarly Project Hours
NS 289	DNP APRN Practicum V	0	6	180	Direct Patient Care
NS 289	DNP APRN Practicum V	0	2	60	Scholarly Project Hours
NS 290	DNP APRN Practicum VI	0	3	90	Direct Patient Care
NS 290	DNP APRN Practicum VI	0	1	30	Scholarly Project Hours

APPENDIX K: NPST STUDENT TRACKING SYSTEM (TYPHON)

NPST Student Tracking System

Case Log Worksheet

= REQUIRED FIELD

Student Information

Case #: _____ Date of Service: _____

Semester: _____

<p>Course: _____</p> <p>Preceptor: _____</p> <p>Clinical Site: _____</p> <p><input type="checkbox"/> Rural Visit</p> <p><input type="checkbox"/> Underserved Area/Population</p> <p>Patient Demographics (ignore if Group Encounter)</p> <p>Age: _____ yrs/mos/wks/days</p> <p><input type="checkbox"/> Pre-Term (Premie) Child?</p> <p>Gestational Age (at birth): _____ weeks</p> <p><input type="checkbox"/> Prenatal visit? Enter fetus age: _____ wks</p> <p>Gender: M / F / T</p> <p>Race: _____</p> <p>Insurance: _____</p> <p>Referral: _____</p> <p>Clinical Information</p> <p>Time with Patient: _____ minutes</p> <p>Consult with Preceptor: _____ minutes (not part of patient time)</p> <p>Type of Decision-Making: _____ Straightforward</p> <p><input type="checkbox"/> Low complexity</p> <p><input type="checkbox"/> Moderate complexity</p> <p><input type="checkbox"/> High complexity</p> <p>Student Participation: _____ Observation only</p> <p><input type="checkbox"/> Less than shared</p> <p><input type="checkbox"/> Shared (50-50)</p> <p><input type="checkbox"/> Primary (>50%)</p> <p>Reason for Visit: _____</p> <p>Chief Complaint: _____</p> <p>Type of H & P: _____ Problem Focused</p> <p><input type="checkbox"/> Expanded Prob. Focused</p> <p><input type="checkbox"/> Detailed</p> <p><input type="checkbox"/> Comprehensive</p> <p>Social Problems Addressed</p> <p><input type="checkbox"/> Abused Child/Adult</p> <p><input type="checkbox"/> Caretaking/Parenting</p> <p><input type="checkbox"/> Education/Language</p> <p><input type="checkbox"/> Emotional</p> <p><input type="checkbox"/> Grief</p> <p><input type="checkbox"/> Growth & Development</p> <p><input type="checkbox"/> Housing/Residence</p> <p><input type="checkbox"/> Income/Economic</p> <p><input type="checkbox"/> Interpersonal Relationships</p> <p><input type="checkbox"/> Issues w/Comm. Resources</p> <p><input type="checkbox"/> Legal</p> <p><input type="checkbox"/> Neglected Child/Adult</p> <p><input type="checkbox"/> Nutrition/Exercise</p> <p><input type="checkbox"/> Palliative/End of Life Care</p> <p><input type="checkbox"/> Prevention</p> <p><input type="checkbox"/> Role Change</p> <p><input type="checkbox"/> Safety</p> <p><input type="checkbox"/> Sanitation/Hygiene</p> <p><input type="checkbox"/> Sexuality</p> <p><input type="checkbox"/> Social Contact/Isolation</p>	<p>Use ICD codes for pregnancy history & complications. Use CPT codes for labs, anesthesia & mode of delivery.</p> <p>Infant Gender: M / F / O</p> <p>Birth Weight: _____ grams</p> <p>Apgar Scores: 1 min: _____ 5 min: _____</p> <p><input type="checkbox"/> Deep suctioning</p> <p><input type="checkbox"/> Endotracheal suctioning</p> <p><input type="checkbox"/> Bag and mask</p> <p><input type="checkbox"/> Intubation for ventilation</p> <p><input type="checkbox"/> Full CPR</p> <p><input type="checkbox"/> Other: _____</p> <p>Newborn Procedures</p> <p><input type="checkbox"/> Meconium aspiration</p> <p><input type="checkbox"/> Congenital anomalies</p> <p><input type="checkbox"/> Birth trauma/injury</p> <p><input type="checkbox"/> NICU Admit: _____</p> <p><input type="checkbox"/> Clinically apparent seizures</p> <p><input type="checkbox"/> Other: _____</p> <p>Newborn Complications</p> <p>Maternal Problems <24 hrs Postpartum</p> <p><input type="checkbox"/> Hemorrhage</p> <p><input type="checkbox"/> Hypertension (onset postpartum)</p> <p><input type="checkbox"/> Temperature >100.4°F</p> <p><input type="checkbox"/> Hematoma</p> <p><input type="checkbox"/> Other: _____</p> <p># OTC Drugs taken regularly: _____</p> <p># Rx currently prescribed: _____</p> <p># New/Refilled Rx This Visit: _____</p> <p>Analgesic & Antipyretic:</p> <p>Cardiology:</p> <p>Dermatology:</p> <p>Endocrinology:</p> <p>ENT:</p> <p>GI Agents:</p> <p>Gynecology:</p> <p>Hematology/Oncology:</p> <p>Infectious Diseases:</p> <p>Neurology:</p> <p>Ophthalmology:</p> <p>Psychiatric:</p> <p>Pulmonary:</p> <p>Rheumatology:</p> <p>Urology:</p> <p>Vaccines:</p> <p>Wound Management:</p> <p>Miscellaneous:</p> <p>Types of New/Refilled Rx This Visit</p> <p><input type="checkbox"/> Caretaker failure</p> <p><input type="checkbox"/> Complexity/demands of treatment</p> <p><input type="checkbox"/> Denial of need</p> <p><input type="checkbox"/> Disappearance of symptoms</p> <p><input type="checkbox"/> Disbelief in benefits/efficacy</p>
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<input type="checkbox"/> Spiritual Issues <input type="checkbox"/> Substance Abuse <input type="checkbox"/> Other: _____ Procedures/Skills - General skills (Observed/Assisted/Done) Obs Asst Done <input type="checkbox"/> Arthrocentesis <input type="checkbox"/> Biopsy punch <input type="checkbox"/> Biopsy shave <input type="checkbox"/> Breast Exam <input type="checkbox"/> Cardiovascular risk assessment/management <input type="checkbox"/> Casting/splinting <input type="checkbox"/> Cerumen disimpaction <input type="checkbox"/> Cryotherapy #1 _____ #5 _____ #2 _____ #6 _____ #3 _____ #7 _____ #4 _____ #8 _____ #1 _____ #7 _____ #2 _____ #8 _____ #3 _____ #9 _____ #4 _____ #10 _____ #5 _____ #11 _____ #6 _____ #12 _____	<input type="checkbox"/> Fear of addiction <input type="checkbox"/> Financial concerns <input type="checkbox"/> Forgetfulness <input type="checkbox"/> Knowledge deficit <input type="checkbox"/> Physical disability <input type="checkbox"/> Pregnancy <input type="checkbox"/> Psychiatric diagnosis <input type="checkbox"/> Religious reasons <input type="checkbox"/> Other/side effects: _____ Adherence Issues with Medications patient's primary language: _____
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Additionally, under clinical notes the assessment and plan must be documented.

APPENDIX L: UNPROFESSIONAL CONDUCT POLICY

Unprofessional Conduct Policy

1. The goal of this evaluation process is to provide constructive and actionable feedback to students whenever concerns regarding unprofessional conduct are brought forth.
2. A Professionalism Contract is used to identify unprofessional conduct and outlines the feedback provided by the faculty and appropriate actions to be taken by the student to remediate their behavior.
3. The AD of Student Wellness and faculty of record of the associated course (if applicable) will meet with the student to provide support and clearly outline expectations for professionalism.
4. Failure of the student to comply with the actions and plan outlined in the Professionalism Contract may lead to adverse academic actions, including failure of the relevant course and up to dismissal from the program.

Procedure

1. A faculty of record, preceptor, clinical nurse educator (CNE) or program director who is concerned about a student's behavior should provide verbal feedback to the student and make suggestions for improvement. An initial email summary will be sent to the student and Student Affairs for placement in the student's file.
2. If attempts to give the student feedback about concerning behaviors are unsuccessful, the behavior is repeated, or is initially egregious enough (i.e., putting someone's safety at risk, violence, harassment, etc.), the faculty of record, AD of DNP Student Wellness or program director will complete a Professionalism Contract and meet with the student to review the form and provide feedback. A review of the behavior and remediation strategies will be discussed. The Professionalism Contract will be placed in the student's file.

3. Students who violate the Professionalism Contract during the program or who have a single confirmed report of a serious violation of professionalism that the faculty of record and program director have determined has jeopardized someone's safety will be at risk for dismissal from the program.
4. Students who are placed on a Professionalism Contract but do not feel that its issuance was merited can ask for clarification or review, as outlined in the grievance policy in the student handbook.

APPENDIX M: HANDBOOK ACKNOWLEDGMENT AND CONSENT

This document is sent via DocuSign from Student Affairs

UCI Sue & Bill Gross School of Nursing

DNP STUDENT HANDBOOK ACKNOWLEDGMENT AND CONSENT

I, _____ have received my copy of the 2023-2024

(Print Student Name)

DNP Student Handbook

It is my responsibility to read and understand the policies and procedures set forth in this manual. It is a guide to policies and procedures for the School of Nursing.

I understand and acknowledge that the School of Nursing has the right, without prior notice, to modify, amend or terminate policies, practices, forms, and other institutional programs within the limits and requirements imposed by the university and the law.

DNP Project Roadmap

Your signature attests that you have carefully read the entirety of the DNP Project Roadmap which includes a description of the DNP Project and expectations.

Clinical Guidelines Requirements (DNP-FNP students only)

Note that your signature on this “DNP Student Handbook Acknowledgment and Consent” form shall constitute your express written consent to abide by all the clinical requirements which include completing a background check and your agreement to undergo the Physical/Mental Health Clearance described in this handbook and the release of those results to the School of Nursing, for its use as described in this handbook.

Any questions you may have regarding this should be brought forward and answered before you sign this document. Do not sign this document until you have had all your questions answered to your satisfaction and fully understand your obligations.

[Student Signature and Date]

Should you have any technical issues or problems signing or completing this form, please email the School of Nursing Student Affairs Office (gnsao@uci.edu) as soon as possible for assistance.



Student Health/Physical Clearance

Students must have an **annual** health/physical exam completed by a licensed healthcare provider while participating in clinical practicum courses with the UCI Sue & Bill Gross School of Nursing.

History and Physical Clearance

A report, signed by a licensed healthcare provider (physician - MD or DO, physician’s assistant, or nurse practitioner) shall be provided to the nursing program. This report shall indicate that the student does not have any health condition(s) that would create a hazard to themselves, employees, or patients (Title 22).

NOTE: *Nursing students who have a condition (impairment) that could interfere with the performance of their essential duties, should connect with the Disability Services Center to determine what accommodation(s) would be reasonable in a clinical setting.*

Health & Physical Examination Form		
Student Name: _____		
DOB: _____	Current Date: _____	Anticipated Graduation: _____
To be completed by licensed healthcare provider		
<p>I have verified that the individual I have examined is the named individual on this form and find that this individual (please check all that apply):</p> <p>_____ is free of any medical condition and/or contagious disease and does not pose a health risk to others. is free of any mental or physical impairment that would prevent the student from meeting the clinical practicum training obligation.</p> <p>_____ The student has the following (impairment) which could interfere with the performance of the essential duties and needs to be followed up with the University Disability Services to determine what accommodations would be reasonable in the clinical setting.</p> <p>_____ The student has received all required immunizations as outlined by the Centers for Disease Control and Prevention (CDC) guidelines or has provided documentation of immunity. (See Immunization requirements provided for clinical placement)</p>		
<p>I understand that this form is confidential and will be used solely for the purpose of determining the student's eligibility to participate in clinical rotations. I further understand that any information provided on this form will be kept confidential in accordance with applicable laws and regulations.</p> <p>Healthcare Provider Printed Name: _____</p> <p>Healthcare Provider Signature: _____</p> <p>Provider Number: _____</p> <p>Date of Exam: _____</p>		



Health/Physical Exam Requirements

Students must have an annual health/physical exam while participating in clinical practicum courses at UCI Sue & Bill Gross School of Nursing. Students not current with this requirement will result in the student unable to start their clinical rotation.

Essential Duties to Meet Clinical Requirements

To enter into and to complete the clinical practicum courses, students must be able to meet the physical and mental health requirements of the UCI Sue & Bill Gross School of Nursing and the agencies in which students are placed for clinical. Students are to notify SON Clinical Support Unit and work with Student Disability Services to determine what accommodations would be reasonable in a clinical setting to meet these requirements.

Mental Health Requirements

The student must have the sufficient mental and emotional stability to perform under stress produced by both academic study and the necessity of performing nursing care in real patient situations while being observed by the instructors and other health care personnel. The student must be able to adapt to changing environments and stress in a clinical setting while focusing on tasks. The student must be able to cope with emotions from self and others.

Physical Requirements

In order to participate in clinical practicum courses with the UCI Sue & Bill Gross School of Nursing, students are required to travel to hospitals, clinics, and community health sites. Students need to have the endurance to adapt to a physically and emotionally demanding program. The following physical requirements are necessary to participate in the clinical practicum courses in nursing:

1. **Strength:** Sufficient strength to lift, move and transfer most patients; to restrain and carry children; to move and carry equipment; and to perform CPR, which requires sufficient body weight and adequate lung expansion.
2. **Mobility:** Sufficient to bend, stoop, get down on the floor; combination of strength, dexterity, mobility, standing/walking for long periods and coordination to assist patients; ability to move around physically and adequately in confined spaces (patient rooms, bathrooms, treatment settings, around patient equipment, etc.). Be able to perform all physical skills required to deliver patient care such as CPR, ambulation, transport, reposition, lifting, and other nursing duties.
3. **Fine Motor Movements:** Necessary to manipulate syringes and IVs; to assist patients with feeding and hygiene; to write appropriate notations; to document in health record; to perform sterile procedures and other skilled procedures.
4. **Speech:** Ability to speak clearly in order to communicate with staff, physicians, and patients; need to be understood on the telephone.
5. **Vision:** Visualize patients in order to assess and observe their health status; skin tone, color changes, dermatological conditions, non-verbal behaviors, changes in signs and symptoms of illness, health improvement or deterioration, etc.
6. **Hearing:** Hear and see patients, monitor signs and symptoms, hear alarms, patient voices, call lights, and assess patient conditions, non-verbal behaviors, changes in signs and symptoms of illness, health improvement or deterioration, hear through the stethoscope to discriminate sounds, and accurately hear on the telephone.
7. **Touch:** Ability to palpate both superficially and deeply and to discriminate tactile sensations