



**Olivet Nazarene University**

**School of Nursing**

**Accelerated BSN Student Handbook**

**Spring 2024**

**Table of Contents PAGE**

**HANDBOOK AGREEMENT 4**

**PERMISSION PAGE 5**

**VLC SKILLS VIDEOS, RETURN DEMONSTRATIONS: 6**

**PERMISSION AND USE**

**Overview** 7

History of the Nursing Program 7

Accreditation Status 8

**Nursing Program Foundation** **9**

Mission Statement 9

Philosophy 9

Program Goals 9

Program Outcomes 9

Program Outcomes to Level Outcomes 9

Core Values/Definitions 12

**ONU BSN Degree Requirements & Program Plan** **13**

Benchmarks 13

Requirements for ONU BS in Nursing Degree 13

Nursing Program Prerequisites 13

Schedule of Nursing Major Courses (ABSN) 14

**ABSN Admission, Progression, and Retention Policies** **14**

Admission to the Nursing Program (ABSN) 14

Requirements for Admission to the Nursing Major 15

HESI Admission Exam Policy 15

Progression Requirements 15

Math Policy 17

Return to the Nursing Major 17

Appeals/Grievance Procedure 17

School of Nursing Procedure 18

Retention 18

Academic Problem Solving 19

**Academic Integrity and Professional Behavior 19**

Statement of Academic Integrity 19

Ethics/Plagiarism 19

Student Use of Artificial Intelligence (AI) 20

Code of Professional Conduct 20

Professional Behavior 20

Confidentiality 21

Privacy and Confidentiality Under the Health Insurance Portability 22

and Accountability Act of 1995 (HIPAA)

**TABLE OF CONTENTS (cont.) Page**

**Academic Support Services** **22**

Benner Library 22

Tutoring 23

Learning Support Services/Disability Support Services 23

Guidelines for Accommodating Students with Disability 23

**ABSN Academic Information and Policies 23**

Orientation Day Policy 23

Required Books 23

Student Focus Group 23

Grade Scale 24

Math Policy 24

Course Activities 24

Extra Credit 25

Late Work Policy 25

Conduct in Discussion Forums and Other Forms of Communication 25

Discussion Requirements and Rubric 25

Modification of the Syllabus 27

Examination Policy 27

Notification of Exam Grades 29

Exam Make-up Procedure 29

HESI Standardized Exam Policy 29

Use of Computer Lab/Rules for Testing 31

**Clinical/Virtual Learning Center (VLC) Policies and Expectations 31**

Clinical Placement/Assignments 31

Obtaining a Capstone Experience 32

Health Policies/Compliance 32

Vaccination Compliance 32

CPR Certification 32

Criminal Background Check 32

Drug Screening Policy 33

Incident Occurrence 34

Medication Error/Near Miss 34

Health Insurance 34

Liability Insurance 34

Safety Guidelines for Clinical Settings 34

Student Expectations for clinical Settings 35

Unsatisfactory Clinical Day 36

Guidelines for Using Patient Information in the Clinical Setting 36

Evaluation of students in the clinical setting 37

Clinical, Lab, and Simulation Attendance/Absence Policy 37

**TABLE OF CONTENTS (cont.) Page**

Student Uniform 38

Oak Brook Virtual Learning Center (VLC) 40

Virtual Learning Center (VLC) Hours 40

Skills/Skills Validations 40

Skills Video Recording Policy 40

**Graduation Requirements 42**

Requirements for Graduation 42

Fees for State Boards 43

Licensure Requirements 43

Criminal Background Check 44

Program Evaluation 44

Post-Graduation Alumni Survey 44

**Shared Governance and Student Organizations** **44**

Organizations and Activities 44

The Honor Society of Nursing, Sigma Theta Tau International, Kappa Sigma Chapter 44

**Ceremony and Awards** **44**

Honors 44

**Supplemental Information 45**

Transportation and Motor Vehicle 45

Inclement Weather Policy GCS Chicagoland Sites 45

Guidelines for Community Activities 45

Student Financial Accounts 45

Additional Contact Information 46

Family Educational Rights and Privacy Act (FERPA) 46

**Appendices**

Appendix A: ANA Code of Ethics for Nurses 48

Appendix B: Bill of Rights and Responsibilities for Students of Nursing 49

Appendix C: Rating Scale for Clinical Evaluations 51

Appendix D: Program Drug List 52

Appendix E: Skill card 57

**Olivet Nazarene University**

**School of Nursing**

**Handbook Agreement**

I, the undersigned, agree to the use of my course work and/or exam scores for the purpose of evaluation during my academic tenure at Olivet Nazarene University. I understand the information will be aggregated data solely for the purpose of enhancing the overall quality of the nursing program.

I understand I am responsible for monitoring my ONU email, as this is how the Nursing Faculty and Administration will be communicating with me. I also understand that nothing will be acknowledged or accepted by ONU unless it is through the Olivet email. I will only use my Olivet email for all Elsevier resources.

In addition, I have reviewed the *current* *Olivet Nazarene University ABSN Nursing Student Handbook*.  I accept responsibility for knowledge of the handbook contents and the standards and academic policies found herein. This receipt needs to be submitted to the ABSN program director - Oak Brook, Olivet Nazarene University and will be filed with your student records. I give the university permission to release my social security number and birth date to university healthcare partners for clinical placement and Continental Testing Company upon graduation to take the NCLEX.

Print Name         \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature             \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_ (month/day/year) Semester   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please sign below to indicate your permission and use of photography taken at the University.

**PHOTOGRAPHY PERMISSION AND USE**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ grants Olivet Nazarene University permission to use photographs of me in publications produced by the organization, web sites owned by the organization, or public relations activities conducted by the organization for the purpose of promoting Olivet Nazarene University.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

Permission given this\_\_\_\_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_.

**PERMISSION FORM\***

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ give permission to my nursing advisor(s), nursing professors, clinical instructor(s), ABSN program director, and Associate Dean of nursing at ONU, to discuss my:

|  |  |
| --- | --- |
| \_\_\_\_\_ Assignment grades | \_\_\_\_\_ Clinical Performance |
| \_\_\_\_\_ Test grades | \_\_\_\_\_ Standardized Test Scores |
| \_\_\_\_\_ Course grades | \_\_\_\_\_ Other academic measures |
| \_\_\_\_\_ Grade Point Average |  |

Those individuals who may contact members of the ONU School of Nursing Faculty include:

Mother (name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father (name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Guardian (name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spouse (name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other (name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I understand that the individual(s) listed within this release will need to supply my student ID number to receive the information listed above. I also understand that I may revoke this permission by submitting a written request to the ABSN program director.

I understand that no information will be conveyed by email or US Postal Service. I request to be included in any phone conversation or face-to-face discussions regarding my academic status.

\_\_\_\_\_ No \_\_\_\_\_ Yes (I may be reached by phone at: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature Student ID # Date

\* The permission form only needs to be completed once for the program and will remain in effect until revoked by the student.

**VLC SKILLS VIDEOS RETURN DEMONSTRATIONS PERMISSION AND USE**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ give permission to Olivet Nazarene University’s (ONU) School of Nursing professors, clinical instructor(s), ABSN program director, and Associate Dean of nursing programs at ONU, to access the completed videos submitted for grading purposes.

I understand that the return demonstration videos(s) are used for the sole purpose of determining successful completion of the required skills noted on the Skills Competency Sheet by Level. Access to videos will only be available after the student provides the iPads to the assigned instructor or shares the link through submission into the appropriate assignment thread in Canvas, using Kaltura media, and will be accessible to only course faculty. FERPA will be maintained at all times. I also understand that I may revoke this permission by submitting a written request to the ABSN program director. In the case of revoking permissions, I understand that I must schedule live return demonstrations on site with a faculty member as outlined in the course calendars.

I understand that no videos will be shared with others outside of the organization.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Student Signature Student ID # Date

Permission given this \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_.

**History of the Nursing Program**

As early as 1959, the possibility of initiating a baccalaureate nursing program was considered by Olivet Nazarene (then) College administrative members who did not find it feasible to initiate a program at that time. However, recognition of the need for nurses and the discontinuance of St. Mary’s hospital diploma program in Kankakee prompted reconsideration early in 1966. At the May 1966 meeting of the Olivet Board of Trustees, approval was given for the development of a baccalaureate degree program in nursing.

Assistance in planning the program was given by the Department Chair at Northern Illinois University and a nurse coordinator of the Illinois Department of Registration and Education. By September of 1966, the first chair, Faye Riley was employed to develop and lead the newly organized Department of Nursing. The first students to enroll in the nursing program started in the fall of 1967. The Dedication program on October 1968 indicates there were 34 students continuing in the course.

Classes met in various buildings of the campus. The first Department of Nursing office was located in Reed Hall of Science. Also, the lecture hall of Reed was used for classes requiring demonstrations. Rooms of Wellman Hall as well as in a college-owned building on Marseilles Street were used for teaching other classes. Later, the office of the Department of Nursing was located in Burke Hall. A generous gift from Mr. and Mrs. Gerett M. Wisner and a federal grant made it possible to construct a free-standing building dedicated for the nursing program.

Groundbreaking for the Wisner Hall for Nursing Education was in February 1970 and was first used in 1971. Wisner Hall provided four classrooms, a student lounge, a resource center with 24 carrels (each equipped with tape and viewing machines), the Evelyn Witthoff - Geraldine Chappell auditorium (respectively named for a Physician – RN missionary team to India) capable of seating 150 students, office space for 20 faculty members, and a faculty lounge. Originally the Audio-Visual Department of the college occupied a large area in Wisner Hall. That space was made available to the nursing department when the audio-visual equipment was moved to Benner Library in 1976. Other departments and offices have shared the building space through the years as well.

The building remains a beautiful testament to the faithfulness and generosity of the Wisner’s. Wisner has been updated with a Virtual Hospital, high fidelity simulation manikins, 50 computer stations for study, standardized testing, and interactive learning.

The Department of Nursing was designated a Division of Nursing in the spring of 1977 by the college administration. The Division of Nursing received full approval from the National League for Nursing in 1979, lasting through June 2002. The nursing program made application to the Commission for Collegiate Nursing Education (CCNE) and received preliminary approval in 1997, and full approval in 2002. In 1990, the Division of Nursing established a non-traditional track of the program of nursing for registered nurses with an associate degree or a three-year diploma desiring the Bachelor of Science Degree in Nursing (RN-BSN). The first class began in January 1991.

Kappa Sigma Chapter, Sigma Theta Tau, International Nursing Honor Society was established here on May 12, 1984, through the hard work and dedication of the first Chapter President, Sue Davison, and the Executive Board Members, VP-Margaret Frogge, Treasurer-Marvina Eckert, Secretary-Brenda Johnson, and Faculty Advisors-Leann Eaton and Amy Golyshko. The Nursing Students in Action joined the National Student Nurses Association in 2008.

In October 2000, a Master’s in Nursing Program was established to prepare nurses for the advanced practice role; the first cohort of MSN students graduated in May 2003. In May 2005, the MSN program’s Continuous Improvement Progress Report was approved.  In November 2006, the MSN program was reviewed for accreditation by CCNE and accreditation was awarded by AACN. In 2007, an expanded MSN offering was launched to include tracks in Nursing Leadership/Manager, Nursing Education, and Emergency Preparedness-Disaster Response. Due to low enrollment in the Emergency Preparedness-Disaster Response Track, it was dissolved and made way for a new track. In June 2011, the Family Nurse Practitioner, and May 2013 the Post-Graduate APRN Certificate tracks were launched.  Olivet Nazarene University’s nursing programs are fully accredited by the Commission on Collegiate Nursing Education.

With the 2006 restructuring of the University, the Division of Nursing became the Department of Nursing within the School of Professional Studies. However, a new restructuring was announced in May of 2014, and the Department of Nursing became the School of Nursing and Health Sciences, effective July 2014. In July 2015, with a new restructuring the School of Nursing and Health Sciences became a Department of Nursing in the School of Life and Health Sciences.

In October 2012 an accelerated BSN (ABSN) track was started. Coursework is online with on-ground lab and clinical. The first cohort finished in February 2014. The ABSN track is located in Oakbrook. This site provides multiple classrooms, two computer labs, and a fully equipped Virtual Learning Center.

In Summer 2016, a combined BSN-MSN track was created (RN-MSN/FNP). The first cohort started in January 2017. The didactic program is online with practicum hours for each track.

In April 2020, the Post Master’s Nursing Education Certificate track (PMC-E) was approved and began on January 2021. On July1,2020, the Department of Nursing was designated as the School of Nursing under the direction of the Associate Dean, Tiffany Greer, as a part of the College of Professional Studies. In October2020, the Post-Master’s Transformational Leadership (PMC-TL) Certificate track was approved and began in January 2021.



The baccalaureate degree program in nursing at Olivet Nazarene University is accredited by the Commission on Collegiate Nursing Education, ([*http://www.ccneaccreditation.org*](http://www.ccneaccreditation.org)).

**NURSING PROGRAM FOUNDATION**

**Mission**

The mission of the School of Nursing is to provide Christian nursing education designed to prepare each graduate for a life of service to God and humanity. In this endeavor, students integrate faith and learning as they investigate concepts inherent in personal, professional, and spiritual growth through life-long learning and leadership.

**Philosophy**

The philosophy of the Olivet Nazarene University School of Nursing encompasses spiritual, personal, and professional concepts that include the roles of leader, change agent, life-long learner, and service guided by ethical and moral standards.

**Program Goals**

1. Transform students personally, professionally, and spiritually to serve God and humanity.

2. Provide education utilizing interprofessional experiences, didactic and online learning, and

evidence-based research to prepare students to successfully pass the NCLEX exam and become

competent nurses.

3. Foster a stimulating atmosphere that promotes intellectual curiosity to further develop critical thinking

through the exploration of cultural, ethical, moral, professional, and spiritual concepts.

**PROGRAM OUTCOMES**

Graduates are prepared to enter the profession of nursing as contributing members of the discipline, to promote, maintain, and restore the health of clients in a variety of settings. The outcomes of the traditional nursing major are to prepare graduates to:

I. Serve God and humanity in diverse roles and settings with respect and compassion.

II. Integrate Christian faith through ethical nursing practice.

III. Articulate the value of professional development and evidence-based practice while preparing to be a lifelong learner.

IV. Assimilate knowledge, skills, and attitudes from the liberal arts into nursing practice to competently care for diverse populations.

V. Demonstrate the development of leadership skills as a professional, accountable, collaborative change agent within a multifaceted health care environment.

VI. Utilize clinical judgment to prioritize safe nursing care.

VII. Communicate effectively through verbal and written modalities, using current and innovative technologies.

**Program Outcomes (PO) to Level Outcomes**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| PO |  | Level 1 | Level 2 | Level 3 | Level 4 |
| II, VI, VII | A. | Recognize and implement appropriate nursing care, through excellent communication, that protects the client and health care personnel. | Anticipate and demonstrate appropriate nursing care, through excellent communication, that protects the client and health care personnel in diverse populations. | Differentiate and apply appropriate nursing care, through excellent communication, that protects the client and health care personnel in a variety of clinical settings. | Evaluate, intervene, and promote change in appropriate nursing care, through excellent communication, that protects the client and health care personnel in clients with complex needs. |
| I, II, VI, VII | B. | Recognize and implement basic principles of safety and infection control for self and others. | Anticipate and demonstrate safety and infection control practices for self and diverse populations. | Differentiate and apply principles of safety and infection control for self and others in a variety of clinical settings. | Evaluate, intervene, and promote change regarding principles of safety and infection control for self and others with complex needs. |
| I, II, IV, VI, VII | C. | Recognize and implement nursing care that prevents and detects health concerns in order to achieve optimal health. | Anticipate and demonstrate nursing care that prevents and detects health concerns across the life span to achieve optimal health in diverse populations. | Differentiate and apply nursing care that prevents and detects health concerns across the life span to achieve optimal health in a variety of clinical settings. | Evaluate, intervene, and promote change in nursing care that prevents and detects health concerns across the life span to achieve optimal health in clients with complex needs. |
| I, II, V, VI, VII | D. | Recognize and implement holistic care that supports the cultural, emotional, mental, social, and spiritual well-being of clients. | Anticipate and provide holistic care that supports the cultural, emotional, mental, social, and spiritual well-being in diverse populations. | Differentiate and apply holistic care that supports the cultural, emotional, mental, social, and spiritual well-being in a variety of clinical settings. | Evaluate, intervene, and promote change while providing holistic care that supports the cultural, emotional, mental, social, and spiritual well-being of clients with complex needs. |
| I, II, IV, VI | E. | Recognize and implement care and comfort while assisting with performance of Activities of Daily Living (ADLs). | Anticipate and demonstrate care and comfort while assisting with ADLs in diverse populations. | Differentiate and apply principles of care and comfort while assisting with ADLs in a variety of clinical settings. | Evaluate, intervene, and promote change by providing care and comfort while assisting with ADLs in clients with complex needs. |
| I, II, IV, V, VI, VII | F. | Determine appropriateness of, safely administer, and accurately evaluate the client response to medications and parenteral therapies. | Determine appropriateness of, safely administer, and accurately evaluate the client response to medications and parenteral therapies in diverse populations. | Determine appropriateness of, safely administer, and accurately evaluate the client response to medications and parenteral therapies in a variety of clinical settings. | Determine appropriateness of, safely administer, and accurately evaluate the client response to medications and parenteral therapies in clients with complex needs. |
| I, II, IV, V, VI | G. | Recognize and implement ways to reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments, or procedures. | Anticipate and demonstrate ways to reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments, or procedures in diverse populations. | Differentiate and apply ways to reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments, or procedures in a variety of clinical settings. | Evaluate, intervene, and promote change to reduce the likelihood that clients will develop complications or health problems related to existing conditions, treatments, or procedures in clients with complex needs. |
| I, II, IV, V, VI, VII | H. | Recognize and implement ways to manage and provide care for clients with acute or chronic health conditions. | Anticipate and demonstrate ways to manage and provide care for clients with acute, chronic, or life-threatening health conditions in diverse populations. | Differentiate and apply methods to manage and provide care for clients with acute, chronic, or life-threatening health conditions in a variety of clinical settings. | Evaluate, intervene, and promote change to manage and provide care for clients with acute, chronic, or life-threatening health conditions in clients with complex needs. |
| I, II, III, IV, V, VI, VII | I. | Recognize and implement ways to demonstrate core values and the use of evidence-based practice in the care of clients with acute or chronic physical health conditions. | Anticipate and demonstrate ways to integrate core values and the use of evidence-based practice in the care of clients from diverse populations. | Differentiate and apply methods to integrate core values and the use of evidence-based practice in the care of clients with acute or chronic physical health conditions. | Evaluate, intervene, and promote change to integrate core values and the use of evidence-based practice in the care of clients with complex needs. |

**OLIVET NAZARENE UNIVERSITY**

**ABSN CORE VALUES**

|  |  |
| --- | --- |
| **Core Values** | **Definitions** |
| **Collaboration** | A collaborative nurse works together interprofessionally within nursing or across disciplines, fostering open communication, mutual respect, and shared decision-making to define and achieve a common purpose. |
| **Competence** | A competent nurse combines knowledge, skills, attitudes, experience, and appropriate clinical judgment to perform safe care. |
| **Communication** | Exchange of verbal and nonverbal information, ideas, and feelings in an effective, thorough, clear, concise, and timely manner. |
| **Cultural Competence** | Cultural competence encompasses awareness and sensitivity with diverse individuals, which include all types of backgrounds, expectations, and experiences. Cultural awareness and sensitivity identify and addresses unconscious biases through knowledge, skills, and openness to improve health, reduce disparities, and promote health equity. |
| **Ethical Nursing Practice** | The principle of ethics describes what is expected in terms of right and/or wrong behavior. Ethical nursing practice utilizes a personal philosophy grounded in the ethical values of the profession and consistent with the beliefs and values of the Christian faith. However, there is a willingness to consider alternate views on ethical issues and personal values from diverse populations. |
| **Evidence-Based Practice** | Nursing practice integrates current research and practice guidelines which are critically appraised and scientifically proven for the delivery of quality healthcare and improved outcomes. |
| **Facilitating Change** | A change agent identifies and responds to the need for change by using evidence- based practice to motivate, inspire, and promote innovative change within the complex healthcare system. |
| **Leader** | A nurse leader is one who understands the complexities of the healthcare system, including the impact of power, politics, policy, and regulatory guidelines on the system. Leaders, through their vision, creativity, and ability can create change and manage transition moving the profession of nursing forward. |
| **Life-long Learning** | The life-long learner engages in continuous self-reflection, curiosity and evaluation for personal, professional, and spiritual growth. |
| **Professionalism** | Being a professional means, the student demonstrates personal and professional accountability, maintains a professional appearance, is trustworthy, has integrity, takes initiative, and uses problem-solving skills and ethical considerations to guide decisions and actions. A professional treats others with dignity, kindness, respect, and compassion. |
| **Service** | Nurses contribute meaningful time and dedication in service to God and mankind to meet the needs of diverse populations. **​** |

**ONU BSN Degree Requirements & Program Plan**

**ABSN RN - LEARNING OUTCOME EVIDENCE- BENCHMARKS**

|  |  |  |
| --- | --- | --- |
| **COURSE** | **EVIDENCE** | **MATCHED TO PROGRAM OUTCOMES** |
|  |  |  |
| **NUR 207 Fundamentals of Nursing** | **Spirituality Paper**  **Care Plan** | **PO: I, II, VII**  **PO: IV, VI** |
| **NUR 335 Community Health & Population Focused Care** | **Community Project** | **PO: III, V, VII** |
| **NUR 456 Leadership/Trends in Nursing** | **Ethical Dilemma Paper** | **PO: I, II, V, VII** |
| **NUR 449 Adult Health III** | **Second/2nd HESI RN Exit (graded attempt)**  **End of Program (EOP) survey with Learner outcomes**  **Skills list** | **PO: All** |
| **NUR 478 Nursing Capstone** | **Care Plan** | **PO: IV, VI** |

**Requirements for ONU BS in Nursing Degree – Graduate and Continuing Studies**

|  |  |
| --- | --- |
| **General Education Requirements** | **Required Credit Hours** |
| BIB 105 Introduction to Christianity | 3 |
| BIB 215 Understanding the Bible | 3 |
| THEO 310 Understanding the Bible ***OR*** THEO300 Faith and Contemporary Issues | 3 |
| ENG 109 Principles of Academic Writing | 3 |
| ENG 200 APA College Research and Writing II | 3 |
| COM 105 Oral Communication | 3 |
| FIN 101 Fine Arts | 3 |
| HIS 210 Western Civilization | 3 |
| ENG 204 World Literature *or* ENG 301 Thematic Studies in Literature | 3 |
| PSC 223 American Government ***OR*** PSY 204 Industrial & Organizational Psychology | 3 |
| Intercultural Understanding- Met through core curriculum requirements with NUR445 Transcultural Nursing | 3 |

|  |  |
| --- | --- |
| **Nursing Program Prerequisites**  ***Student must maintain 2.75 GPA and no less than a grade of “C” in all prerequisite courses to remain in good standing in the nursing program.*** | **Required Credit Hours** |
| BIO 211 Medical Terminology | 2-3 |
| BIO 246 Anatomy & Physiology I | 4 |
| BIO 247 Anatomy & Physiology II | 4 |
| NUR 330 Pathophysiology for Nursing | 3 |
| BIO 356 Microbiology | 3 |
| CHM 101 Intro to Chemistry | 3 |
| SOC 120 Sociology | 3 |
| FAC 126 Nutrition in Health & Fitness | 3 |
| MTH 120 Intro to Statistics | 3 |
| PSY 200 Lifespan Development | 3 |

**A minimum of 121 credit hours is required** to graduate.

**Schedule for cohorts**

|  |  |  |  |
| --- | --- | --- | --- |
| **Semester** | **Nursing Major Courses** | **Required Credits** | **Length in weeks (may**  **Flex by one week)** |
| 0 | NUR 202 Intro to Professional Nursing (Medical Terminology content incorporated into this course) | 3 | 8 |
| 1st | NUR 206 Health Assessment | 3 | 15 |
| 1st | NUR 207 Fundamentals of Nursing | 5 | 15 |
| 1st | NUR 227 Pharmacology for Nursing | 3 | 15 |
| 1st | NUR 388 Gerontology and Palliative Care | 2 | 15 |
| 1st | NUR 180 Seminar I | 1 | 15 |
| 2nd | NUR 445 Transcultural Family Nursing | 3 | 15 |
| 2nd | NUR 342 Mental Health Nursing I | 4 | 15 |
| 2nd | NUR 349 Adult Health Nursing I | 5 | 15 |
| 2nd | NUR 466 Research | 3 | 15 |
| 2nd | NUR 280 Seminar II | 1 | 15 |
| 3rd | NUR 378 Childbearing Family Health | 4 | 15 |
| 3rd | NUR 415 Child Health Nursing | 4 | 15 |
| 3rd | NUR 439 Adult Health Nursing II | 5 | 15 |
| 3rd | NUR 380 Seminar III | 1 | 15 |
| 4th | NUR 335 Community Health/Population Care | 3 | 15 |
| 4th | NUR 449 Adult Health Nursing III | 3 | 15 |
| 4th | NUR 456 Leadership/Trends in Nursing | 3 | 15 |
| 4th | NUR 478 Synthesis/Capstone in Nursing | 4 | 15 |
| 4th | NUR 480 Seminar IV | 1 | 15 |

**ABSN ADMISSION, PROGRESSION, AND RETENTION POLICIES**

The nursing curriculum builds on a broad liberal arts foundation and is supported by behavioral and life science courses. Nursing students progress from wellness emphasis to life-threatening situations and address individuals, families, and communities as clients. Admission to nursing can be accomplished in either the fall, spring, or summer semester.

**ADMISSION TO THE NURSING PROGRAM (ABSN)**

Students will not be admitted into the nursing program if any of the following courses are taken more than twice at any university: Chemistry, Anatomy and Physiology I and II, Microbiology, Pathophysiology, and Medical Terminology. Students may not retake more than two science courses. To enroll in the nursing program, a student must have a 2.75 grade point average.

Students enrolled in the nursing program may not transfer nursing courses into their transcript. The ABSN Admission, Progression, and Retention Policies regarding the failure of nursing courses apply to nursing courses taken in other nursing programs.

The School of Nursing reserves the right to make exceptions to the ABSN admission requirements in cases where a student from the traditional undergraduate nursing program elects to finish his/her degree through the School of Graduate and Continuing Studies. These exceptions may be made on a case-by-case basis.

**Requirements for Admission to the Nursing Major**

* A cumulative 2.75 GPA prior to admission to NUR 202.
* Successful completion of NUR 202 and all supporting courses through Level 0.
* Successful completion of the HESI A2 exam.
* Successful completion with a grade of C or higher in all nursing and support courses.
* All required academic prerequisites have been completed and official transcripts have been received.
* Physical exam (*within 6 months before the program start date*).
* Current immunizations and a negative QuantiFERON TB gold (*showing immunity within 6 months before the program start date*).
* + Hepatitis B titer (*showing immunity within three years before the program start date*).
* + MMR titer (*showing immunity within three years before the program start date*).
* + Varicella titer (*showing immunity within three years before the program start date*).
* Proof of initial TDaP as an adult then TD booster (On admission).
* Current seasonal influenza immunization.
* Other health requirements per agency request, (including Covid-19 requirements).
* Current American Heart Association CPR for the Healthcare Provider or American Heart Association Basic Life Support CPR certification with **successful hands-on demonstration**.
* Cleared federal criminal background check (Annually).
* Drug Screen negative 10 spot for illegal drugs (via clinical compliance platform).

**HESI Admission Exam POLICY**

Passing the HESI A2 entrance exam is required prior to enrolling in Olivet’s first nursing course, NUR-202: Introduction to Professional Nursing. ONU will offer this exam several times each semester for your convenience.

**The HESI A2 can be taken a total of three times. After the second failed attempt at the HESI A2, we strongly recommend you wait one semester to take it a third time.**Different versions of the test will be used for repeated attempts.

To pass the HESI A2 exam, you must meet or exceed thefollowing scores from all four categories on the same test: **Cumulative (Composite) Score – 75%, Math, – 75%, Anatomy & Physiology – 64%, English Language Composite Score (Reading Comprehension, Grammar, & Vocabulary) – 75%**. If you have taken the HESI A2 at another institution within the last 18 months, please send your results to your transfer advisor and the ABSN Nursing team will determine if your results are transferable. Note: Each HESI exam you take has an expiration date of 18 months. HESI scores older than 18 months, passing or not passing, must be retaken.

**Progression Requirements**

There is an expectation of normal course progression in the nursing program at Olivet. Normal course progression requires passing all nursing courses in each level before progressing to the next level. Prerequisite course requirements are closely adhered to by the nursing program.

**Nursing Course Progression Policy:**

A student is limited to withdrawing (dropping) or failing a total of 2 courses with a NUR prefix, excluding NUR 202 and NUR 330. A student may not enroll in any nursing course more than two times *including* NUR 202 and NUR 330.

Additionally, a student cannot fail more than one clinical/lab course in the core nursing program, *excluding* NUR 202.

In the event of course withdrawal or failure of NUR 206: Health Assessment, the student will re-enroll in the clinical component of NUR 207: Fundamentals of Nursing concurrently with the repetition of Health Assessment to ensure the optimal retention and application of acquired knowledge and skills.

In order to progress to the next level, all students must receive a grade of C or higher in each nursing course and in each of the supporting courses. To enroll in the nursing program, a student must have a 2.75 grade point average (GPA). This GPA of 2.75 must be maintained to progress in the nursing curriculum.

**A visual of this policy in action for Levels 1-4:**

|  |  |  |
| --- | --- | --- |
| **Clinical Course**  **Failure** | **Non-Clinical Course Failure** | **Withdrawal (Excluding Math)** |
| XX |  |  |
| X | X | X |
| X | XX |  |
| X |  | XX |
|  | X | XX |
|  | XX | X |
|  | XXX |  |
|  |  | XXX |

A voluntary withdrawal must be communicated to the ABSN Program Director via email or phone. A withdrawal from an 8-week course must be completed by the end of week 5 and withdrawal from a 16-week course must be completed by the end of week 10. Any withdrawal after seven calendar days of the course start will have the withdrawal policy applied. Once a student has completed seven calendar days of the course, and drops the course, it will count as a withdrawal.

Students who withdraw or fail and need to repeat NUR 478: Nursing Capstone, must repeat all capstone hours and also audit NUR 449: Adult Health Nursing III. If a student fails NUR 449: Adult Health Nursing III, the student will be required to repeat the class and half of their required clinical hours for NUR 478: Nursing capstone.  NUR 449: Adult Health III, although not directly tied to clinical hours, is still considered a clinical course because it is a mandatory co-requisite with NUR 478: Nursing Capstone.

If a student is not compliant with the site’s orientation by the assigned due date, the student will be administratively withdrawn from all level clinical courses in that semester. Two unsatisfactory clinical/lab or simulation days in one course will result in automatic failure of that clinical course and necessitate the repetition of that course in order to progress in the nursing program. The removal of a student per site request will result in immediate failure of the course. Additionally, review of the incident may result in dismissal from the nursing program.

**Level I-III NUR**

Composite GPA 2.75

Courses passed at 77%

Final clinical evaluations satisfactory for all criteria

Exams at an average of 77% for all nursing courses

**Level IV NUR**

Composite GPA 2.75

Courses passed at 77%

Final clinical evaluations satisfactory for all criteria

Second/2nd HESI RN Exit Exam score of 900 or above

Exams at an average of 77% for all nursing courses

HESI Review Course

Research, Transcultural, Leadership, and Gerontology courses do not need a 77% average on exams, but students must pass the course with a 77%.

**Math Policy:**

Students may be administratively withdrawn per the math failure policy prior to the start of clinical. Students are limited to an administrative withdrawal for math failure policy twice in the program. Upon a third math policy failure, the student will be withdrawn from the program without the opportunity to reapply. See the Math Policy below for further information.

**RETURN TO THE NURSING MAJOR**

Students in good standing seeking to return to the nursing program after an absence of more than two semesters must submit a letter to the ABSN program director documenting the reason for desiring a return to the program. The case will be reviewed by the Associate Dean and the ABSN program director. The letter should be received no less than 30 days prior to the start of the targeted semester.

**APPEALS/GRIEVANCE PROCEDURE**

The university has Grade Appeals, Academic Policy Appeals, and Grievance Policies. Full policies can be located in the University Catalog. The following are definitions of each policy:

[**Grade Appeals**](https://catalog.olivet.edu/content.php?catoid=5&navoid=288#Grade_Appeal_-_SGCS)

An appeal of a grade occurs at the conclusion of a course and is based on a student’s belief that their final grade is incorrect. Students may not appeal grades for individual assignments while a course is in progress but should contact the instructor if they believe a grade for any assignment is incorrect.

[**Academic Policy Appeals**](https://catalog.olivet.edu/content.php?catoid=5&navoid=288#academic-policy-appeals)

Students have the right to petition for exceptions to any academic policy. The Academic Standards Committee is chaired by the University Registrar and includes four faculty appointed by the Steering Committee and two students appointed by the Associated Student Council. Most requests for exception are institutional in nature such as requests to overload, requests for substitutions, and similar items. The committee’s responsibility is to balance the academic integrity of the institution with legitimate hardships students face. All requests for exceptions to institutional policy are made in writing at the Office of the Registrar.

In some cases, departments have internal policies unique to their programs. Students may request an exception to those policies through whatever internal process is in place in that department. If those requests are not approved, students may appeal to the Academic Standards Committee. In reviewing such cases it is essential to have faculty from the department involved in making decisions about exceptions; it is also necessary to have faculty from outside the department to ensure consistency across the university and to prevent conflicts of interest.

[**Grievance Policy**](https://catalog.olivet.edu/content.php?catoid=5&navoid=288#Grievance_Procedure_-_SGCS)

Students may file a grievance when they believe their student rights, as outlined in written university policy, were violated or there was a lack of due process as defined by university policy. Students must file their grievance within 30 calendar days of the alleged incident. If the concern is regarding a final grade, the student should follow the grade appeal process. If the student is requesting an exception, they should follow the process for exceptions to departmental policy. If the student is alleging sexual discrimination or harassment, they should file an incident report with the Title IX coordinator.

**School of Nursing Procedure:** Grade appeals and Grievances will follow the university policy from the beginning. Academic policy appeals will start with the School of Nursing through our own informal process:

If a student wishes to appeal a nursing policy, the informal process is the first mechanism for resolution. This process involves documented conferences progressing sequentially between:

1.    The student(s) and involved instructor

2.    The student and a shared meeting with the ABSN program director and the Associate Dean of

Nursing programs

The informal process should be initiated by the student no later than 10 school\* days after the policy was applied to the student. (See the ABSN program director for forms). If a satisfactory conclusion is not attained by the completion of step 2 of the informal process, the student may then initiate the formal process by appealing to the Academic Standards Committee as outlined in the Academic Policy Appeals procedure.

\*School = days when the university is in session and excludes all holidays, weekends, and designated breaks.

**RETENTION**

Students who are struggling in their courses should reach out to their didactic professor for help. If a student is having difficulty in one or more of their courses, (e.g., attendance, exam scores, behavior, missing assignments), a retention alert may be submitted to the Accessibility and Disability Resources (ADR) [ADR@olivet.edu](mailto:ADR@olivet.edu) for documentation. The ABSN program director will be notified for proper advising.

The nursing faculty strives to reasonably support students who are experiencing difficulties. The goal of the School of Nursing is to produce knowledgeable nursing graduates capable of successful completion of the NCLEX-RN and with the ability to function in a variety of settings. Students who are deemed at risk by the nursing faculty may be referred for additional support, though the ultimate responsibility for learning resides with the student.

Faculty tracks students who are not maintaining established standards via the Student Progression Committee. Faculty believe that all students who feel called into nursing should have an opportunity to plan for their success.

**ACADEMIC PROBLEM-SOLVING CHAIN OF COMMAND**

Problems are best resolved at the level on which they occur. If you are having a problem in one of your courses, please contact the course instructor to arrange a meeting with them. The instructor will want to hear your views and concerns and will welcome the opportunity to talk with you. Most academic problems can be resolved at this level. If the problem cannot be resolved with the instructor, then the problem should be taken to the level coordinator. Should the problem remain unresolved after meeting with the level coordinator the student can then contact the ABSN program director.

It is important to follow this chain of command procedure in resolving problems. It is important to respect the organizational structure so that problems can be resolved at the level on which they occur.

**Academic IntegRiTy and Professional Behavior**

[**STATEMENT OF ACADEMIC INTEGRITY (GCS Policy)**](https://catalog.olivet.edu/content.php?catoid=5&navoid=288&hl=%22academic+integrity%22&returnto=search#Academic_Integrity_-_SGCS)

***The University has an exclusive proprietary trademark interest in its name, logos, and branding. The University must ensure the continued viability of its valuable trademark rights and will not permit unauthorized use of its name or logos to dilute these rights. No one may, without prior permission from the Office of Marketing, use the University’s name or logos for commercial purposes, on social media posts, or in any way that might confuse or mislead observers to attribute the use to the University.***

**Please see the University Catalog for the** [[**Statement of Academic Integrity**](https://catalog.olivet.edu/content.php?catoid=8&navoid=472&hl=%22grade%22&returnto=search#academic-integrity)](https://catalog.olivet.edu/content.php?catoid=8&navoid=472&hl=%22grade%22&returnto=search#academic-integrity)

**ETHICS/ PLAGIARISM**

Preparation for a professional career includes responsibility and accountability for one’s work and decisions. Assignments are expected to reflect the effort and thoughts of the individual student, except as indicated by the use of proper documentation. Failure to properly credit the work of another will result in a grade of zero (0) for the assignment. Plagiarism is defined as use of intellectual material produced by another person without acknowledging the source. For example:

* Wholesale copying of passages from works of others into an assignment, paper, posting, or thesis without acknowledgement.
* Using the views, opinions, or insights of another without acknowledgement.
* Paraphrasing another person’s characteristic or original phraseology, metaphor, or other literary device without acknowledgment.
  + A final Turnitin score over 25% is evidence of using too many resources other than your own thoughts and ideas, excluding journal, care plan, or concept map templates, and will result in a (0) zero for the assignment. Students can submit to Turnitin multiple times prior to the final submission to ensure a score of 25% or less is achieved. Note that a score higher than 25% can be a strong indication of plagiarism. However, a lower score does not mean the student doesn’t have any plagiarism within the assignment. The Final Turnitin report will be assessed for plagiarism.
* Using previously submitted work without self-citing.
* The APA title page must be included with all written assignments, excluding journals, care plans, and concept maps. The APA title page is not considered part of the exclusionary templates listed above.

**STUDENT USE OF ARTIFICIAL INTELLIGENCE (AI)**

Learners may use artificial intelligence (AI) tools only to help to generate topics, brainstorm, and create outlines. All submitted work must be the learner’s unique original work; using content generated by others, including AI, is prohibited. The use of generative AI tools to create assignment content is a violation of academic integrity.

**CODE OF PROFESSIONAL CONDUCT**

All students at the university are required to comply with the ONU student handbook. Additionally, students seeking to enter and successfully complete the ONU nursing degree must also comply with the following school of nursing - code of interpersonal professional agreement.

**PROFESSIONAL BEHAVIOR**

Nursing students are expected to exhibit professional behaviors both in the classroom and in the clinical areas. Examples of these behaviors include being respectful when the instructor and/or fellow students are speaking; refraining from initiating discussions that are argumentative and disruptive to the class, and demonstrating accountability for own actions in the classroom and the clinical/lab areas. In turn, the faculty is also expected to design learning opportunities that foster a climate of mutual respect and caring. Each clinical experience is an opportunity for both faculty and students to provide empathetic, sensitive, and compassionate care for individuals, families, groups, and communities.

**PREAMBLE**

Students of nursing have a responsibility to society in learning the academic theory, technical knowledge and clinical skills needed to provide nursing care. The clinical setting presents unique challenges and responsibilities while caring for human beings in a variety of health care environments. Along with this knowledge, students are expected to develop and demonstrate interpersonal skills consistent with the profession for interaction with patients, colleagues, faculty, other health care professionals and the public.

This Code is based on the understanding that, to practice nursing as a student, agreement is made to uphold the trust with which society has placed in the profession and to present ourselves according to those standards. The statements of the Code establish the contract between the nursing student and the School of Nursing whereby students agree to adhere to civility standards of the profession as formally set forth in this Code of Interpersonal Professionalism.

**School of Nursing - Students’ Responsibilities:**

*Failure to comply with the requirements of any of the following items or other policies in the School of Nursing Student Handbook or Olivet Nazarene University Student Handbook may result in a conference with the appropriate Director or their designee to discuss the difficulty. Should the problems warrant immediate action, the Director may recommend the student be dismissed from the School of Nursing program. See Appendix B for the Student Bill of Rights*

**Attentiveness –** The student regularly attends class/clinical/lab/simulation. All extended absences are for relevant and serious reasons and approved, where applicable, by the appropriate authority. The student is consistently on time for class/clinical/lab/simulation and stays until the end. The student is alert and demonstrates attentiveness by taking notes when appropriate and asking appropriate questions.

**Demeanor** – The student has a positive, open attitude towards peers, teachers, and others during the course of nursing studies. The student maintains a professional bearing in interpersonal relations. The student functions in a supportive and constructive fashion in group situations and makes good use of feedback and evaluations.

**Maturity** – The student functions as a responsible, ethical, law-abiding adult.

**Cooperation** – The student demonstrates their ability to work effectively in large and small groups and with other members of the health team, giving and accepting freely in the interchange of information.

**Inquisitiveness** – The student acquires an interest in their courses and curricular subjects, demonstrating individual pursuit of further knowledge.

**Responsibility** – The student has nursing school performance as their primary commitment. Student/student and student/faculty academic interchanges are carried out in a reliable and trustworthy manner. Students are expected to maintain professional behavior which includes no loitering, no use of cell phones, no use of social media, no studying for other courses while in preconference, clinical, or post conference unless asked to perform additional research on a topic.

**Authority** – A student shows appropriate respect for those placed in authority over them both within the University and society.

**Personal Appearance** – The student’s personal hygiene and dress reflect the high standards expected of a professional nurse. Please note compliance of student uniform is an expectation for clinical/lab/simulation.

**Communication –** The student demonstrates an ability to communicate effectively, verbally, nonverbally, and in writing with peers, teachers, patients, and others.

**Professional Role** – The student conducts self as a professional role model at all times and in compliance with Standards of Practice Relative to Registered Nurses (OAC Chapter 4723-4) and the ANA Code of [Ethics for Nurses with Interpretive Statements-](https://nursingworld.org/DocumentVault/Ethics-1/Code-of-Ethics-for-Nurses.html) The student demonstrates the personal, intellectual and motivational qualifications of a professional nurse. See Appendix A.

**Judgment** – The student shows an ability to think critically regarding options, reflecting their ability to make intelligent decisions in his/her personal and academic life.

**Ethics** – The student conducts self in compliance with the ANA Code of Ethics.

**Moral Standards** – The student respects the rights and privacy of other individuals and does not violate the laws of our society.

**The Olivet Nazarene School of Nursing reserves the right to dismiss a student at any time based on actions or behaviors the University may deem inappropriate. Each student, by admission to the ABSN program track in the School of Nursing, recognizes this right of the University.**

The continuance of any student on the roster of the School of Nursing, the receipt of academic credit, graduation, and the granting of a degree rests solely within the powers of the University and School of Nursing.

**Confidentiality**

Confidentiality of patients and information concerning patients is critical. Clinical agencies have guidelines for confidentiality as well as consequences of failure to comply. Students may be sent home from the clinical setting if compliance is not maintained and will not be eligible to return to the clinical setting. This will result in failure for the clinical component and subsequent failure of the course.

**PRIVACY AND CONFIDENTIALITY UNDER THE HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1995 (HIPAA)**

To ensure your written course assignments comply with the 1996, *Health Insurance Portability and Accountability Act*, please never name:

* Your employer
* A patient
* A co-worker

Breaking a HIPAA privacy rule may jeopardize the clinical affiliation agreement between ONU and the health care institution and may result in the student’s removal from the clinical site and/or nursing program. Criminal penalties for wrongful disclosure can include not only large fines but also prison time. The criminal penalties increase as the seriousness of the offense increases. These penalties can be as high as fines of $250,000 or prison sentences of up to 10 years. A modification to HIPAA is the HITECH (Health Information Technology) Act.

To be eligible for American Recovery and Reinvestment Act (2009) funding, healthcare facilities must prove they are HIPAA compliant. The HITECH Act defines and enforces compliance standards, rules, and penalties related to the electronic exchange of the electronic medical or health record (EMR, EHR) programs and Patient Health Information (PHI). In gross summary, HITECH requires:

1. **Enforced HIPAA compliance** —willful neglect may result in up to a fine of $250,000 for a

single violation and repeated violations may be fined up to $1.5 million. Anyone can initiate a complaint regarding non-compliance.

**2. Access to EMR** — all health records must be available as an EMR and/or shared (by

patient permission) as an encrypted PHI (ePHI) record.

1. **Accountability of Business Associates** — health care business associates and providers must

ALL adhere to privacy/security requirements or EVERYONE is culpable (Compliance Compatibility Security Rule).

1. **Notification of Data Breach** — it is mandatory to notify a patient of a data breach of any unsecured information, meaning that it was shared with a business associate using an unencrypted format or without patient permission.

**5. Additional Requirements** — HITECH defines additional requirements to address patient privacy in electronic marketing and accounting practices.

For the latest information regarding HIPAA, go to <https://www.edocscan.com/hitech-act-hipaa-compliance-regulations>.

**ACADEMIC SUPPORT SERVICES**

**BENNER LIBRARY**  Benner Library makes numerous resources available for nursing students. In addition to a full complement of nursing books, Benner provides a substantial number of nursing periodicals, both in print and in electronic format. Nursing students have access to several health-related online article databases*.* Articles not available in full text may be ordered through Benner’s Interlibrary Loan service. The nursing home page can be accessed at <https://library.olivet.edu/subject-guides/nursing/index.php>

Should other library resources be needed, Olivet students can request materials from any other library in CARLI, a consortium of 76 Illinois academic libraries. In addition, ONU nursing students have access to libraries at many of the clinical agencies.

Access Benner Library’s home page at <https://library.olivet.edu> for the most current information about the library’s resources and services, including specific information for off-campus students. For additional assistance, contact the Interlibrary Loan Department at (815) 928-5439 or the Reference Desk at (815) 939-5355, or ill@olivet.edu.

**TUTORING**

Tutoring services are available to all students. Requests for tutoring need to come from the student to the didactic instructor.

**LEARNING SUPPORT SERVICES/DISABILITY SUPPORT SERVICES**

It is the policy of Olivet Nazarene University to accommodate students with disabilities in accordance with federal and state laws. GCS students with documented disabilities should contact the online accommodations support coordinator. Please send inquiries to

**[adr@olivet.edu.](mailto:adr@olivet.edu.)**

**Guidelines for Accommodating Students with Disability**

In accordance with the National Council of State Board of Nursing (NCSBN) the following competencies are necessary for the professional practice of nursing:

1. The ability to see, hear, touch, smell, and distinguish colors.

2. Oral and writing ability with accuracy, clarity, and efficiency.

3. Manual dexterity, gross, and fine movements.

4. Ability to learn, think critically, analyze, assess, solve problems, and reach judgment.

a. Students must be able to establish cause and affect relationships.

b. Students must be able to prioritize data and tasks.

c. Emotional stability and ability to accept responsibility and accountability.

American Association of Colleges of Nursing (AACN, 2001)

If a student or potential student has difficulty in meeting any of the above competencies it is his responsibility to identify himself as needing accommodations. Any requests made for accommodations to meet these competencies must be made in writing to (Accessibility and Disability Resources) ADR@olivet.edu.

**ABSN ACADEMIC INFORMATION AND POLICIES**

**orientation day policy**

All students will be required to attend a mandatory orientation at the beginning of each semester.

**REQUIRED BOOKS AND RESOURCES**

The required books and learning resources for each course will be listed in each course syllabus. The course syllabi will be available prior to the start of the semester.

**STUDENT FOCUS GROUPS**

A student focus group is held every semester. Invited students, along with an elected student representative from each cohort, will meet to share ideas for ensuring the quality and integrity of the nursing program. The focus groups’ discussions will provide an assessment feedback forum for the student input into program improvement. Minutes are taken and action responses are provided when appropriate. The student suggestions may be taken to the faculty as a whole for discussion. The forum is for the purpose of improving the learning community.

**GRADE SCALE *Grades are not rounded***

95 – 100 A

92 – 94.9 A-

89 – 91.9 B+

86 – 88.9 B

83 – 85.9 B-

80 – 82.9 C+

77 – 79.9 **C\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

74 – 76.9 C- **Non-passing scores**

71 – 73.9 D+

68 – 70.9 D

65 – 67.9 D-

< 65 F

**MATH POLICY**

Math is an essential component in the calculation of medication dosages in the clinical setting. Every student will take a math test prior to the beginning of each semester. All non-clinical courses will **not** be held to the math policy. The math test must be passed with 100% proficiency before enrolling in the next levels’ clinical courses. Math remediation will be available for students who are unsuccessful. Further remediation is the student’s responsibility and is strongly encouraged. A total of three (3) opportunities will be permitted before the student is **administratively withdrawn** from all current nursing clinical courses. Math tests must be taken as scheduled. Any missed math test will be scored as a **zero** and counts as one attempt for that semester. Calculators are provided through the SafeMedicate program. Two minutes per question will be the time set for taking of the math exam. Ten additional minutes are allotted for final review of the test prior to submission for a total of 50 minutes. Please also note, as stated within the Admission, Progression, and Retention policies, “*Students will be limited to being [administratively] withdrawn for math policy failure twice in the program.* ***Upon a third math policy failure, the student will be withdrawn from the program without the opportunity to reapply”.***

Please see SafeMedicate for rounding guidelines.

**COURSE ACTIVITIES**

All components of the course, except the discussion board and quizzes, must be completed by 11:59 p.m. on the last course day CST in order to pass the course. Students must receive a satisfactory/complete for non-graded assignments/projects. **Only one submission of assignments is allowed to the Final Submission area and must be turned in by the due date. Resubmission of assignments for regrading is not permitted. All written assignments, including discussion postings, should utilize the 7th edition Publication Manual of the American Psychological Association.**

**Using TURNITIN: After completing the draft of a written assignment with Turnitin, the submission to the Canvas FINAL submission site is considered the FINAL submission of the written assignment and no further revisions will be allowed. This FINAL submission will be the only grade for that assignment.**

Students who are repeating a course must complete all course activities for the course they are repeating and submit new work for all assignments unless otherwise documented by the course professor. Please note: the Pathophysiology HESI, taken in NUR 439, and the Community HESI, taken in NUR 335, can only be taken one time. If a student is repeating either NUR 439 or NUR 335, the grade from the first attempt will be entered into the gradebook.

**EXTRA CREDIT**

No extra credit will be offered.

**LATE WORK POLICY**

Late course or clinical work is highly discouraged; however, in the event you choose to turn in an assignment past the due date and time, 10% per day will be deducted from your assignment grade. After the third day you will receive a zero for your assignment grade. Evolve graded assignments not submitted on time will receive a zero. **All work must be completed by the last course day by 11:59 p.m. CST even if it is too late to receive credit towards the course** – see comments under course activities. Refer to the discussion requirements for the policy on late discussion board postings.

**CONDUCT IN DISCUSSION FORUMS AND OTHER FORMS OF COMMUNICATION**

Discussion forums are vital for effective, online learning. Demeaning comments are not permitted. Inappropriate or derogatory language, ethnic, racial, or gender-based comments, suggestions, or undercurrents are not tolerated. Students are expected to project a scholastic demeanor and to interactively respond to class activities. Students, at all times, are expected to be respectful of their peers, the institution, its facilities, and its personnel. Discussions in the classrooms and online are totally independent of the work environment. Discussion should remain in the correct arena. This is a time of professional, not personal, communication. Plagiarism is something that ONU and the School of Nursing take very seriously. The School of Nursing follows the Policy that is established with Graduate and Continuing Studies.

**DISCUSSION REQUIREMENTS AND RUBRIC** Requirements: You are required to submit your discussion posts for this course as instructed per course syllabus. All posts must follow APA format. Each post needs to have a citation and references to help support what you are discussing. Weekly discussions begin on Monday, Day 1, 12:00 a.m. and end Sunday, Day 7, 11:59 p.m. Initial postings are due by Day 3, 11:59 p.m., all peer response(s) are due by Day 7, 11:59 p.m., unless otherwise stated in the course syllabus. Discussions posted after the week is completed will receive a zero unless a previous arrangement was communicated between the student and didactic professor. See the Discussion Rubric below for requirements.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **OLIVET NAZARENE UNIVERSITY**  **A/BSN PROGRAM (Based on 35 pts)**  **DISCUSSION RUBRIC** | | | | | | |
| **Criteria** | **Ratings** | | | | | |
|  | **Exemplary**  5 points | **Proficient**  4 points | **Sufficient**  3 points | **Developing**  2 points | **Basic**  1 point | **Inadequate**  0 points |
| **Application of Course Knowledge:** *Initial Post* | Addresses all aspects of the initial discussion question(s) with thorough application of experiences, knowledge, and understanding, using relevant examples. | Addresses most aspects of the initial discussion question(s) with clear application of experiences, knowledge, and understanding, using relevant examples. | Addresses some aspects of the initial discussion question(s) applying experiences, knowledge, and understanding, using relevant examples. | Addresses  question(s) demonstrating a minimal understanding, using relevant examples. | Not all questions address and/or main idea/s not supported by experiences, knowledge, and understanding, and/or uses relevant examples. | Does not address the initial question(s). |
| **Integration of Relevant Research:**  *Initial Post* | Thoroughly synthesizes and integrates relevant research. | Synthesizes and integrates relevant research. | Synthesizes or integrates relevant research. | Minimally synthesizes and integrates relevant research. | Poorly synthesizes and integrates relevant research. | Does not synthesize and/or integrate relevant research. |
| **Engagement with Peers & Faculty**: *Feedback Post* | Responses significantly contribute to the quality of interaction by providing rich and relevant examples, synthesis, comments and ideas, applicable research support, discerning ideas, and/or stimulating thoughts/probes to peer postings. | Responses provide evidence that the student has considered peer postings and synthesizes key comments and ideas, as applicable by providing relevant examples, applicable research support, discerning ideas, and/or stimulating thoughts/probes. | Responses add some contribution to the quality of interaction; provide examples, research support, discerning ideas, and/or stimulating thoughts/probes. | Responses  contribute minimally to the quality of interaction. | Responses display no depth. | Does not engage with peers and faculty in discussion. |
| **Written Communication**: *Demonstrates personal growth through written communication by effectively conveying ideas and analyzing information.* | Always conveys ideas and analyzes information in a clear and concise, and organized manner. Respectfully offers suggestions, constructive feedback, or opposing viewpoints. Majority of thoughts and ideas are one’s own. | Consistently conveys ideas and analyzes information in a clear and concise, and organized manner. Respectfully offers suggestions, constructive feedback, or opposing viewpoints. Most thoughts and ideas are one’s own. | Adequately conveys ideas and analyzes information using understandable language; information is not organized.  Respectfully offers suggestions, constructive feedback, or opposing viewpoints. Some thoughts and ideas are one’s own. | Minimally  conveys ideas and analyzes information using understandable language; information is not organized.  Respectfully offers suggestions, constructive feedback, or opposing viewpoints. Few thoughts and ideas are one’s own. | Conveys ideas and/or analyzes information using language that is not clear, logical, or organized to the point that the reader has difficulty understanding.  Respectfully offers suggestions, constructive feedback, or opposing viewpoints. Thoughts and ideas express are rarely one’s own. | Poorly demonstrates written communication; Does not express one’s own thoughts and/or ideas and/or is unprofessional in one’s communication. |
| **Written Communication:** *Demonstrates personal growth through effective written communication through proper use of mechanics and proper use of APA.* | 0 to 2 error in APA, sentence structure, grammar, spelling, syntax, and/or punctuation noted in written communication. A repeated error is equal to one error. | 3-4 errors noted in APA, sentence structure, grammar, spelling, syntax, and/or punctuation. A repeated error is equal to one error. | 5-6 errors noted in APA, sentence structure, grammar, spelling, syntax, and/or punctuation. A repeated error is equal to one error. |  | 9 or more errors noted in APA, sentence structure, grammar, spelling, syntax, and/or punctuation. A repeated error is equal to one error. | Poorly demonstrates APA, writing skills in sentence structure, grammar, spelling, syntax, and/or punctuation. A repeated error is equal to one error. |
| **Participation & Instructions:** *Initial Post* | Initial post response consists of a minimum of 175 –words, including a minimum of two cited references; one from a course textbook and one other scholarly nursing reference and submitted on or before Day 3 by 11:59 p.m. | Not applicable | Meets either reference requirements or 175-word count but not both. | **Submitted Late** (Day 4-7), but meets reference requirements and 175-word count. | Not applicable | Submitted late (Day 4-7) but does not meet the 175 minimum word requirement; and does not utilize required references. |
| **Participation & Instructions:** *Feedback Posts* | Provides feedback to at least two peer initial posts with a minimum of 75 words, including at least one scholarly nursing reference per reply and submitted on or before Day 7 by 11:59 p.m. Posts on a different day from initial post AND replies to any or all faculty questions. | Not applicable | Meets 75-word count to **one** peer initial post **OR** Responded to peer post(s) without references | Not applicable | Not applicable | Submitted late (after Day 7) or posts do not meet the post requirements: 75-word minimum , two peer posts, evidence of scholarly integration. |

**MODIFICATION OF THE SYLLABUS**

The course syllabus is tentative. The instructor reserves the right to modify the syllabus based on unforeseen circumstances. If it becomes necessary to modify the syllabus the faculty will provide notification as quickly as possible.

**EXAMINATION POLICY**

Examinations in all nursing courses must be passed with a cumulative total of 77% to pass the course (this mandated average does not apply to Gerontology, Transcultural Nursing, Nursing Research, and Leadership in Nursing). Students that achieve less than a 77% cumulative test grade must contact the instructor for assistance. If a student does not meet the 77% exam average, the final grade entered for the course will be the student’s exam average grade, not the overall course grade.

Students must notify their didactic instructor prior to any absence. Excused absence may include death of immediate family member, documented illness, sanctioned university events, or extenuating circumstances. Students may be asked to provide proof for reason of absence. Request for an excused absence MUST occur by voice mail or Olivet email directly to the course instructor before the start of the exam. It is the professor’s decision whether to grant an excused absence or not. A student who fails to attend a scheduled examination/quiz without ***prior*** notification will receive a grade of zero for the examination/quiz.

Remember that exams are an individual effort. There should not be discussion about questions during or after the exam. Other students may have an alternate exam time. Discussing exam items can jeopardize exam integrity when discussed with students who have not taken the exam.

All examinations are closed book and closed notes unless otherwise specified by instructor. Examination dates and times are provided by the level coordinator. Examination time limits will be announced and enforced. Students should allow adequate time for completion of the exam.

Each student must be seated in the designated testing room **10 minutes prior to the scheduled testing time** for attendance and must not leave until the student is finished with the exam. The testing room **door will be** **closed five minutes prior to the exam start time and not open until the exam is completed.** Students may be required to present a valid photo ID to take and submit the exam. Any student arriving after the door is closed will not be allowed to take the exam and will receive a zero for a grade on the exam unless documentation of extenuating circumstances is provided and approved by the didactic instructor. If approved, the student will be scheduled for a make-up exam. Excessive occurrences will be documented, and the student may receive a written performance plan.

All personal belongings (backpacks, book bags, **all** types of watches, Google glasses, coats/jackets/sweaters, cell phones, etc.) must be stored in a designated area away from the testing area without exception.

Before, during, or after exam administration, students are strictly prohibited from using lab computers for any purpose other than the completion and submission of an exam and may not open any additional screens including email or any search engines. Students may not cut and paste or retype exam questions into an email, word document or any other format during and immediately following submission of an exam.

Bringing in ear plugs to the exam would be beneficial if noise disturbs your concentration. Any computer difficulties while taking an exam should be reported immediately to the proctor. Whiteboards are optional. If used, the whiteboards must be clear until the start of the exam and clear after submission of the exam. Student desks must be clear of all materials except dry erase markers, whiteboards, and University provided calculators. Calculators will not be shared. No restroom breaks during testing unless you have medical documentation from a healthcare provider. Students should plan to use the restroom prior to exam. There will be no talking among students during the exam.

All answers on the answer sheet or saved in ExamSoft are the final answers. Once the student has completed their last exam question, the student will raise their hand so that the proctor can watch the student submit their exam for all computerized exams or collect the paper exam.

Students should not be loitering in front of the computer lab after completing the exam.

**Consequences for Breach of Exam Rules:** If a proctor observes a violation of the exam rules as listed above, the exam will be turned off, the score for the exam will be zero, the student will be requested to leave the exam room, and the ABSN program director will be notified.

**NOTIFICATION OF EXAM GRADES**

When you take an exam in any nursing course the grades will be posted in a timely manner after an analysis of the exam has been completed. Grades will not be emailed, provided via phone, or posted on any faculty door to ensure confidentiality.

An item analysis of each exam will be completed by the didactic instructor within 48 hours (excluding holidays, weekends, and breaks). Missed exam concepts will be provided if requested by the student within one week after the exam. If the student would like to inspect and review items missed on their exam, an exam review form must be completed. No notes can be taken during reviews; however, the professor can send notes to the student afterwards if requested by the student. Professional behavior is expected during the review. All personal belongings (backpacks, book bags, watches, Google glasses, coats/jackets, sweaters, cell phones, etc.) must be stored in a designated area away from the review without exception. Students may not take pictures or screen shots during the review. If a review is completed online/phone, only concepts will be discussed.Recording during the review is prohibited.

**EXAM MAKE-UP PROCEDURE**

Make-up examinations will be given near or during mid-term and final exam week. The format for the make-up examination will differ from the original examination (may be short answer or essay). If the exam is not made up, a score of zero will be recorded for the examination. In order to be allowed to make up a missed exam, proof of the reason for the absence must be submitted to the course instructor upon return to class.  **All requests for make-up dates must come from the instructor.**

In the event of an emergency where the student is unable to attend a scheduled exam:

1. The student notifies the instructor prior to the exam time.
2. If the make-up exam is approved by the instructor, the instructor will notify the student of the makeup date and time. Exams scheduled before mid-term week will be rescheduled for mid-term week. Exams scheduled after mid-terms will be rescheduled for finals week. Any exam missed during finals week will require acceptable documentation to be submitted to the ABSN program director. No more than two exams per a semester will be allowed unless appropriate documentation is approved by the ABSN program director.

**HESI STANDARDIZED EXAM POLICY**

* Faculty will administer HESI exams throughout the nursing program. The HESI exams will be recorded as an assignment, a unit exam, or a final exam grade depending on the course. All HESI exams given as a unit exam or final exam are included in the 77% exam policy and will be worth no more than 10% of the course grade. The conversion score will be the final grade. The individual conversion score can be found on the HESI student report.
* For courses with a HESI exam, students will complete the exam to determine their level of content mastery.
* All students are encouraged to review missed content regardless of the score obtained.
* The table below depicts the courses which have a related HESI exam and required remediation; however, the related HESI exam may be given at later date.
* The Second/2nd HESI RN Exit and HESI RN-NCLEX Review Course are mandatory for any students graduating. These requirements prepare students for the NCLEX exam. For any students who will be returning the following semester the HESI RN-NCLEX Review Course is optional (providing seating is available).

|  |  |
| --- | --- |
| **Nursing Program Level and Courses in Which the HESI’s are Given.** | |
| **Nursing Level 0** | **Nursing Level I** |
| NUR 202 Introduction to Professional Nursing   * Pre-Req: HESI A2 with critical thinking     NUR 330 Pathophysiology for Nursing (transferring students who did not take this course at Olivet will be required to take the pathophysiology HESI at the end of NUR 202). | NUR 206 Health Assessment   * Health Assessment   NUR 207 Fundamentals of Nursing   * Fundamentals * Pathophysiology   **Used throughout program:**   * Online HESI review * Drug Calculations Online |
| **Nursing Level II** | **Nursing Level III** |
| NUR 342 Mental Health Nursing:   * Psychiatric/ Mental Health | NUR 378 Childbearing Family Health:   * Maternity Nursing   NUR 415 Child Health Nursing   * Pediatric   NUR 439 Adult Health II   * Pathophysiology |
| **Nursing Level IV** |  |
| NUR 335 Community Health/Population Care   * Community Health   NUR 456 Leadership Trends in Nursing   * Management * HESI CAT (taken in Level IV only)   NUR 449 Adult Health Nursing III:   * Pharmacology * Medical-Surgical * Second/2nd HESI RN Exit (taken only if graduating) * HESI RN-NCLEX Review Course |  |

**USE of COMPUTER LABS/RULES FOR TESTING**

* + - * The computer lab is available for student use during published office hours except for reserved times for exam administration, lecture, workshop or student orientation and open house. Students may not access the lab to use computers or to print or make photocopies during reserved times.
      * Food or drinks are prohibited in the computer lab.
      * Students may not install or download software to any University computers.
      * Students may not alter or disable any hardware from any University computers.

**CLINICAL/VIRTUAL LEARNING CENTER (VLC) POLICIES AND EXPECTATIONS**

The school of nursing provides hands-on learning opportunities and in certain classes the student will be assessed by another student or play a role in active learning. The clinical experience allows the students to practice and grow in the professional setting. The faculty recognizes the challenges students may encounter while meeting the time commitment required of such personal investment; however, there is little flexibility in addressing the needs of students who are unable to meet the required clinical hours. Students are expected to attend all clinical, laboratory, and simulation sessions, be in uniform, be on time, be prepared, and to actively participate.

The following policies apply:

* Professional appearance and equipment is required as defined in the Student Uniform Policy. Failure to meet this requirement will result in an unsatisfactory day. Students could be sent home when not in compliance, at which time, an alternate assignment will be assigned by the didactic instructor.
* Personal cell phones/electronic communication devices are to be turned off and stored during clinical/lab/simulation and are not to be kept on unless authorized.
* No invasive procedures should be performed on peers or faculty.

**Clinical Placement/Assignments/GUIDELINES INFORMATION**

Students are assigned to clinical groups. Such assignments are based on maximum learning opportunities, available section and sites, size, and facility constraints. Students may not get the clinical placement they desire. Other constraints include clinical agencies that change service areas available to students. Students should be prepared to go to a different clinical agency during different hours than they originally requested or planned.

Multiple clinical facilities are used for application of the nursing process across the spectrum of healthcare agencies, settings, and populations. Clinical placements and assignments are determined by the ABSN program director and faculty and may take place between 6:00 a.m. and 11:00 p.m. seven days a week. Night clinicals are a possibility. Capstone clinicals follow the schedule of assigned preceptors and may vary. Clinical placements, (days, times, locations) are subject to change based on the availability of clinical sites and clinical instructors. If there is a shortage of anticipated patients on an assigned clinical unit, alternative clinical placements, observations, and/or activities on site will be scheduled based upon facility policy. If a facility cancels the clinical day the hours will be completed in the VLC at Oak Brook or Bourbonnais site, whichever is closest and available. These hours may need to be completed on a different day.

An observation experience is considered a clinical day. Students receiving a rating of 1 in any category on their observation performance form or a notification from the facility regarding unsatisfactory performance will result in the student receiving an unsatisfactory clinical day.

**OBTAINING A CAPSTONE EXPERIENCE**

Students contacting sites/potential preceptors is strictly prohibited. Capstone assignments are made by the clinical coordinator or designees.

Capstone assignments are not allowed on the unit where a student works. Failure to follow this policy will result in the loss of the opportunity to choose your capstone site.

**HEALTH POLICIES/COMPLIANCE**

If a student has not met all health compliance requirements by the **assigned** **date**, the student will not be allowed to enroll in the next level’s courses. Students enrolled in the ABSN track must maintain these requirements throughout the program even when taking nonclinical courses.

Summary of required Health Compliance items:

* + Physical exam (*within 6 months before the program start date*)
  + Current immunizations and a negative QuantiFERON TB gold (*showing immunity within 6 months before the program start date*) and QuantiFERON TB gold or askin test annually thereafter.
  + + Hepatitis B titer (*showing immunity within three years before the program start date*)
  + + MMR titer (*showing immunity within three years before the program start date*)
  + + Varicella titer (*showing immunity within three years before the program start date*)
  + Proof of initial TDaP as an adult then TD booster (On admission) (current (within 10 years) before the program start date)
  + Current seasonal influenza immunization (Annually)
  + Other health requirements per agency request, including COVID-19 requirements.
  + Current American Heart Association CPR for the Healthcare Provider or American Heart Association Basic Life Support CPR certification
  + Cleared federal criminal background check (Annually) (via clinical compliance documentation platform only)
  + Drug Screen negative 10 spot for illegal drugs (Annually) (via clinical compliance documentation platform astlebranch.com only)

**VACCINATION COMPLIANCE**

Documented exceptions for refusal of vaccines are allowed only for medical reasons and religious objections. If a student seeks an exemption from vaccination requirements on religious grounds, the student must present a signed statement that he or she objects to immunizations on religious grounds. If a student is unable to receive any vaccination for medical reasons or obtains a religious exemption for any vaccination, the student may be denied access to clinical facilities at which required clinical experiences must be completed and therefore may not be able to complete their program of study. The University urges all prospective and current students to consider this carefully when deciding to apply or enroll in the program.

**CPR CERTIFICATION**

All students are required to have current CPR through the American Heart Association only. The course must be BLS for the Healthcare Provideror Basic Life Support and be good for two years.

The CPR certification cannot expire during the academic year**.** Students are required to pay the cost associated with CPR certification and recertification as needed **including successful completion of the** **hands-on demonstration**. Students are required to provide an updated copy of certification.

**Criminal Background Check**

All students are required to obtain a criminal background check. A ***cleared*** background check **must be completed by the assigned date prior to the start of classes for Level 0 students only and then annually** by the **assigned** **date.** Students should go to the clinical documentation platform internet site and complete the application to begin the criminal background check: All completed forms are to be submitted through this site.

**Drug Screening Policy**

In compliance with both federal and Illinois law, the use, possession, and distribution of alcohol or illegal drugs, including marijuana which remains illegal under federal law, or the misuse of prescription drugs, on Olivet’s campus (or other Olivet property) or as any part of its activities, including in the classroom, Clinical, Capstone, or laboratory setting, is strictly prohibited.

Nursing students must have a cleared drug screen on file in the clinical compliance documentation platform website by the assigned date **for Level 0 students and then annually** by the **assigned** **date**; this drug screen includes a screen for marijuana (THC). This mandatory drug testing must be performed by the designated drug testing representatives. Drug testing is done at the student’s expense. If the drug screen is positive, the student will be immediately withdrawn from all courses and must follow the readmission process. Drug testing is done at the student’s expense. If the drug screen is positive, the student will be immediately withdrawn from all courses and must follow the readmission process.

**Readmission following a positive drug screening -** Positive drug screen results prohibit students from practicing in the clinical environment for six months from the drug screen date, thus you are hereby dis-enrolled from your nursing courses.

In six months, you may reapply by submitting a letter requesting consideration for readmission into the nursing program to the ABSN program director, pending approval by the Associate Dean of nursing programs. Readmission into the program will be effective at the start of the next semester. Your request will be forwarded to the Chair of the Admission, Progression, and Retention Committee for consideration. Your readmission application will require you to submit:

1. Urine drug screening results to the ABSN program director.
2. Documentation from a therapist specializing in addiction behaviors indicating a status of recovery and rehabilitation related to the substance used or abused.
3. If readmitted, the student will be subjected to random drug screening and/or to “for cause” drug screening at the student’s expense for the duration of their studies in the nursing program.
4. If the student has positive results on a drug screening after readmission to the nursing program, the student will be dismissed from the nursing program with no option for readmission to the program.

**“For Cause” Drug Screening**

1. If faculty observes a student behaving in a manner that is consistent with the use or misuse of alcohol, illegal drugs, or drugs which impair judgment, affecting either the classroom, clinical or laboratory setting, the student will be removed from the educational setting and required to submit to an appropriate screening immediately.
2. If the behavior is noted in the clinical setting, the student will be removed from patient care. The student will have to submit to the agencies’ and/or department’s drug screening and results will be shared with the ABSN program director and the Associate Dean of nursing programs.
3. If the behavior is noted on campus in either the classroom or laboratory setting the university’s campus policy will be followed.
4. If the result of the drug screening is negative, the student shall meet with the ABSN program director to discuss the circumstances surrounding the impaired behavior. Based on the information provided and further medical evaluation if warranted, the ABSN program director will make a decision regarding return to the clinical, classroom and laboratory setting.
5. If the drug screen is positive, the ABSN program director will withdraw the student from all nursing courses. The student will pay the costs associated with the “for cause” drug screening.
6. A student’s failure to comply with any aspect of the “For Cause” Drug Screening Requirement will result in the student’s administrative withdrawal from the Nursing Program without option for readmission.

**INCIDENT OCCURRENCE**

This policy is in accordance with the seriousness involved when responsible for patient care and preparing/administering medications.

* The Clinical Incident Report Form should be completed when any unusual occurrence takes place where there is actual or potential harm to a patient, a student, or an instructor. The form will be sent to the ABSN program director - for placement in the student’s file. An incident report form may be obtained from the ABSN program director.
* In addition to Clinical Incident Report Form, the facility incident report should be filled out and the charge nurse notified.

**medication error/NEAR MISS**

An actual medication error will be considered an incident. A medication error is defined as an error in one of the *right*s of medication administration that reaches the patient. The student will work with the clinical professor to complete the required paperwork. At the discretion of the professor, the student will be required to remediate as assigned. For a medication error the student will receive an unsatisfactory clinical day and may be sent home for the day. Actual or potential life-threatening errors or safety violations may result in dismissal from the program. A meeting will occur between the clinical professor, level coordinator, and student(s) involved in any medication error or near miss. Documentation will be placed in the student’s file.

The student will be required to complete a 3-5-page APA-formatted paper describing the error or near miss, the process for documentation of the error, and the evidence-based process for safe medication administration. The paper must also include the medication, action, interactions, routes, adverse effects, and therapeutic effects of the medication. Lastly, the student should self-reflect on the error in a holistic manner.

**HEALTH INSURANCE**

Students are required to maintain their own health insurance.

**LIABILITY INSURANCE** The responsibility for the student is assumed by the University for all full-time students.

**SAFETY GUIDELINES FOR CLINICAL SETTINGS**

* If you perceive that you are in an unsafe environment, leave that environment as soon as possible and seek safety.
* Report any unusual occurrences to your instructor immediately.
* Park in the institution’s parking facility and in well-lighted areas.
* Before entering an elevator or stairwell, evaluate the area. Do not enter if you feel it is unsafe.
* Carry phone numbers with you; instructor’s contact number and the ABSN department of nursing number.

**STUDENT EXPECTATIONS IN THE CLINICAL SETTING**

1. All nursing students are able to perform medication administration according to their clinical course level after successful skills validation in the Virtual Learning Center (VLC). Please see updated skills card in Appendix E. **RNs/Clinical Instructors: Please quiz your students on the medications before they pass them to ensure competency.** 
   * Facilities with a medication dispersing machine: the RN and/or clinical instructor is responsible for pulling the medications from the Medication machine since the student will not have a code to get in. **Students are not allowed to remove medications from any locked device, such as the medication machine, drawers, or cabinets.**
   * Facilities with medication scanners: the RN and/or clinical instructor (per facility policy) is responsible for scanning and charting the medication(s). **The RN and/or clinical faculty must always oversee and assist with drawing up IM, SC, or IVP drugs; they must be with student while administering all medications, hanging new IV bags, and converting IV sites to saline flushes.**
     + Exception: (Depending on facility student medication administration policy) students may or may not be allowed to use a scanner to administer and document medications with the instructor.
2. The nursing student **is allowed** to perform procedures **with supervision** only if the skill has been demonstrated successfully in the Virtual Learning Center in accordance with level requirement (refer to the[ONU ABSN SKILLS COMPETENCY SHEET BY LEVEL](http://library.olivet.edu/subject-guides/nursing/index.php))
   * Each Olivet student has a skills card.
   * The skills are signed off in the VLC each semester by Olivet faculty.
   * Only skills signed off in the VLC column can be completed by the student in the clinical setting and still must be completed with direct supervision.
   * Although a skill may be permissible per the skills card, please exercise extreme caution when assisting students with any invasive procedures or IV medication administration as patient safety is of utmost importance.
   * As the student performs these skills please sign and initial their skills competency cards. (*This is a benchmark that the students must have 80% completed upon completion of our program*.) They are not allowed to do any of these skills by themselves; only when there is an RN present in the room unless the skill has been signed off in the IND (individually) column. Skills that may never be done individually have an X in that column on the skills card.
3. The nursing student is **not allowed** to do any of the following:
   * Hang blood/products (they are allowed to monitor/maintain transfusion with RN).
   * Take physician orders (transcribe, repeat, or enter physician orders).
   * Witness Informed consents or DNR orders of any kind.
   * Enter negative pressure rooms for any reason. (Students from Olivet have not been fit tested and are prohibited from entering negative pressure rooms for any reason; even if they have been fit tested at their place of employment).
   * Students need to follow hospital/clinical site guidelines for the care of COVID-19 patients.
   * Administer vasoactive medications unless under direct supervision in Capstone.
   * Administer chemotherapeutic medications.
   * Any other actions/procedures not allowed per facility policies.
4. On the nursing units, the nursing students are to assist:
   * Capstone students:
     + Assist their RN preceptor with care of all assigned patients.
       - Utilizes the nursing process for providing safe care (e.g. assessments, interventions, evaluation, medications, documentation).
   * All Levels:
     + Students are responsible for obtaining report, performing assessments, passing medications, and charting.
       - Students **MUST** be quizzed and know their medications prior to administration.
       - Charting must be reviewed by clinical instructor.
     + Students are to answer call lights for all patients not just their assigned patient but must immediately report the needs of the patient to the primary nurse.
   * **No** students **should be sitting down** at the nurses’ station unless they are documenting or collaborating with the clinical staff.
5. If any of these expectations are not in-line with the facility, then the facility policies and procedures will overrule any of the above expectations.
6. Food and beverages are never allowed at the nurses’ station or in any patient care location. Eating and drinking is only to be done in designated locations.

**GUIDELINES FOR USING PATIENT INFORMATION IN THE CLINICAL SETTING**

In compliance with HIPPA regulations no Electronic Medical Records (EMR) may be removed from the clinical setting. Records may be generated by the clinical instructor for use by students in the clinical setting only and must be placed in the appropriate receptacle for shredding before leaving the premises. Use only the patient’s initials on the clinical papers.

**Olivet Nazarene University**

**School of Nursing**

**Unsatisfactory Clinical Day**

It is impossible for every behavior that is unsatisfactory in the clinical setting to be listed in the handbook. Students must use critical thinking skills and the knowledge they have gained from instruction to guide their behavior. Two unsatisfactory clinical/lab or simulation days in one course will result in automatic failure of that clinical course and necessitate the repetition of that course in order to progress in the nursing program.

Students will be scheduled for *clinical/lab/simulation* in each of the following nursing courses:

NUR 206 Health Assessment

NUR 207 Fundamentals of Nursing

NUR 342 Mental Health Nursing

NUR 378 Childbearing Family Nursing

NUR 349 Adult Health Nursing I

NUR 415 Child Health Nursing

NUR 439 Adult Health Nursing II

NUR 449 Adult Health Nursing III

NUR 335 Community Health/Population Care

NUR 478 Nursing Capstone

**EVALUATION OF STUDENTS IN THE CLINICAL SETTING**

A satisfactory clinical experience is required to pass the above courses. Frequent formative evaluations will be given, and a summative evaluation is given at the end. Evaluation of student behavior in clinical is a unique situation based on patient needs, safety issues, standards of practice, and the practice area. Therefore, each situation will be evaluated uniquely by the clinical professor and will result in an individualized clinical evaluation. A situation may be deemed unsatisfactory in a category, unsatisfactory for the day, or even serious enough to warrant failure of the course. Safety issues could warrant failure of the course. If the student is unprepared for clinical, he/she will be sent home and receive an unsatisfactory for the day. Any unsatisfactory day necessitates a mandatory conference between the student, clinical professor, and level coordinator and should occur prior to the next clinical day for that course.

Two unsatisfactory ratings in any one category row on the Daily Clinical Evaluation tool results in an unsatisfactory clinical day. Two unsatisfactory ratings in different categories (same column on evaluation tool) on one day also would result in an unsatisfactory clinical day.

If a student receives a “Needs Improvement” in a category row on the daily clinical evaluation tool and the instructor determines the student has not improved in that category on a subsequent day, the student will receive an unsatisfactory rating in that category for that day. NOTE: If there is already another unsatisfactory rating in a category for that day, the student will receive an unsatisfactory clinical day as outlined above.

Two unsatisfactory clinical days will result in automatic failure of that clinical course and necessitate the repetition of that course in order to progress in the nursing program.

**See Appendix C for Rating Scale**

**Clinical, lab, AND Simulation ATTENDANCE/Absence Policy**

The following policies apply:

* The student is required to complete all clinical hours. Simulations/lab days are considered clinical hours, and therefore fall under all policies that apply to clinical. Two unsatisfactory clinical/lab or simulation days in one course will result in automatic failure of that clinical course and necessitate the repetition of that course in order to progress in the nursing program.
* Students are required to attend their weekly assigned lab day in its entirety if enrolled in a clinical course.
* Punctual attendance at all clinicals, lab, and simulations, is mandatory. Students arriving late or leaving early for any reason, unless for extenuating circumstances, need approval from the instructor.
* Tardiness is defined as five (5) minutes late. If a tardy occurs, for lab or simulation, the student must meet with the course/clinical faculty for counseling of professional behaviors; documentation of the tardiness will be placed in the student’s permanent file. If tardy in clinical, students will receive an unsatisfactory rating under professional behavior. If more than five minutes tardy for clinical, under the discretion of the clinical instructor, the student may be sent home from clinical.
* Students must notify the clinical area and their clinical and didactic instructor prior to any absence. Excused absences may include death of immediate family member, documented illness, or sanctioned university events. Students may be required to provide proof for reason of absence within one week of the absence. An unexcused absence will result in an unsatisfactory clinical day.

If a student is sent home or sent for medical evaluation from clinical, the student may not return to clinical/lab/simulation for that day.

Students may not attend clinical with any restrictions or limitations except for approved accommodations from Learning Support Services. Any student returning to clinical after illness, injury, surgical procedures, etc. must submit authentic documentation stating they are medically cleared without restrictions to participate in complete patient care, subject to further review based on individual facility disability policies and procedures.

Clinical, lab, or simulation missed due to administrative closure and/or inclement weather is made up at the discretion of the faculty and/or the ABSN program director.

* If a clinical day/lab/simulation is missed, the time must be made up as assigned and additional course work will be given. For example, a research paper on a topic assigned by the level coordinator or a full care plan on the patient scenario of the day would be possible assignments required. The student must contact the level coordinator and arrange a time for the lab session. The clinical and laboratory hours must be made up within the term that the course is being offered unless arrangements are made and approved by the level coordinator.
* Make up clinicals will be made up hour per hour. Any makeup clinicals that are not attended count as an unsatisfactory day and may result in failure of the course. Any clinical makeup hours will be required at midterm and/or finals week.
* Students will receive an incomplete grade for the course until all required clinical, simulation, and hours are completed.

**STUDENT UNIFORM**

**General Professional Clinical/Lab/Simulation Appearance:**

***Specific Appearance Considerations:***

Your uniform must be of proportionate fit (not too loose or tight), clean and pressed without wrinkles, and without frays, holes, or tears. Pants must not drag on the floor. Underwear must be worn, and color/design must not be in contrast with the uniform. Socks, shoes, and laces must be clean.

ONU approved purple top and bottom ordered through Marcus Uniforms. (https://MarcusUniforms.com).

Click on “Group Login” link in the top navigation bar. Choose the “New Customer” registration option on the right. Create an account. The group password is “Olivet”. Then click on “Olivet Nazarene University”. This will allow you to order the correct uniforms.

***Lab Coat:*** A white lab coat will be needed. Everyone will purchase their consultation lab coat per required length through: Marcus Uniforms (<https://marcusuniforms.com/school-medical-scrubs/olivet-nazarene-university.html>).

***Patches and ID:*** The ONU patch will be embroidered on the front right side of the uniform scrub top and one will be embroidered on the right sleeve of your lab coat. A picture ID will be provided by ONU and it should be worn at all times when in uniform and for all school functions. If the ID badge needs to be replaced, it will be at the student’s own expense.

***Footwear:*** Clean all-white leather-like shoes with clean white laces are to be worn along with white hosiery without runs or white socks. Shoes must have enclosed heels (no clogs) and toes, heels no higher than 1 ½ inches, and be white. Also available from Marcus Uniforms.

***Hair:*** Neatly secured, away from face, and off the collar. No large, brightly colored barrettes, ribbons, head bands, hair wraps or any other distracting hair ornaments. Hair needs to be clean and of a natural color, which is professionally styled and not distracting for client care.

***Beards/Mustaches*:** Clean, short, and neatly trimmed. Males without full beards must be clean-shaven (no “five o’clock shadow”) when in the clinical/simulation/lab area. In the event a student has a mustache and/or goatee, the remainder of facial hair should be clean-shaven. A mask may be required by the clinical facility.

***Nails***: Nails are to be clipped to fingertip length. The wearing of acrylic/gel overlay, or “false nails,” is not permitted during clinical. No nail polish is allowed.

***Jewelry:*** Acceptable jewelry includes a wedding band unless restricted by hospital policy. No other jewelry is permitted.

***Tattoos:*** All tattoos must be covered with band aids or tattoo concealer makeup during all clinical experiences.

***Global Health Practicum:*** Olivet dress code applies. Black dress pants with white modest blouse and lab coat. No leggings, yoga pants, or jeans! Shoes must have enclosed heels (no clogs) and toes, heels no higher than 1 ½ inches, and must be either black or brown.

***Equipment Required:*** Watch with ability to count minutes and seconds (neutral color, preferably waterproof), (No smart watches allowed at clinical), bandage scissors, tape measure, pen light, and stethoscope.

***Skills Card:*** Skills cards must be brought to all clinicals. Students cannot perform any skills within the clinical setting without their skills card. The professor initials are required for any bolded, non-italicized skill.

***General Dress Requirement:*** When on campus students must wear modest clothing and dress appropriately or risk being sent home.

***Attire for Pinning:*** Black dress pants or black knee length skirt (must touch knees when standing), white modest top, and white lab coat. Footwear should be black with closed toe, no higher than 1 ½ inches. No thigh-high boots.

**OAK BROOK VIRTUAL LEARNING CENTER (VLC)**

The purpose of the VLC is to facilitate learning. Users are expected to promote a quiet, calm atmosphere and maintain neat, effective work areas. Professional behavior is expected at all times. Children are not allowed on campus, in lab, class, or at clinicals.

***Guidelines for use of facilities and equipment***

1. Food and beverages are not allowed, no exceptions.
2. Notify the Level coordinator if supplies need to be replenished or if equipment malfunctions.
3. Before leaving the VLC, please leave all areas clean and tidy and return equipment.
4. Models must be covered and not left exposed.
5. Supplies should only be taken out of the lab by students if approved by the level coordinator. **No sharps are to be taken from the VLC.**
6. All sharps must be properly disposed of in the labeled sharps containers.
7. If an injury occurs immediately notify the Level Coordinator or the lab staff.

**VIRTUAL LEARNING CENTER (VLC) HOURS**

Required lab days are scheduled within the semester and can be found on the appropriate level map. Hours outside of the required lab days are available and must be scheduled with the Level Coordinator a minimum of 24 hours prior to the requested day and time. These additional lab hours allow students to hone their clinical skills.

**SKILLS/SKILLS VALIDATIONS**

Students will be required to complete all skill validations and successfully pass prior to performing at clinical. All level skills in bold on the skills card must be validated in the VLC prior to the end of that level’s semester. Unsuccessful skill validations must be remediated and may be revalidated with a different instructor and should occur on a different day. Remediation must occur within one week of an unsuccessful validation.If unsuccessful on a second attempt, the student will receive an unsatisfactory clinical day tied to the course with which that skill is associated. A third and final attempt must be completed with a different instructor and if unsuccessful will result in failure of the clinical course with which that skill is associated. If the skill was completed by video, the second and third attempts must be completed in person. Please see the unsatisfactory clinical day policy.

Skills performed unsatisfactorily in the clinical setting necessitates remediation by the student in the VLC within the time set by the instructor. Failure to comply with the assigned remediation will result in an unsatisfactory clinical day for that course. It is the student’s responsibility to make an appointment with the VLC for remediation.

**SKILLS VIDEO RECORDING POLICY**

**Purpose:** To fulfill ONU return demonstration requirements in the ABSN track for validation of identified skills.

**Guidelines:** Videos must be completed on the identified skills in the Virtual Learning Center (VLC). The Evolve skills check lists will be used by faculty to confirm successful validation of the skills recorded. Videos can either be submitted to Canvas, via the course in which they are assigned through the use of Kaltura media or recorded on the University provided iPads and be given to the assigned instructor, which is compliant with FERPA. Students must be easily visible throughout skills videos, may not start and stop the video at any time, nor use any notecards, papers, or prompts during the skill. Please scan your area before beginning the skill to verify this.

**Process:** Preparation prior to recording return demonstration videos:

1. Must watch the identified skills video(s) on Evolve if available and complete the learning activities for grades in the course.
2. The videos must be created in the VLC on an approved device.
3. Videos are to be submitted or provided to the instructor on the day they are created. If a student leaves lab and the video has not been submitted the student will receive an unsatisfactory clinical/lab day. (*See instructions below*).
4. Professors will provide feedback and communication to student via Canvas and/or Olivet email.
5. Students must bring skills card to level meeting day in order to have the skill signed off prior to performing the skill in clinical on live patients. The card will be signed by the faculty member viewing the skills.

**Responsibilities:**

Personal lab supplies must be used for all skills unless the skill requires supplies that are not part of the student lab bag. In this case, the supplies will be provided to the student to use for return demonstration.

Recording sessions can only be done during assigned lab time, during open lab times, or by appointment only.

Important things to consider…

* When recording skills, please put the “Recording Session in Progress” sign on the front of door of the VLC. The signs can be found next to the printer in the VLC.
* If the student is using an iPhone, the student should place the phone in airplane mode while recording to avoid unexpected incoming calls, texts, and notifications.
* Devices should be checked to ensure enough space is available prior to completing videos.
* Submit video by uploading and sharing the link. (See instructions below.)

**Skills that may NOT be recorded (All skills not mentioned below will follow the Skills Video Recording Policy)**

**Level I:**

* Blood pressure
* Catheterization, male
* Catheterization, female
* Radial/apical pulse
* Respirations
* Chest/lung Assessment
* Heart/blood vessel Assessment

**Nursing Video.olivet.edu Process**

[Watch Video Tutorial on uploading video into https://video.olivet.edu](https://video.olivet.edu/media/Using+video.olivet.edu+to+share+a+video+for+a+canvas+assignment/1_x224hrjz)

Create video with one of the devices stated in the course.

* For best results keep the videos under 15 minutes. This will ease the process of uploading it into Kaltura (video.olivet.edu)

**Upload your video:**

1. Go to <https://video.olivet.edu/> and log in with ONU Credentials. Note: Do not use [username@olivet.edu](mailto:username@olivet.edu), just use username.
2. Click on “Add New” button, Select “Media Upload.”
3. Click “Choose a file to upload,” navigate and find video to upload, select it and click “open.”
4. The video may take a few seconds to a few minutes to upload, depending on size. Type a short description of the video, leave publishing set to “Private”. Click on “Save” when done.
   1. Video may take some time to process. It is normal for the thumbnail not to appear immediately. Again, this process will be faster if the video is under 15 minutes.
5. Click on “Go to My Media,” Click on “Edit,” Click the “Collaboration” tab.
6. Where it says “Username or ID” add the instructor by typing instructor first name, last name, or username. Wait for the system to find them. Instructor name will appear below the field. Click their name. Note: If Kaltura cannot find instructor, contact the instructor.
7. After clicking the instructor’s name, check the box for “Coeditor.” Click on “Add” in the main page. The instructor’s name should then appear at the bottom of the screen, added as a coeditor.

**Share the Link:**

1. Click on the username menu and choose “My Media.” Click on the video thumbnail, then click “Share.”
2. Copy the “Link to Media Page” URL and submit the hyperlink to the assignment in Canvas and the course instructor will be able to see the video when he/she clicks on that hyperlink.

**GRADUATION REQUIREMENTS**

**REQUIREMENTS FOR GRADUATION**

Baccalaureate degrees offered by the university are awarded upon completion of the appropriate curriculum and upon recommendation of the faculty. The following requirements apply to the BSN degree:

* 1. A minimum of 120 semester hours of credit.
  2. A minimum grade point average of 2.75.
  3. A minimum of 40 hours of credit in upper-division courses (courses numbered 300 or above).
  4. Completion of the General Education studies as required by the University.
  5. Completion of the nursing major's program of study as specified by the school of nursing.
  6. Completion of supporting courses as specified by the school of nursing.
  7. Students may participate in the May/August commencement only if they are within 12 hours of graduation by the end of the spring semester and have filed a plan of studies with the Registrar by April 1.
  8. Completion of the HESI Computer Adaptive Test (CAT).
  9. Completion of the three-day HESI NCLEX Review
  10. Other University requirements.
  11. **Successfully demonstrating achieved competency on the 2nd HESI Exit Assessment, which is a score of 900 or above.**

1. If the student does not pass the 2nd HESI Exit exam, the student will be required to take an NCLEX RN review course at the student’s expense before the Associate Dean of nursing programs will release the student to take the NCLEX. This is in addition to the HESI NCLEX review course provided at the end of the final semester. If the student has to sign up for an additional review course because of failing the exit, the student will be required to:
   1. Submit proof of official documentation of having completed an NCLEX review course, including the names of the corporation and the student, upon completion.
   2. The student will not be released to sign up for the NCLEX exam until this documentation has been received and approved by the Associate Dean of nursing programs.

Following graduation, Olivet Nursing Students from the ABSN program are eligible to sit for the NCLEX-RN exam for licensure. Applications for this exam are available online from the Illinois Department of Financial and Professional Regulation website. Senior students will be advised regarding the NCLEX-RN application process. Conferral months are January, May, and August.

**FEES FOR STATE BOARDS**

The student will be responsible to pay for their own Illinois license application fees and for finger printing prior to taking the examination for State Boards.

**LICENSURE REQUIREMENTS**

The Division of Professional Regulation for the state of Illinois requires that all students preparing themselves to take the licensing exam to be a registered nurse in Illinois must complete the following or similar personal history form as a part of the application process. Students will be responsible for NCLEX exam and finger printing fees.

|  |  |  |
| --- | --- | --- |
| PART VI: Personal History Information (This part must be completed by all Applicants) | YES | NO |
| 1. Have you been convicted of any criminal offense in any state or federal court (other than minor traffic violations)? *If yes, attach a statement for each conviction including date and place of conviction, nature of the offense and if applicable, the date of discharge from any penalty imposed.* |  |  |
| 2. Do you now suffer, have you suffered from, been diagnosed as having, or been treated for any disease or condition which is generally regarded by the medical community as chronic, i.e., (1) mental or emotional disease or condition; (2) alcohol or other substance abuse; (3) physical disease or condition that presently interferes with your ability to practice your profession? *If yes, attach a detailed statement, including an explanation whether or not you are currently under treatment.* |  |  |
| 3. Have you been denied a professional license or permit, or privilege of taking an examination, or had a professional license or permit disciplined in any way by any licensing authority in Illinois or elsewhere? *If yes, attach a detailed explanation.* |  |  |
| 4. Have you ever been discharged other than honorably from the armed service or from a city, county, state or federal position?  *If yes, attach a detailed explanation.* |  |  |
| 5. Are you a U.S. citizen OR a lawfully admitted alien of the United States? |  |  |

**Criminal Background Check**

Students applying for initial licensure in Illinois as registered nurses must submit to a criminal background check and provide evidence of fingerprinting process from the Illinois State police, or its designated agent. **Fingerprints must be taken within 60 days prior to submission of the application for licensure**. Information regarding licensure application will be presented to senior level nursing students in the last semester prior to graduation.

**PROGRAM EVALUATION**

Assessment is an integral part of student learning. The assessment process involves observation and judgment of each student’s academic performance on the basis of explicit criteria established in the course syllabi. In the assessment process feedback is also essential. Faculty feedback provides the student with information that can be used to reflect on one’s personal and professional growth and development within the teaching-learning environment. Program assessment illustrates program effectiveness to the faculty and larger community. The achievement of program outcomes is determined by multiple assessments, the HESI test scores, and the student’s evaluation of course learning. Outcomes are analyzed and the aggregate data is used to develop, maintain, and revise the curriculum.

**POST GRADUATION ALUMNI SURVEY**

Graduates can expect to receive a nursing alumni survey form one year and five years post -graduation. Information obtained will be used in program evaluation and to update files. Participation is encouraged.

**SHARED GOVERNANCE AND STUDENT ORGANIZATIONS**

**ORGANIZATIONS AND ACTIVITIES**

All students at ONU have the privilege of joining any organization on ONU campus for which they are eligible. Of special interest to students in nursing is Kappa Sigma.

***The Honor Society of Nursing,*** [***Sigma Theta Tau International***](https://sigmanursing.org/why-sigma/sigma-membership/membership-faqs)***, Kappa Sigma Chapter***

The [Kappa Sigma Chapter](https://kappasigma.nursingsociety.org/home?CLK=d7d9a4b3-5ee0-4603-9b8a-9e13b15b95d7) of Sigma Theta Tau International invites nursing juniors and seniors with a grade point average of at least 3.0 or higher who demonstrate academic excellence, potential for leadership, and a desire to advance the profession of nursing. The top 35% of each class may be eligible for membership into STTI. Invitations to be inducted are extended from the chapter faculty counselors in the spring. The vision of the Honor Society of Nursing, Sigma Theta Tau International is to create a global community of nurses who lead in using knowledge, scholarship, service and learning to improve the health of the world’s people.

**CEREMONY AND AWARDS**

**HONORS**

Graduating seniors in nursing are eligible for faculty nomination to *Who's Who in American Universities*. Selection is made by a general faculty and student vote.

Phi Delta Lambda, a National Nazarene Honor Society, inducts high-ranking graduates into membership upon election by the faculty.

Sigma Theta Tau International, Kappa Sigma Chapter annually invites students who meet eligibility requirements to apply for induction (see Organizations and Activities for more information).

If the proctor observes any violation of the exam rules, as listed under General Exam Rules section, the exam will be turned

off, the student will be requested to leave the Exam room and the Director of Nursing Educations will be notified.

**Test Review:**

Faculty will provide post test scores within 48 hours after the administration of last test, except for courses with essays. The feedback timeframe for essay courses will be defined by individual professor.

` After the faculty has had time to evaluate the test, he/she will provide a content review as defined in syllabus

Contact your professor for any additional feedback/review as defined in syllabus

`1

**SUPPLEMENTAL INFORMATION**

**TRANSPORTATION AND MOTOR VEHICLE**

Most courses in nursing involve clinical assignments to agencies off-campus. Because of this, it is recommended that students have the use of a car.

**INCLEMENT WEATHER POLICY SGCS CHICAGOLAND SITES**

Our Oak Brook site generally follows College of DuPage. Please do not assume that because the community colleges have closed, that Olivet will automatically close our campuses. Decisions to close Chicagoland sites are made by the Office of Finance and Administration and will be made by 5 a.m. for day classes and by 3 p.m. for evening classes, when at all possible. The decision to close will be communicated via e-mail. As soon as the decision is made, students and faculty are notified via Olivet email.

**GUIDELINES FOR COMMUNITY ACTIVITIES**

* Know where you are going. Carry a map and find the site before starting your travel. Become familiar with the neighborhood, building or home where you will have your experience.
* Travel in pairs.
* Keep your car in good operating condition and with sufficient gas to complete the trip.
* Place valuables, purses, and personal items in the trunk prior to arriving at your destination. Take with you only that which is necessary for the experience.
* Keep your car doors locked at all times.
* Negotiate with the family about restricting pets (dogs, cats, etc.).
* Know what you are willing to leave behind if you perceive yourself to be in an unsafe environment.
* Carry phone numbers with you, i.e., instructor’s contact information and department of nursing number.

**STUDENT FINANCIAL ACCOUNTS**

* Students can view their student account and Financial Aid information on the Olivet Portal at <https://my.olivet.edu>.
* Refund Policy:
  + The fees charged in the ABSN program are refunded according to the refund policy in letter “b” below. Tuition is refunded according to the following policy:
    1. For courses less than 16 weeks in length:
       - No class sessions attended: Full tuition refund
       - Attend one class session: Full tuition refund and $50 cancellation fee. All but $50 refund: Written notification of withdrawal *prior to* the second class session of a course. Failure to provide official notification directly to the Office of Admissions and Student Services will result in administrative withdrawal. Students are then charged full tuition, plus fees.
       - Attend two or more class sessions: No refund.
       - \*\*To receive tuition refund, the University must have written notification of withdrawal.
    2. For courses 16 weeks in length or more:  
       First week - 100 percent  
       Second week - 90 percent  
       Third week - 75 percent  
       Fourth week - 50 percent  
       Fifth week - 25 percent  
       Sixth week - none
* Student accounts must be paid in full to be eligible for the transfer of credits, participation in Commencement ceremonies, and degree conferral.
* Financial Aid Satisfactory Academic Progress:
  + A student will be evaluated at the end of each term (or corresponding loan payment period) to ensure the student is maintaining satisfactory academic progress towards earning the degree he/she is seeking. Per the Department of Education requirements, satisfactory academic progress is measured on a qualitative and a quantitative basis.
  + To meet the quantitative requirement for satisfactory academic progress, the student must successfully complete at least 67% of the courses he/she attempts on a cumulative basis.
  + To meet the qualitative requirement for satisfactory academic progress, the student must have a minimum cumulative GPA required for graduation from his/her program of study. If a student repeats a course, the grade for the repeat will be included in the calculation of the student’s cumulative GPA.
  + If the student fails to meet one or more of these requirements, the student will be placed on “Warning” status and notified via letter and email. The student will have the duration of one term (payment period) to regain his/her satisfactory standing in the program of study. If the student does not regain his/her satisfactory standing, he/she will be granted an “Unsatisfactory” status and will no longer be eligible to receive any federal, state or institutional financial aid until a satisfactory status has been regained. A student will be notified via letter and email if the student is placed on “Unsatisfactory” status.

For more detailed information about the financial policies, please reference the “GCS Financial Information” section of the Olivet Course Catalog at:

<https://catalog.olivet.edu/content.php?catoid=2&navoid=95>.

For any financial questions, please contact Student Financial Solutions at 815-939-5245 or [StudentFinance@olivet.edu](mailto:StudentFinance@olivet.edu).

**ADDITIONAL CONTACT INFORMATION:**

|  |  |  |
| --- | --- | --- |
| Online Admissions | 877-4-Olivet (877-465-4838)-Option 1 | [OnlineAdmissions@olivet.edu](mailto:OnlineAdmissions@olivet.edu) |
| Learning Support Services | 877-4-Olivet (877-465-4838)- Option 2 | LSS@olivet.edu |
| Student Financial Services | 815-939-5245 | [StudentFinance@olivet.edu](mailto:StudentFinance@olivet.edu) |
| Registrar | 815-939-5201 | [registrar@olivet.edu](mailto:registrar@olivet.edu) |
| Information Technology (IT) | 815-939-5302 | [it@olivet.edu](mailto:it@olivet.edu) |

**Family Educational Rights and Privacy Act (FERPA)** The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level. Students to whom the rights have transferred are "eligible students."

* Parents or eligible students have the right to inspect and review the student's education records maintained by the school. Schools are not required to provide copies of records unless, for reasons such as great distance, it is impossible for parents or eligible students to review the records. Schools may charge a fee for copies.
* Parents or eligible students have the right to request that a school correct records which they believe to be inaccurate or misleading. If the school decides not to amend the record, the parent or eligible student then has the right to a formal hearing. After the hearing, if the school still decides not to amend the record, the parent or eligible student has the right to place a statement with the record setting forth his or her view about the contested information.
* Generally, schools must have written permission from the parent or eligible student in order to release any information from a student's education record. However, FERPA allows schools to disclose those records, without consent, to the following parties or under the following conditions (34 CFR § 99.31):

School officials with legitimate educational interest:

Other schools to which a student is transferring:

Specified officials for audit or evaluation purposes.

* + Appropriate parties in connection with financial aid to a student.
  + Organizations conducting certain studies for or on behalf of the school.
  + Accrediting organizations.
  + To comply with a judicial order or lawfully issued subpoena.
  + Appropriate officials in cases of health and safety emergencies; and

State and local authorities, within a juvenile justice system, pursuant to specific State law.

Schools may disclose, without consent, "directory" information such as a student's name, address, telephone number, date and place of birth, honors and awards, and dates of attendance. However, schools must tell parents and eligible students about directory information and allow parents and eligible students a reasonable amount of time to request that the school not disclose directory information about them. Schools must notify parents and eligible students annually of their rights under FERPA. The actual means of notification (special letter, inclusion in a PTA bulletin, student handbook, or newspaper article) is left to the discretion of each school.

For additional information or technical assistance, you may call (202) 260-3887 (voice). Individuals who use TDD may call the Federal Information Relay Service at 1-800-877-8339.

Or you may contact us at the following address:

Family Policy Compliance Office  
U.S. Department of Education  
400 Maryland Avenue, SW  
Washington, D.C. 20202-5920

**Appendix A**

**AMERICAN NURSES ASSOCIATION CODE FOR NURSES**

**Code of Ethics for Nurses**

The steering committee drafted a revised code. This draft was made available to the public for comments. After the comments were reviewed the *Code of Ethics for Nurses with Interpretive Statements* was revised in 2015*.*

1. The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
2. The nurse’s primary commitment is to the patient, whether an individual, family, group, community, or population.
3. The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
4. The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.
5. The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
6. The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.
7. The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
8. The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
9. 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.

American Nurses Association. (2015). *Code of ethics for nurses with interpretive statements.*  Silver Spring, MD: Author. <https://www.nursingworld.org/codeofethics>

**APPENDIX B**

**Bill of RIGHTS and Code of ethics**

**Bill of Rights and Responsibilities for Students of Nursing**

**The NSNA Student Bill of Rights and Responsibilities was initially adopted in 1975. The document was updated by the NSNA House of Delegates in San Antonio, Texas (1991); and item #4 was revised by the NSNA House of Delegates in Baltimore, Maryland (2006). This document was updated by the NSNA House of Delegates in (2017).**

1. Students should be encouraged to develop the capacity for critical judgment and engage in a sustained and independent search for truth.
2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom: students should exercise their freedom in a responsible manner.
3. Each institution has a duty to develop policies and procedures which provide and safeguard the students’ freedom to learn.
4. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, color, creed, national origin, ethnicity, age, gender, marital status, life style, disability, or economic status.
5. Students should be free to take reasoned exception to the data or views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.
6. Students should have protection through orderly procedures against prejudiced or capricious academic evaluation, but they are responsible for maintaining standards of academic performance established for each course in which they are enrolled.
7. Information about student views, beliefs, political ideation, or sexual orientation which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as a basis of evaluation.
8. The student should have the right to have a responsible voice in the determination of his/her curriculum.
9. Institutions should have a carefully considered policy as to the information which should be a part of a student's permanent educational record and as to the conditions of this disclosure.
10. Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions publicly and privately.
11. Students should be allowed to invite and to hear any person of their own choosing within the institution's acceptable realm, thereby taking the responsibility of furthering their education.
12. The student body should have clearly defined means to participate in the formulation and application of institutional policy affecting academic and student affairs, e.g., through a faculty-student council, student membership or representation on faculty committees.
13. The institution has an obligation to clarify those standards of behavior which it considers essential to its educational mission, its community life, or its outcomes and philosophy.
14. Disciplinary proceedings should be instituted only for violations of standards of conduct formulated with significant student participation and published in advance through such means as a student handbook or a generally available set of institutional regulations. It is the responsibility of the student to know these regulations. Grievance procedures should be available for every student.
15. As citizens and members of an academic community, students are subject to the obligations which accrue to them by virtue of this membership and should enjoy the same freedoms of citizenship.
16. Students have the right to belong or refuse to belong to any organization of their choice.
17. Students have the right to personal privacy in their living space to the extent that the welfare and property of others are respected.
18. Adequate safety precautions should be provided by nursing programs, for example, adequate street lighting, locks, and other safety measures deemed necessary by the environment.
19. Dress code, if present in school, should be established with student input in conjunction with the school chair and faculty, so the highest professional standards are maintained, but also taking into consideration points of comfort and practicality for the student.
20. Grading systems should be carefully reviewed periodically with students and faculty for clarification and better student-faculty understanding.
21. Students should have a clear mechanism for input into the evaluation of nursing faculty.

From: <https://www.nsna.org/Publications/BillofRights.aspx>

**Appendix C**

**RATING SCALE FOR CLINICAL EVALUATION**

**OUTSTANDING (O):**

Consistently superior in clinical performance, skill, synthesis of learning and application of nursing principles. Functions above expectations of student at this level.

1. Is able to function safely and effectively with minimal guidance in a relaxed and confident manner.
2. Demonstrates superior ability to make alert and informed observations.
3. Demonstrates superior ability to synthesize KNOWLEDGE; clinical performance is beyond expectations, making appropriate nursing judgments and intervening with minimal guidance.
4. Seeks out and assumes responsibility beyond that required, consistently seeking learning experiences.
5. Consistently demonstrates expected professional conduct.

**SATISFACTORY (S):**

Safe clinical performance; demonstrates expected skills, synthesis of learning and application of nursing principles at expected level.

1. Functions safely and accurately with guidance from the instructor.
2. Makes expected observations, demonstrating ability to relate and apply KNOWLEDGE.
3. Assumes responsibility for assignments; usually seeks out learning experiences.
4. Makes appropriate nursing judgments and intervenes with guidance.
5. Adequately demonstrates expected professional conduct.

**UNSATISFACTORY (U)**

Clinical performance inadequate; indicates lack of skill, unsafe nursing practice, inadequate depth of KNOWLEDGE, or application of nursing principles. Functions well below expectations.

1. Does not function safely even with guidance.
2. Does not demonstrate ability to make expected, obvious observations related to patient care.
3. Does not demonstrate ability to relate KNOWLEDGE to clinical situation at expected level.
4. Has difficulty accepting responsibility, seldom seeks learning experience.
5. Does not initiate nursing intervention without maximum guidance.
6. Demonstrates unprofessional clinical conduct.

**NEEDS IMPROVEMENT (NI)**

Clinical performance is not necessarily inadequate, however further assessment of knowledge, understanding, problem solving, technical skills, attitudes, and/or ethics/professionalism is needed to determine clinical competence (Rafiee et al., 2014).

Rafiee, G., Moattari, M., Nikbakht, A. N., Kojuri, J., & Mousavinasab, M. (2014). Problems and challenges of nursing students’ clinical evaluation: A qualitative study. *Iranian Journal of Nursing and Midwifery Research, 19*(1), 41–49.

Two unsatisfactory ratings in any one category row on the Daily Clinical Evaluation tool results in an unsatisfactory clinical day. Two unsatisfactory ratings in different categories (same column on evaluation tool) on one day also would result in an unsatisfactory clinical day.

If a student receives a “Needs Improvement” in a category row on the daily clinical evaluation tool and the instructor determines the student has not improved in that category on a subsequent day, the student will receive an unsatisfactory rating in that category for that day. NOTE: If there is already another unsatisfactory rating in a category for that day, the student will receive an unsatisfactory clinical day as outlined above.

Two unsatisfactory clinical days will result in automatic failure of that clinical course and necessitate the repetition of that course in order to progress in the nursing program.

**Appendix D**

**Drug list for Program**

Please use this core list of drugs to study. It is based on the categories you learned in Introduction to Pharmacology.

You may also learn additional drugs in your courses and clinical.

|  |  |  |  |
| --- | --- | --- | --- |
| Level 1 | Level 2 | Level 3 | Level 4 |
| **Fundamentals**  Acetylsalicylic acid (Aspirin)  Ibuprofen (Motrin)  Ibuprofen/NSAID (Advil)  Hydrocodone-Acetaminophen (Hydrocodone)  Dicyclomine (Bentyl)  Hypromellose (Artificial tears)  Neomycin/Polymyxin B/Hydrocortisone (Cortisporin ear gtts)  Corticosteroid (Prednisone)  Influenza vaccine  Albuterol (Proventil)  Ipratropium bromide (Atrovent, Ventolin)  Methylpredisolone (Solu-Medrol)  Warfarin (Coumadin)  Heparin sodium (Heparin)  Enoxaparin (Lovenox)  Vit K  Potassium  Sodium Chloride  Furosemide (Lasix)  Metronidazole (Flagyl)  GaviLyte-G (Golytely)  Bisacodyl (Dulcolax)  Pepto Bismul,  Diphenoxylate/atropine (Lomotil)  Docusate sodium (Colace)  Docusate sodium (Senekot)  Magnesium hydroxide (MOM)  Ciprofloxacin (Cipro)  Levofloxin (Levaquin)  Oxybutynin (Ditropan)  Tamsulosin (Flomax)  Phenazopyridine (Pyridium)  Zovirax (Acyclovir)  Ferrous Sulfate  Acetaminophen (Tylenol)  water & fat soluble vitamins | **Adult Health 1**  **Antibiotics** - Amoxicillin (Amoxil), Azithromycin (Zithromax), Cefazolin (Ancef), Ceftriaxone (Rocephin), Cephalexin (Keflex), Erythromycin, Sulfamethoxazole/trimethoprim (Bactrim), Ampicillin/Sulbactam (Unasyn), Piperacillin/tazobactam (Zosyn).  **Antibiotics II** Ciprofloxacin (Cipro), Gentamycin, Levofloxacin (Levaquin), Metronidazole (Flagyl), Pyridium (Phenazopyridine), Vancomycin (Vancocin).  **Antivirals** Acyclovir (Zovirax), Fluconazole (Diflucan), Nystatin (Mycostatin).  **Antiinflammatory** Allopurinol (Zyloprim), Celecoxib (Celebrex), Ketorolac (Toradol). **Antihypertensives**  Captopril (Capoten), Carvedilol (Coreg), Clonidine (Catapres), Enalapril (Vasotec), Losartan (Cozaar), Valsartan (Diovan), Verapamil (Calan), Lisinopril (Prinivil).  **Diuretics** Furosemide (Lasix), Hydrochlorothiazide (HydroDIURIL), Spironolactone (Aldactone). **Respiratory**  Methylprednisolone (Medrol, Solu-Medrol)  **Fluids and Electrolytes** Dextran, Fresh Frozen Plasma (FFP), Packed Red Blood Cells (PRBC's), Potassium, Sodium Chloride (NaCl)  **Antithyroid** Levothyroxine (Synthroid, Levothyroid, Levoxyl)  **Antidiabetics** Glipizide(Glucotrol), Insulin glargine (Lantus), Insulin detemir (Levemir), Insulin NPH, Insulin Lispro (Humalog), Metformin (Glucophage), Regular Insulin (Humulin R, Novolin R), Sitagliptin (Januvia).  **GI Meds** **Acid Controlling** Prevacid, Cimetidine (Tagamet), Famotidine (Pepcid), Omeprazole (Prilosec), Pantoprazole (Protonix), Sucralfate (Carafate)  **GI Meds Antiemetic and Antinausea** Metoclopramide (Reglan), Ondasetron (Zofran)  **GI Meds Bowel Disorder Drugs** Docusate Sodium (Colace), Magnesium Hydroxide (MOM). **Analgesics** Acetaminophen (Tylenol), Codeine Sulfate, Dilaudid, Fentanyl, Lidocaine, Morphine Sulfate, Naloxone HCL (Narcan), Oxycodone HCL (Oxycontin), Tramadol (Ultram)  **CNS Depressants and Muscle Relaxants** Diazepam (Valium), Midazolam (Versed), Flumazenil, Dantrolene  AED’s Topiramate(Topamax)  **General and Local Anesthetics** Dexmedetomcholine (Precedex), Ketamine (Ketalar), Lidocaine (Xylocaine), Nitrous Oxide, Propofol (Diprivan), Rocuronium (Zemuron), Sevoflurane (Ultane)  **Analgesics** Fentanyl (Duragesic), Meperidine HCL (Demerol), Methadone HCL (Dolophine), Morphine Sulfate,  Naloxone HCL (Narcan), Oxycodone HCL (OxyContin)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Pharmacology for Mental Health:** Alprazolam (Xanax Amitriptyline (Elavil)  Aripiprazole (Abilify Bupropion (Wellbutrin)-  Buspirone (BuSpar Citalopram (Celexa  Clozapine (Clozaril) - - Diazepam (Valium  Duloxetine (Cymbalta) Fluoxetine (Prozac  Haloperidol (Haldol) Lithium  Lorazepam (Ativan) Mirtazapine (Remeron)  Risperidone (Risperdal) Selegiline transdermal patch (Emsam)  Trazodone (Desyrel, Oleptro) | **Adult Health II**  **Acid Controlling Drugs** - Ranitidine (Zantac), Omeprazole (Prilosec),  **Adrenal Drugs** - Dexamethasone (Decadron), Hydrocortisone (Cortisol), Deltasone (Prednisone), Fludrocortisone (Florinef), Dexamethasone (Decadron)  **Adrenergic Drugs** –  Epinephrine (Epi)  **Adrenergic-Blocking Drugs** **-**Phenoxybenzamine (Dibenzyline) **Analgesic Drugs -** Acetaminophen (Tylenol), Bortezomib (Velcade), Hydromorphone (Dilaudid), Tramadol (Ultram)  **Anti-Emetic and Anti-Nausea Drugs -** Ondansetron (Zofran)  **Antiepileptics Drugs -** Capecitabine (Xeloda),Phenytoin (Dilantin), Fosphenytoin (Cerebyx), Carbamazepine (Tegretol), Oxcarbazepine (Trileptal) Lamotrigine (Lamictal), Valproic Acid (Depakote), Primidone (Mysoline) Gabapentin (Neurontin), Pregabalin (Lyrica), Levetiracetam (Keppra), Topiramate (Topamax), Ezogabine (Potiga), Diazepam (Valium), Lorazepam (Ativan)  **Antifungal Drugs** – Ketoconazole (Nizoral),Fluororacil (5 FU)  **Antigout Drugs** - Allopurinol (Zyloprim),  **Coagulation Modifier Drugs** – Argatroban (Acova), Factor VIII (Octocog alfa),  **Blood products, -**  Albumin, Coagulation factors, Immunoglobulins,  **Antihistamines, Decongestants, Antitussives, and Expectorants** - Cyproheptadine (Periactin), Diphenhydramine (Benadryl)  **Antineoplastic Drugs part one:** Paclitaxel (Taxol), Paclitaxel (Taxol), Etoposide (VP16), Docetaxel (Taxotere), Fluorouracil (5FU). Vincristine (Vincasar PFS) **Antineoplastic Drugs part two:** Carboplatin (Paraplatin), Cisplatin (Platinol), Doxorubicin (Adriamycin) Carmustine (Gliadel wafers)  **Targeted therapy:** Tarceva, Bevacizumab (Avastin), Mitotane (Lysodren),Doxorubicin, (Adriamycin), Cyclophosphamide (Cytoxan), Blenoxane (Bleomycin), Carboplatin (Paraplatin), Cisplatin (Platinol), Imatinib (Gleevec), **Biologic Response Modifying and Antirheumatic Drugs -** Rituximab (Rituxan), Trastuzumab (Herceptin), Cetuximab (Erbitux), Methotrexate (Trexall) Epoetin Alfa (Epogen), Filgrastim (Neupogen), Aranesp Lenalidomide (Revlimid), Azacitidine (Vidaza), Decitabine (Dacogen),  **Antitubercular Drugs -** Rifadin (Rifampin), Pyrazinamide (PZA), Ethambutol (Myambutol)  **Antiviral Drugs -** Zoledronic acid (Zometa), Pamidronate (Aredia), Lamivudine (Epivir), Zidovudine (Retrovir), Raltegravir (Isentress), Efavirenz/Emtricitabine/Tenofovir (Atripla), Lamivudine/Zidovudine (Combivir), emtricitabine, rilpivirine, and tenofovir disoproxil fumarate (Complera), emtricitabine/tenofovir disoproxil fumarate (Truvada) Acyclovir (Zovirax)  **Central Nervous System Depressants and Muscle Relaxants -** Baclofen (Lioresal)  **Coagulation Modifier Drugs** – Antithrombotics - Alteplase (Activase), Clopidogrel (Plavix), Aspirin (ASA), Temozolomide (Temodar)  **Chemotherapy:** multiagent **Dermatologic Drugs/ Adrenal Drugs -** corticosteroids Methylprednisolone (Solumedrol), Deltasone (Prednisone)  **Fluid and Electrolytes** - Tolvaptan (Samsca), Conivaptan (Vaprisol), Furosemide (Lasix), Bumetanide (Bumex) hypertonic saline (3% NaCl), Metopirone (Metyrapone), Aminoglutethimide (Elipten)  **General and Local Anesthetics** – Morphine Sulfate (Morphine)  **GI meds:** Radiation Tx, Brachytherapy, Targeted therapy growth factor  **Men's Health Drugs -** Leuprorelin (Lupron), Goserelin (Zoladex), Finasteride (Proscar), Sildenafil (Viagra), Tadalafil (Cialis) Vardenafil (Levitra), Flutamide (Eulexin), Bicalutamide (Casodex)  **Psychotherapeutic Drugs -** Amitriptyline (Elavil), Duloxetine (Cymbalta), Trazadone (Desyrel)  **Respiratory Drugs**  Tiotropium bromide (Spiriva) , Fluticasone furoate and vilanterol (Breo Ellipta) , Fluticasone propionate and salmeterol (Advair), Budesonide and formoterol (Symbicort), Formoterol and mometasone (Dulera),Albuterol ( Ventolin or Proventil) , Salmeterol (Serevent), Ipratropium (Atrovent), Umeclidinium (Incruse Ellipta), Theophylline(Theo Dur), Aminophylline, Montelukast (Singulair), Zafirlukast (Accolate), Fluticasone propionate (Flovent), Methylprednisolone (Solumedrol ) Morphine Sulfate (Morphine), - Deltasone (Prednisone)  Cardiac Drugs:  **Adrenergic -Blocking Drugs** - Labetalol (Trandate) ,Carvedilol (Coreg),Metoprolol (Toprol),  **Coagulation Modifier Drugs** - Warfarin Sodium (Coumadin), Fondaparinux (Arixtra), Rivaroxaban (Xarelto), Apixaban (Eliquis), Dabigatran (Pradaxa), Enoxaparin (Lovenox) ,Clopidogrel (Plavix), Heparin, Alteplase (Activase), Protamine Sulfate, Vitamin K, **Antihypertensive Drugs** - Enalapril (Vasotec), Losartan (Cozaar),Valsartan (Diovan),  **Anti Dysrythmic Drugs** - Fosinopril (Monopril), Dofetilide (Tikosyn), Amiodarone (Cordarone),  **Heart Failure Drugs**  Digoxin (Lanoxin), Diltiazem (Cardizem),  **Diuretic Drugs** - Furosemide (Lasix), Hydrochlorothiazide (Hydrodiuril),  **Statins** -Simvastatin (Zocor), Atorvastatin (Lipitor),  **Calcium channel blocker** - Verapamil (Calan),  **Electrolytes:**  Potassium, Magnesium  **TPN** (Total parenteral nutrition)  **Women's Health Drugs** - Calcitonin, Tamoxifen (Soltamox), Anastrozole (Arimidex), oral contraceptives, Mifepristone (Korlym), hormone replacement therapy  \_\_\_\_\_\_\_\_\_\_\_  **OB**  Antihypertensives:  Hydralazine (Apresoline)  Labetalol Methyldopa (Aldomet) Nifedipine (Procardia) Ophthalmic Erythromycin MMR RhO (D) immunoglobulin (RhoGAM) Clomiphene (Clomid) Contraceptive drugs: Dinoprostone (Cervidil) Medroxyprogesterone (Depo-Provera) Methylergonovine (Methergine) Oxytocin (Pitocin) In addition: Misoprostol (Cytotec) Hemabate Terbutaline (Brethine) Indomethacin (Indocin) Butorphanol (Stadol) Nubain  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Peds**  Ceftriaxone (Rocephin), cephalexin (Kelfex), sulfamethoxazole/trimethoprim (Bactrim),  Amoxicillin/clavulanic acid (augmentin), Gentamycin Sulfate (gentamycin), Nitrofurantoin (Macrobid), Diphenhydramine (Benadryl), Loratadine (Claritin), Baclofen (Lioresal),Methylphenidate (Ritalin), Methylphenidate (Concerta), Amphetamine; Dextroamphetamine (Adderall), Lisdexamfetamine (Vyvanse), Atomoxetine (Strattera),Diphtheria and tetanus toxoids and acellular pertussis vaccine tetanus (Tripedia, Daptacel, Infanrix), Haemophilus influenza type b conjugate vaccine (Hib), Hepatitis B virus vaccine (recombivax HB, engerix-B), Human papillomavirus vaccine (HPV),Influenza virus vaccine (Fluzone, Fluvirin, FluMist), Meningococcal vaccine (Menactra, Menveo), Pneumococcal vaccine (Pneumovax and thirteen valent (PV13, Prevnar 13), Poliovirus vaccine (OPV), varicella virus vaccine (Varivax) | **Adult Health III**  All previous drugs plus  Anticoagulants  Fibrinolytics  Heparin drips    ADRENERGIC DRUGS-  Levophed (Norepinephrine)  Epinephrine  Dobutamine (Dobutrex)  Milrinone (Primacor) |

**Appendix E Skill Cards**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **All Level 0 Skills MUST be Validated in the VLC (Virtual Learning Center) Prior to performing in Clinical** | | | | | | | | | | | | | |
| **Level** | **Validated Skills** | | | **Peer Initial & Date** | | **Peer Initial & Date** | | **VLC**  **Validation** | | **1st Time in Clinical** | | **Independently** | |
| Level 0 | Abdominal Binder | | |  | |  | |  | |  | |  | |
| Level 0 | Active/Passive Range of Motion | | |  | |  | |  | |  | |  | |
| Level 0 | Backrub | | |  | |  | |  | |  | |  | |
| Level 0 | Bed Occupied | | Unoccupied |  |  |  |  |  |  |  |  |  |  |
| Level 0 | Bed bath | | Shower |  |  |  |  |  |  |  |  |  |  |
| Level 0 | Bedpan | | |  | |  | |  | |  | |  | |
| Level 0 | Body Mechanics | | |  | |  | |  | |  | |  | |
| Level 0 | Facial Shaving | | Feeding |  |  |  |  |  |  |  |  |  |  |
| Level 0 | Handwashing | | |  | |  | |  | |  | |  | |
| Level 0 | Isolation PPE | | |  | |  | |  | |  | |  | |
| Level 0 | Oral Care | | Peri Care |  |  |  |  |  |  |  |  |  |  |
| Level 0 | Positioning/ Turning | | |  | |  | |  | |  | |  | |
| Level 0 | Ted hose | Dressing a client | |  |  |  |  |  |  |  |  |  |  |
| Level 0 | Transferring (1 and 2 person) | | |  | |  | |  | |  | |  | |
| Level 0 | **Vital Signs** | Blood Pressure | |  | |  | |  | |  | |  | |
| Level 0 | Radial/Apical pulse | |  | |  | |  | |  | |  | |
| Level 0 | Respirations | |  | |  | |  | |  | |  | |
| Level 0 | Pulse Oximeter | |  | |  | |  | |  | |  | |
| Level 0 |  | Axillary |  | |  | |  | |  | |  | |
| Level 0 | Oral |  | |  | |  | |  | |  | |
| Level 0 | Tympanic |  | |  | |  | |  | |  | |
| Level 0 | Rectal |  | |  | |  | |  | |  | |
| **KEY:** Students need 2 peers to sign off each skill **prior** to validation or performance in clinical. Validated skills need a professor to sign-off skills done appropriately **prior** to performance in clinical. **1st Time in Clinical** = 1st time student performs skill on a client in clinical setting. **Individual** = student has completed the 1st time in clinical and other demonstrations of this skill, and is able to do the skill independent of a prof/preceptor (does not apply to those items with an "X" in the column/row). **NOTE**: No skill will be performed in the clinical setting without two peer initials and VLC validation where applicable. | | | | | | | | | | | | | |
| **Non Validated Skills Below** | | | | | | | | | | | | | |
| Level 1 | Assessment: Genitalia | | |  | |  | | **X** | |  | |  | |
| Level 1 | Doppler | | |  | |  | | **X** | |  | |  | |
| Level 1 | Glucoscan | | |  | |  | | **X** | |  | |  | |
| Level 1 | Medication Administration | | Intranasal |  | |  | | **X** | |  | | **X** | |
| Level 1 | Oxygen: Nasal Cannula | | |  | |  | | **X** | |  | |  | |
| Level 1 | Post mortem care | | |  | |  | | **X** | |  | |  | |
| Level 1 | SCD's (Sequential Compression Device) | | |  | |  | | **X** | |  | |  | |
| Level 1 | Stool specimen | | |  | |  | | **X** | |  | |  | |
| Level 1 | Strain urine | | |  | |  | | **X** | |  | |  | |
| Level 1 | Telemetry monitor application | | |  | |  | | **X** | |  | |  | |
| Level 2 | Bladder scanner | | | **X** | | **X** | | **X** | |  | | **X** | |
| Level 2 | Blood transfusion: observation/maintenance | | |  | |  | | **X** | |  | | **X** | |
| Level 2 | Cast care | | |  | |  | | **X** | |  | |  | |
| Level 2 | Drains: Care, I&O, removal | | |  | |  | | **X** | |  | |  | |
| Level 2 | IV site care | | |  | |  | | **X** | |  | |  | |
| Level 2 | Ostomy care/irrigation | | |  | |  | | **X** | |  | |  | |
| Level 2 | **Oxygen** | Non-Rebreather | |  | |  | | **X** | |  | |  | |
| Level 2 | Simple Mask | |  | |  | | **X** | |  | |  | |
| Level 2 | Pin care | | |  | |  | | **X** | |  | |  | |
| Level 2 | Staple/ suture removal | | |  | |  | | **X** | |  | | **X** | |
| Level 2 | Traction | | | **X** | | **X** | | **X** | |  | | **X** | |
| Level 2 | TPN/PPN | | | **X** | | **X** | | **X** | |  | | **X** | |
| Level 3 | Peritoneal dialysis | | | **X** | | **X** | | **X** | |  | | **X** | |
| Level 3 | **Mother Baby** | Circumcision care | |  | |  | | **X** | |  | |  | |
| Level 4 | Ambu bag/ Crash cart check | | |  | |  | | **X** | |  | |  | |
|  |  | | |  | |  | |  | |  | |  | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **All Skills MUST be Validated in the VLC (Virtual Learning Center) Prior to performing in Clinical** | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| **Level** | **Validated Skills** | | | **Peer Initial & Date** | | **Peer Initial & Date** | | **VLC**  **Validation** | | **1st Time in Clinical** | | **Independently** | |
| Level 1 | Catheterization | Male | Female |  |  |  |  |  |  |  |  | **X** | **X** |
| Level 1 | Foley Care / Removal | | |  | |  | |  | |  | | **X** | |
| Level 1 | Dressings (dry/aseptic) | | |  | |  | |  | |  | |  | |
| Level 1 | Enema | | |  | |  | |  | |  | |  | |
| Level 1 | Oral suctioning (Yankauer) | | |  | |  | |  | |  | | **X** | |
| Level 1 | Donning Sterile gloves/ Sterile Field | | |  | |  | |  | |  | |  | |
| Level 1 | **Medication Admin** | Eye drops | |  | |  | |  | |  | | **X** | |
| Level 1 | Ointment | |  | |  | |  | |  | | **X** | |
| Level 1 | Ear drops | |  | |  | |  | |  | | **X** | |
| Level 1 | IM (intramuscular injection) | |  | |  | |  | |  | | **X** | |
| Level 1 | Patches | |  | |  | |  | |  | | **X** | |
| Level 1 | PO (oral) / Sublingual | |  |  |  |  |  |  |  |  | **X** | **X** |
| Level 1 | SQ (subcutaneous injection) | |  | |  | |  | |  | | **X** | |
| Level 1 | Suppository | |  | |  | |  | |  | | **X** | |
| Level 1 | **Health Assessment Skills** | Abdomen | |  | |  | |  | |  | |  | |
| Level 1 | Chest/Lungs | |  | |  | |  | |  | |  | |
| Level 1 | Ears/Eyes | |  |  |  |  |  |  |  |  |  |  |
| Level 1 | Nose/Mouth/Throat | |  | |  | |  | |  | |  | |
| Level 1 | Head /Neck /Lymph | |  | |  | |  | |  | |  | |
| Level 1 | Heart / Peripheral Vascular | |  | |  | |  | |  | |  | |
| Level 1 | Musculoskeletal | |  | |  | |  | |  | |  | |
| Level 1 | Neurological | |  | |  | |  | |  | |  | |
| Level 1 | Skin/Hair/Nails | |  | |  | |  | |  | |  | |
| Level 2 | Medication Administration SQ (subcutaneous) Insulin | | |  | |  | |  | |  | | **X** | |
| Level 2 | Catheter irrigation | Continuous | |  | |  | |  | |  | | **X** | |
| Level 2 | Intermittent | |  | |  | |  | |  | | **X** | |
| Level 2 | **Intravenous** | IV Insertion | |  | |  | |  | |  | | **X** | |
| Level 2 | IV bag hang/change | |  | |  | |  | |  | | **X** | |
| Level 2 | IV discontinue | |  | |  | |  | |  | |  | |
| Level 2 | IV lock/flush | |  | |  | |  | |  | | **X** | |
| Level 2 | IV pump meds | |  | |  | |  | |  | | **X** | |
| Level 2 | Convert to saline lock | |  | |  | |  | |  | | **X** | |
| Level 2 | IV push meds | |  | |  | |  | |  | | **X** | |
| Level 2 | **NG tube** (Nasogastric) or **G tube** (Gastric) | Insertion | |  | |  | |  | |  | | **X** | |
| Level 2 | Removal | |  | |  | |  | |  | | **X** | |
| Level 2 | Feedings/care | |  | |  | |  | |  | | **X** | |
| Level 2 | Medications | |  | |  | |  | |  | | **X** | |
| Level 3 | **Central Line Care** | Blood draw | |  | |  | |  | |  | | **X** | |
| Level 3 | Dressing change | |  | |  | |  | |  | | **X** | |
| Level 3 | Central line flush | |  | |  | |  | |  | | **X** | |
| Level 3 | Medications | |  | |  | |  | |  | | **X** | |
| Level 3 | Dressing change (complex) (wet to dry) | | |  | |  | |  | |  | | **X** | |
| Level 3 | Port a cath access | | |  | |  | |  | |  | | **X** | |
| Level 3 | Suctioning | Nasopharyngeal /Oropharyngeal | |  | |  | |  | |  | |  | |
| Level 3 | Tracheal | Suctioning (sterile) | |  | |  | |  | |  | | **X** | |
| Level 3 | Trach care/inner cannula change | |  | |  | |  | |  | | **X** | |
| Level 3 | **Pediatric / Newborn Medication Administration** | | PO |  | |  | |  | |  | | **X** | |
| Level 3 | IM |  | |  | |  | |  | | **X** | |
| Level 3 | Pediatric assessment | | |  | |  | |  | |  | | **X** | |
| Level 3 | Pediatric / Newborn Vital Signs | | |  | |  | |  | |  | |  | |
| Level 3 | **Mother / Baby** | Newborn Assessment | |  | |  | |  | |  | |  | |
| Level 3 | Postpartum Assessment | |  | |  | |  | |  | | **X** | |
| Level 4 | Chest Tube set-up | | |  | |  | |  | |  | | **X** | |
| Level 4 | EKG 12 lead application | | |  | |  | |  | |  | |  | |
| Level 4 | Suctioning - Inline ET | | |  | |  | |  | |  | |  | |
| **Peer & Faculty/Nurse/Preceptor Initials, Signature & Credentials:** | | | | | | | | | | | | | |