Student of Nursing,

The nursing Faculty would like to welcome you to UAM College of Technology-McGehee, Practical Nursing Program. We are pleased you have chosen our college for your nursing education. We encourage each individual to achieve excellence in his/her application of knowledge and skill in nursing practice. We are dedicated to assisting you in achieving the educational goals you have set for your future in nursing.

The nursing faculty believes that learning occurs at all times. Wherever we are, whatever we are doing, we are always reacting to and learning from our environment. As educators, it is our responsibility to prepare the environment to facilitate your learning. As a nursing student, it is your responsibility to prepare yourself to learn. It is our opinion that we are all students of life and we should all strive to keep our minds and hearts open to receive gifts from those individuals who we encounter in our life. It is our sincere desire that we will all learn from each other and that you will successfully complete this program with the knowledge, skill and attitude required to become an excellent practical nurse.

Peggie Orrell, RN  
Director of Nursing and Allied Health

Kim Ray, RN  
Nursing Instructor

Nikki Calhoun, RN  
Nursing Instructor
PRINCIPLES TO ADOPT WHILE IN NURSING SCHOOL

- I will value all members of the nursing class, respecting and appreciating their differences.
- I will hold myself and others to the highest standards of academic, personal and social integrity.
- I will conduct myself civilly in all things.
- I will think before I speak or act, and will accept responsibility of my works and actions.
- I will challenge what is wrong and strive to make it right.
- I will strive to make UAMCTM a safe and clean educational environment.
- I will respect the rights and the person of all human beings and will avoid all acts of violence and abuse/revenge.
- I will respect my body by not abusing it in any way.
- I will continuously work to improve myself and community, now and in the future.
- I will afford myself the best opportunity to succeed in the nursing program.
Contents

PHILOSOPHY .................................................................................................................. 8
PROGRAM OUTCOMES .................................................................................................. 10
PROGRAM DESCRIPTION ............................................................................................... 11
ADMISSION ...................................................................................................................... 11
SELECTION PROCESS ................................................................................................... 12
WITHDRAWAL ................................................................................................................. 13
TRANSFER POLICY ........................................................................................................ 13
READMISSION POLICY .................................................................................................. 13
REQUIRED TEXTS AND EQUIPMENT FROM BOOKSTORE ........................................... 19
ACADEMIC POLICY ....................................................................................................... 20
GRADING POLICY .......................................................................................................... 20
AWARDS & SCHOLARSHIPS .......................................................................................... 21
CODE OF ACADEMIC HONESTY ................................................................................... 22
Goals of the Academic Honesty Policy in UAMCTM Practical Nursing are to ................. 22
Plagiarism: .................................................................................................................... 22
Violation of the Code of Academic Honesty .................................................................... 24
Behaviors that constitute Academic Dishonesty ............................................................... 24
EXAM POLICY ............................................................................................................... 25
HOMEWORK AND ASSIGNMENT POLICY .................................................................. 26
ATTENDANCE POLICY .................................................................................................... 27
Cancellation of Classes .................................................................................................... 30
DISCIPLINARY POLICY ................................................................................................... 31
Drug Testing Procedures ................................................................. 43
Positive results ............................................................................... 44
Testing for Cause ........................................................................ 45
Social Networking ........................................................................ 46
Substance Abuse Policy Release Form ............................................ 47
HEPATITIS B .................................................................................. 48
Acknowledgement of Receipt and Compliance ............................... 49
CRIMINAL BACKGROUND ................................................................ 50
CRIMINAL BACKGROUND STATEMENT DISCLOSURE ................. 55
IMPORTANT PHONE NUMBERS ...................................................... 56
Clinical Training Sites: ................................................................... 56
Hospitals ....................................................................................... 56
Nursing Homes ............................................................................. 56
Clinics ........................................................................................... 56
Pediatric Clinics ............................................................................ 56
Psychiatric/Developmental Disabilities ........................................... 56
First Response/Ambulance ............................................................. 57
Nursing Faculty Cell Numbers ....................................................... 57
Directions to Clinical Sites .............................................................. 57
Area Agency on Aging of Southeast Arkansas, 110 E. Gaines Street, Monticello, AR ........................................ 57
Bradley County Medical Center, 404 S. Bradley Street, Warren, AR ................................................................. 58
Chicot Memorial Hospital, 2729 S. Hwy 65 82, Lake Village, AR ............................................................. 58
Child Development Center, 1711 East Ash Street, McGehee, AR ............................................................. 58
Drew Memorial Hospital, 778 Scogin Drive, Monticello, AR ............................................................. 58
EASI, Pine Bluff, 116 University Drive, Pine Bluff, AR ............................................................. 58
EASI, Warren, 501 Jolley Street, Warren, AR ............................................................. 58
PHILOSOPHY

UAMCTM, Practical Nursing Program’s philosophy and program outcomes are congruent with those of UAM College of Technology, McGehee and University of Arkansas at Monticello.

We, the faculty believe:

A PERSON is a unique, dynamic individual who is constantly evolving due to internal and external environmental factors such as culture, race, religion, gender, developmental stage/age, social status/structures, life experiences, etc. Human beings are holistic in that “the human system functions as a whole and is more that the mere sum of its parts”, Sister Callista Roy, 1991 and are characterized by the integration of physiological, psychosocial and spiritual components. All individuals have dignity and are worthy of respect and have the right to actively participate and collaborate with healthcare providers in their plan of care. Human beings are consumers of health care with physiological, psychosocial and spiritual needs. These needs must be met to achieve optimal health.

The ENVIRONMENT is all that is internal and external to the person. A person never acts in isolation, but is influenced by the environment and in turn affects the environment. Internal and external environmental factors include psychological, social, physical, and physiological components. There is constant, dynamic, unique interaction between a person and their environment. The environment can exert positive, negative or neutral effect over an individual in relation to health. To maintain health an individual must adapt appropriately to changes in their environment.

HEALTH is a dynamic state of wellness in which the individual is constantly adapting to changes in their internal and external environment. It is viewed as a point on a continuum ranging from illness and obvious disease to a state of optimum functioning in every aspect of life. Levels of health vary among individuals throughout the lifespan. Individuals define and are responsible for their own health. An individual’s unique definition of health and their health-seeking behaviors are influenced by multiple variables. Each individual’s view of health is relative to their circumstance, culture, developmental stage, religion, past experiences and many other factors. Nursing has the ability to influence an individual’s health-seeking behaviors by being ever mindful of their unique views of health. An appropriate nursing process must consider an individual’s view of health. Nursing practice is directed toward, “the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities and populations. (ANA, Nursing’s Social Policy Statement, 2nd Ed, 2003).

NURSING is both an art and a science, which facilitates health promotion, maintenance, and restoration throughout the lifespan utilizing the nursing process as a problem-solving method. The nursing process consists of assessment, nursing diagnosis/problem, planning, implementation and evaluation and is essential to providing quality, prioritized, client-centered care. Application of the nursing process employs the use of critical thinking skills during each phase of the process. Critical thinking is directed, purposeful, mental activity by which ideas are evaluated, plans are constructed, and desired outcomes are decided (deWitt, 2009). Nurses practice within legal, ethical and
professional standards in the health care delivery system to provide safe, effective care for clients (individuals, families, communities). Nurses are advocates who accept and respect the cultural diversity and developmental/lifespan differences of their clients and strive to provide an environment that supports individuality and dignity.

The broad goal of **NURSING EDUCATION** is to produce safe, caring, ethical, quality nurses. These goals can best be met by following the guidelines of the Arkansas State Board of Nursing for education programs, employing faculty who are caring, effective and current with healthcare issues and practice, and through constant program evaluation.

The community should be an integral part of the planning, development and evaluation of a nursing program, as we fulfill a need for our healthcare community. To identify needs, communication with individuals of the healthcare community is essential. A diverse advisory committee/board should be maintained and updated yearly. End-of-course evaluations by students as well as peer evaluation by other faculty are important considerations for program improvement and change. Faculty continued education is critical to maintain up-to-date program curriculum, reflective of current advances in healthcare.

Individuals are instructional and can learn. Learning is an innate behavior that develops over time and from experiences. Each person possesses skills that determine their level/rate of learning. Enhancing learning skills and developing new skills is a priority to maximizing an individual’s learning potential. Students may be racially, culturally, socioeconomically, developmentally and gender diverse but will be taught, evaluated and treated with respect, dignity and valued as an individual with unique educational needs. Every student has a right to receive an education appropriate for them. Each individual is responsible for their own learning experience. Holding learners responsible for their education empowers them and promotes internal motivation.

The faculty is committed to providing a positive learning environment that encourages students to develop to their maximum potential. Faculty should facilitate learning from simple to complex; concrete to abstract and direction-following to problem-solving. Faculty should be easily accessible to students. Faculty should have frequent office hours, offering extra lab time, and creating a general “open-door” policy, which may provide student with additional unique tools for success. Faculty should serve as role models by setting high standards for themselves, which should be evident in their practice. Faculty should set standards high for students as well. Students will perform at the level that is expected. Membership in professional organizations, enhance personal development through networking with associates and other professionals.

Information should be shared using auditory, visual and tactile stimulation. It should be reinforced using a variety of methods fostering internal and external motivation for the individual. External and internal positive reinforcement encourages/motivates individuals to achieve goals and succeed.

Learning should be an interactive process. Demonstrations and thought-provoking questions interspersed throughout lecture, lab, and clinical creates an environment of sharing. By maintaining an open style, students feel free to ask questions. Ultimately, this creates an environment in which critical thinking skills can be developed and a deeper understanding of nursing can be cultured. A multidisciplinary approach is essential for success. Students should be taught to work successfully as part of a healthcare team.
The faculty’s desire is to graduate students who possess the:

- knowledge and skills to be a proficient, entry-level practical nurse that can care for patients in all degrees of health, across the lifespan in various clinical settings.
- communication skills necessary to be an effective therapeutic nurse.
- empathy needed to be a culturally sensitive, caring advocate.
- problem-solving and critical thinking skills to practice safely.
- confidence needed to function as a successful member of the healthcare team.
- motivation to search-out new learning opportunities to maintain an up-to-date and current practice.
- desire to achieve optimal success in the profession of nursing.
- ethics and high standards to be valued and respected by their peers and the community.

PROGRAM OUTCOMES

The Nursing program will:

Educate competent, entry-level practical nurses who function within their scope of practice and legal and ethical standards as delineated in the Arkansas Nurse Practice Act.

Graduate students who pass the NCLEX at or above the national pass rate for first-time writers.

Graduate students of whom 90% become employed in nursing within 6 months.

Graduate students of whom 90% indicate that they are satisfied overall with the quality of the nursing education they received.

Graduate students of whom 95% of employers indicate that they would hire another graduate in the future if the need arises.

Maintain full approval of the Arkansas State Board of Nursing.

Meet standards of UAM College of Technology, McGehee, the University of Arkansas at Monticello System, and North Central Association of Colleges and Schools.
STUDENT LEARNING OUTCOMES:

Upon successful completion of the Practical Nursing program at UAM College of Technology, McGehee the student will have the ability to:

Pass the NCLEX-PN on the first writing.

Obtain a practical nurse license in the state in which they reside.

Enter the workforce with the competencies of an entry level practical nurse.

Provide safe, appropriate, holistic, nursing care, utilizing the nursing process, to individuals of diverse cultures, developmental stages, ages, genders, races across the lifespan in various practice settings.

Communicate and collaborate successfully and appropriately with other healthcare providers and clients (individuals, families, communities) in the prevention of disease, and maintenance and promotion of health.

Assume legal and ethical responsibilities and accountability in the practice of practical nursing as defined by the Arkansas Nurse Practice Act.

Join a professional organization to strengthen professional relationships and stay current on trends, issues and concerns of the nursing profession.

PROGRAM DESCRIPTION

The Practical Nursing (PN) program is approved by the Arkansas State Board of Nursing with regular evaluations to ensure a quality education in the nursing field. The program is designed to prepare qualified individuals to meet community nursing needs to perform those functions which are generally recognized as being within the scope of practical nursing and where the skill of registered nursing is not required.

ADMISSION

Applicants must meet all UAM College of Technology-McGehee requirements. In addition to obtaining admission to UAM College of Technology-McGehee, persons interested must complete a separate application to the Practical Nursing Program and be accepted for admission into nursing courses. An official copy of all transcripts (all coursework completed at high school/GED and all work completed at any community college, college, and/or university must be submitted to the college. UAM College of Technology does not offer advanced standing. You must have a letter of recommendation (good standing) from the nursing director, sent from the nursing program(s) that you have attended.
Take the Academic Placement test (ACT, ASSET, and COMPAS)

The ASSET can be taken at any of the three campuses, McGehee, Monticello or Crossett. The current cost of the test is $20.00. To view ASSET testing dates for the McGehee campus, go to www.uamont.edu/McGehee/ and click on the “Admissions” link. If you do not take the ASSET on the McGehee campus, you must request that your scores to be sent to the practical nursing department in McGehee. To apply for admission to the practical nursing program, you must score a 40 or above in the reading, writing and numerical skills portions of the ASSET or score a composite of 18 or higher with at least a 17 in reading, 15 in English and a 17 in math skills on the ACT.

Apply for financial aid.

Please see Charles Rocconi, Director of Student Services. He can be contacted at (870)222-5360, ext. 5220.

Enroll in prerequisites

Please see UAM catalog for necessary prerequisites. All Practical Nursing program prerequisites, with the exception of mathematics, English and computers, must be successfully completed within the past five (5) years with a grade of “C” or higher in order for a student to be eligible for acceptance into the Practical Nursing program. All prerequisites must be completed with the required grade for a student to register for nursing courses within the nursing program. No prerequisites may be taken concurrently with nursing courses. The prerequisites necessary may be offered on the three UAM campuses. You can review the schedules for these courses by searching online at www.uamont.edu/. If you did not complete your prerequisites within the UAM system, you must have your transcript sent to UAM college of Technology, McGehee, upon completion of these courses. Failure to provide transcripts of courses will result in the student being dropped from all classes in which they are registered and being unable to attend classes.

Complete and return the application

When your test scores meet the criteria, you will be sent an email with application documents or you may request a packet to be mailed to you. You must complete the application by October 11, 2013. These documents will be kept on file and your scores will be calculated and ranked alongside all other eligible applicants. Applications are not retained from previous years; a new application must be requested and completed by the student. Late applications will be considered beyond the October deadline based on availability of space.

**SELECTION PROCESS**

Admission is a selective process. The applicant’s who are eligible and have completed all requirements, will compete for 30 available openings in the program. Nursing applicants, who are not currently enrolled at UAM, must also apply for admission at UAM College of Technology, McGehee. The nursing department will contact each qualified applicant to schedule a meeting with the Director of Nursing and Allied Health and to take a TEAS exam. The exam is a requirement for each applying student and is utilized in the selection process. The exam is computer-based and must be paid for with a credit/debit or money card. The cost is $45.00. It will take approximately two and one-half (2 ½) to 3 hours complete this exam.
Selection is complete by the end of the **first week in November**. The 30 highest scoring students will be accepted into the program. You will receive an email or letter congratulating you of your selection or that you were chosen as an alternate or your scores were not high enough to be considered. Selection is assessed/completed using the TEAS exam and your grades earned in nursing prerequisites. The top 30 students are chosen for admission. Students who completed A&P I and II, Comp I and Intermediate Algebra will receive 2 extra points toward selection.

**Following acceptance into the PN program:**

- The student must take and successfully pass a healthcare provider CPR course from an approved American Heart Association instructor. (must be valid through December 2014)
- The student must start/complete Hep B vaccinations or sign a waiver.
- The student must get a TB skin test (this test must be done mid-December so it will be good throughout the nursing program)
  - Students will be dropped from classes if they fail to submit any of the requirements listed above (CPR card, Hep B record or waiver, TB skin test) one week prior to orientation
- Students are required to make an appointment with their advisor to register for nursing courses
- Students are required to take UAMCT, McGehee nursing courses while in the program, no other concurrent coursework with be allowed

**WITHDRAWAL**

Withdrawal (in good standing during the program) desiring readmission, must submit a written request for readmission with the next class within two weeks of withdrawal. Students failing to do this will not be allowed to apply for readmission. In the event you change your mind and decide not to readmit, you must notify the nursing department immediately. Failure to do so will result in your not being allowed admission into the program at a later date. Only those students who withdraw in good standing will be considered for readmission. Good standing is defined as students who have not withdrawn due to behavioral/conduct/professionalism issues.

**TRANSFER POLICY**

UAM College of Technology, McGehee does not accept transfer nursing credits or advanced standing. Prerequisites are accepted per University policy.

**READMISSION POLICY**

- A student may be readmitted once for academic failure.
- Any student who leaves the program due to behavioral issues will be ineligible for readmission.
All students will be required to retake:

- ALL CLINICAL COURSES
- NURSING OF ADULTS I AND II

A student will be required to prove proficiency in the courses which they have completed with a “C” or better. The student will be required to take program proficiency exams in all courses completed (with exception to the afore mentioned courses) (with a “C” or better) and must score 80% or higher for each course. If the student’s score is lower than 80% they will be required to retake that particular course. The student should understand that if they receive federal student aid for courses completed with a grade of “A” or “B” in the Practical Nursing Program or at any University of Arkansas or College of Technology campus, and if they are required to repeat the course, federal student aid cannot and will not pay for the same course. If a student’s score is 80% or above on a program proficiency exam, they will not be required to retake that course. All exam policies will be in effect during the proficiency exams.

A returning student must be readmitted to the next year’s class or all courses must be repeated. No program proficiency exams will be given if readmission is not with the next class.

Students are permitted only one readmission due to academic failure. The student must complete the entire admission process including the selection process. The student is not guaranteed readmission.

Readmission of students who withdraw from a nursing course for reasons other than academic failure will be considered by the Director of Nursing and Allied Health, faculty, Assistant Vice Chancellor and the Vice Chancellor on an individual basis after the student has reapplied for admission and has submitted a letter explaining how the problem that led to withdrawal has been remedied.

Students who exhibit behaviors which are not congruent with the Professional Code of Ethics will not be allowed to re-enter the program.

PROGRAM OF STUDY

To be eligible for a Technical Certificate from the University of Arkansas at Monticello College of Technology, McGehee, nursing majors must complete a Program of Study approved by his/her advisor upon entering the University. The Program of Study indicates the minimum semester hours of unduplicated credit at the technical certificate level. The Program of Study for a Technical Certificate in Practical Nursing follows:
## PREREQUISITES FOR AASN TRACK
*(must be successfully completed before starting nursing courses)*

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>BIOL 2233</td>
<td>Anatomy &amp; Physiology I</td>
<td>3</td>
</tr>
<tr>
<td>BIOL 2291</td>
<td>Lab Anatomy &amp; Physiology I</td>
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</tr>
<tr>
<td>BIOL 2243</td>
<td>Anatomy &amp; Physiology II</td>
<td>3</td>
</tr>
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<td>BIOL 2301</td>
<td>Lab Anatomy &amp; Physiology II</td>
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<tr>
<td>PE 2113</td>
<td>Nutrition</td>
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<tr>
<td>ENGL 1013</td>
<td>Composition I</td>
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</tr>
<tr>
<td>NA 1017</td>
<td>Nursing Assistant</td>
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**ONE OF THE FOLLOWING:**

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<tr>
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<th>Credit Hours</th>
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<tbody>
<tr>
<td>CIS 1013</td>
<td>Introduction to Computer-based Systems</td>
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<tr>
<td>CIS 2223</td>
<td>Microcomputer Applications</td>
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<tr>
<td>BUS 1303</td>
<td>Tech Computer Apps for Business</td>
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<tr>
<td>MATH 1203</td>
<td>Intermediate Algebra</td>
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</table>

**TOTAL PREREQUISITE HOURS FOR AASN TRACK** 27 credit hours

## PREREQUISITES FOR PN TECHNICAL TRACK

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<td>PN Anatomy And Physiology or higher</td>
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<td>COMM 1203</td>
<td>Tech Communication or higher</td>
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<tr>
<td>MAT 1203</td>
<td>Technical Math or higher</td>
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<td>Course</td>
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<td>Description</td>
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<td>--------</td>
<td>------</td>
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</tr>
<tr>
<td>NA</td>
<td>1017</td>
<td>Nursing Assistant</td>
</tr>
<tr>
<td>BUS</td>
<td>1303</td>
<td>Technical Computer Applications or higher</td>
</tr>
<tr>
<td>PE</td>
<td>2113</td>
<td>Nutrition</td>
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<td><strong>TOTAL PREREQUISITE HOURS FOR PN TECHNICAL TRACK</strong></td>
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**FIRST SEMESTER (SPRING)**

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<th>Course</th>
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<th>Description</th>
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<td>NUR</td>
<td>1002</td>
<td>PN Pharmacology</td>
<td>2 credit hours</td>
</tr>
<tr>
<td>NUR</td>
<td>1117</td>
<td>PN Basic Nursing Principles &amp; Skills</td>
<td>7 credit hours</td>
</tr>
<tr>
<td>NUR</td>
<td>1162</td>
<td>PN Geriatric Nursing &amp; Management</td>
<td>2 credit hours</td>
</tr>
<tr>
<td>NUR</td>
<td>1231</td>
<td>PN Nursing of Mothers &amp; Infants</td>
<td>1 credit hour</td>
</tr>
<tr>
<td>NUR</td>
<td>1242</td>
<td>PN Nursing of Children</td>
<td>2 credit hours</td>
</tr>
<tr>
<td>NUR</td>
<td>2264</td>
<td>PN Clinical I</td>
<td>4 credit hours</td>
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<td><strong>Total Semester Credit Hours</strong></td>
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<td><strong>18 credit hours</strong></td>
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**SECOND AND THIRD SEMESTERS (SUMMER I & II)**

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<td>NUR</td>
<td>1101</td>
<td>PN Vocational/Legal/Ethical</td>
<td>1 credit hour</td>
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<tr>
<td>NUR</td>
<td>1203</td>
<td>PN Intravenous Therapy</td>
<td>3 credit hours</td>
</tr>
<tr>
<td>NUR</td>
<td>1317</td>
<td>PN Adult Medical/Surgical Nursing I</td>
<td>7 credit hours</td>
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<tr>
<td>NUR</td>
<td>2151</td>
<td>PN Mental Health &amp; Illness</td>
<td>1 credit hour</td>
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<tr>
<td><strong>Total Summer Credit Hours</strong></td>
<td></td>
<td></td>
<td><strong>12 credit hours</strong></td>
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</table>

**FOURTH SEMESTER (FALL)**
In addition to the program of study, the basic requirements include:

- A Minimum cumulative grade point average of 2.0 upon completion of the program
- Earn a grade of “C” or better in all required courses
- All financial obligations with the University and the student organization must be settled before receiving the technical certificate
- Attendance at pinning ceremonies is required of all candidates unless written permission to be awarded the technical certificate in absentia is submitted to the Director of Nursing and Allied Health
- Meet all required scores on ATI exams

For additional information concerning the curriculum and the University in general a current electronic catalog may be obtained at student services or you may go on the website at [www.uamont.edu](http://www.uamont.edu) click on “current student” then click on “student more”. The student handbook and the college catalog are listed in this area.
# 2014 Practical Nursing Program Cost

<table>
<thead>
<tr>
<th>SPRING SEMESTER</th>
<th>COST</th>
<th>SUMMER I&amp;II</th>
<th>COST</th>
<th>FALL SEMESTER</th>
<th>COST</th>
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<tbody>
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<td>$1,296.00</td>
<td>Tuition $72/credit hr@ 12</td>
<td>$864.00</td>
<td>Tuition $72/credit hr@ 12</td>
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<tr>
<td>Tech Infra structure $2/crhr</td>
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<td>Criminal Background Check</td>
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<td>Hepatitis B Vac (3)</td>
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<td>ASBN Licensure Fee</td>
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## Total Approximate Program Cost Not Including Prerequisites

$7,009.50

This total is only an estimate; some costs are subject to change without notice.
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<th>Course</th>
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<tr>
<td>NUR1002 PHARMACOLOGY</td>
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ACADEMIC POLICY

The practical nursing (PN) program is progressive. Students must maintain a C (78%) average in all courses or the following action will be taken:

- Below a C (78%) before midpoint of a course, the student will be counseled regarding the deficit and strategies will be discussed to improve the student’s grade. The student will be referred to the retention specialist. This will be a written warning.

- Below a C (78%) at midpoint of a course, the student will be counseled regarding the academic deficit and strategies will be discussed to improve the student’s grade average. The student will be placed on academic probation until their grade average is 78% or above. A counseling statement will be written and signed by the student and all concerned. (see counseling statement in this handbook).

- **Below a 76% average in three courses at any time during Clinical I, the student will be ineligible to attend clinical until they have raised their average to 76% or above in all but two courses.** On the student’s scheduled clinical days, the student will be expected to report to the Nursing and Allied Health Building for remediation in the course(s) in which they are below 76% average. The student is required to remediate until they have raised their grade to the acceptable level. Students will be required to make up missed clinical, furthermore, attendance policies in this handbook still apply. Students who miss 40 hours or more will be given the option to withdraw from classes if this action is keeping within the policies of UAM.

- **Students with a 65% or below in two (2) or more courses will be ineligible to attend clinical.**

- Below a C at completion of a course, the student will not be allowed to register for the next sequence of courses and will be unable to progress in the nursing program.

- A “C” in nursing consists of a numerical grade of no less than 78%.

GRADING POLICY

Grades are based on:

- Lecture: refer to the specific course syllabus.

- Clinical: refer to the specific course syllabus.

Grading Scale:

<table>
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<tr>
<th>Average</th>
<th>Letter Grade</th>
<th>Points</th>
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<tr>
<td>92-85%</td>
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<td>84-78%</td>
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<td>77-65%</td>
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<tr>
<td>64-0%</td>
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</table>
- Exam scores will be 90% of your total theory grade, 10% will be assignments, pop exams and class participation.
- Clinical exams and evaluations are equal in weight and will make up the total of the clinical grade.
- Clinical evaluations are completed by clinical instructors, nurses you will work with in hospitals and clinics, your clinical preceptor during your preceptorship and possibly your peers during peer reviews/evaluations.
- No grades will be posted. Students may schedule appointments with their specific course instructors to review their exam scores and their grades.
- Mid-term grades will be available from the student’s advisor/instructor. It is the student’s responsibility to schedule an appointment with their advisor to view mid-term grades.
- When nearing the completion of a semester, you will be expected to complete exams generated by a national testing company (ATI). The exam scores you receive will be incorporated into your specific course scores to calculate your final grade. At some point in the program, you may be required to score a minimum on these exams. If you do not score the minimum score, you will receive an “I” for a grade and will have a specified time to improve your score.
- Final course grades will be entered into the system as soon as possible by the instructor and will be available to students via WeevilNet. We will not post grades or report grades over the telephone or by email.
- Following final grade release, students have the right to schedule an appointment with their advisor to discuss their grade and their continued progression in the program.

**AWARDS & SCHOLARSHIPS**

- **Nursing Faculty Award for Outstanding Nursing Student of the Year**
  - This award is given during the pinning ceremony to the student who has the best: attendance, grades, attitude, and clinical skills.
- **Nightingale Award**
  - This award is given during the pinning ceremony to the student who has shown the best overall improvement in clinical skills and is exceptional at nursing care.
- **McGehee Hospital Auxiliary Scholarship**
  - This scholarship varies in award amount and may be given to one or more students who live in and are interested in working in the McGehee area
  - Grade point average, instructor recommendation and student need are considered
  - Students are expected to compose an application letter to the auxiliary committee during the application process
  - Students are expected to write a letter of appreciation if awarded the scholarship
Given during the summer I semester

- Mr. and Mrs. Smith Scholarship
  - This scholarship will be awarded to one or more students
  - Student must be in good standing in the program
  - Instructor recommendation and student need are considered
  - Student must submit a “letter of need”
  - Awarded students are expected to write a letter of appreciation.

CODE OF ACADEMIC HONESTY

The Practical Nursing program at UA MCTM recognizes that the nursing profession is based on a standard of honesty and personal and professional integrity. In order to achieve the mission of the college and the practical nursing program and develop the high ethical standards required for nursing practice, academic honesty is an integral part of the nursing program. Students and faculty are jointly responsible for maintaining an honest environment and all must work together to ensure the success of the academic honesty policy. All students within the practical nursing program are expected to maintain the code of academic honesty. This means that all academic work is presented without plagiarism, cheating or unauthorized assistance.

Goals of the Academic Honesty Policy in UAMCTM Practical Nursing are to

- Promote a culture of academic honesty within the practical nursing program.
- Increase understanding of acts that are designated as academically dishonest behaviors.
- Maintain the academic reputation of the UAMCTM Practical Nursing program.
- Clearly define the process related to matters of academic dishonesty.

Plagiarism:

- Any attempt to present someone else’s work as one’s own, on quizzes, examinations, reports, or notebooks, etc., constitutes plagiarism, an act closely analogous to the theft of money or goods to any form of swindling or fraud, and in the academic world, just as deplorable. There are various forms of plagiarism of which the following are the most common:
  - Word-for-word plagiarism. This includes (a) the submission of another person’s work as one’s own; (b) the submission of work from any source whatever (book, magazine, newspaper article, unpublished paper, or thesis) without proper acknowledgement by footnote or reference within the text of the paper; (c) the submission of any part of another’s work without proper use of quotation marks.
  - Patchwork plagiarism. This consists of piecing together of unacknowledged phrases and sentences quoted verbatim (or nearly verbatim) from a variety of sources. The mere reshuffling of other people’s words does not constitute “original” work.
  - Unacknowledged paraphrase. It is perfectly legitimate to set forth another author’s facts or ideas in one’s own words, but if one is genuinely indebted to the author for these facts or ideas, the debt must be acknowledged by footnote or reference within the text of the paper.
• Unauthorized assistance:
  o Using books, notes, calculators and technological devices in an unauthorized manner to assist with quizzes, exams or lab work.
  o Copying answers to an exam.
  o Giving or receiving answers to a scheduled exam.
  o Submitting work done by another individual and portraying it as one’s own.

• Providing false information:
  o Giving false reasons (in advance or after the fact) for failure to complete academic work. This includes, for example, giving false excuses for failure to attend an exam or attend clinical.
  o Falsifying the results of any laboratory or clinical work or fabricating any data or information, including patient related information.
  o Giving false information or testimony in connection with any investigation or hearing under this policy.
  o Presenting previously submitted academic work and portraying it as new material.
  o Falsifying clinical/preceptor paperwork; (some examples: hours, assessments, experiences, performance of skills submitted.

Goals of the Academic Honesty Policy

• Promote a culture of academic honesty within the Program.
• Increase understanding of acts that are designated as academically dishonest behaviors.
• Maintain the academic reputation of the UAMCT-M.
• Clearly define the process related to matters of academic dishonesty.

Cheating and plagiarism are considered academic violations. These violations are adjudicated through the Academic Violation Process listed below:

1. An instructor who suspects a student is guilty of cheating or plagiarism within the instructor’s class must inform the student of this suspicion and provide the student with an opportunity to respond to the accusation.

2. An instructor who believes a student is guilty of cheating or plagiarism within the instructor’s class may take any of the following actions as specifically listed in the class syllabus:
   a. Issue a warning to the student;
   b. Lower the grade awarded to the student for the test or paper;
   c. Require the student to retake the test or rewrite the paper;
   d. Award no credit for the paper or test;
   e. Withdraw the student from the course;
   f. Award the student a failing grade for the course;
   g. Other action specified in the course syllabus.

• A student who receives any of the above actions and feels this action is unjust may appeal the instructor’s decision as addressed in the academic process of appeal. This appeal procedure must begin within ten class days of receiving written or oral notice of the action. The Office of Academic Affairs conducts the appeals process. If attending the UAM Colleges of Technology at Crossett or McGehee, the appeal process begins with the Director of Instruction (Assistant Vice Chancellor), and then proceeds to the Vice Chancellor, and then the Academic Appeals Committee.
Violation of the Code of Academic Honesty

- Incidents of academic dishonesty will be adjudicated through the program’s usual disciplinary process. Specifically, when a faculty member suspects a student has committed academic dishonesty, the faculty member will confront the student and may determine the appropriate action to be taken. Penalties could include repercussions on the assignment/test, through failure for the course. A student who disagrees with the faculty member’s decision may appeal through the appeals process listed in the handbook.

Behaviors that constitute Academic Dishonesty

- Behaviors listed are not inclusive (Adopted from Academic Honesty policies from West Hills Community College, University of Maryland Baltimore, School of Nursing; University of Rochester, University of Arkansas/Fayetteville, University of Houston/Clear Lake, University of Michigan, and Rhode Island College handbook of Policies, Practices and Regulations.)

Plagiarism – Any attempt to present someone else’s work as one’s own, on quizzes, examinations, reports, or notebooks, etc., constitutes plagiarism, an act closely analogous to the theft of money or goods to any form of swindling or fraud, and in the academic world, just as deplorable. There are various forms of plagiarism of which the following are the most common:

  o **Word-for-word plagiarism.** This includes (a) the submission of another person’s work as one’s own: (b) the submission of work from any source whatever (book, magazine, or newspaper article, unpublished paper, or thesis) without proper acknowledgement by footnote or reference within the text of the paper; (C) the submission of any part of another’s work without proper use of quotation marks.

  o **Patchwork plagiarism.** This consists of piecing together of unacknowledged phrases and sentences quoted verbatim (or nearly verbatim) from a variety of sources. The mere reshuffling of other people’s words does not constitute “original” work.

  o **Unacknowledged paraphrase.** It is perfectly legitimate to set forth another author’s facts or ideas in one’s own words, but if one is genuinely indebted to the author for these facts or ideas, the debt must be acknowledged by footnote or reference within the text of the paper.

- Unauthorized assistance:

  o Using books, notes, calculators and technological devices in an unauthorized manner to assist with quizzes, exams or lab work.

  o Copying answers to an exam.

  o Giving or receiving answers to a scheduled exam.

  o Submitting work done by another individual and portraying it as one’s own.

- Providing false information:

  o Giving false reasons (in advance or after the fact) for failure to complete academic work. This includes, for example, giving false excuses for failure to attend an exam or attend clinical.
• Falsifying the results of any laboratory or clinical work or fabricating any data or information, including patient related information.
• Giving false information or testimony in connection with any investigation or hearing under this policy.
• Presenting previously submitted academic work and portraying it as new material.

• Theft
• Procuring unauthorized materials/data related to academic work such as exams, grades, class files in any way.

EXAM POLICY

• All books, papers, belongings, etc... must be placed on the floor in the front of the room before the exam begins.
• You should have a pencil and a scantron only at your seat, unless otherwise instructed.
• Each student must supply their own scantrons for exams. Scantrons can be purchased at the campus bookstore.
• Failure to supply a scantron before an exam will result in the student being unable to take the exam at that time.
• You must use a number 2 pencil with a good eraser on all exams.
• Students must put their name on the exam and scantron. Those exams/scantrons without a name will receive an automatic five (5) point deduction.
• There will be no talking during exams. If you talk during an exam, you will be asked to leave the testing area and you will earn a zero for that exam.
• If you have a question or need to be excused from the exam, please raise your hand to notify the proctor.
• All exams will have a time limit. The proctor will notify you of the time limit before or as the exam begins. At the end of the time limit, the proctor will request that all scantrons and exams be submitted. At that time, you must put your pencil down and submit your scantron.
• Students arriving late for an exam must enter quietly and take their seat without disrupting the students testing. Students will be allowed to take the exam but will abide by the set time limit.
• Submit your scantron when you have completed your exam, exit the testing area, do not disturb the class as you exit, do not re-enter the room until all students have completed testing.
• After you have exited the testing area, please be quite and do not stand in the hall discussing exam questions. You are welcome to visit the student center in the main building until class begins again.
• A post test review may be performed at the availability of time and the instructor’s discretion.
• Your scantron score will stand. Any discrepancies will be addressed by the instructor and/or the Director of Nursing and Allied Health.

• Exam scores will not be posted.

• If you feel that your answer to an item on an exam has been marked incorrect inappropriately, you must submit a written request for item review to the instructor who wrote the exam. This request must be turned in to the instructor on the day of the exam review. For your item to be reviewed, you must have the item number and a reference page number on your request.

• No cheating of any kind is allowed (review “ineligible to attend clinical”)

• No caps/hats/head coverings will be allowed during exams

• No shielding of eyes is permitted during exams, keep your eyes on your paper

• Testing on computer may be implemented at some point. All appropriate testing policies will apply.

• Students absent with notification will be given a make-up exam at the end of the course, before finals. It is the student’s responsibility to schedule a testing date with the appropriate faculty for a make-up exam.

• There will be no make-up of pop exams for any reason.

• A student will only be allowed to make-up one exam per course.

• Any further absence on exam days within the semester will result in a zero.
  o Exception to this rule: Death in immediate family, you are hospitalized, a subpoenaed to court.

• Make-up exams will be allowed only under the following circumstances and may be evaluated on an individual basis by the nursing faculty and director:
  o A student is sent home sick by an instructor or supervisor for a facility.
  o A student is absent with a physician’s excuse.
  o A student has an immediate family member hospitalized.
  o You are subpoenaed or have a court ORDER to appear in court.

• Make-up exams carry an automatic five point deduction from the exam score.
  o Example: if a test is worth 25 points, you will lose five test points before beginning the exam. The maximum points you can score on the exam would be 20.

• Students absent from class without notification will receive a zero on all exams given during their absence.

**HOMEWORK AND ASSIGNMENT POLICY**

• Refer to the specific course syllabi.
• Unless otherwise instructed, all written work must be word processed, typed, or written legibly in blue or black ink, on standard sized paper. The paper can be lined or unlined, but it cannot be torn from a notebook.

• Papers are corrected for grammar, sentence structure, punctuation, and spelling. Remediation may be required by faculty for those students exhibiting deficits.

• Students absent without notification will receive a zero on all homework due on the day missed.

• Students with excused absences will be allowed to turn in all homework on their next scheduled class/clinical day with no deductions.

• Assignments that are not handed in on time will receive a 5 point deduction.
  o Assignments are considered late if received after 8:10 am on the date they are due.
  o Must be turned in before class begins or immediately upon your arrival.

• Assignments will not be accepted if more than one day late.

• All scantrons, homework, care plans and bibliography cards submitted for a grade become the property of UAM College of Technology, McGehee.

• The student will be allowed to view their work (care plans, written assignments) after it is graded, no copies will be made for the students. If you want copies of your work, please copy your work before submission.

• Any assignment submitted without a name will receive a 5 point deduction.

ATTENDANCE POLICY

CLASSROOM

• Attendance is strictly recorded and the policy will be strictly adhered to.
• Following an absence, the student is responsible for gathering missed information and material without disrupting the class.
• Students are required to sign-in and sign-out each day.
• If a student needs to leave for any reason, they must sign out and notify the instructor/director before leaving.
• No student may sign-in for or sign-out for anyone other than themselves.
• Failure to sign-in/out or both may result in the student losing the hours for that day. This will apply to the forty-hour (40) maximum.
• Students completing the program must meet the minimum requirements of each course and total program hours as required by the curriculum plan and the Arkansas State Board of Nursing.
• Students may be absent a maximum of forty (40) hours from the first day of the program until completion (This would be excused absences and unexcused absences total) All absences after 40 hours will be unexcused. The student will be unable to make the hours up and will be ineligible to attend clinical experiences. Extenuating circumstances will be addressed on an individual basis. It
is the student’s responsibility to keep up with the hours they are absent, late, or leave early. All absentee hours must be made-up. IT IS THE STUDENT’S RESPONSIBILITY TO SCHEDULE MAKE-UP HOURS.

- Students who have not made-up their missed hours before posting of grades will receive an incomplete and will not be allowed to progress in the nursing program.
- Makeup time/assignments will be necessary and will be at the discretion of the nursing faculty. It is the student’s responsibility to meet with each instructor when time is missed, to discuss makeup assignments/time.
- All lecture makeup time must be completed before the student is eligible for clinical experiences outside the lab.
- The nursing staff, Director of Nursing and Allied Health and Assistant Vice Chancellor, retains the right to evaluate missed time.
- Classes begin promptly. Students are expected to be on time and prepared for class.
- If a student must be absent or late for LECTURE, they must call the nursing office before 8:10. If it is necessary to leave a voice mail message, give a detailed message and a number where you can be reached. Failure to speak with faculty or leave a detailed message will be considered “failure to call”. No one else may call in for a student, the student must call.
- “failure to call”
  - First offense will result in a written, verbal warning
  - Second offense will result in a written warning
  - Third offense will result in being Ineligible to attend clinical
- Anyone arriving late for lecture will be considered tardy and will automatically lose thirty (30) minutes on attendance.
  - When a student is tardy four (4) or more times for lecture, they shall not enter the classroom. The student will miss the entire class period and will be counted absent for that class. This pertains to every course.
- When a student is late to lecture, they must enter quietly and take their seat without disrupting the instructor or other students.
- Anyone arriving after report begins for clinical or after the appointed time will automatically lose thirty (30) minutes of attendance.
- Leaving early is strongly discouraged unless you are sent home by the instructor or a representative of the facility.
- Every effort should be made to schedule appointments after school hours. Repeatedly leaving early will not be tolerated and will be evaluated on an individual basis.
- If a given presentation (tour, guest speaker, workshop, etc.) is missed, the instructor/Director of Nursing and Allied Health has the option to:
  - Require the student to come back with the next available class and cover the missed material
  - Issue a zero for the course material that is missed
  - Require a make-up assignment that covers the missed information
• Agencies that grant financial assistance will be notified of all absences of those students receiving financial aid. The policy of each agency regarding payment when a student is absent will apply in each case.

• Bereavement policy: in the event of a death in the immediate family, the student will be allowed three days of excused time that will not be applied to the maximum forty (40) hours. The student will be allowed to make-up the hours if necessary, as well as any missed work without a penalty. Hours must be made up if the student has not met minimum ASBN requirements.

• Holidays: All holidays recognized by the University of Arkansas at Monticello will be observed. (see your calendar).

CLINICAL

• If a student must be absent or late for CLINICAL, they must call the assigned clinical instructor’s cell phone no later than 6:45 (see list of numbers in this handbook). If it is necessary to leave a voice mail message, give a detailed message and a number where you can be reached. Failure to speak with the instructor or leave a detailed message will be considered “failure to call”. A text message will not suffice; we need to hear your voice.

• “failure to call”
  o First offense will result in a written, verbal warning
  o Second offense will result in a written warning
  o Third offense will result in being Ineligible to attend clinical

• If a student must be absent or late for CLINICAL the student must also call the facility where they are scheduled. They must speak with the nurse/person in charge. You must get the name of the person you spoke with and leave a number where you can be contacted. If you are scheduled in a clinic area where there will be no instructor, call the nursing office and the clinical site.

• In the absence of extenuating circumstances, a student who has been tardy for the fourth (4th) and/or more times will be sent home for that day and will be required to make up those clinical hours at the discretion of the instructor/Director of Nursing and Allied Health.

• Leaving early is strongly discouraged unless you are sent home by the instructor or the facility. You should make every effort to schedule appointments after school hours. Repeatedly leaving early will not be tolerated and will be evaluated on an individual basis. Never leave a facility or clinical area without first notifying the clinical instructor. This is considered abandonment. The disciplinary policy will be followed. The only exception to this is being sent home by the instructor or the supervisor of the facility. If you leave early, you must sign out.

• Any missed clinical time will be made-up on the scheduled make-up days or the student will be given an assignment appropriate to the missed clinical experience and at the instructor’s and/or the Director of Nursing and Allied Health’s discretion. If the student’s absences exceed the scheduled make-up hours, they may be required to make-up the necessary hours following pinning. They will receive an incomplete grade until all time and all assignments are completed.
Cancellation of Classes

- Students are informed about cancellation of classes or clinical by announcements on local radio stations, Channel 7, RAVE, communications from individual instructor’s, or by a “call chain” set up by the student organization, ALPNA. It is very important to contact the nursing office if the number you have given to be contacted has changed. This policy is also in the UAM student handbook.
DISCIPLINARY POLICY
Copies of all disciplinary actions will be given to the Vice Chancellor, Assistant Vice Chancellor, Counselor, and the student. The original will remain in the student’s permanent record.

Definition of actions:

- **Warning:** A verbal warning may be given, initially. Please see individual policies.
- **Warning:** A written warning will be given in regard to infractions of policy, see individual policies. Students will be counseled by the Director of Nursing and Allied Health and/or the nursing faculty concerning their violation of policy and possible coping strategies will be discussed to prevent recurrence. A specified time frame for improvement will be stipulated.
- **Probation:** A written notice of infractions concerning policies and procedures will be addressed by the Director of Nursing and Allied Health and/or nursing faculty and referred to the Assistant Vice Chancellor, the Counselor and Vice Chancellor.

Student Appeal Procedure
Please see UAM student handbook on UAM homepage under current student at [www.uamont.edu](http://www.uamont.edu)

CLASSE ROM POLICY

- Professional behavior respect for self and others, courteous mannerisms and habits are required.
- Socially acceptable personal hygiene is required, if your hygiene is in question or becomes an issue, you will be asked to leave the classroom to take care of your business and the discipline policy will be followed.
- Address instructors, administration, and professional staff with proper titles: Mr., Miss, Mrs., or Doctor.
- Profanity will not be tolerated.
- Students are expected to return the classroom to proper order prior to dismissal.
- Students are required to adhere to safety policies and procedures in the department.
- There will be no cell phones in the classroom. Please see cell phone policy.
- Eating and drinking in the classroom will not be allowed. The exception to this is water in a bottle or with a top on the container.
- Students are not allowed to give the appearance of sleeping in the classroom. They will be asked to leave and will not be allowed to return until the next break, the discipline policy will be followed.
- Students are discouraged from leaving early. Students must inform the instructor and sign out.
• Students are responsible for keeping the classrooms and labs neat, orderly and safe. Failure to comply will result in counseling, see disciplinary policy.

• All items left in the refrigerator on the last scheduled lecture day of the week will be discarded. Please take your dishes home. The refrigerator is completely emptied and cleaned on Friday. If you leave a container, it will be thrown out.

**Classroom attire**

- Name badges must be worn at all times.
- Modest dress.
- If the student has not dressed appropriately for class/clinical, the student will be sent home to dress appropriately with hours being deducted from their attendance.

**Smoking**

- Smoking is strictly prohibited on all UAM campuses and clinical facilities by law. Failure to adhere to this policy will result in disciplinary action.

**Cell Phones**

- Cell phones may be allowed in certain instances. See individual course syllabi for the instructor’s policy. However, if a student chooses to bring their cell phone into the classroom without permission or against policy, he/she will be subject to the following policies:
  
  o If a cell phone rings, makes any sound or vibrates, the student will be asked to leave the classroom and will not be allowed to enter until the next break.
  
  o If a cell phone rings, makes any sound or vibrates during testing, the student will be asked to turn in their test and leave the room immediately. The student is responsible for scheduling a make-up exam at the end of the semester which will carry a 5 point deduction.
  
  o Failure to comply with this policy will result in the student being counseled, the disciplinary policy will be followed (see disciplinary policy)

- Students are not allowed to use the school’s phone.
- Students are to receive no personal/business telephone calls into the school’s phone system. Only true emergency calls will be relayed to the student.
- If a student has a need to keep in contact with family or other individuals, the student must inform the instructor of their situation.
- Students are required to read and sign the student handbook agreement. The student is responsible for knowing and understanding the policies, as well as the consequences for failure to follow these policies.
LABORATORY POLICY

- Students are expected to return the lab to proper order prior to dismissal.
- Students must sign in with an instructor or the secretary before entering the laboratory.
- Students must wash hands before handling SimMan.
- No drinks (except water as mentioned before) or food in the laboratory.
- Cell phones are not allowed.
- Lab evaluations
  - Students must successfully perform all scheduled skills in the lab before being eligible for clinical practice.
  - A student will be allowed to perform and be evaluated on a nursing skill twice without check-off adjustment.
  - If a student is not prepared to perform skills check-off, the student will be evaluated as unsuccessful and will be required to be re-evaluated on that particular skill at a later time.
  - All students will remain on the scheduled check-off rotation. If you are unsuccessful performing a skill, you are expected to continue the skills rotation as scheduled.
  - If a student is unable to successfully perform a skill (twice), the student will be required to:
    - Schedule time in the lab with the nursing secretary and practice on their own time (must sign-in and sign-out).
    - Complete the following assignment:
      - Student must hand write (legibly) the unsuccessful skills(s) word-for-word from their principles and skills textbook.
      - Nursing faculty will re-evaluate the student’s performance.
      - Student must be able to answer questions regarding the skill/procedure.
      - This process will continue until the student can successfully perform the skill or the student has missed too many clinical hours (40 total absences). At that time, the student will be ineligible to attend clinical and will fail Clinical.
      - Faculty evaluators may be rotated following the second unsuccessful performance, per Director of Nursing and Allied Health.

NURSING LAMP AND PIN POLICY

Nursing lamp and pins will be ordered several months before graduation to allow time for shipping and receiving. Each pin and lamp will be assessed for damage and correctness. In the event that a return of the lamp or pin is necessary, there must be time for repair or correction.

- When ordering the lamp and pin, you must be aware of the following policy:
  - In the event that you must leave the program (for whatever reason) after ordering and purchasing the pin and lamp but before completing the program, you will not be allowed to receive either the lamp or the pin. Only individuals who complete the program will receive a lamp and a pin. The lamp and pin will remain the property of the nursing department, a refund is not possible.
• If you are unsure of your completion, you may not want to order the lamp or pin. This would mean that you would not have your lamp or pin during the pinning ceremony. If available, you may be allowed to use what we have in inventory, but would not be allowed to take the pin or lamp home.

**CLINICAL POLICY**

• Before attending Clinical I, the student must have checked off and passed all lab procedures as scheduled. If unable to attend clinical, the student will continue to practice and check off on skills until all scheduled skills are completed successfully.

• Before attending clinical I the student’s final Medication/Dosage score must be 90%. The student will be ineligible to attend clinical I until they score 90% or above. If unsuccessful on the first exam, the student will be given two more chances to score 90% or above. If after the 3rd attempt the student is still unsuccessful, the student will be ineligible for clinical and will be withdrawn from the course. The student will be unable to progress in the nursing program.

• Before attending clinical II the student will be given another Medication/dosage exam and the student must score 90% on that exam. If unsuccessful, the student will be given two more chances to score 90%. At that time, the student will be ineligible for clinical and will fail the course. The student will be unable to progress in the nursing program.

**Clinical Orientation**

• Students are required to attend all clinical agency orientations. Clinical orientations are generally held the week before clinical begins. Such sessions may be held outside the college calendar and before the beginning of the semester. Keep this in mind when you plan vacations or schedule other responsibilities.

**Clinical Dress Code**

• A University clinical identification badge must be worn at all times during all clinical rotations, including scheduled trips, to identify the student as a member of UAMCTM, PN program.

• A complete uniform constitutes professional attire and includes: a clean, pressed, well-fitting, uniform, a left shoulder patch; ID badge, bandage scissors, stethoscope, black/blue pen, penlight, paper or pocket size notebook for note-taking; watch with a second hand or digital watch that can mark seconds.

• The student will wear the UAMCTM approved uniforms (these are purchased from Sanders Uniforms of Greenville and will be ordered before clinical experiences).
  - White top with green piping, logo patch on left sleeve
  - White pants w/elastic waist and sewn front crease
  - White lab coat with, logo patch on left sleeve
  - White, leather, full (no clogs, sling backs)shoes
  - White socks
- White/nude color undergarments for light skinned and dark colored undergarments for dark skinned individuals (your undergarments should not show, whatever color it takes)
- UAMCTM ID badge with badge holder (bookstore)

- The student’s hair will be worn off their collar; no hair/head coverings will be worn.
- The student’s hair will be worn out of their face; hair that falls into the face must be pulled back.
- Hair must be a “natural” color, kept clean and styled so that it does not require frequent adjustment and does not fall forward when you bend over.
- The student will wear their nails neat, clean and trimmed short with no colored polish; clear nail polish may be worn. No artificial nails will be allowed.
- Chewing gum is not allowed in the clinical area.
- The student may wear one plain band style ring. Plain post-style earrings (one per lobe) are allowed. No other rings, earrings, bracelets, decorations, or visible body piercings will be allowed in clinical settings.
- Tongue rings/studs will NOT be allowed in clinical settings. If one is visible, the student will be reminded to remove the ring/stud. If this should happen repeatedly, the student may be sent home for that day of clinical and will be required to make up their time.
- Students will not be allowed to wear perfume or heavily scented lotions, body spray, hair spray, cologne or after shaves. Patients who have compromised respiratory systems find it difficult to breathe when exposed to many odors/airborne chemicals.
- If makeup is worn, it must be discreet. This will be addressed by the clinical instructors.
- Males will keep all facial hair neatly trimmed.
- The following is NOT allowed
  - Wrinkled uniform, dirty shoes, waist packs, thong underwear.
  - Visible tattoos, per the clinical facilities policy.

**These regulations are part of infection control, patient safety policies, and professionalism. Violation of uniform regulations will follow the discipline policy.**

- Any and all alterations of the uniform must be first approved by faculty.

**Expected Behaviors**
- Students must adhere to all rules, regulations and policies of the college and clinical facility.
- Professional and courteous mannerisms and habits are essential.
- Address instructors, administration, and professional staff with proper titles.
- The student will perform all duties in a manner which will reflect positively on the student, instructor, the facility, and the school.
• The student will discuss controversial learning problems with the instructor only.

• The student will be expected to come to nursing faculty regarding any educational problem and not to hospital employees.

• Students must be honest at all times. Any evidence of dishonesty or theft with money, merchandise, time, effort or equipment that results in dismissal from the clinical facility will automatically deem the student ineligible to attend clinical.

• Students are not allowed to eat or drink outside the designated areas within the clinical facilities. See your clinical instructor or the charge nurse concerning those areas.

• Students are not allowed to sleep or give the appearance of sleeping during clinical experiences.

• Students are not allowed to leave their assigned areas without prior proper notification and approval from the instructor/assigned nurse or preceptor, and then only when necessary arrangements have been made. Leaving without notification and approval is considered patient abandonment. This is a very serious offense. Breaks and lunches will be assigned by the clinical instructor; leave only when the instructor has instructed you.

• The student will not confront any employee within the clinical facility. All problems will be brought directly to the instructor and the instructor will intervene when necessary. The student will be in direct insubordination if they confront any employee in or out of the facility and may become ineligible to attend clinical.

• The student will read and sign the clinical agreement before being allowed to attend clinical. The student is responsible for knowing and understanding the policies concerning clinical, as well as the consequences for failure to follow these policies.

• The student will maintain all required records related to learning.

• The student will maintain a current record of their clinical assignments and the hours attended at each assigned area (your clinical log). Faculty will request to review these periodically. When a student is scheduled for clinical other than the hospital, the student is responsible to turn in their clinical log to the nursing secretary following the experience. The secretary makes a copy of this log for attendance records (nurse at facility must sign it for the student). If you do not turn this log into the secretary, you did not attend clinical on those days. An entry into this log is expected with each clinical experience (every day).

• The student will maintain a DAILY clinical journal which should contain but may not be limited to: the clinical site, their actions, client behaviors, experiences, knowledge learned, feelings, perceptions....this data must be recorded in an appropriate manner and language. This journal will be taken up and reviewed during the year and graded. This will be added to your clinical grade. Whatever you write in this journal WILL be read by the nursing faculty; be advised to write only what you would want someone to read. Inappropriate diary entries will be addressed by the instructors, director and assistant vice chancellor and may lead to being ineligible to attend clinical.
**Expected Outcomes and Clinical Progression**

- Outcomes are located in the course syllabus.
- Students must progress through clinical as evidenced by consistently meeting clinical objectives defined on the clinical evaluation. These evaluations are completed by the nursing instructor, facility nurses and/or preceptors in Clinical I, II and III.
- Any student who fails to progress in the clinical area and is deemed unsafe or exhibits the inability to progress with their peers as evidenced by clinical evaluations or unsafe behaviors may be deemed ineligible to attend clinical and unable to progress in the practical nursing program.
- The student will be given a verbal warning regarding the inability to progress and a counseling statement will be written. Retention in particular areas will be discussed, strategies will be recommended by the clinical instructor/Director of Nursing and Allied Health. A plan to assist the student to progress will be initiated. A time-line will be identified. A faculty member will conduct a follow-up conference with the student to determine if the plan of action was implemented satisfactorily.
- A second warning of failure to progress will result in a written warning along with the above process of identifying weaknesses and strategies to improve progression. The student will be asked to provide a clinical self-evaluation. Faculty member will conduct a follow-up conference with the student to determine if the plan of action was implemented satisfactorily. The disciplinary policy will be followed.
- The Director of Nursing and Allied Health will be provided written documentation of the process from its inception to conclusion.
- If the problem does not resolve and satisfactory improvement is not evident, the following actions will occur:
  - The student will be informed of ineligibility to attend clinical through written documentation from the appropriate faculty member.
  - The student will be referred to advisement to discuss educational options (i.e. Withdrawal from course)
- Any student who completes a clinical course under failure to progress will receive an “F” as their final clinical grade and will be unable to progress in the nursing program sequence.
- The student may refer to the UAM Student Handbook for the appeals policy.

**Smart phone/Handheld Technology use during clinical**

- Overall Goal: to support the infusion of technology into the nursing curriculum which will allow enhanced evidenced-based information and data usage.
- Students will be able to rapidly and efficiently access pertinent nursing data upon which to base safe and appropriate clinical judgments using handheld technology.
  - Students must adhere to the Health Insurance Portability and Accountability Act of 1996 (HIPAA) which establishes standards for use, disclosure and
protection of personally identifiable health information. Students must handle all health information with care to prevent unauthorized use or disclosure of protected health information.

- Students shall not remove, download, or copy confidential patient information onto their device.
- Students will not store passwords, verification codes or electronic signature codes onto the device.
- Only patient data that is non-identifying (age, race, height, weight) may be input into the device (i.e. for formula/drug calculations).
- Because electronic messages may be intercepted by other people, the student will not use the device’s email capabilities to send individually identifiable health information.
- Students will not use the camera feature at anytime.
- Students will not use the device in the presence of patients or family members.
- Students will not abuse the privilege of using the device by making personal calls or texting in the clinical area.
- Students shall report any violations of the policy to the clinical instructor.
- If students do not follow this use policy, disciplinary action up to and including being dismissed from the program may occur.
- All smart phone use will depend on the facility’s policy.

**Tobacco Use At Clinical**

- Students will not be allowed to use any type of tobacco product at a clinical facility. It is not permissible to smoke at clinical sites, in your vehicle or anywhere on the premises. This will be considered a serious offense and the discipline policy will be followed. If this infraction causes student expulsion from a clinical site, the student will be ineligible to attend clinical at that site and will be ineligible to attend clinical. The student will not be allowed to progress in the program.

**HIPAA**

- The Healthy Insurance Portability and Accountability Act of 1996 (HIPAA) called for the creation of regulations regarding patient privacy and electronic medical records. Failure to comply with the rules may lead to civil penalties. Intentional violation of the regulations can lead to sizable fines and time in jail. The six rights covered by these regulations are found in your Fundamental Concepts text. Students will maintain strict patient confidentiality, as required by HIPAA and the clinical agency’s policy. This is a very serious offense which may be grounds for clinical ineligibility.

**Incident Reports**

- The student agrees to report any injury, accident, or fall to the instructor immediately following the incident. This is required during lecture/lab or during clinical. The student will complete and turn in an incident report within 24 hours of the event to the practical nursing department. It is the student’s responsibility to notify the Director of Nursing and Allied Health as soon as possible following the incident. For patient incidents, the student will alert the clinical instructor
immediately, follow the above reporting policy and then follow the facility’s policy for reporting incidents.

**Malpractice Insurance**
- Any student officially enrolled at UAMCTM will be covered by the malpractice insurance provided by UAMCTM and paid for by the student while the student is at a training site during scheduled experiences.

**Standard Precaution Guidelines**
- The student will be expected to know and to maintain Standard Precautions and safety rules as mandated by OSHA and the CDC (Standard precaution guidelines are located in your Fundamental Concepts text; to view OSHA safety guidelines go to [www.osha.gov](http://www.osha.gov))
- The student will abide by UAM College of Technology, McGehee(UAMCTM), Practical Nurse Program’s Substance Abuse Policy at all time (see Substance Abuse Policy in this handbook)

**Transportation**
- All students will provide their own transportation to and from clinical learning facilities.

**Attendance**
- See “attendance policy” in this handbook.

**INELIGIBLE TO ATTEND CLINICAL**
- A student will be ineligible to attend clinical for:
  - Attendance as previously stated.
  - For grades as previously stated.
  - Failing to adhere to the college, nursing program, and clinical facility policies and procedures.
  - Any violation of the Code of Academic Honesty
  - Use or possession of any type of mind altering substance which is not issued under a physician’s prescription. Violation of this regulation will result in immediate termination from the college and possible legal action. (See Drug Policy)
  - Use of any type of mind altering substance during clinical whether prescribed or not will result in immediate termination from the college and possible legal action. (See Drug Policy)
  - Disruption of lecture/clinical in any form.
  - Being in the nursing staff or faculty offices, lab or supply rooms without permission.
- Insobordination of any type that involves any employee of this institution or affiliating institutions.
- Medication errors (see medication errors in this handbook).
- Providing false information to faculty/staff/employees of this institution, in any form.
- For leaving any facility without properly notifying the nursing faculty, see clinical policies.
- Unprofessional conduct

MEDICATION ERROR POLICY

A medication error is defined as giving medication with one or more of the following inaccuracies:

- Incorrect medication
- Incorrect patient
- Incorrect dose
- Incorrect route
- Incorrect time
  - Medication must be given within the policy time frame: 30 minutes before scheduled time to 30 minutes after scheduled time
- Incorrect documentation, false documentation or failure to document.
- Medication omission, medication must be given within the policy time frame or it will be considered omission of medication
- Failure to have licensed or registered nurse present while preparing and while giving medication or initiation of IVs, IV push (or any type of medication or fluid), change of fluids or manipulation of the IV equipment
- Failure to maintain standard precautions at any time during administration
- Failure to perform standard/necessary pre-administration assessment for the class of medication given
- Failure to perform standard/necessary post-administration assessment for the class of medication given
- Failure to understand the medication and its properties
- Failure to obtain a scheduled/ordered blood sugar within the medication time-frame policy
- Any nonprudent behavior by the student not mentioned above, regarding medication preparation, medication administration or medication administration follow-up, to also include all nonprudent student behavior regarding IV therapy

Medication errors will be subject to the following action:

a. First medication error, the student will be given a verbal warning.
   - The student will be counseled and a verbal warning will be confirmed in writing
If a medication error could result in a patient’s DEATH (is life-threatening), the student will fail the clinical course and will be ineligible to attend clinical. The student will not be allowed to progress in the nursing sequence.

b. Second medication error, the student will be given a written warning
   - The student will not be allowed to give medication following a medication error until the next clinical day
   - The student must be counseled on their error and strategies will be discussed before being allowed to give medications, which will be confirmed in writing
   - If a medication error could result in a patient’s DEATH (is life-threatening), the student will fail the clinical course and will be ineligible to attend clinical. The student will not be allowed to progress in the nursing sequence

c. Third medication error, the student must report to the Director of Nursing and Allied Health and will be given a second written warning.
   - The student must complete the necessary paperwork and will be relieved of their clinical responsibility for that day
   - The student must report to the Director of Nursing and Allied Health to discuss plan-of-action, strategies and will be remediated on medication administration
   - It will be the decision of the clinical instructor and the Director of Nursing and Allied Health when the student is ready to re-enter the clinical setting, but there will be no more than 3 days remediation
   - If a medication error could result in a patient’s DEATH (is life-threatening), the student will fail the clinical course and will be ineligible to attend clinical. The student will not be allowed to progress in the nursing sequence

d. Fourth medication error, the student will not be allowed to return to clinical.
   - The student must complete the necessary paperwork and will be relieved of their clinical responsibility
   - The student must immediately report to the Director of Nursing and Allied Health and will be ineligible to return to the clinical setting
   - The student will fail the clinical course
   - If a medication error could result in a patient’s DEATH (is life-threatening), the student will fail the clinical course and will be ineligible to attend clinical. The student will not be allowed to progress in the nursing sequence

MATERNITY POLICY

- Should a student become pregnant during the program, they may train, if they are in good health and have written permission from their physician each month. Documentation of permission must be turned into the secretary following each monthly/routine visit.
Following delivery, written release for continuing nursing student activities must be submitted before returning to school/clinical.

Regular attendance policy will remain in effect, however, time missed and assignments missed will be handled per situation by Administration and the Director of Health Occupations.

**LIBRARY POLICY**
- See UAM student handbook on UAM library policies and hours of operation.
- Students must have a valid UAM identification Card to utilize the library.

**OFFICE HOURS POLICY**
- See individual syllabus for instructor office hours.
- Office hours are posted on the instructor’s office doors.

**SUBSTANCE ABUSE POLICY**
- The UAM College of Technology-McGehee Nursing Program recognizes its responsibility to provide a health environment within which students may learn and prepare themselves to become members of the nursing profession. The school is committed to protecting the safety, health and welfare of its faculty, staff, and students and people who come into contact with its faculty, staff and students during scheduled learning experiences. The Practical Nursing Program strictly prohibits the illicit use, possession, sale, conveyance, distribution and manufacture of illegal drugs, intoxicants or controlled substances in any amount or in any manner and the abuse of nonprescription and prescription drugs.
- Use or possession of any type of mind altering substance which is not issued under a physician’s prescription. Violation of this regulation will result in immediate termination from the college and possible legal action.
- Any nurse who tests positive for illegal, controlled or abuses potential substances and who cannot produce a valid and current prescription for the drug is at risk of being in violation of the Arkansas Nurse Practice Act, ACA 17-87-309 (a)(3)(4) and (6); and the Arkansas State Board Rules and Regulations Chapter Seven, Section XLA and Section XV.A.6.m.
- Furthermore, any nurse who is aware that another nurse has violated a provision of the Arkansas Nurse Practice Act is obligated to report that nurse to the Board. A failure to do so in and of itself is a violation of the Arkansas Nurse Practice Act, ACA 17-87-309 (a)(6); and the Arkansas State Board Rules and Regulations Chapter Seven, Section XLA and Section XV.A.6.j. Similar professional expectations apply to nursing students. Any nursing student who is aware that another nursing student is using or is in possession of illegal drugs, intoxicants, or controlled substances is obligated to report this information to a school of nursing faculty member.
• The intent of the Substance Policy is not just to identify those students chemically impaired, but also attempts to assist the student in the return to a competent and safe level of practice and to achieve his/her goal of becoming a Licensed Practical Nurse. Emphasis is on deterrence, education and reintegration. All aspects of the policy are to be conducted in good faith with compassion, dignity, and confidentiality.

• The substance Abuse Policies of the UAM College of Technology-McGehee Practical Nursing Program are found in the student handbook.

• As a condition of enrollment, each student will sign a Substance Abuse Policy Release Form agreeing to adhere to the Substance Abuse Policy (see release form in this handbook).

**Drug Testing Procedures**

• The practical Nursing Program requires the student to submit to drug testing under any or all of the following circumstances:
  - Scheduled testing at unannounced designated times throughout the program (student is responsible for all costs).
  - Random testing as required by the clinical agencies or the Practical Nursing Program.
  - For cause (see testing for cause in this handbook).

• Cost
  - The approximate cost of each drug screen is $45.00. The student is responsible to pay for the cost of the drug screens, which may include urine, blood, or breathalyzer testing. You must pay the $45.00 to the student organization (ALPNA). Any student refusing/unable to submit to a drug screen will be considered as a positive screening and will be dismissed from the program.

• Facility
  - The Practical Nursing Program will identify an approved laboratory to perform testing utilizing the agency’s policies.

• Sample Collection
  - The collection techniques will adhere to the guidelines in accordance with US Department of Transportation 49 CFR Part 40 following chain of custody protocol. If at any time the Practical Nursing Program deems necessary, the student will be required to submit to an observed specimen collection.

• Substances
  - Substance-related disorders are listed in the Diagnostic and statistical Manual of Mental Disorders, fourth edition, (DSM-IV). Substances of abuse are grouped into eleven classes: alcohol, amphetamines or similarly acting sympathomimetics, caffeine, cannabis, cocaine, hallucinogens, inhalants, nicotine, opioids, phencyclidine (PCP) or similarly acting arylocylohexylamines and sedatives, hypnotics or anxiolytics. Testing may include any of these drug categories. The Practical
Nursing Department retains the authority to change the panel of tests without notice to include other illegal substances as suggested by local and national reports or circumstances.

**Positive results**

- Test results will be considered positive if substance levels excluding caffeine and nicotine meet or exceed the amount to test positive. Positive tests are run twice to verify substances. Split samples are saved at the original lab and may be sent to another approved lab for additional testing at the student’s expense.

- Confidentiality
  - All testing information, interview, reports, statements and test results specifically related to the individual are confidential. Drug test results will be received from the lab by the Director of Nursing and Allied Health or designee, and only authorized persons will be allowed to review this information. In the event that the test data results in disciplinary action, data may be reviewed by the Coordinator of Special Projects and Instruction and the Appeals Committee. Records will be maintained in a locked, fireproof file cabinet. The Practical Nursing Program may be required by the Arkansas State Board of Nursing to include information regarding the student’s substance abuse history. This information, in writing, may be shared before the student would be permitted to take the NCLEX examination for licensure.

- Treatment, Referral and Reapplication
  - The outcome of a positive drug screen is in direct violation of the UAM College of Technology-McGehee Practical Nursing Program’s handbook and will result in immediate termination from the program. The Faculty will refer persons identified as having substances abuse problems for therapeutic counseling regarding substance withdrawal and rehabilitation. Referral sites include but are not limited to:
    - Delta Counseling
    - Delta Regional Medical Center
    - Jefferson Regional Medical Center

- A student will not be denied learning opportunities based on a history of substance abuse. The reapplication process for a student who has previously tested positive for substance abuse will include:
  - Demonstrated attendance at AA, NA, or a treatment program of choice from a legitimate substance abuse counselor for the term of the program (12 months). Evidence of participation must be sent to the UAMCT-McGehee Practical Nursing Program. Acceptable evidence shall consist of a written record of at least the date of each meeting, the name of each group attended, purpose of the meeting, and the signature of signed initials of the director of each group attended.
  - Demonstrated at least 2 years of abstinence immediately prior to application.
  - Demonstrated letters of reference from all employers within the last 2 years.

- Once readmitted, the student must sign an agreement to participate in monitoring by random drug screening at the student’s expense.
• Once readmitted, the student must abstain at all times from the use of controlled or abuse potential substances, including alcohol, except as prescribed by a licensed practitioner from whom medical attention is sought. The student shall inform all licensed practitioners who authorize prescriptions of controlled or abuse potential substances of student’s dependency on controlled or abuse potential substances, and the student shall cause all such licensed practitioners to submit a written report identifying the medication, dosage, and the date the medication was prescribed. The prescribing practitioners shall submit the report directly to the Department Director or designee within ten (10) days of the date of the prescription.

• Appeals shall follow the Student Appeals Procedure (see Student Appeals Procedure in this handbook)

• Once a student who is readmitted to the nursing program, and if a positive test for substance abuse is found, the student will be terminated from the program and will be ineligible to return. Furthermore, the student will be ineligible to receive a letter of good standing from the nursing program.

**Testing for Cause**

• Any nursing student, who demonstrates behavioral changes suspected to be related to the use of drugs, including but not limited to alcohol, will be subjected to testing. The nursing faculty member decision to drug test will be drawn from those facts in light of the experience of the observers and may be based on:
  
  o Observable phenomena such as direct observation of drug use and or physical symptoms or manifestations of being under the influence of a drug.
  
  o Erratic behavior, slurred speech, staggered gait, flushed face, dilated/pinpoint pupils, wide mood swings, and deterioration of work performance.
  
  o Information that a student has caused or contributed to an accident that resulted in injury requiring treatment by a licensed health care professional.
  
  o Conviction by a court, or being found guilty of a drug, alcohol or controlled substance in another legitimate jurisdiction.
  
  o Upon request from a clinical facility, in which narcotics are missing.

• Testing Policy/Procedure
  
  o The faculty member will have another faculty member or staff RN to confirm the suspicious behavior.
  
  o The student will be asked to leave the area and go with a faculty member and a witness to discuss the situation in a location ensuring privacy and confidentiality. The discussion will be documented, and the decision to drug test will be made.
  
  o If warranted, the student will submit appropriate laboratory specimens in accordance with the Substance Abuse Policy and clinical agency policies, if appropriate.
  
  o The student will be suspended from all clinical activities until the case has been reviewed by the appropriate personnel or committees, as designated by the nursing program.
  
  o If the laboratory test is negative for substance classified in the Diagnostic and/or Clinical Statistical manual of Mental Disorders (DSM-IV), the student will be allowed to return to class/clinical without
penalty. Arrangement to make up missed work must be initiated by the student on the first day back to class or clinical (whichever comes first).

- If one (1) laboratory test is positive for substance classified in the DSM-IV, the student will be immediately terminated from the program. Confidentiality will be maintained.

### Social Networking

- Students who participate in social networking sites (i.e. Face Book, My Space, Twitter, Insta-gram, Snap Chat, etc.) will accept the nursing program’s right to access and review personal page content when probable cause of violations of HIPAA or any other policy, regarding conduct, that may reflect negatively on the university, nursing program and/or its clinical sites. Students must also understand that such violations may result in disciplinary action.
- Social networking should be limited to off-the-clock time and should not be accessed from any device during instruction. This includes but is not limited to institutional computers and mobile devices. Note: See handbook policy on the use of mobile devices in classrooms and clinical facilities.
- Students will be held accountable for all on-line activity that may reflect negatively on the university or the nursing program’s clinical sites. This includes but is not limited to: pictures, posts, videos, and written/implied comments. The nursing disciplinary policy will be upheld for all violations of this policy. Please see disciplinary policy in nursing handbook.
- Upon admission into the nursing program, all students will attend a social networking session/class. Upon completion of this session/class, each student will be required to sign a contract stating their awareness and understanding of the nursing program’s policies related to Social Networking.
- Video/photography is prohibited during class/clinical unless administrative pre-approval has been obtained. Absolutely no video/photography of patients is allowed (see HIPAA policy in the nursing handbook).
- The disciplinary policy will be followed.
Substance Abuse Policy Release Form

I, ________________________________, have read the Substance Abuse Policy of the UAM College of Technology-McGehee Practical Nursing Program and agreed as a student in the nursing program to comply with all aspects of the policy as written, including urine, blood, or breathalyzer testing.

I agree that Mainline Clinic/Drew Memorial Hospital/Chicot Memorial Hospital/Bradley County Hospital is authorized by me to provide the results of this test to UAM College of Technology-McGehee Practical Nursing Program. I agree to indemnify and hold the lab harmless from and against any and all liabilities of judgments arising out of any claim related to 1) compliance of the UAM College of Technology-McGehee with federal and state law and 2) the UAM College of Technology’s interpretation, use and confidentiality of the test results, except when the lab is found to have acted negligently with respect to such matters.

I further understand that failure to adhere to the conditions specified in this policy will result in my being ineligible to attend clinical. Furthermore, I agree to abide by the provisions for determining being ineligible to attend clinical and to follow the conditions of readmission as outlined.

____________________________  ______________________________
Student Name (printed)       Student Signature

____________________________
Date

UAMCTM Director of Nursing and Allied Health
HEPATITIS B

Hepatitis B (HBV) is a serious viral infection of the liver that can lead to chronic liver disease, cirrhosis, liver cancer, liver failure, and even death. The disease is transmitted by blood and/or body fluids and many people will have no symptoms when they develop the disease. The primary risk factors for Hepatitis B are sexual activity and injecting drug use. This disease is completely preventable. Hepatitis B vaccine is available to all age groups to prevent Hepatitis B viral infection. A series of three (3) doses of vaccine are required for optimal protection. Missed doses may still be sought to complete the series if only one or two have been acquired. The HBV vaccine has a record of safety and is believed to confer long immunity in most cases.

The Hepatitis B vaccination is recommended after the student has been accepted into the nursing program to receive training, UNLESS:

I. The student has previously received the complete Hepatitis B vaccination series.
II. Antibody testing has revealed that the student is immune.
III. The vaccine is contraindicated for medical reasons.
IV. The student signs a waiver (below) releasing the school from responsibility of possible exposure.

The student is responsible for arranging for the immunization and for providing documentation of such to the program.

_____ I hereby certify that I have read this information and I have received the complete three dose series or have started the series of the Hepatitis B vaccine.
   Date of completion of the Hepatitis B vaccination series _______/_____/______
 OR
   Date of last injection_______/_______/_______ Injection number__________.

_____ I hereby certify that I have read this information I have elected not to receive the Hepatitis B vaccine or I am unable to receive the vaccine due to medical/other causes.

Student Signature ________________________________

☐ I understand the risk of Hepatitis B and waive any responsibility of UAM College of Technology, McGehee and associated clinical facilities.

Student Signature ________________________________
Acknowledgement of Receipt and Compliance

I hereby acknowledge that I have been given access to the UAMCTM Practical Nursing Handbook and will comply with its policies and procedures.

Should the faculty of UAM College of Technology-McGehee, the Program Director and/or the Assistant Vice Chancellor agree that I should discontinue Practical Nursing training for any justifiable reason or reasons, I shall abide by the decision and leave the program without malice or argument. I will ask for no special favors and I will follow the Appeal Procedure (refer to school handbook) if I am not in agreement with the decision.

Date: _________________________________

Printed Name: ___________________________________________________________________________________

Signature: ______________________________________________________________________________________
UAM COLLEGE OF TECHNOLOGY, McGEHEE

PRACTICAL NURSING PROGRAM

CRIMINAL BACKGROUND

The information that follows is from the Arkansas State Board of Nursing, Nurse Practice Act, Sub Chapter 3 – Licensing, §17-87-312 Criminal background checks. The Nurse Practice Act can be found on the ASBN web site (www.asbn.arkansas.gov).

The Arkansas State Board of Nursing (ASBN) has the authority to deny licensure to any person who has been convicted of a crime. Conviction of a crime may prevent a student from taking clinical courses, the National Council Licensure Examination for Practical Nurses (NCLEX-PN) or becoming licensed to practice as an LPN. Successful completion of this program does not assure ASBN’s approval to take the NCLEX-PN per ACA 17-87-312. If you have any questions or have been convicted of a crime of any type, go to the following website for more information (http://www.arsbn.arkansas.gov/MedicationAssistants/Documents/NPA.Subchapter3.2012.pdf) and make an appointment with the Chairperson of the PN Program. Any violations or convictions during nursing school may result in dismissal from the program. Please read the following information and then print and sign your name on the following form.

17-87-312. Criminal background checks.

(a) Each first-time applicant for a license issued by the Arkansas State Board of Nursing shall apply to the Identification Bureau of the Department of Arkansas State Police for a state and national criminal background check, to be conducted by the Federal Bureau of Investigation.
(b) The check shall conform to the applicable federal standards and shall include the taking of fingerprints.
(c) The applicant shall sign a release of information to the board and shall be responsible to the Department of Arkansas State Police for the payment of any fee associated with the criminal background check.
(d) Upon completion of the criminal background check, the Identification Bureau of the Department of Arkansas State Police shall forward to the board all information obtained concerning the applicant in the commission of any offense listed in subsection (e) of this section.
(e) Except as provided in subdivision (l)(1) of this section, no person shall be eligible to receive or hold a license issued by the board if that person has pleaded guilty or nolo contendere to, or been found guilty of any of the following offenses by any court in the State of Arkansas or of any similar offense by a court in another state or of any similar offense by a federal court:
   (1) Capital murder as prohibited in § 5-10-101;
   (2) Murder in the first degree as prohibited in § 5-10-102 and murder in the second degree as prohibited in §5-10-103;
   (3) Manslaughter as prohibited in § 5-10-104;
   (4) Negligent homicide as prohibited in § 5-10-105;
   (5) Kidnapping as prohibited in § 5-11-102;
   (6) False imprisonment in the first degree as prohibited in § 5-11-103;
(7) Permanent detention or restraint as prohibited in § 5-11-106;
(8) Robbery as prohibited in § 5-12-102;
(9) Aggravated robbery as prohibited in § 5-12-103;
(10) Battery in the first degree as prohibited in § 5-13-201;
(11) Aggravated assault as prohibited in § 5-13-204;
(12) Introduction of controlled substance into the body of another person as prohibited in § 5-13-210;
(13) Terroristic threatening in the first degree as prohibited in § 5-13-301;
(14) Rape as prohibited in §§ 5-14-103;
(15) Sexual indecency with a child as prohibited in § 5-14-110;
(16) Sexual assault in the first degree, second degree, third degree, and fourth degree as prohibited in §§ 5-14-124 – 5-14-127;
(17) Incest as prohibited in § 5-26-202;
(18) Offenses against the family as prohibited in §§ 5-26-303 - 5-26-306;
(19) Endangering the welfare of an incompetent person in the first degree as prohibited in § 5-27-201;
(20) Endangering the welfare of a minor in the first degree as prohibited in § 5-27-205;
(21) Permitting abuse of a child as prohibited in § 5-27-221(a)(1) and (3);
(22) Engaging children in sexually explicit conduct for use in visual or print media, transportation of minors for prohibited sexual conduct, pandering or possessing visual or print medium depicting sexually explicit conduct involving a child, or use of a child or consent to use of a child in a sexual performance by producing, directing, or promoting a sexual performance by a child as prohibited in §§ 5-27-303 - 5-27-305, 5-27-402, and 5-27-403;
(23) Felony adult abuse as prohibited in § 5-28-103;
(24) Theft of property as prohibited in § 5-36-103;
(25) Theft by receiving as prohibited in § 5-36-106;
(26) Arson as prohibited in § 5-38-301;
(27) Burglary as prohibited in § 5-39-201;
(28) Felony violation of the Uniform Controlled Substances Act §§ 5-64-101 – 5-64-608 as prohibited in § 5-64-401;
(29) Promotion of prostitution in the first degree as prohibited in § 5-70-104;
(30) Stalking as prohibited in § 5-71-229;
(31) Criminal attempt, criminal complicity, criminal solicitation, or criminal conspiracy as prohibited in §§ 5-3-201, 5-3-202, 5-3-301, and 5-3-401, to commit any of the offenses listed in this subsection;
(32) Computer child pornography as prohibited in § 5-27-603; and
(33) Computer exploitation of a child in the first degree as prohibited in § 5-27-605.
(f)(1)(A) The board may issue a nonrenewable temporary permit for licensure to a first-time applicant pending the results of the criminal background check.
(B) The permit shall be valid for no more than six (6) months.
(2) Except as provided in subdivision (l)(1) of this section, upon receipt of information from the Identification Bureau of the Department of Arkansas State Police that the person holding the letter of provisional licensure has pleaded guilty or nolo contendere to, or has been found guilty of, any offense listed in subsection (e) of this section, the board shall immediately revoke the provisional license.
(g)(1) The provisions of subsections (e) and subdivision (f)(2) of this section may be waived by the board upon the request of:
(A) An affected applicant for licensure; or
(B) The person holding a license subject to revocation.
(2) Circumstances for which a waiver may be granted shall include, but not be limited to, the following:
(A) The age at which the crime was committed;
(B) The circumstances surrounding the crime;
(C) The length of time since the crime;
(D) Subsequent work history;
(E) Employment references;
(F) Character references; and
(G) Other evidence demonstrating that the applicant does not pose a threat to the health or safety of the public.

(h)(1) Any information received by the board from the Identification Bureau of the Department of Arkansas State Police pursuant to this section shall not be available for examination except by:
   (A) The affected applicant for licensure, or his authorized representative; or
   (B) The person whose license is subject to revocation or his or her authorized representative.

(2) No record, file, or document shall be removed from the custody of the Department of Arkansas State Police.

(i) Any information made available to the affected applicant for licensure or the person whose license is subject to revocation shall be information pertaining to that person only.

(j) Rights of privilege and confidentiality established in this section shall not extend to any document created for purposes other than this background check.

(k) The board shall adopt the necessary rules and regulations to fully implement the provisions of this section.

(l)(1) For purposes of this section, an expunged record of a conviction or a plea of guilty or nolo contendere to an offense listed in subsection (e) of this section shall not be considered a conviction, guilty plea, or nolo contendere plea to the offense unless the offense is also listed in subdivision (l)(2) of this section.

   (2) Because of the serious nature of the offenses and the close relationship to the type of work that is to be performed, the following shall result in permanent disqualification:
      (A) Capital murder as prohibited in § 5-10-101;
      (B) Murder in the first degree as prohibited in § 5-10-102 and murder in the second degree as prohibited in § 5-10-103;
      (C) Kidnapping as prohibited in § 5-11-102;
      (D) Rape as prohibited in § 5-14-103;
      (E) Sexual assault in the first degree as prohibited in § 5-14-124 and sexual assault in the second degree as prohibited in § 5-14-125;
      (F) Endangering the welfare of a minor in the first degree as prohibited in § 5-27-205 and endangering the welfare of a minor in the second degree as prohibited in § 5-27-206;
      (G) Incest as prohibited in § 5-26-202;
      (H) Arson as prohibited in § 5-38-301;
      (I) Endangering the welfare of incompetent person in the first degree as prohibited in § 5-27-201; and
      (J) Adult abuse that constitutes a felony as prohibited in § 5-28-103.
UAM COLLEGE OF TECHNOLOGY, MCGEHEE

PRACTICAL NURSING PROGRAM

ACKNOWLEDGEMENT OF UNDERSTANDING REGARDING CRIMINAL BACKGROUND CHECKS

I acknowledge I have received, read and understand State Board of Nursing, Nurse Practice Act, Sub Chapter 3 – Licensing, §17-87-312 Criminal Background Checks. In signing this I am stating that I fully understand that graduating from UAM College of Technology, McGehee Practical Nursing Program, does not assure ASBN’s approval to take the licensure examination.

Printed Name

Signature

DATE
Waiver and Release Agreement-Allied Health

I, ____________________________________, request participation in school activities, which may include, but are not limited to travel to various community services projects, field trips, clinical-including lab experience, or any other educational opportunities, which may be held throughout my enrollment in the Allied Health programs which may include, Nursing Assistant, Practical Nursing, Emergency Medical Technician, or Paramedic through UAM College of Technology, McGehee.

I consent to participation in the activity and acknowledge that I fully understand my participation may involve risk of serious injury or death, including losses which may result not only from my own actions, inactions or negligence, but also from the actions, inactions or negligence of others, the condition of the facilities, equipment, or areas where the event or activity is being conducted, and/or the rules of play of this type of event or activity. I understand that if I have any risk concerns, I should discuss the risked associated with my participation with the Director of Nursing and Allied Health.

Knowing and understanding the risks involved with participation in the activity, I hereby voluntarily and willingly assume full and complete responsibility for all losses and damages, including injury illness and death, resulting from my participation in the activity, including transpiration to and from the activity. I agree I am financially responsible for any losses and damages resulting from my participation in the activity.

____________________________________  ______________________________________
PRINTED NAME  SIGNATURE  DATE
CRIMINAL BACKGROUND STATEMENT DISCLOSURE

Any person who has been convicted of a crime may not be allowed to take the NCLEX for licensure. Graduation from this program does not assure Arkansas State Board of Nursing’s approval to take the licensure examination. If you have been convicted of a crime of any type, please see a nursing faculty member for more information.

Please answer the question below and sign and date your response.

Have you ever been convicted of a crime?

__________Yes

__________No

_________________________________________________
_________________________________________________
PRINTED NAME                                        SIGNATURE                                      DATE

If you answered yes to the above question, please explain your situation.
IMPORTANT PHONE NUMBERS

Clinical Training Sites:

Hospitals

Bradley County Medical Center..................Warren, AR 870-226-3731
Chicot Memorial Hospital..................Lake Village, AR 870-265-5351
Drew Memorial Hospital..................Monticello, AR 870-367-2411
McGehee Hospital Inc..................McGehee, AR 870-222-5600

Nursing Homes

The Woods of Monticello Health & Rehab..................Monticello, AR 870-367-6852

Clinics

Lake Village Clinic..................Lake Village, AR 870-265-5343
Mainline Health Clinic..................Dermott, AR 870-538-3355
Mainline Health Clinic..................Eudora, AR 870-355-2512
Mainline Health Clinic..................Portland, AR 870-737-2221
Mainline Health Clinic..................Monticello, AR 870-367-6246
Monticello Medical Clinic..................Monticello, AR 870-367-6867
Wound Healing Institute of SE Arkansas..................Monticello, AR 870-367-4325
Monticello Dialysis..................Monticello, AR 870-367-3100

Pediatric Clinics

Area Agency on Aging..................Monticello, AR 870-367-9873

Psychiatric/Developmental Disabilities

SE Arkansas Human Development Center........Warren, AR 870-226-6774
First Response/Ambulance

Emergency Ambulance Service Incorporated (EASI) 870-536-0734
Monticello Ambulance Service Incorporated

Important Numbers to Know

UAMCTM, McGehee, AR 870-222-5360
Director of Nursing and Allied Health, Peggie Orrell Ex: 2124
NA Instructor and Admin. Assistant, Donna Hicks Ex: 2135
Nursing Faculty, Kim Ray Ex: 2125
Nursing Faculty, Nikki Calhoun Ex: 2155

Nursing Faculty Cell Numbers

Peggie Orrell..................................................................................................................................................870-723-0949
Kim Ray..........................................................................................................................................................870-723-4599
Nikki Calhoun................................................................................................................................................870-723-6797

Directions to Clinical Sites

Area Agency on Aging of Southeast Arkansas, 110 E. Gaines Street, Monticello, AR

From the Nursing and Allied Health Building turn right onto E. Ash Street, turn left at North 1st Street. Turn right at Holly Street continue to follow AR-4/US-278 toward Monticello. Come into Monticello and turn left on Church Street, then left on Gaines. Area Agency will be on the left at 110 East Gaines Street. Your contact person is Denise Beasley, DON, phone number (870) 367-9873.
Bradley County Medical Center, 404 S. Bradley Street, Warren, AR
From the Nursing and Allied Health Building turn right onto E. Ash Street and proceed to Monticello. (See above) Continue to stay on Hwy 278 through Monticello (follow signs). Warren is 16 miles from Monticello on 278. In Warren, turn left at S. Bradley Street 404 S. Bradley County Medical Center will be on the right. Your contact person is Tiffany Holland, DON; phone number is (870) 226-3731.

Chicot Memorial Hospital, 2729 S. Hwy 65 82, Lake Village, AR
From the Nursing and Allied Health Building turn right onto E. Ash Street. Take hwy 65 to Lake Village. Chicot Memorial Hospital will be on hwy 65 on your left. Your contact person is (ask for the nursing supervisor or the house nurse, not the DON) Caroline Cook, DON; phone number is (870) 265-5351.

Child Development Center, 1711 East Ash Street, McGehee, AR
This center is slightly to the right and behind the main campus building. From the Nursing and Allied Health Building turn left on Ash Street just past the College of Technology Building turn left again and the Child Development Center will be straight ahead. Child Development Center 1711 East Ash Street. Your contact person is Jonie Massey phone number is (870) 222-6589.

Drew Memorial Hospital, 778 Scogin Drive, Monticello, AR
From the Nursing and Allied Health Building turn right onto E. Ash Street. Follow directions above for Monticello. Go through Monticello (follow marked highway 278). Turn left at light (intersection of 278 and 425); turn right at red light (follow hospital sign); turn left at Scogin Drive, Drew Memorial Hospital will be on your right. Your contact person Kathaleen Warren, Med/Surg Director or Linda Orrell, DON phone number is (870) 367-2411.

EASI, Pine Bluff, 116 University Drive, Pine Bluff, AR
From the Nursing and Allied Health Building turn right on E Ash Street. Take Hwy 65 North toward Pine Bluff. Take Harding Ave exit and bear right onto Martha Mitchell Expressway. Go through 6 stop lights. Turn right at University Drive (Hwy 79). EASI will be on your right. Your contact person is Cheryl Smith at the Pine Bluff EASI phone number (870) 536-0734.

EASI, Warren, 501 Jolley Street, Warren, AR
From the Nursing and Allied Health Building turn right onto E. Ash Street and proceed to Monticello. (See above) Continue to stay on Hwy 278 through Monticello (follow signs). Warren is 16 miles from Monticello on 278. Turn left on Jolley Street. Pass the hospital on your left. EASI will be on the right, across from the hospital. Your contact person is Cheryl Smith at the Pine Bluff EASI phone number (870) 536-0734.
Lake Village Clinic, 2918 Louis Sessions Street, Lake Village, AR
From the Nursing and Allied Health Building right onto E. Ash Street. Take hwy 65 to Lake Village. Pass Chicot Memorial Hospital and turn left into the next drive (Louis Sessions Street). The clinic will be on your left. Your contact person is Anna Martar phone number (870) 265-5343.

Lake Village Health Care, 903 Borgognoni Drive, Lake Village, AR
From the Nursing and Allied Health Building right onto E. Ash Street. Take hwy 65 to Lake Village. Turn left at 16th Section Rd/Borgognoni Drive Lake Village Health Care will be on your right. Your contact person is Keidra Kairk; Phone number (870) 265-5337.

Mainline Clinic Dermott, 300 S. School Street, Dermott, AR
From the Nursing and Allied Health Building right onto E. Ash Street. Take hwy 65 South. Turn right onto hwy 165. Follow 165 for 7.9 miles. Turn right onto hwy 35 toward Dermott. Follow hwy 35 through Dermott. The clinic will be on your left on the corner of hwy 35 and School Street. Your contact person is Kira Gray, LPN phone number (870) 538-3355.

Mainline Clinic Eudora, 579 E. Beouff Street, Eudora, AR
From the Nursing and Allied Health Building right onto E. Ash Street. Take hwy 65 South. Go into and through Lake Village on hwy 65. Turn right at E. Ham Street then turn left to stay on E. Ham Street. Turn to the left at N. Prospect Street/Water Street, and then turn right at E. Beouff Street, Mainline Clinic Eudora will be on your right. Your contact person is Lacey Nowlan, DON phone number (870) 355-2512.

Mainline Clinic Monticello, 766 RL Ross Drive, Monticello, AR
From the Nursing and Allied Health Building right onto E. Ash Street and proceed to Monticello. (See directions for Monticello above). Go through Monticello (follow marked Highway 278). Turn left at the light (intersection of 278 and 425) onto to 425 North. Turn right at the next light (Old Warren Road) then turn left on H L Ross Drive. Arrive at 766 H L Ross drive on the right. Your contact person is Lacey Nowlan, DON phone number (870) 367-6246.

Mainline Clinic Portland, 233 N. Main Street, Portland, AR
From the Nursing and Allied Health Building right onto E. Ash Street. Take US 65 South toward Dermott. Turn right at US 165 continue for 29.1 miles. Turn right at Griffin/Griffith Road under the water tower in Portland. Travel straight until you cross the railroad tracks. Across the railroad track will be the Mainline Clinic Portland. Your contact person is Lacey Nowlan, DON phone number (870) 737-2221.
**McGehee Family Clinic, 601 Holly Street, McGehee, AR**

From the Nursing and Allied Health Building turn right and follow Ash Street until you cross the railroad track and come to a four way stop. Turn to the left on North 1st Street. Follow North 1st street until you come to a four way stop. Turn to the right on Holly Street continue on Holly Street for about 0.8 miles. McGehee Family clinic will be on your left across from the General Dollar Store. Your contact person is **Pam Graves**, office manager phone number (870) 222-6131.

**McGehee Hospital Inc., McGehee, AR**

From the Nursing and Allied Health Building turn right and follow Ash Street until you cross the railroad track and come to a four way stop. Turn to the left on North 1st Street. Follow North 1st street until you come to a four way stop continue through the four way stop on South 1st Street for about 1.1 miles. Turn right at Walnut then right again on South 2nd Street. Turn left at Valley Road and then left at South 3rd Street McGehee-Desha Hospital will be on your left. Contact person **Sarah Calvert**, DON; phone number (870) 222-5600.

**Monticello Dialysis, 774 Jordan Drive, Monticello, AR**

From the Nursing and Allied Health Building turn right onto E. Ash Street. Follow directions above for Monticello. Go through Monticello (follow marked highway 278). Turn left at light (intersection of 278 and 425), turn right at red light (follow hospital sign); turn left at Scogin Drive, Drew Memorial Hospital will be on your right, continue on. Turn right onto Jordan Drive. Monticello Dialysis will be on your right. Contact person is **Pamela Kelly**, DON; phone number (870) 367-3100. Monticello Dialysis office hours are Monday, Wednesday and Friday from 6:30 until 4:30.

**Monticello Medical Clinic, 906 Roberts Drive, Monticello, AR**

From the Nursing and Allied Health Building turn right onto E. Ash Street. Follow directions above for Monticello. Go through Monticello (follow marked highway 278). Turn left at light (intersection of 278 and 425), turn right at red light (follow hospital sign); turn left at Scogin Drive, Drew Memorial Hospital will be on your right, continue on to the next road (Roberts Drive). Turn right onto Roberts Drive. Monticello Medical Center will be on your left. Contact person is **Darlene Savage**, Office Manager; phone number (870) 367-6867.

**Southeast Arkansas Human Development Center, 1 Center Circle, Warren, AR**

From the Nursing and Allied Health Building turn right onto E. Ash Street and proceed to Monticello. (See above) Continue to stay on Hwy 278 through Monticello (follow signs). Warren is 16 miles from Monticello on 278. When you come to Warren turn right (sign Southeast Arkansas Human Dev. Center) at Center Circle turn left to stay on Center Circle, Southeast Arkansas Human Development Center will be on the left. Contact person is **Teresa Herring**, Superintendent; phone number (870)226-6774. **NO UNIFORM, SLACKS, BLOUSE WITH LAB COAT AND NAME BADGE.**
The Woods of Monticello health & Rehabilitation
From the Nursing and Allied Health Building take a right onto East Ash Street and proceed to Monticello. (see directions above) Come into Monticello and to the square. At the 4-way stop entering the square, turn right onto Main Street. Drive ½ mile and take a left onto West Jefferson. Take a right onto Chester. The Woods of Monticello will be on your right. Contact person is Micki Grant, DON, phone number (870) 367-6852.

Wound Healing Institute of SE Arkansas
From the Nursing and Allied Health Building take a right onto East Ash Street and proceed to Monticello. Go through Monticello on Hwy 278. Turn left at light (intersection of Hwy 278 & 425) onto Hwy 425 North. Continue to next light (Old Warren Road) and turn right, turn left onto H L Ross Drive. Arrive at 750 H L Ross drive on the right. Contact person is Sarah Pearce, RN, phone number (870) 367-4325.
PRACTICAL NURSING SCHOOL CALENDAR 2014

Spring Semester 2014

January 2 (Wed).........................Application deadline for regular registration. Tuition and fees due for preregistered students.

January 6 (Mon)..........................................................Schedule changes. New student orientation. Night registration.

January 7 (Tue).................................................................Open registration.

January 8 (Wed).................................................................Classes begin.

January 10 (Fri)...............................................................Last day to register or add classes.

January 20 (Mon)..................................Martin Luther King Holiday. Offices/classes closed.

February 21 (Fri).................................Deadline to apply for August and December graduation.

March 19 (Wed)...............................Last day to drop a spring 2014 class or withdraw.

March 24-28 (Mon-Fri)........................Spring Break.

April 7-18.................................................................Preregistration for Summer and Fall 2014.

April 30 – May 6 (Wed-Tue)..................Final exam period.

May 10 (Fri)..........................................................UAMCT, McGehee Commencement.

Summer I- 2014

May 13 (Mon).................................IV Therapy Intersession class begins.

May 22 (Wed).................................IV Therapy Final.

May 27 (Mon).................................Memorial Holiday. Offices/classes closed.

May 28(Tue).................................First day of Summer classes.

June 20 (Fri).................................Last day to drop summer I classes. Grade will be W.

June 21 (Fri).................................Commencement for UAMCT McGehee.

June 26 (Wed).................................Last day of classes. Final Exams

Summer II 2014

July 1 (Mon).................................First day of classes.
July 4 (Thrus)...............................................................................................................................Independence Day Holiday.

July 26 (Fri).......................................................................................................................................Last day to drop Summer II classes with a W.

July 31 (Wed).....................................................................................................................................Last day of classes.

**FALL 2014**

August 12 (Mon)....Application deadline for regular registration. Tuition and fees due for preregistered students.

August 20 (Tues)................................................................................................................................Open registration.

August 21 (Wed)..................................................................................................................................First day of classes.

August 27 (Tue)....................................................................................................................................Last day to register or add classes.

September 2 (Mon).........................................................................................................................Labor Day Holiday. Offices/classes closed.

November 4 (Mon)...............................................................................................................................Preregistration for Spring.

November 6 (Wed)...............................................................................................................................Last day to drop with a W.

November 27 (Wed)...............................................................................................................................Classes closed.

November 28-29 (Thru-Fir)................................................................................................................Thanksgiving Holiday. Offices/classes closed.

December 3 (Tues)...............................................................................................................................Last day to withdraw from class.

December 6 (Fri)...................................................................................................................................Last Day of classes.

December 9-13 (Mon-Fri)..................................................................................................................Final exam period.

DECEMBER 13, 2012.........................................................................................................................6 PM, PINNING CEREMONY, FINE ARTS CENTER, MONTICELLO

For class schedule, please see calendar.
Preparing for the clinical experience

All hospital clinical days begin at 0630. Some clinic experiences will begin later, you will be given more information regarding those clinics during Clinical II. Most clinical I, will be 8 hour days. 10 hour days are scheduled for Clinical II and III. You may also be attending some clinical at night.

Read about your patient’s disease process.

Pay particular attention to:

- Causes or contributing factors (etiology)
- Usual signs and symptoms
- Common nursing diagnosis/problems likely to apply to your patient’s condition.
- Common medical treatments/procedures/tests
- Psychosocial ramifications

Review basic nursing skills likely to be performed on your patients.

- Pre/post OP care
- Pre/post treatment care
- Dressing changes
- Suctioning techniques
- Wound suction/drainage devices
- Cast/traction/turning care
- Hot/cold applications ordered
- Intravenous therapy
- Medication administration
- NG/G tube gavage feeding
• Catheter insertion

Research your patient’s medications.

• Classification of medication
• Action of medication
• Usual dose and route of medication
• Expected and adverse side effects of the medication
• Special nursing implication of medication
• Pre/post medication administration actions/assessments

Prepare for patient teaching

• Assess patient’s knowledge of the subject
• Read information concerning the disease process
• Read previous nursing care notes
• Read information concerning diagnostic pre/post testing care
• Evaluate any self-care needs:
  • Home management
  • Cast care
  • Dressing changes
  • Diabetic self-care
  • Medication administration

Preparing a Nursing Care Plan. Refer to Principle and Skills nursing theory and text.

• Individualize plan to your patient
• Review the nursing interventions

Perform a patient’s chart/electronic file review
• Look at face sheet
• Current physician’s orders
• Current progress notes
• History & Physical
• Admission nursing assessment
• Current lab/diagnostic tests and results
• Medication administrations record (MAR)-must be checked against the physician orders each shift
• Consults
• Nurse’s notes and flow sheet

Get sufficient sleep to Perform efficiently and prevent mistakes

POSITIVE QUALITIES IN STUDENT NURSES

AKA: Good things to do while you are in nursing school

◉ When in doubt, ask, ask, ask, ask, ask, ask!!!!!!!
◉ Put back money and come prepared
◉ ALWAYS be on top of your game
◉ Save the drama for your mama
◉ Be prepared to have no life outside of school
◉ Ask questions
◉ Be quiet
◉ Be respectful of others
◉ Answer call lights quickly
◉ Don’t stand around, ask if someone needs help, answer call bells/lights
Keep a neat and clean appearance
Learn the routine, where ever you are
Be caring
Be enthusiastic
Be interested, this will be your profession
Have a sense of humor
Exhibit confidence
Be gentle
Be knowledgeable
Take pride in your accomplishments
Accept constructive criticism graciously
Be easy to get along with
Put your client’s care first, before anything you do for yourself
Be cheerful
Be courteous and trustworthy
Be on time
Look for things that need doing
Always, always be honest

NEGATIVE QUALITIES IN STUDENT NURSES

AKA: Not so good things to do while you are in nursing school

Use a foul mouth
Exhibit a poor attitude
Be uncaring
Be lazy
Be hard to get along with
Exhibit poor knowledge
Be late
Only do enough to “get by”
Be critical of others
Continually complain
Have unclean, poor hygiene
Appear blameless
Make excuses for everything
Gossip
Be a poor listener
Be unprepared for class/clinical

Congratulations on entering a challenging but rewarding profession. Over the last couple of years we have asked students what they would say to the beginning students if they were given the chance. Here are a few of their responses:

**Past student advice**

- *Keep God close and always strive to shine in his light and he will provide.*
- *Remember, “Don’t Stress Now” it’s going to get worse.*
- *Put back money and come prepared*
- *ALWAYS be on top of your game*
- *Save the drama for your mama*
- *Be prepared to have no life outside of school*
BE ON TIME FOR ALL MEDS!!!!!

Nursing school is a life changing experience, soon you will see. Be prepared to slide the roller coaster of life through every emotion, excitement and disappointment and enjoy every minute. Make new friends & forget old enemies. Become a wonderful nurse and changed person in a matter of months and don’t forget to leave your mark as Class of ’08. Good Luck.

Be 110% devoted and study hard. Nursing School is like LIFE….you get out of it, what you put into it.

Be a positive force, and pray.

Study hard. What happens here can/will change your life.

Relax now, while you can. Pray hard.

Prioritize! Prioritize! Prioritize! Then you’ll have some time for yourself.

I would advise you not to work while in nursing school, not even part-time.

Prepare yourself and especially your family for the roller coaster ride their about to take during the next year.

Stay focused, no matter what!

DON’T CRY, it will get better.

Study! Your personal life must go aside for 10 months. Study hard. In the end it will all be worth it. Never give up-push on.

Read ahead, stay ahead on everything, do not get behind.

Never expect to have a free day from studying, or it will cause unnecessary stress, which you will already have plenty of.

If you don’t know without a doubt that you want to be here, and want to be a nurse with all your heart; leave now, you will only be wasting time for everyone!

Take one day at a time. Try to stay as organized as possible

Always be prepared with your things while you go to the clinical. For example: 2 black pens, pen light, scissors, measuring tape……always have a backup and a backup plan. Study hard.

Sleep now, while you can.

The only thing certain is that everything is subject to change.

Life as you know it, is now officially over.
Be prepared to put everything else in life on the back burner! Keep your grade as high as you can and never go into finals riding the fence. In clinical, always do as much as you can, you never get enough experience. When you’re in half-way and ready to give up from lack of sleep and you are just plum exhausted, remember why you decided to be a nurse.

STUDY!! STUDY!! STUDY!! Always remember that if you want it bad enough then you can have it with determination and dedication. No matter what anyone says you can succeed. All you need is a lot of prayer, determination, dedication and support from loved ones. Enjoy the ride! “Tough times don’t always last; but tough people do”.

If you have children take a deep breath. There is a lot of time spent away from them. But remember, always, always, always, you are bettering your life and theirs. Keep your head up, study every spare moment and never give up.

I would tell the next class to really study hard and make this their first priority because this is a very demanding field and if you are not willing to give 100%, then this isn’t the field you need to be in. Work hard and study hard.

When you think you just can’t do this anymore, keep trying because anything is possible.

It is true, your life will be on hold for the next year. But, it is worth every minute when you can get that pin. My best advice will be STUDY!! Pay attention and most important if you think you have made it at the end, don’t get tired and think you got it in the bag. Always study all year.

Trust your instructor’s judgment at all time, you may not understand why. If you trust in what she says, you will make it to the end and realize she was right. Stay away from all negative thoughts, study hard.

Your handbook was developed to provide the information you need. Many hours have gone into planning this academic year. Circumstances may (and usually do) require changes and alterations in the calendar. Please be patient and most important be flexible. Come to class prepared and ready to learn. The instructors will provide you with a syllabus for each course that will include lecture, course objectives, test schedules, required reading, videos, computer lab and homework assignments. Every effort will be made to adhere to this handbook. Additions to the handbook may be necessary during this year. Should changes or additions become necessary, you will be notified as soon as possible.

The Nursing Faculty

Peggie Orrell, RN

Kim Ray, RN

Nikki Calhoun, RN
Appendix A Video List

Video List & Computer Lab Programs
## Video List

### Basic Nursing Videos:
- **BN005** Principles & Guidelines for Hospital Employees
- **BN010** Update for Health Professionals
- **BN015** AIDS, Part II
- **BN020** Feeding the Patient
- **BN025** Enteral Feeding Tubes, Part I
- **BN030** Enteral Feeding Tubes, Part II
- **BN035** Implantable Ports
- **BN040** Management of TPN, Part I
- **BN045** Management of TPN, Part II
- **BN05** Techniques of Therapeutic Communication
- **BN055** Blocks to Therapeutic Communication
- **BN060** Interactions for Study
- **BN070** Range of Motion
- **BN075** Bandages & Binders
- **BN08** Applications of Heat & Cold
- **BN085** Shirley Holmes Tracks Down Germs
- **BN090** Shirley Holmes Pursues Patient Safety, Part I
- **BN095** Shirley Holmes Pursues Patient Safety, Part II
- **BN100** Auscultation & Percussion of Lungs & Thorax
- **BN105** Auscultation of Heart Sounds
- **BN110** Alteration in Pattern: Assessment
- **BN115** Alteration in Pattern: Dysuria
- **BN120** Alteration in Pattern: Temporary Retention
- **BN125** Incontinence: Indep Interventions & Indwelling Catheter
- **BN130** Counseling Patients with Vaginal Yeast Infections
- **BN140** Central Venous Access Devices
- **BN145** Chest Tube Drainage
- **BN150** Suctioning Part I
- **BN155** Suctioning Part II
- **BN160** Adapting the Physical Environment
- **BN165** Developing a Helping Relationship
- **BN170** Grooming
- **BN175** Oral Hygiene
- **BN180** Bathing
- **BN190** CPR for Health Care Providers
- **BN215** Skin Assessment, Care & Documentation
- **BN220** Documenting Nursing Practice
- **BN225** Charting: Legal Implication
- **BN230** Impaired Mobility: Physical Consequences
- **BN235** Impaired Mobility: The Nurse’s Role
- **BN240** Pressure, Shear & Friction: Assessing Risk
- **BN245** Pressure, Shear & Friction: Prevention & Intervention
- **BN250** Equipment Preparation & Patient Assessment
- **BN255** Access & Medication Administration
- **BN260** Preventing Complications & Discontinuing the IV
- **BN265** Measuring Basic Functions
- **BN270** Assuring Safety
- **BN275** Maintaining Personal Hygiene
- **BN280** Performing Treatments
- **BN285** Maintaining Surgical Asepsis
- **BN290** Administering Nonparenteral Medications
- **BN295** Administering Injectable Medications
- **BN300** Administering IV Medications

**NEW:**
- **BN310** Nursing Process and Critical Thinking: The Nursing Process
- **BN315** Nursing Process and Critical Thinking: Critical Thinking in the Nursing Process

**INTRODUCTION:** Concepts, Values and Decision Making

**COMMITMENT:** Patients, Professionalism and Boundaries
Nursing Management of Wounds
Pressure Ulcers in Adults: Prediction and Prevention
Basic Clinical Skills: Urethral Catheterization
Fluids and Electrolytes Balance: Basics

**Geriatric Videos:**
GER05 The Natural Process of Aging
GER10 Normal Physiologic Changes
GER15 Physical Assessment, Part I
GER20 Physical Assessment, Part II
GER25 Functional Assessment
GER30 Mental & Socioeconomic Assessment
GER35 When Someone You Love has Alzheimer's

**Maternity/Infant Videos:**
MI005 Pregnancy
MI010 Birth & the Neonate
MI015 Reducing the Risk Factors
MI020 Nursing Assessment of the Postpartum Patient
MI025 Ineffective Breast-feeding
MI030 Knowledge Deficit: Infant Care
MI035 Physical Examination, Part I
MI040 Gestational Age Assessment, Part II
MI045 Labor & Delivery: the LDR
MI060 Labor & Delivery: Maternal Changes & Prenatal Care
MI070 Baby Care Basics for the Formula-Feeding Mother
MI075 Baby Care Basics for Your Baby's Early Months
MI088 Cesarean Section
MI090 Postpartum
MI095 Gestational Age Assessment
MI100 The Stages of Labor
MI105 Pregnancy Induced Hypertension

**NEW:**
Labor and Delivery 78798DR-DVD
Newborn Stabilization and Care 78798GR-DVD
Caring for the Postpartum Patient 78798HR-DVD

**Med/Surg Videos:**
MS005 Hemorrhaging
MS010 Anaphylactic Shock
MS015 Mega Code
MS020 Tuberculosis (Prevention & Practices)
MS025 The Critical Balance, Part I
MS030 The Critical Balance, Part II
MS035 Code Call
MS040 Eliminating Chaos During Code Blue
MS045 Post-Abdominal Surgery
MS050 CHF
MS055 Newly Diagnosed Diabetes Mellitus
MS060 Constipation: How Your Care Plan Can Make the Difference
MS065 Acute Pain Management: Oper or Med Proc and Trauma
MS070 Diabetes
MS075 Ostomy Care
MS080 When Someone You Love is a Cancer Survivor
MS085 Preparing the Ostomy Client for Discharge
MS090 Acute Neurological Care: Spinal Cord Injury
MS095 Nursing Management of Acute Head Injuries
MS100 Casts: Part I
MS105 Casts: Part II
MS110 Pre & Post Op: Knee Replacement
MS115 Pre & Post Op: Hip Replacement
MS120 Pre & Post Op: Hip Fracture
MS125 Breaking the Chain of Nosocomial Infections: Surgical Wound Infections
MS130 Breaking the Chain of Nosocomial Infections: Pneumonia
MS135 Breaking the Chain of Nosocomial Infections: UTI
Breaking the Chain of Nos Infections: Bloodstream Infections
Critical Care: Emergency Burn Treatment

**Pediatrics:**

PED05Medicating Children
PED10Physical Growth & Motor Development
PED11Physical Growth & Motor Development (b)
PED15Cognitive Development
PED16Cognitive Development (b)
PED20Language Development
PED25Emotional/Social Development
PED26Peer Relations
PED27Role Play
PED28Psychosocial Development (not available)
PED30Detection & Treatment of Sexually Abused Children
PED31Intellectual Growth & Achievement
PED32Psychosocial Care Infant & Toddlers
PED33Preschool and School-Aged Children
PED34Adolescents
PED35Detection & Treatment of Sexually Abused Children, PED 36The Dying Child
PED40Child Abuse: Prevention, Detection & Management

**Pharmacy:**

PH005Administering Oral, Topical, Supplemental & Inhalants
PH010Administering IM, ID, SQ Injections
PH015Initiating IV Therapy
PH020Preparing & Administering IV Medications
PH025Pharmacology Assessment: Nursing Implications
PH030Equipment Preparation
PH035Preparing Medication from an Ampule
PH040Preparing Medication from a Vial
PH050Patient Controlled Analgesia: Nursing Prospective (2)
PH055Oral Medication Administration

**NEW: Case Studies in Medication Error Prevention**

**Preventing Medication Errors: A prescription for Patient Safety**

**Administering Oral, Topical, Suppository and Inhalant Medications**

**Parenteral Medication Administration**

**Equipment Preparation**

**Parenteral Medication Administration: Preparing Medication from an Ampule**

**Parenteral Medication Administration: Site Selection and Injection Techniques**

**Parenteral Medication Administration: Preparing Medication from a Vial**

**IM Meds Intramuscular, Subcutaneous, and Intradermal**

**IV Therapy:**

M196ASafer Infusion Therapy: the Basics
M196BSafer Infusion Therapy: Initiating Venipuncture
M196CSafer Infusion Therapy: Reducing Complications & Improving Outcomes
M196DSafer Infusion Therapy: Care and Maintenance

**Mental Health:**

MH005Psychotropic Med: Assess, Interv and Treatment
MH010Psychotropic Meds: Schizophrenia and Bipolar Disorders
MH015Psychotropic Medications: Depression and Anxiety
MH020Medication Issues in Mental Health: Understanding Movement Disorders
MH025Medication Issues in Mental Health: Preventing Adverse Drug Reactions

**Vocational, Legal & Ethical:**

VLE05Arkansas Nursing Education Articulation Plan (Fall 1992)
VLE10Introduction to Computerized Adaptive Testing
VLE15HOSA Student Recruitment
VLE20HOSA Helping Members Become the Best They Can Be
VLE25HOSA Competitive Events
VLE30McMurphy Nursing Project
VLE35Navy Nurse Corps
VLE45Diagnostic Reasoning
VLE50Attending Tocues
VLE55Diagnostic Strategies
VLE60Nursing Process
VLE65Creative Problem Solving
VLE70The Nature of Ethical Problems
VLE75Values Clarification
VLE80A Patient’s Bill of Rights
VLE85Institutional Policies
VLE90Patient Autonomy
VLE95Nurse/Physician Relationship
VLE100Nursing Obligations
VLE105Concerning Death
VLE110Confidentiality: Legal and Ethical Concerns
VLE115Stem Cells
VLE120Human Cloning and Ethical Dilemma
VLE125Interviews on the Ethics of Medical Genetics
VLE130History of Bioterrorism
VLE135Help Schools Prepare for Terrorism
VLE140Terrorism Preparedness
VLE145Role of Nursing During Times of War and Terrorism
VLE150Getting Ready for Terrorism
VLE155HIPAA

NEW:

HIPAA for Healthcare Workers:
An Overview
The privacy Rule
The Security Rule
APPENDIX B ALPNA Class Officers Duties

ALPNA CLASS OFFICERS DUTIES
Student Organization

Officer Duties

**President**

*An elected officer that serves the student organization by:*

- Representing the student organization at Faculty Staff Meetings.
- Chairing all student organization meetings.
- Directing student organization in fund raising.

The president should not dominate the organization but lead it. The president votes only to break a tie. No action can be taken by the student organization of the individual class members without a majority vote.

**Vice President**

*An elected officer that aids the president and the student organization.*

**Secretary**

*An elected officer that serves the student organization by:*

- Keeping detailed minutes of each organization meeting.
- Minutes should include:
  - Date
  - Time the meeting was called to order
  - Who attended the meeting
  - Old Business: this is unfinished items from the last meeting.
  - New Business
  - Any motions made
  - Who made the motion
  - Who seconded the motion
  - Any vote taken on the motion
• Time the meeting was adjourned

• All minutes should be typed and filed in the student organization=s notebook.

• The advisor should receive a copy of the meeting minutes no later than one week after the meeting was held.

Example of Minutes

ALPNA Student Organization Meeting Minutes (Example)
Date: 6/1/2009
Time: 1530

Called to Order by: Jill, President

Attendance: Bob, Mary, Karen, Jim, Jane, Rick, Joe, alice, Tina

approval of minutes: Read through the minutes of last meeting, ask for approval

Old Business:

Fund raisers:
Karen was to call wal-mart about having the bake sale ther on Aug 10th and to find out details for receiving matching monies. (write what Karen reports)

T-Shirts for Spring Conference
Bob was to get an estimate on t-shirts from different vendors. (write bob's)

New Business:

Reception details
A motion was made by Jill and seconded by Joe to serve only cake and punch at the reception. Motion was passed by 25 to 5.

A motion was made by Karen and seconded by Bob to serve finger foods at the reception. Motion was not passed by 4 to 16.

Nurse of the Year Award Candidates

Adjourned at: 1600

Treasurer

An elected officer that serves the student organization by:

• Keeping a detailed record of organizational funds.

• Financial Record should include:

• Any deposits made.
• Any monies collected and from whom.
• Any withdrawals made and the purpose of the expenditure.
• A Financial Report should be filed with the Advisor no later than one week after each fund raiser.
• Collecting all monies owed the student organization.
• All monies should be given to Ms. Geraldine for deposit immediately.
• The student advisor will not count, touch or keep the money, it is your responsibility.
• No monies should change hands without a receipt!!!!!!
• The individual receiving the money will count it and sign a receipt, give a copy to the individual turning in the money and keep a copy for themselves.

**Example of Financial Report**

<table>
<thead>
<tr>
<th>ALPNA STUDENT ORGANIZATION FINANCIAL REPORT</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Beginning Balance</strong></td>
</tr>
<tr>
<td>167.15</td>
</tr>
<tr>
<td><strong>Deposits:</strong></td>
</tr>
<tr>
<td>Karen Student Organization Dues 15.00</td>
</tr>
<tr>
<td>Joe Student Organization Dues 15.00</td>
</tr>
<tr>
<td>Jill Calendar sale (25 @ 2.50) 62.50</td>
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<tr>
<td>Rick Bake sale 150.00</td>
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<tr>
<td>Wal-Mart Matching Funds 150.00</td>
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<tr>
<td><strong>Total Deposits</strong></td>
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<tr>
<td>392.50</td>
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<tr>
<td><strong>Withdrawals:</strong></td>
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<tr>
<td>ALPNA Registration fall conference 30@ 5.00</td>
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<tr>
<td><strong>Total Deposits</strong></td>
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<tr>
<td>559.65</td>
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</tbody>
</table>

**Historian**

*An elected officer that serves the student organization by:*

• Keeping a scrapbook of the student organization’s activities throughout the year.

• Writing short articles or advertisements about the student organization and their activities for the local newspaper.
• Must turn in the scrapbook at the end of the year.

Parliamentarian

An elected officer that serves the student organization by:

• Keeping order in the student organization’s meetings.

Remember, no class member should rule the class. This is still a democracy. You all must work together for the good of the class or the whole class suffers.
APPENDIX C Evaluation Forms
CLINICAL I EVALUATION FORM

<table>
<thead>
<tr>
<th>Evaluation Criteria</th>
<th>Strongly Disagree</th>
<th>Mildly Disagree</th>
<th>Mildly Agree</th>
<th>Strongly Agree</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exhibits a positive attitude.</td>
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<tr>
<td>Exhibits adaptability to change.</td>
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<td>Maintains client/resident confidentiality.</td>
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<td>Manages time effectively.</td>
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<td>On time for clinical assignments.</td>
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<td>Prepared for clinical assignments.</td>
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<td>Accepts constructive criticism.</td>
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<td>Exhibits willingness to learn new techniques.</td>
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<tr>
<td>Exhibits rapport with client/resident and client/resident family.</td>
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<td>Demonstrates therapeutic communication.</td>
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<td>Communicates effectively verbally.</td>
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<td>Willingly assists others with client/resident care activities as needed.</td>
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<tr>
<td>Applies theoretical knowledge appropriately.</td>
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<td>Demonstrates universal precautions appropriately.</td>
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<td>Demonstrates accurate physical assessment.</td>
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<td>Dresses professionally.</td>
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<td>Exhibits professional behavior.</td>
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<td>Performs skills appropriately.</td>
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<td>Demonstrates safe client/resident care.</td>
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<td>Promotes health maintenance through client teaching.</td>
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<td>Exhibits willingness to seek assistance pro.</td>
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<td>Demonstrates effective use of the nursing process.</td>
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<td>Demonstrates leadership skills.</td>
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<td>Seeks opportunities for continued education.</td>
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<tr>
<td>Shows respect to health care team/fellow students/clients/residents/families.</td>
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</tbody>
</table>

Comments

Evaluator's Signature ____________________________ Date __________ Total Score __________

Student’s Signature ____________________________ Date __________

PLO: Reviewed 12/10/13
## CLINICAL II AND III EVALUATION FORM

### EVALUATION

UAM COLLEGE OF TECHNOLOGY-McGEHEE
Clinical II and III Evaluation

<table>
<thead>
<tr>
<th>NAME</th>
<th>CLINICAL SITE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Evaluation Criteria</th>
<th>Strongly Disagree (1)</th>
<th>Mildly Disagree (2)</th>
<th>Mildly Agree (3)</th>
<th>Strongly Agree (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exhibits professional behavior.</td>
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<tr>
<td>Identifies strengths and areas for improvement.</td>
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</tr>
<tr>
<td>Maintains confidentiality of client information.</td>
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</tr>
<tr>
<td>Proficient, coordinated, confident behavior displayed.</td>
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</tr>
<tr>
<td>Paperwork complete, on time, legible, able to discuss with ease.</td>
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</tr>
<tr>
<td>Prepared in advance to provide knowledgeable care to clients.</td>
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</tr>
<tr>
<td>Accepts constructive criticism.</td>
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<td></td>
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</tr>
<tr>
<td>Exhibits willingness to learn new techniques.</td>
<td></td>
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<tr>
<td>Exhibits rapport with client, client family and health care team.</td>
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<tr>
<td>Demonstrates therapeutic communication.</td>
<td></td>
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<tr>
<td>Punctual.</td>
<td></td>
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<tr>
<td>Willingly assists others with client care activities as needed.</td>
<td></td>
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</tr>
<tr>
<td>Applies theoretical knowledge appropriately.</td>
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<tr>
<td>Demonstrates universal precautions appropriately.</td>
<td></td>
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</tr>
<tr>
<td>Documents completely and thoroughly.</td>
<td></td>
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</tr>
<tr>
<td>Performs skills appropriately and safely.</td>
<td></td>
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<tr>
<td>Demonstrates safe nursing care.</td>
<td></td>
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<tr>
<td>Promotes health maintenance through client teaching.</td>
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<tr>
<td>Requests guidance as necessary.</td>
<td></td>
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<tr>
<td>Demonstrates effective use of the nursing process.</td>
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<tr>
<td>Demonstrates leadership skills.</td>
<td></td>
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<tr>
<td>Demonstrates appropriate delegation skills.</td>
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<tr>
<td>Seeks opportunities for continued education.</td>
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</tr>
<tr>
<td>Shows respect to health care team/fellow students/clients.</td>
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</tr>
<tr>
<td>Asses assigned client(s) appropriately and in a timely manner.</td>
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<tr>
<td>Identify changes in client’s health status.</td>
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<tr>
<td>Recognize significant client data.</td>
<td></td>
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<tr>
<td>Rank priorities of care.</td>
<td></td>
<td></td>
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<tr>
<td>Accountable for own actions.</td>
<td></td>
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<tr>
<td>Administers medications appropriately.</td>
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<tr>
<td>Utilize critical thinking skills.</td>
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</table>

Comments

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__________________________________________________________________________________________

Student’s identified area of improvement

**Strengths**

Evaluator’s Signature __________ Date __________ Total Score __________

Student’s Signature __________ Date __________

PLO Reviewed 12/10/13
APPENDIX D Medical Abbreviation List
### MEDICAL ABBREVIATION LIST

**ABBREVIATIONS AND SYMBOLS (used for clinical tests)**

<table>
<thead>
<tr>
<th></th>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>1.</td>
<td>A/O</td>
<td>alert and orientated</td>
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<tr>
<td>2.</td>
<td>aa</td>
<td>of each</td>
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<td>3.</td>
<td>AAA</td>
<td>abdominal aortic aneurysm</td>
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<tr>
<td>4.</td>
<td>abd</td>
<td>abdomen</td>
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<td>5.</td>
<td>ABGs</td>
<td>arterial blood gases</td>
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<tr>
<td>6.</td>
<td>ac, a.c.</td>
<td>before meals</td>
</tr>
<tr>
<td>7.</td>
<td>ACLS</td>
<td>advanced cardiac life support</td>
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<tr>
<td>8.</td>
<td>ACTH</td>
<td>adrenocorticotropic hormone</td>
</tr>
<tr>
<td>9.</td>
<td>ad lib</td>
<td>as often as desired</td>
</tr>
<tr>
<td>10.</td>
<td>ADH</td>
<td>anti-diuretic hormone</td>
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<tr>
<td>11.</td>
<td>ADLs</td>
<td>activities of daily living</td>
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<td>AED</td>
<td>automatic external defibrillator</td>
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<td>AFI</td>
<td>acute febrile illness</td>
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<td>14.</td>
<td>AFP</td>
<td>alpha-fetoprotein</td>
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<td>15.</td>
<td>AgNO₃⁻</td>
<td>silver nitrate</td>
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<tr>
<td>16.</td>
<td>AIDS</td>
<td>acquired immunodeficiency syndrome</td>
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<tr>
<td>17.</td>
<td>AKA</td>
<td>above the knee amputation</td>
</tr>
<tr>
<td>18.</td>
<td>AMA</td>
<td>against medical advice</td>
</tr>
<tr>
<td>19.</td>
<td>amb</td>
<td>ambulate/ambulatory</td>
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<tr>
<td>20.</td>
<td>amp</td>
<td>ampule</td>
</tr>
<tr>
<td>21.</td>
<td>and</td>
<td>et</td>
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<td>---</td>
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<td>22</td>
<td>AP</td>
<td>anteroposterior</td>
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<tr>
<td>23</td>
<td>APGAR</td>
<td>appearance, pulse, grimace, activity, respirations</td>
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<tr>
<td>24</td>
<td>Aq, H₂O</td>
<td>water</td>
</tr>
<tr>
<td>25</td>
<td>ARDS</td>
<td>adult respiratory distress syndrome</td>
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<tr>
<td>26</td>
<td>ARF</td>
<td>acute renal failure</td>
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<tr>
<td>27</td>
<td>ASAP</td>
<td>as soon as possible</td>
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<tr>
<td>28</td>
<td>ASHD</td>
<td>arteriosclerotic heart disease</td>
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<td>29</td>
<td>b.i.d.</td>
<td>twice daily</td>
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<tr>
<td>30</td>
<td>BBB</td>
<td>bundle branch block</td>
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<td>31</td>
<td>BE</td>
<td>barium enema</td>
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<tr>
<td>32</td>
<td>BKA</td>
<td>below the knee amputation</td>
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<td>33</td>
<td>Bm, BM</td>
<td>bowel movement</td>
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<td>BMR</td>
<td>basal metabolic rate</td>
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<td>35</td>
<td>BOM</td>
<td>bilateral otitis media</td>
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<td>36</td>
<td>BPH</td>
<td>benign prostatic hypertrophy</td>
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<td>37</td>
<td>BPM</td>
<td>beats per minute</td>
</tr>
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<td>38</td>
<td>BRP</td>
<td>bathroom privileges</td>
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<td>39</td>
<td>BS</td>
<td>bowel sounds, breath sounds</td>
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<td>40</td>
<td>BSC</td>
<td>bedside commode</td>
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<tr>
<td>41</td>
<td>BUN</td>
<td>blood urea nitrogen</td>
</tr>
<tr>
<td>42</td>
<td>c</td>
<td>with</td>
</tr>
<tr>
<td>43</td>
<td>C&amp;S</td>
<td>culture and sensitivity</td>
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<td>44</td>
<td>c/o</td>
<td>complains of</td>
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<tr>
<td>45</td>
<td>CA</td>
<td>cancer</td>
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<tr>
<td>46</td>
<td>Ca⁺</td>
<td>calcium</td>
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<td>47.</td>
<td>CABG</td>
<td>coronary artery bypass graft</td>
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<td>48.</td>
<td>CAD</td>
<td>coronary artery disease</td>
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<tr>
<td>49.</td>
<td>cal.</td>
<td>calorie</td>
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<tr>
<td>50.</td>
<td>cap.</td>
<td>capsule</td>
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<tr>
<td>51.</td>
<td>CAT</td>
<td>computerized axial tomography</td>
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<td>52.</td>
<td>cath</td>
<td>catheter</td>
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<tr>
<td>53.</td>
<td>CBR</td>
<td>complete bed rest</td>
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<tr>
<td>54.</td>
<td>CCU</td>
<td>coronary care unit</td>
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<tr>
<td>55.</td>
<td>CF</td>
<td>cystic fibrosis</td>
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<tr>
<td>56.</td>
<td>CHF</td>
<td>congestive heart failure</td>
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<tr>
<td>57.</td>
<td>Cl⁻</td>
<td>chloride</td>
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<tr>
<td>58.</td>
<td>CMV</td>
<td>cytomegalovirus</td>
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<tr>
<td>59.</td>
<td>CNS</td>
<td>central nervous system</td>
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<tr>
<td>60.</td>
<td>CO₂</td>
<td>carbon dioxide</td>
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<tr>
<td>61.</td>
<td>COLD</td>
<td>chronic obstructive lung disease</td>
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<tr>
<td>62.</td>
<td>comp</td>
<td>complication</td>
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<td>63.</td>
<td>COPD</td>
<td>chronic obstructive pulmonary disease</td>
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<td>64.</td>
<td>CP</td>
<td>chest pain or cerebral palsy</td>
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<td>65.</td>
<td>CPK</td>
<td>creatine phosphokinase</td>
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<td>66.</td>
<td>cr</td>
<td>creatinine</td>
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<td>67.</td>
<td>CRF</td>
<td>chronic renal failure</td>
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<td>68.</td>
<td>CRNA</td>
<td>certified registered nurse anesthetist</td>
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<td>69.</td>
<td>CT</td>
<td>computerized tomography</td>
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<td>70.</td>
<td>CVA</td>
<td>cerebrovascular accident</td>
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<td>71.</td>
<td>CVP</td>
<td>central venous pressure</td>
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<td>Abbreviation</td>
<td>Description</td>
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<td>72.</td>
<td>D&amp;C</td>
<td>dilation and curettage</td>
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<td>D₃W</td>
<td>5% dextrose in water</td>
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<td>DAT</td>
<td>diet as tolerated</td>
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<td>75.</td>
<td>DC (D/C)</td>
<td>discontinue</td>
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<td>76.</td>
<td>disch</td>
<td>discharge</td>
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<tr>
<td>77.</td>
<td>DJD</td>
<td>degenerative joint disease</td>
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<td>78.</td>
<td>DKA</td>
<td>diabetic ketoacidosis</td>
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<td>79.</td>
<td>DM</td>
<td>diabetes mellitus</td>
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<tr>
<td>80.</td>
<td>DNR</td>
<td>do not resuscitate</td>
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<td>81.</td>
<td>DOA</td>
<td>dead on arrival</td>
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<tr>
<td>82.</td>
<td>DOE</td>
<td>dyspnea on exertion</td>
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<td>83.</td>
<td>DPT</td>
<td>diphtheria, pertussis, tetanus</td>
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<td>84.</td>
<td>Dr.</td>
<td>doctor</td>
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<td>85.</td>
<td>DTR</td>
<td>deep tendon reflexes</td>
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<td>86.</td>
<td>DVT</td>
<td>deep vein thrombosis</td>
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<td>87.</td>
<td>DWT</td>
<td>daily weight</td>
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<td>88.</td>
<td>dx.</td>
<td>diagnosis</td>
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<td>89.</td>
<td>E.C.G. (EKG)</td>
<td>electrocardiogram</td>
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<td>EBL</td>
<td>estimated blood loss</td>
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<td>EC</td>
<td>enteric coated</td>
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<td>92.</td>
<td>EDC</td>
<td>expected date of confinement</td>
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<td>93.</td>
<td>EDD</td>
<td>expected date of delivery</td>
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<td>EEG</td>
<td>electroencephalogram</td>
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<td>elix</td>
<td>elixir</td>
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<td>97. ESR</td>
<td>erythrocyte sedimentation rate</td>
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<td>98. ETOH</td>
<td>ethanol (alcohol), (drunken state)</td>
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<td>99. fb</td>
<td>fingerbreadths</td>
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<td>100. FBS</td>
<td>fasting blood sugar</td>
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<td>101. Fe⁺</td>
<td>iron</td>
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<td>102. FHR</td>
<td>fetal heart rate</td>
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<td>fetal heart tone</td>
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<td>104. FTT</td>
<td>failure to thrive</td>
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<td>105. FUO</td>
<td>fever of unknown origin</td>
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<td>fracture</td>
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<td>gram</td>
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<td>gastroesophageal reflux disease</td>
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<td>glomerular filtration rate</td>
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<td>grain</td>
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<td>113. H&amp;H</td>
<td>hemoglobin and hematocrit</td>
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<td>114. H₂O₂</td>
<td>hydrogen peroxide</td>
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<td>headache</td>
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<td>116. hct</td>
<td>hematocrit</td>
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<td>117. HDL</td>
<td>high density lipoprotein</td>
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<td>hemoglobin</td>
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<td>head of bed</td>
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<td>hours of sleep</td>
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<td>I&amp;O</td>
<td>intake and output</td>
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<td>intensive care unit</td>
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<td>insulin dependent diabetes mellitus</td>
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<td>intramuscular</td>
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<td>inj</td>
<td>injection</td>
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<td>intermittent positive pressure breathing</td>
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<td>idiopathic thrombocytopenic purpura</td>
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<td>intrauterine pregnancy</td>
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<td>IV</td>
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<td>IVP</td>
<td>intravenous pyelogram, intravenous push</td>
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<td>potassium chloride</td>
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<td>kg</td>
<td>kilogram</td>
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<td>keep vein open</td>
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<td>LCTA</td>
<td>lungs clear to auscultation</td>
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<td>liquid</td>
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<td>LLE</td>
<td>left lower extremity</td>
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<td>143.</td>
<td>LLL</td>
<td>left lower lobe</td>
</tr>
<tr>
<td>144.</td>
<td>LLQ</td>
<td>left lower quadrant</td>
</tr>
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<td>145.</td>
<td>LMP</td>
<td>last menstrual period</td>
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<td>146.</td>
<td>LOC</td>
<td>level of consciousness</td>
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<td>licensed practical nurse</td>
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<td>148.</td>
<td>LUL</td>
<td>left upper lobe</td>
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<td>149.</td>
<td>MAE</td>
<td>moves all extremities</td>
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<td>mEq</td>
<td>milliequivalent</td>
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<td>minute</td>
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<tr>
<td>154.</td>
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<td>milliliter</td>
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<td>mm</td>
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<td>156.</td>
<td>mmm</td>
<td>moist mucous membranes</td>
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<tr>
<td>157.</td>
<td>MMR</td>
<td>measles, mumps, rubella</td>
</tr>
<tr>
<td>158.</td>
<td>mn</td>
<td>midnight</td>
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<tr>
<td>159.</td>
<td>MRSA</td>
<td>methicillin resistant staphylococcus aureus</td>
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<tr>
<td>160.</td>
<td>MS</td>
<td>multiple sclerosis</td>
</tr>
<tr>
<td>161.</td>
<td>MVA</td>
<td>motor vehicle accident</td>
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<td>162.</td>
<td>N/V</td>
<td>nausea and vomiting</td>
</tr>
<tr>
<td>163.</td>
<td>NAS</td>
<td>no added salt</td>
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<tr>
<td>164.</td>
<td>NGT</td>
<td>nasogastric tube</td>
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<tr>
<td>165.</td>
<td>NIDDM</td>
<td>non-insulin dependent diabetes mellitus</td>
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<td>166.</td>
<td>NKA</td>
<td>no known allergies</td>
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<tr>
<td>167.</td>
<td>NKDA</td>
<td>no known drug allergies</td>
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<tr>
<td>168.</td>
<td>noc</td>
<td>nocturnal, night</td>
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<tr>
<td>169.</td>
<td>NPO</td>
<td>nothing by mouth</td>
</tr>
<tr>
<td>170.</td>
<td>NS</td>
<td>normal saline</td>
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<td>171.</td>
<td>NSAID</td>
<td>non-steroidal anti-inflammatory drugs</td>
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<td>Abbreviation</td>
<td>Description</td>
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<td>172.</td>
<td>NSR</td>
<td>normal sinus rhythm</td>
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<td>173.</td>
<td>nsy</td>
<td>nursery</td>
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<tr>
<td>174.</td>
<td>NVD</td>
<td>neck vein distention</td>
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<tr>
<td>175.</td>
<td>O$_2$</td>
<td>oxygen</td>
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<tr>
<td>176.</td>
<td>OB</td>
<td>obstetrics</td>
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<tr>
<td>177.</td>
<td>OD</td>
<td>overdose</td>
</tr>
<tr>
<td>178.</td>
<td>OOB</td>
<td>out of bed</td>
</tr>
<tr>
<td>179.</td>
<td>OR</td>
<td>operating room</td>
</tr>
<tr>
<td>180.</td>
<td>ORIF</td>
<td>open reduction internal fixation</td>
</tr>
<tr>
<td>181.</td>
<td>OTC</td>
<td>over the counter</td>
</tr>
<tr>
<td>182.</td>
<td></td>
<td>ounce</td>
</tr>
<tr>
<td>183.</td>
<td>p</td>
<td>after</td>
</tr>
<tr>
<td>184.</td>
<td>p.m.</td>
<td>afternoon</td>
</tr>
<tr>
<td>185.</td>
<td>PA</td>
<td>posteroanterior</td>
</tr>
<tr>
<td>186.</td>
<td>PAC</td>
<td>premature atrial contraction</td>
</tr>
<tr>
<td>187.</td>
<td>pc, p.c.</td>
<td>after meals</td>
</tr>
<tr>
<td>188.</td>
<td>PE</td>
<td>pulmonary embolus, physical exam, pleural effusion</td>
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<tr>
<td>189.</td>
<td>PERRLA</td>
<td>pupils equal, round, reactive to light accommodation</td>
</tr>
<tr>
<td>190.</td>
<td>PFT</td>
<td>pulmonary function tests</td>
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<tr>
<td>191.</td>
<td>PID</td>
<td>pelvic inflammatory disease</td>
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<tr>
<td>192.</td>
<td>PP</td>
<td>postpartum</td>
</tr>
<tr>
<td>193.</td>
<td>PPBS</td>
<td>post prandial blood sugar</td>
</tr>
<tr>
<td>194.</td>
<td>PPD</td>
<td>purified protein derivative</td>
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<td>195.</td>
<td>pr, p.r., R</td>
<td>rectal</td>
</tr>
<tr>
<td>196.</td>
<td>prn</td>
<td>as needed</td>
</tr>
<tr>
<td></td>
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<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>197.</td>
<td>PUD</td>
<td>peptic ulcer disease</td>
</tr>
<tr>
<td>198.</td>
<td>PVC</td>
<td>premature ventricular contraction</td>
</tr>
<tr>
<td>199.</td>
<td>q</td>
<td>every</td>
</tr>
<tr>
<td>200.</td>
<td>R.N.</td>
<td>registered nurse</td>
</tr>
<tr>
<td>201.</td>
<td>R/O</td>
<td>rule out</td>
</tr>
<tr>
<td>202.</td>
<td>r/t</td>
<td>related to</td>
</tr>
<tr>
<td>203.</td>
<td>RA</td>
<td>rheumatoid arthritis, right atrium</td>
</tr>
<tr>
<td>204.</td>
<td>RBS</td>
<td>random blood sugar</td>
</tr>
<tr>
<td>205.</td>
<td>resp</td>
<td>respirations</td>
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<tr>
<td>206.</td>
<td>RLE</td>
<td>right lower extremity</td>
</tr>
<tr>
<td>207.</td>
<td>RLQ</td>
<td>right lower quadrant</td>
</tr>
<tr>
<td>208.</td>
<td>ROM</td>
<td>range of motion</td>
</tr>
<tr>
<td>209.</td>
<td>ROS</td>
<td>review of systems</td>
</tr>
<tr>
<td>210.</td>
<td>ROS</td>
<td>review of systems</td>
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<tr>
<td>211.</td>
<td>RR</td>
<td>recovery room</td>
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<tr>
<td>212.</td>
<td>RRR</td>
<td>regular rate and rhythm</td>
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<tr>
<td>213.</td>
<td>RUQ</td>
<td>right upper quadrant</td>
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<tr>
<td>214.</td>
<td>RV</td>
<td>residual volume</td>
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<tr>
<td>215.</td>
<td>s</td>
<td>without</td>
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<td>216.</td>
<td>S&amp;S, SS</td>
<td>signs and symptoms</td>
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<tr>
<td>217.</td>
<td>SICU</td>
<td>surgical intensive care unit</td>
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<tr>
<td>218.</td>
<td>SL</td>
<td>sublingual</td>
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<td>219.</td>
<td>SOAP</td>
<td>subjective, objective, assessment, plan</td>
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<tr>
<td>220.</td>
<td>SOB</td>
<td>shortness of breath</td>
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<tr>
<td>221.</td>
<td>sol</td>
<td>solution</td>
</tr>
<tr>
<td>222.</td>
<td>sp gr</td>
<td>specific gravity</td>
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<tr>
<td>223.</td>
<td>spec.</td>
<td>specimen</td>
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<tr>
<td>224.</td>
<td>SR</td>
<td>side rails, sustained release</td>
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<td>225.</td>
<td>ss</td>
<td>$\frac{1}{2}$</td>
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<td>226.</td>
<td>Staph</td>
<td>staphylococcus</td>
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<td>STD</td>
<td>sexually transmitted disease</td>
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<td>streptococcus</td>
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<tr>
<td>229.</td>
<td>surg</td>
<td>surgery</td>
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<td>230.</td>
<td>T</td>
<td>temperature</td>
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<tr>
<td>231.</td>
<td>t.i.d.</td>
<td>three times a day</td>
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<td>T.O.</td>
<td>telephone order</td>
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<td>tab</td>
<td>tablet</td>
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<td>TCDB</td>
<td>turn, cough, deep breath</td>
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<td>TIA</td>
<td>transient ischemic attacks</td>
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<td>236.</td>
<td>TNTC</td>
<td>too numerous to count</td>
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<tr>
<td>237.</td>
<td>TPR</td>
<td>temperature, pulse, respirations</td>
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<tr>
<td>238.</td>
<td>tx</td>
<td>treatment</td>
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<td>239.</td>
<td>UA</td>
<td>urinalysis</td>
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<td>URI</td>
<td>upper respiratory infection</td>
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<td>UTI</td>
<td>urinary tract infection</td>
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<td>242.</td>
<td>V.O.</td>
<td>verbal order</td>
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<td>243.</td>
<td>VD</td>
<td>venereal disease</td>
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<td>244.</td>
<td>V-fib</td>
<td>ventricular fibrillation</td>
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<td>245.</td>
<td>via</td>
<td>by means of</td>
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<td>246.</td>
<td>VRE</td>
<td>vancomycin-resistant enterococcus</td>
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<td></td>
<td>Abbreviation</td>
<td>Full Form</td>
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<td>247.</td>
<td>VT</td>
<td>ventricular tachycardia</td>
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<td>248.</td>
<td>w</td>
<td>with</td>
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<td>249.</td>
<td>W.B.C.</td>
<td>white blood count</td>
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<td>w.o.</td>
<td>written orders</td>
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<td>251.</td>
<td>W/C</td>
<td>wheelchair</td>
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<td>252.</td>
<td>WNL</td>
<td>within normal limits</td>
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<tr>
<td>253.</td>
<td>wt</td>
<td>weight</td>
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<td>254.</td>
<td>HRT</td>
<td>hormone replacement therapy</td>
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<td>255.</td>
<td>HCG</td>
<td>human chorionic gonadotropin</td>
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<td>256.</td>
<td>HPV</td>
<td>human papilloma virus</td>
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<tr>
<td>257.</td>
<td>CAP</td>
<td>community acquired pneumonia</td>
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<tr>
<td>258.</td>
<td>bol.</td>
<td>bolus</td>
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<tr>
<td>259.</td>
<td>B.S.</td>
<td>blood sugar</td>
</tr>
<tr>
<td>260.</td>
<td>et</td>
<td>and</td>
</tr>
<tr>
<td>261.</td>
<td>hr</td>
<td>hour</td>
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<td>262.</td>
<td>ID</td>
<td>intradermal</td>
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<td>263.</td>
<td>stat</td>
<td>immediately</td>
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<td>264.</td>
<td>supp</td>
<td>suppository</td>
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<td>265.</td>
<td>CDC</td>
<td>center for disease control and prevention</td>
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<tr>
<td>266.</td>
<td>LOS</td>
<td>length of stay</td>
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<td>267.</td>
<td>COBRA</td>
<td>consolidated omnibus budget reconciliation act</td>
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<td>268.</td>
<td>OSHA</td>
<td>occupational health and safety administration</td>
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<td>269.</td>
<td>PCP</td>
<td>primary care physician</td>
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<td>270.</td>
<td>SBE</td>
<td>self breast exam</td>
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<td>271.</td>
<td>DO</td>
<td>doctor of osteopathic medicine</td>
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<td></td>
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<td>---</td>
<td>---</td>
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<td>272.</td>
<td>DRG</td>
<td>diagnosis related group</td>
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<td>273.</td>
<td>FNP</td>
<td>family nurse practitioner</td>
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<tr>
<td>274.</td>
<td>HIPAA</td>
<td>health insurance portability and accountability act</td>
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<tr>
<td>275.</td>
<td>SSRI</td>
<td>selective serotonin reuptake inhibitor</td>
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<td>276.</td>
<td>WHO</td>
<td>world health organization</td>
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**“Do-not-use” list**

<table>
<thead>
<tr>
<th>Do not use</th>
<th>Potential problem</th>
<th>Use instead</th>
</tr>
</thead>
<tbody>
<tr>
<td>U (unit)</td>
<td>Mistaken for “0” (zero), the number “4” or “cc”</td>
<td>“unit”</td>
</tr>
<tr>
<td>IU (international unit)</td>
<td>Mistaken for IV or the number 10.</td>
<td>“International Unit”</td>
</tr>
<tr>
<td>Q.D., QD, q.d., qd (daily)</td>
<td>Mistaken for each other. Period after the Q mistaken for “l” and the “O” mistaken for “l” (q.i.d. is four times a day dosing)</td>
<td>“daily”</td>
</tr>
<tr>
<td>Q.O.D., QOD, q.o.d., qod (every other day)</td>
<td></td>
<td>“every other day”</td>
</tr>
<tr>
<td>Trailing zero (X.0 mg)</td>
<td>Decimal point is missed</td>
<td>X mg</td>
</tr>
<tr>
<td>Lack of leading zero (.X mg)</td>
<td></td>
<td>0.X mg</td>
</tr>
<tr>
<td>MS</td>
<td>Con mean morphine sulfate or magnesium sulfate</td>
<td>“morphine sulfate”</td>
</tr>
<tr>
<td>MSO₄ and MgSO₄</td>
<td>Confused for one another</td>
<td>“morphine sulfate” and “magnesium sulfate”</td>
</tr>
</tbody>
</table>
APPENDIX E – Geriatric Leadership and Wound Care Objectives
GERIATRIC LEADERSHIP OBJECTIVES

University of Arkansas College of Technology, McGehee
Practical Nursing Department

Geriatric Management and leadership Clinical Objectives

Objective: At the completion of this clinical experience, the student will be able to:

1. Describe the skills used in managing care for a group of clients.
   a. Describe how physical/mental assessments are performed.
      i. When, how often, what depth
   b. Describe the process of medication administration for the facility.
   c. Describe the process of documentation for the long-term care facility.
   d. Describe common treatments, those responsible, and the documentation process.

2. Describe skills associated with managing the client unit.
   a. Describe delegation as it pertains to the long-term care facility and the LPN manager; what tasks can be delegated and to whom; criteria for delegating a task.
   b. Describe how time management is implemented by the charge nurse.
   c. Describe how daily schedules and work assignments are assigned.
   d. Discuss the delegation tasks you have observed during your rotation.
   e. List tasks that should not be delegated to a CNA or other non-licensed personnel.

3. Describe the responsibilities of the charge nurse in maintaining a safe client environment.

4. Identify various effective communication skills needed in the management of a client unit. Describe those you have seen during your rotation.

5. Identify various ineffective communication skills and those you have seen during your rotation, if any.

6. Identify effective leadership styles exhibited by managers in the clinical rotation.

7. Describe, in your opinion, the most effective leadership style and why you think it is most effective.

8. List the qualities and characteristics of an effective leader/manager.

9. List the chain of command for the clinical facility and describe the process.

10. Describe your own leadership style and reflect on that (daily) in your clinical log, describing your personal experiences during this rotation.

Instructions:
After completing your Geriatric leadership and Management clinical rotation:

1. Your objectives must be completed and submitted to the office along with your clinical log.
2. Your clinical evaluation must be completed by your preceptor taped together or in a sealed envelope and returned to the office with your paperwork.
3. Your preceptor evaluation must be completed by you and submitted to the office with your paperwork.
4. Your clinical log must be submitted to the office.
5. All above required documentation must be submitted following this clinical rotation on the next scheduled day at the Dermott campus.
WOUND CARE OBJECTIVES

You are to answer these objectives one week before your clinical experience with the Wound Center. Submit a copy and keep your original to take with you during your rotation.

Wound Care Objectives

UAM College of Technology McGehee Practical Nursing Program

1. Identify the different types of wounds (wound description, causes, stages)
2. Describe medical treatment for each type of wound
3. Describe nursing care for each type of wound
4. Describe charting necessary for each type of wound
5. Describe the current trends on dressing each wound type
6. Describe the nurse’s role in wound care
7. Discuss prevention of wounds
8. Discuss the most recent advances in providing wound care.
APPENDIX F - HIPAA

Health Insurance Portability and Accountability Act of 1996

As nursing students, you will at times be knowledgeable of data concerning patients, families and communities. It is your responsibility to be aware of and abide by the health Insurance Portability and Accountability Act (HIPAA) of 1996. Before attending clinical, you will be taught what HIPAA is and what responsibility you have as a student, concerning this law. You will also be required to sign a student agreement to comply with HIPAA regulations during your time as a student in the Practical Nursing Program at UAM College of Technology, McGehee. See agreement on the next page.
Student Agreement (HIPAA)

UAM College of Technology-McGehee

Practical Nursing Program

Student Agreement

I have read and understand the requirements of Health Insurance Portability and Accountability Act (HIPAA) of 1996. I realize I am to abide by the confidentiality provisions of HIPAA when providing nursing care for patients or in any clinical learning situation in any capacity as a nursing student in any healthcare setting or circumstance. I realize that violations of HIPAA can result in fines and/or imprisonment. I further understand that violations of client confidentiality are a serious matter, and may result in my dismissal from the Practical Nursing Program at the UAM College of Technology-McGehee. I agree to comply with HIPAA regulations during the time I am a student in the Practical Nursing Program at the UAM College of Technology-McGehee.

______________________________
Printed name

______________________________
Signature Date