Master of Science in Nursing (MSN) and Graduate/Postgraduate Certificate (PGC) Programs Handbook

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https://sites.google.com/purdueglobal.edu/nursingresources/msn-post-grad-cert/msn-pgc-handbooks

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Welcome

WELCOME to the Clinical Experience portal for Purdue Global MSN & Postgraduate Certificate Students. Whether you are just beginning your journey or advancing into clinical rotations, this hub provides the policies, essential resources, tools, and deadlines to help you succeed.

Compliance & Certification

Maintain a current Basic Life Support (BLS) card for healthcare providers through the American Heart Association and complete all pre-clinical onboarding before each clinical course. Students may not begin hours until all documentation is submitted and approved.

Acute Care Students: You must provide a copy of your current ACLS certification card. ACLS certification must remain current throughout your enrollment.

Student Responsibilities

- **Connect with Clinical Sites & Initiate Setup:** Research and contact potential clinical sites and preceptors in your area. Once a site and preceptor have agreed to host you, submit all required paperwork ahead of deadlines.
- **Plan Schedule & Prepare:** Meet with your preceptor before starting to establish a mutually agreeable schedule; modify your personal schedule to accommodate the preceptor and adhere strictly to the agreed hours.
- **Complete Onboarding & Know Policies:** Fulfill all site-specific training/compliance requirements and arrange for practice orientation before starting. Remain fully aware of all relevant university policies (catalog, withdrawal, registration, integrity, etc.)
- **Engage Actively & Learn:** During the rotation, observe, analyze, and discuss your preceptor's professional practice (interactions, role demands) within the healthcare environment.
- **Track & Reflect Weekly:** Systematically document and reflect on clinical activities each week.
- **Maintain Proactive Communication:** Communicate consistently and effectively with both your assigned faculty member and your preceptor throughout the rotation.

Preceptor Responsibilities

- **Provide Oversight & Mentorship:** Serve as a professional role model, offer guidance, demonstrate clinical expertise, and provide ongoing feedback on the student's performance and areas for improvement.
- **Facilitate Clinical Learning:** Ensure appropriate facilities and direct patient care opportunities exist to meet course objectives. Limit the number of Purdue University Global students to 5 students per term.
- **Manage Student Experience:** Introduce the student to staff, orient them to the setting, and only permit clinical hours with University-approved clinicians.
- **Assess & Communicate Progress:** Continuously assess the student's knowledge/skills. Maintain communication with the assigned faculty member regarding progress and participate in scheduled check-ins.
- **Report Concerns Promptly:** Notify designated faculty/Practicum Manager immediately of any concerns (e.g., performance issues).
- **Fulfill Administrative Requirements:** Provide a current copy of your professional license, certifications, and CV/Resume.

- **Complete University Documentation:** Verify student clinical hours and submit the final evaluation form via CORE ELMS.

Preceptor Eligibility Requirements

- Hold an active, unencumbered license in the clinical state and role
- Minimum of one year of experience in advanced practice or relevant clinical setting
- Be in good standing with your organization
- For NP programs: must be board-certified in the population-focus area
- Preceptors may also be MDs, DOs, PAs, CNS who have a **specialty alignment** (e.g., OB-GYN for women's health rotations)
- Physician Assistants preceptors **cannot supervise Nurse Practitioner students in Alaska, Arizona, California, Kansas, or Pennsylvania**
- **Residents or physicians in training are not permitted to be preceptors.**
- **Conflict of Interest:** Preceptors cannot be relatives, personal friends, or direct supervisors of the student in an employment setting
- **Employer Sites:** Clinical hours at a student's workplace require a separate department, schedule, and preceptor with no managerial relationship. View Employer Site & Preceptor Rules for more information.

Site & Preceptor Arrangements

Number of Sites and Preceptors Required

Primary Care NP Students:

Required to have a minimum of 2 clinical sites and 2 preceptors throughout the program. If you are using only two preceptors/sites, each of these must be a minimum of 160 hours each.

Psychiatric Mental Health NP Students:

Required to have a minimum of 2 clinical sites and 2 preceptors throughout the program. If you are using only two preceptors/sites, each of these must be a minimum of 130 hours each for MN courses, or 160 hours each for NU courses.

Acute Care NP Students:

Required to have a minimum of 1 clinical site and 2 preceptors throughout the program. If you are using only two preceptors, each of these preceptors must be a minimum of 160 hours each.

Site/Preceptor Approval

- Sites and preceptors must be appropriate for each clinical course, allowing you to treat the required patient population, in the appropriate clinical setting.
- Submit your sites and preceptors to CORE ELMS for review on a course-by-course basis.
- You are required to submit a Site Prospector Form for each term and each clinical rotation, even if you have previously used the intended site/preceptor.

One Site/Preceptor for Multiple Courses Approval

If you are requesting to use one site or preceptor for multiple clinical courses, you must submit the clinical site and preceptor separately under each of the requested clinical courses for review.

It is important to note, you cannot use the same preceptor for multiple clinical courses in a single academic term (see the guidelines found in "Two Clinical Courses in the Same Term Approval" below).

Multiple Sites/Preceptors for One Course Approval

If necessary, you have the option to use multiple sites or preceptors for one clinical course. You may have a maximum of three preceptors for one clinical course.

Two Clinical Courses in the Same Term Approval

If you would like to enroll in two clinical courses in one academic term, you must request review of this from your Student Success Manager. The School of Nursing evaluates these requests on a case-by-case basis, taking into consideration your progress in didactic and clinical coursework. If you are approved to take two clinical courses in one term, you must arrange separate preceptors.

Arranging Sites/Preceptors by Course Sequence

When planning your outreach to potential sites and preceptors, please plan for your clinical courses to be taken in order. Your clinical courses are meant to be taken in a specific sequence that promotes learning and progression of skills. There is limited flexibility in the sequence of clinical courses.

Placement Match Request

Students who are unable to secure a clinical site or preceptor may submit a Placement Match Request for support. Requests must be submitted by the published deadlines.

Support for Preceptors

Faculty and clinical coordinators are available to provide guidance and resolve issues. Preceptors are not expected to act as instructors - your clinical expertise and mentorship are what matter most.

Thank you for helping shape the next generation of nurse leaders and practitioners.

Important Resources

- **CORE ELMS by PeopleGrove:** https://corehighered.com/login-elms
- **Clinical Student Manager (CSM) Contact List:** http://www.kushs.net/kaplan/ClinicalP/SONClinicalPlacementTeamContactInformationChart.pdf
- **Clinical Placement Process:** https://sites.google.com/purdueglobal.edu/nursingresources/clinical-student-handbooks/clinical-placement-process-post-licensure-programs
- **Preclinical Requirements:** https://sites.google.com/purdueglobal.edu/nursingresources/clinical-student-handbooks/clinical-placement-process-post-licensure-programs/clinical-placement-process-steps/preclinical-requirements

- **Affiliation Agreements:** https://sites.google.com/purdueglobal.edu/nursingresources/clinical-student-handbooks/clinical-placement-process-post-licensure-programs/clinical-placement-process-steps/affiliation-agreement
- **Conduct & Confidentiality:** https://sites.google.com/purdueglobal.edu/nursingresources/clinical-student-handbooks/student-conduct-confidentiality
- **Employer Site & Preceptor Rules:** https://sites.google.com/purdueglobal.edu/nursingresources/clinical-student-handbooks/clinical-placement-process-post-licensure-programs/clinical-placement-process-steps/employer-site-preceptor-rules
- **Placement Match Request:** https://sites.google.com/purdueglobal.edu/nursingresources/clinical-student-handbooks/placement-match-request

Identify Your Program Track

This handbook contains information for all MSN & Postgraduate Certificate students, followed by details specific to your chosen specialization.

Navigate to your specific program:

- **Primary Care Nurse Practitioner Programs (FNP & AGPCNP):** See page 9
- **Psychiatric Mental Health Nurse Practitioner Program (PMHNP):** See page 23
- **Acute Care Nurse Practitioner Program (AGACNP):** See page 34
- **Executive Leader / Nurse Practitioner Programs:** See page 42
- **Women's Health Nurse Practitioner Program (WHNP):** See page 49

Primary Care Nurse Practitioner Programs

Overview

This page provides essential information for all students enrolled in the Family Nurse Practitioner (FNP) or Adult-Gerontology Primary Care Nurse Practitioner (AGPCNP) tracks. Clinical requirements and expectations vary slightly based on your enrollment year.

Clinical Requirements

- Four clinical courses; each course requires 160 hours for a total of 640 hours
- Patient encounter minimum: 1 patient for every 1 clinical hour, 640 minimum
- Hours cannot be carried over between courses
- Direct patient care hours required; In-person & telehealth visits permitted under preceptor supervision.
- Telehealth allowed for up to 50% of total program hours (320 hours max). Specific courses have further restrictions. Select your program version above for more details.
- Preceptor and site required for each course
- Preceptors must work in outpatient settings (family practice, internal medicine, etc.)
- **Patient Age Ranges:**
    - **FNP Students:** Pediatrics/Adolescents 0-19, Adults 18-64, Geriatrics 65+
    - **AGPCNP Students:** Ages 13 and older
- Visit the Clinical Placement Process Page for more information.

Course Sequence & Structure

- **Introductory Course:** Focuses on physical assessment, differential diagnosis, charting, critical thinking, and foundational skills.
- **Specialty Rotations:** Women's health, pediatric/adolescent, frail elderly
- **Final Course (MN610 / NU610):** Board certification prep, licensing information review, primary care synthesis, and other key post-graduation areas.

What counts toward clinical hours?

Time documented as clinical hours must be time spent in direct patient care activities.

The requirements for clinical sites and hours are detailed by the National Task Force on Quality Nurse Practitioner Education (NTF). Per Standard III of the NTF criteria, “Direct Patient Care Clinical Hours” refers to hours in which direct clinical care is provided to patients.

Clinical experiences and time spent in each experience should be varied and distributed in a way that prepares you to provide care to the populations served. All clinical experience activities must be completed under the direct supervision of your preceptor.

You may count the hours spent in “grand rounds” or other patient-focused medical education activities that occur on the assigned unit, for no more than 5% of your total hours for the clinical rotation.

All clinical hours must be supervised by your approved preceptor during the academic term in which you are registered for the clinical course. Your clinical hour logs must accurately reflect each date, time,

and hours you were present at your approved clinical site and engaged in direct patient care activities under the supervision of your approved preceptor. Any instance of fabricated information in your hours or field encounter logs can result in disciplinary action under the university's code of student conduct.

Telehealth Hours

If you are in a **Primary Care** or **Psychiatric Mental Health Nurse Practitioner** program, you may include time spent in on-site patient care and telehealth hours (when appropriate for the course/program). You may complete no more than 50% of the total clinical hours required for your program in telehealth.
When completing telehealth hours, you must hold an active, unencumbered RN license in the state where the site and preceptor are based.

What is not considered direct care patient contact hours?

Lunch (whether spent in the office or out) and travel time to, from, or between sites (if traveling from one site to another). For clinical days of 8–9 hours, a minimum of one 30-minute break is highly recommended. If you are not able to take lunch, please note in the clinical log the reason for not taking one.

Any "rounding up" of clinical hours (i.e., counting 3.5 hours as 4) will be considered academic dishonesty and may result in failure of the course and possible dismissal from the program.

Logging Patient Encounters

You are required to document all patient encounters in the Field Encounters section of the clinical management system. This documentation must include information such as age, ethnicity, a SOAP note, and billing/coding details. You must ensure that your logs do not contain any personally identifiable information.

The minimum number of required field encounters is specified on each specific program's page. While these are the minimum requirements, you must log information for every patient you encounter during your clinical rotation, even if the total patients you saw exceeds the minimum. For example, if you see 200 patients but the course requires only 160, you must log all 200 encounters.

By logging all patient encounters, you demonstrate compliance with documentation standards and ensure that you have complete records for legal purposes.

Final Evaluations

ou must have at least one final clinical evaluation per clinical course completed by your preceptor(s). If you log 40+ clinical hours with a preceptor, their evaluation is required. If under 40 hours is completed with a preceptor, that preceptor's evaluation is optional. To pass the clinical course, you must achieve 3.0 or above on all assessed items in every final preceptor evaluation. All completed preceptor evaluations contribute to the final grade in the clinical course. **If any final preceptor evaluation shows an unsatisfactory score on any assessed item, you will not pass the clinical and must retake the course.**

Unsuccessful Attempt at Clinical Course

The grade of “B” is the minimum acceptable grade for graduate nurse practitioner clinical courses. If you do not earn the required grade in a clinical course and must repeat the class, you must repeat all required clinical hours and field encounters. You must also have a passing preceptor evaluation from your course repeat. If repeating a clinical course, please work with your Clinical Student Manager to submit a site and preceptor to be approved for the repeated course/rotation.

Acceptable Preceptor Credentials for Primary Care

Some roles may be limited to specific rotations or further requirements may be needed for a certain course.

- **Nurse Practitioner (NP)** that is board certified in a primary care specialty (Family Nurse Practitioner, Adult-Gero Primary Care Nurse Practitioner)
- **Medical Doctor (MD)** or **Doctor of Osteopathic Medicine (DO)** that specializes in primary care (Family Medicine, Internal Medicine (outpatient))
- **Certified Physician Assistant (PA)** that practices in a primary care specialty. If you're in a state that requires physician supervision, the physician's license and specialty will be reviewed. Physician Assistant (PAs) restricted in Alaska, Arizona, California, Kansas, and Pennsylvania, so it excludes students in those states.
- **Clinical Nurse Specialist (CNS)** that is board certified through ANCC, holds prescriptive authority, and is employed in a primary care setting in a direct patient care role (Adult Health CNS, Adult-Gerontology CNS)

Your Primary Care Program Version

Some information differs depending on your practicum course sequence.

Navigate to your specific program path:

- For students in MN courses: See page 12
- For students in NU courses: See page 17

For students enrolled in MN courses

Clinical Courses Overview (160 Hours and 160 Patient Encounters Total Per Course)

FNP/AGPCNP MN Clinical Courses

Family Nurse Practitioner Clinical Courses	Hours	Encounters	Sequence
MN569: FNP I Clinical - Life Span Health Focus	160	160	1
MN577: NP II Clinical - Women's Health Focus	160	160	2 or 3
MN581: FNP II Clinical - Children and Adolescent Health Focus	160	160	3 or 2
MN610: NP III Clinical - Primary Care Focus	160	160	4
Total Requirements	**640**	**640**	

Adult-Gerontology Primary Care Nurse Practitioner Clinical Courses	Hours	Encounters	Sequence
MN573: AGNP I Clinical - Adolescent and Adult Focus	160	160	1
MN577: NP II Clinical - Women's Health Focus	160	160	2 or 3
MN585: AGNP II Clinical - Frail Elderly Focus	160	160	3 or 2
MN610: NP III Clinical - Primary Care Focus	160	160	4
Total Requirements	**640**	**640**	

MN569

At least 80 patient encounters must consist of adult population patient visits: ages 18-99+

Clinical Specifics:

- Family practice outpatient settings
- Internal medicine Clinic (outpatient)
- Urgent care or Fast Track (Emergency Departments not permitted for NU569).
    - **Note:** If you choose an urgent care or fast track setting for NU569, you must complete the entirety of the NU610 (final clinical course) in family practice outpatient setting and may not use a specialty site for NU610.
- Federally Qualified Health Centers focusing on Primary Care
- Boards of Health with primary care clinics
- Retail Clinics (will be evaluated on a case-by-case basis)

MN573

Clinical Specifics:

- Family practice outpatient settings
- Internal Medicine Clinic (Outpatient)
- Urgent care or Fast Track (Emergency Departments not permitted for NU573).
    - **Note:** If you choose an urgent care or fast track setting for NU573, you must complete the entirety of the NU610 (final clinical course) in a primary care practice outpatient setting and may not use a specialty site for NU610.

- Federally Qualified Health Centers (focusing on Primary Care)
- Boards of Health with Primary Care Clinic
- Retail Clinics (will be evaluated on a case-by-case basis)

MN577

The MN577 clinical experience requires students to see and provide primary care to women across the life span. Women's health patient visits should include annual well women screening exams including PAP smears, pre- and post-menopausal management, family planning, birth control management, care of gynecologic patients as well as the care of pre-, ante-, and postpartum patients.

A maximum of 80 hours telehealth is permitted for this experience. Up to 40 clinical hours may be obtained through assisting with labor or delivery, Uro-GYN, GYN-onc, and maternal fetal medicine. Students may attend inpatient surgical procedures including, but not limited to, Cesarean section deliveries.

A minimum of 80 patient encounters must consist of women's health visits, as described above.

Clinical Specifics:

- OB/GYN practices
- Primary care clinics (such as a family practice that see a considerable amount of patients for GYN services)
- Planned Parenthood (more than one site may be needed to ensure all course requirements are met)
- Federally Qualified Health Centers (that see a considerable amount of patients for GYN services)
- Boards of Health that include primary care clinics (that see a considerable amount of patients for GYN services)
- An urgent care is **not** an acceptable site for MN577

MN581

The MN581 clinical experience requires students to see and provide primary care to children and adolescents across the lifespan from birth to age 19. Primary care of pediatrics includes well child checks, sick/injury visits, and school/sports physicals. One of the most important aspects of this clinical experience are well child check visits. Well child check visits should include monitoring growth and development, health screenings (such as vision, hearing, lead, etc), administering immunizations, and providing anticipatory guidance.

A maximum of 80 hours telehealth is permitted for the MN581 clinical experience.

Requires a minimum of 80 patient encounters to consist of pediatric patient visits if rotating within a general primary care/family practice.

Clinical Specifics:

- Private pediatric offices
- Family practice clinics with a large pediatric population
- Health departments with a large pediatric population that manage both well children and sick visits

- Pediatric primary care clinics that deal with well child or sick child issues not related to another condition (i.e., no specialty clinics)
- Adolescent sites that do intake and medical management (would need a second site to see additional patients who are younger) such as the following:
    - Juvenile detention centers
    - Mental health facilities
    - Teen clinics
    - School-based health centers
- An urgent care is **not** an acceptable site for MN581

MN585

A maximum of 80 hours telehealth is permitted for this experience.

If rotating within a general primary care/family practice for MN585, a minimum of 80 patient encounters must consist of frail/elderly patient visits: ages 65 and older

Clinical Specifics:

- Family practice settings with a large elderly population
- Nursing homes
- Skilled nursing facilities
- Home health medical practices (providing primary care)
- Hospice
- Internal medicine (outpatient)
- Palliative care
- Geriatric assessment centers
- Rehab where geriatric care is provided

MN610

Specialty Sites: Students may request to spend a minimum of 40 hours and up to a maximum of 80 hours in a specialty, outpatient setting. Examples are dermatology, orthopedics, cardiology, oncology, and so forth. No inpatient acute care settings will be approved. Approval for specialty sites is not guaranteed and is contingent on review of prior family practice experience in previous clinical rotation courses. All approvals/denials are final.

**As a reminder, if all your other rotations have been with only one preceptor/site, you will need to fulfill all 160 hours of MN610 with a second preceptor/site (see earlier section "Site & Preceptor Arrangements").*

Clinical Specifics:

- Primary care family practice
- Internal medicine clinic (outpatient)
- Federally Qualified Health Centers focusing on Primary Care
- Boards of Health with primary care clinics
- Retail clinics (will be evaluated on a case-by-case basis)
- Urgent care, Emergency Department (ED), or Fast Track sites will be considered on a case-by-case basis.
    - Fast Track section of ED can be considered for all 160 required hours in MN610.

    - The general ED patient population can be considered for 80 specialty hours in MN610.
    - **Important note:** If you completed MN569 or MN573 in an urgent care/retail clinic, you will not be eligible to use an Urgent Care, ED, or Fast Track in MN610 and must have a family practice/primary care outpatient setting for all 160 clinical hours in NU610.
- Palliative care (AGPCNP students, specialty site for FNP students)
- Skilled nursing facilities (AGPCNP students, specialty site for FNP students)
- Geriatric assessment centers (AGPCNP students, specialty site for FNP students)
- Hospice (AGPCNP students, specialty site for FNP students)
- Chronic rehab where geriatric care is provided in a non-acute setting (AGPCNP students, specialty site for FNP students)

Final site and preceptor approval is required before beginning clinical hours. Site availability and requirements are subject to change by state regulations or program policy.

Course Outcomes

MN569: FNP Clinical I - Life Span Health Focus

- Demonstrate a consistent approach to the evaluation and management of illnesses and conditions for clients presenting in the primary care setting.
- Interpret diagnostic testing based on the history and physical assessment for clients presenting with acute, episodic, and chronic illness in the primary care setting.
- Formulate an evidence-based management plan for clients in the primary care setting with acute, episodic, and chronic illnesses, taking consideration of gender, culture, and ethnicity.
- Design age-appropriate health maintenance and screening plans for adult primary care clients.
- Form a collaborative relationship with the client, family, and other health care providers.
- Apply principles of informatics to the primary care setting.

MN573: AGNP I Clinical - Adolescent and Adult Focus

- Perform an appropriate comprehensive or focused history and physical exam.
- In collaboration with the preceptor, order and interpret diagnostic testing.
- Prescribe pharmacologic and nonpharmacologic interventions for symptom management and disease amelioration.
- Create a comprehensive written or oral report for the client visit.
- Form a collaborative relationship with the client, family, or caregiver and members of the interprofessional health care team.

MN577: NP II Clinical - Women's Health Focus

- Manage human responses to the changes in the personal, interpersonal, and social systems that affect women’s health throughout the lifespan.
- Conduct a comprehensive or problem-focused women’s health history and physical exam.
- Develop a comprehensive plan of care for acute and chronic conditions.
- Perform age-appropriate health maintenance activities and lifestyle interventions for long-term health.
- Develop a collaborative partnership with the client and other members of the health care team.

MN581: FNP II Clinical - Children and Adolescent Health Focus

- Perform a comprehensive or problem-focused pediatric/adolescent history and physical examination to develop a plan of care.

- Conduct age-appropriate developmental testing for children from birth to age 21 years.
- Provide age-appropriate anticipatory guidance for the client and caregiver.
- Perform health maintenance and screening activities appropriate to the child and adolescent.
- Recognize and appropriately refer clients whose health problems fall outside the scope of practice of the family nurse practitioner to other members of the health care team.

MN585: AGNP II Clinical - Frail Elderly Focus

- Demonstrate a consistent approach to the evaluation and management of illnesses and conditions for the frail elderly patients presenting in the primary care setting.
- Interpret diagnostic testing based on the history and physical assessment for the frail elderly patients with acute, episodic, and chronic illness in the primary care setting.
- Formulate an evidence-based management plan for the frail elderly patients in the primary care setting with acute, episodic, and chronic illnesses, taking consideration of gender, culture, and ethnicity.
- Design age-appropriate health maintenance and screening plans for the frail elderly patients across the life span.
- Form a collaborative relationship with the patient, family, and other health care providers.
- Apply principles of informatics to the primary care setting.

MN610: NP III Clinical - Primary Care Focus

- Demonstrate emergent clinical reasoning skills in evaluating, planning, and implementing care across gender and age span in a culturally competent manner for patients experiencing acute and chronic disease processes.
- In conjunction with the preceptor, order and interpret diagnostic tests and prescribe medications.
- Apply the concepts of health promotion, health maintenance, health restoration, and health teaching when treating adults.
- Incorporate clients' cultural practices into the individualized management plan.
- Develop written and oral communication skills for conveying care-related data to the interprofessional team.

For students enrolled in NU courses

Clinical Courses Overview (160 Hours and 160 Patient Encounters Total Per Course)

FNP/AGPCNP NU Clinical Courses

Family Nurse Practitioner Clinical Courses	Hours	Encounters	Sequence
NU569: FNP I Clinical - Life Span Health Focus	160	160	1
NU577: NP II Clinical - Women's Health Focus	160	160	2 or 3
NU581: FNP II Clinical - Children and Adolescent Health Focus	160	160	3 or 2
NU610: NP III Clinical - Primary Care Focus	160	160	4
Total Requirements	**640**	**640**	

Adult-Gerontology Primary Care Nurse Practitioner Clinical Courses	Hours	Encounters	Sequence
NU573: AGNP I Clinical - Adolescent and Adult Focus	160	160	1
NU577: NP II Clinical - Women's Health Focus	160	160	2 or 3
NU585: AGNP II Clinical - Frail Elderly Focus	160	160	3 or 2
NU610: NP III Clinical - Primary Care Focus	160	160	4
Total Requirements	**640**	**640**	

NU569

Requires a minimum of 80 patient encounters to consist of adult population patient visits: ages 18-99+

Clinical Specifics:

- Family practice outpatient settings
- Internal medicine Clinic (outpatient)
- Urgent care or Fast Track (Emergency Departments not permitted for NU569).
    - **Note:** If you choose an urgent care or fast track setting for NU569, you must complete the entirety of the NU610 (final clinical course) in family practice outpatient setting and may not use a specialty site for NU610.
- Federally Qualified Health Centers focusing on Primary Care
- Boards of Health with primary care clinics
- Retail Clinics (will be evaluated on a case-by-case basis)

NU573

Clinical Specifics:

- Family practice outpatient settings
- Internal Medicine Clinic (Outpatient)

- Urgent care or Fast Track (Emergency Departments not permitted for NU573).
    - **Note:** If you choose an urgent care or fast track setting for NU573, you must complete the entirety of the NU610 (final clinical course) in a primary care practice outpatient setting and may not use a specialty site for NU610.
- Federally Qualified Health Centers (focusing on Primary Care)
- Boards of Health with Primary Care Clinic
- Retail Clinics (will be evaluated on a case-by-case basis)

NU577

The NU577 clinical experience requires students to see and provide primary care to women across the life span. Women's health patient visits should include annual well women screening exams including PAP smears, pre- and post-menopausal management, family planning, birth control management, care of gynecologic patients as well as the care of pre-, ante-, and postpartum patients.

A maximum of 80 hours telehealth is permitted for this experience. Up to 40 clinical hours may be obtained through assisting with labor or delivery, Uro-GYN, GYN-onc, and maternal fetal medicine. Students may attend inpatient surgical procedures including, but not limited to, Cesarean section deliveries.

A minimum of 80 patient encounters must consist of women's health visits, as described above.

Clinical Specifics:

- OB/GYN practices
- Primary care clinics (such as a family practice that see a considerable amount of patients for GYN services)
- Planned Parenthood (more than one site may be needed to ensure all course requirements are met)
- Federally Qualified Health Centers (that see a considerable amount of patients for GYN services)
- Boards of Health that include primary care clinics (that see a considerable amount of patients for GYN services)
- An urgent care is **not** an acceptable site for NU577

NU581

The NU581 clinical experience requires students to see and provide primary care to children and adolescents across the lifespan from birth to age 19. Primary care of pediatrics includes well child checks, sick/injury visits, and school/sports physicals. One of the most important aspects of this clinical experience are well child check visits. Well child check visits should include monitoring growth and development, health screenings (such as vision, hearing, lead, etc), administering immunizations, and providing anticipatory guidance.

A maximum of 80 hours telehealth is permitted for the NU581 clinical experience.

Requires a minimum of 80 patient encounters to consist of pediatric patient visits if rotating within a general primary care/family practice.

Clinical Specifics:

- Private pediatric offices

- Family practice clinics with a large pediatric population
- Health departments with a large pediatric population that manage both well children and sick visits
- Pediatric primary care clinics that deal with well child or sick child issues not related to another condition (i.e., no specialty clinics)
- Adolescent sites that do intake and medical management (would need a second site to see additional patients who are younger) such as the following:
    - Juvenile detention centers
    - Mental health facilities
    - Teen clinics
    - School-based health centers
- An urgent care is **not** an acceptable site for NU581

NU585

A maximum of 80 hours telehealth is permitted for this experience.

If rotating within a general primary care/family practice for NU585, a minimum of 80 patient encounters must consist of frail/elderly patient visits: ages 65 and older

Clinical Specifics:

- Family practice settings with a large elderly population
- Nursing homes
- Skilled nursing facilities
- Home health medical practices (providing primary care)
- Hospice
- Internal medicine (outpatient)
- Palliative care
- Geriatric assessment centers
- Rehab where geriatric care is provided

NU610

Specialty Sites: Students may request to spend a minimum of 40 hours and up to a maximum of 80 hours in a specialty, outpatient setting. Examples are dermatology, orthopedics, cardiology, oncology, and so forth. No inpatient acute care settings will be approved. Approval for specialty sites is not guaranteed and is contingent on review of prior family practice experience in previous clinical rotation courses. All approvals/denials are final.

**As a reminder, if all your other rotations have been with only one preceptor/site, you will need to fulfill all 160 hours of NU610 with a second preceptor/site (see earlier section "Site & Preceptor Arrangements").*

Clinical Specifics:

- Primary care family practice
- Internal medicine clinic (outpatient)
- Federally Qualified Health Centers focusing on Primary Care
- Boards of Health with primary care clinics
- Retail clinics (will be evaluated on a case-by-case basis)

- Urgent care, Emergency Department (ED), or Fast Track sites will be considered on a case-by-case basis.
    - Fast Track section of ED can be considered for all 160 required hours in NU610.
    - The general ED patient population can be considered for 80 specialty hours in NU610.
    - **Important note:** If you completed NU569 or NU573 in an urgent care/retail clinic, you will not be eligible to use an Urgent Care, ED, or Fast Track in NU610 and must have a family practice/primary care outpatient setting for all 160 clinical hours in NU610.
- Palliative care (AGPCNP students, specialty site for FNP students)
- Skilled nursing facilities (AGPCNP students, specialty site for FNP students)
- Geriatric assessment centers (AGPCNP students, specialty site for FNP students)
- Hospice (AGPCNP students, specialty site for FNP students)
- Chronic rehab where geriatric care is provided in a non-acute setting (AGPCNP students, specialty site for FNP students)

Final site and preceptor approval is required before beginning clinical hours. Site availability and requirements are subject to change by state regulations or program policy.

Course Outcomes

NU569: FNP Clinical I - Life Span Health Focus

- NU569-1: Examine evidence-based management plans for clients in the primary care setting with acute, episodic, and chronic illnesses, taking into consideration gender, culture, and ethnicity.
- NU569-2: Explore diagnostic testing and formulation of differential diagnoses based on the history and physical assessment and foundational knowledge for clients presenting with acute, episodic, and chronic illnesses in the primary care setting.
- NU569-3: Apply a consistent approach to the management of illnesses and conditions for clients presenting in the primary care setting.
- NU569-4: Integrate age-appropriate health maintenance and screening plans for adult primary care clients through collaborative and caring relationships.
- NU569-5: Formulate a professional collaborative relationship with the client, family, and other health care providers.

NU573: AGNP I Clinical - Adolescent and Adult Focus

- NU573-1: Differentiate between normal and abnormal physiology for selected diseases in primary care for adolescent and adult populations, including health risk factors.
- NU573-2: Justify clinical judgment with a consistent approach to comprehensive clinical assessment for adolescent and adult patients with acute, episodic, and chronic illness in the primary care setting.
- NU573-3: Formulate differential diagnoses based upon assessment data and diagnostic reasoning for adolescent and adult patients presenting with acute, episodic, and chronic illness in the primary care setting.
- NU573-4: Prepare a person-centered plan of care that includes appropriate evidence-based practice screening tools, pharmacologic and nonpharmacologic interventions for symptom management, and disease amelioration.
- NU573-5: Develop a collaborative and communicative relationship with the patient, family and/or caregivers, and members of the interprofessional health care team in the primary care setting.

NU577: NP II Clinical - Women's Health Focus

- NU577-1: Manage human responses to the changes in the personal, interpersonal, and social systems that affect women's health throughout the lifespan.
- NU577-2: Conduct a comprehensive or problem-focused women's health history and physical exam.
- NU577-3: Develop a comprehensive plan of care for acute and chronic conditions.
- NU577-4: Perform age-appropriate health maintenance activities and lifestyle interventions for long-term health.
- NU577-5: Develop a collaborative partnership with the client and other members of the health care team.

NU581: FNP II Clinical - Children and Adolescent Health Focus

- NU581-1: Analyze the supporting evidence for incorporating developmental surveillance, screening, and anticipatory guidance in the management of pediatric patients.
- NU581-2: Formulate a current evidence-based treatment plan that is context driven with advanced reasoning for a pediatric client presenting in primary care with a chronic or acute health issue.
- NU581-3: Synthesize expert opinions on the utilization of medications in the young pediatric population.
- NU581-4: Examine communication strategies that can improve collaboration among client, family, nurse practitioner, and other health care professionals.
- NU581-5: Evaluate the use of information and communication technology to address needs, gaps, and inefficiencies in care.

NU585: AGNP II Clinical - Frail Elderly Focus

- NU585-1: Show clinical reasoning, judgment, and decision-making skills based upon a broad knowledge base including foundational and advanced specialty knowledge of the frail elderly client.
- NU585-2: Examine best practices for the use of advanced information and communication technologies to support documentation of care and communication among the frail elderly client, providers, and other health care team members and organizations.
- NU585-3: Formulate an evidence-based, holistic, person-centered plan of care for the frail elderly client with acute and episodic diseases and chronic illnesses.
- NU585-4: Incorporate health promotion, maintenance, and restoration of health into an evidence-based plan of care for the frail elderly client, including findings of population health data and appropriate pharmacological and nonpharmacological interventions.
- NU585-5: Use effective communication and collaboration with the frail elderly client, family, nurse practitioner, and other health care providers in a manner that facilitates a partnership approach to quality care.

NU610: NP III Clinical - Primary Care Focus

- NU610-1: Construct clinical reasoning skills in evaluating, planning, and implementing care across gender and age span in a culturally competent manner for patients experiencing acute and chronic disease processes.
- NU610-2: Develop an evidence-based management plan for patients in the primary care setting with acute, episodic, and chronic illnesses, inclusive of gender, culture, and ethnicity.

- NU610-3: Create age-appropriate plans for health promotion, health maintenance, health restoration, and health teaching when treating adults.
- NU610-4: Integrate patients' cultural preferences, health beliefs, spiritual beliefs, behaviors, and traditional practices into the individualized management plan.
- NU610-5: Formulate a written and oral presentation on care-related data for the interprofessional team.

Psychiatric Mental Health Nurse Practitioner Program

Overview

This page provides an overview of clinical expectations for PMHNP students. Your curriculum and total required hours depend on your enrollment version. Please select the correct version below to review program-specific details.

Clinical Course Structure

- Four clinical courses completed sequentially
- Includes psychotherapy and lifespan management focus
- Preceptor and site approval required before each course
- Total hours and patient encounters vary by version
- Telehealth allowed for up to 50% of hours; telehealth hours may be used only with outpatient clinical facilities and patient encounters; telehealth hours are not permitted for inpatient, acute settings.

Need help with forms or process? Visit the Clinical Placement Process Page (https://sites.google.com/purdueglobal.edu/nursingresources/clinical-student-handbooks/clinical-placement-process-post-licensure-programs).

What counts toward clinical hours?

Time documented as clinical hours must be time spent in direct patient care activities.

The requirements for clinical sites and hours are detailed by the National Task Force on Quality Nurse Practitioner Education (NTF). Per Standard III of the NTF criteria, “Direct Patient Care Clinical Hours” refers to hours in which direct clinical care is provided to patients.

Clinical experiences and time spent in each experience should be varied and distributed in a way that prepares you to provide care to the populations served. All clinical experience activities must be completed under the direct supervision of your preceptor.

You may count the hours spent in “grand rounds” or other patient-focused medical education activities that occur on the assigned unit, for no more than 5% of your total hours for the clinical rotation.

All clinical hours must be supervised by your approved preceptor during the academic term in which you are registered for the clinical course. Your clinical hour logs must accurately reflect each date, time, and hours you were present at your approved clinical site and engaged in direct patient care activities under the supervision of your approved preceptor. Any instance of fabricated information in your hours or field encounter logs can result in disciplinary action under the university’s code of student conduct.

Telehealth Hours

If you are in a Primary Care or Psychiatric Mental Health Nurse Practitioner program, you may include time spent in on-site patient care and telehealth hours (when appropriate for the course/program). You may complete no more than 50% of the total clinical hours required for your program in telehealth.

When completing telehealth hours, you must hold an active, unencumbered RN license in the state where the site and preceptor are based.

What is not considered direct care patient contact hours?

Lunch (whether spent in the office or out) and travel time to, from, or between sites (if traveling from one site to another). For clinical days of 8–9 hours, a minimum of one 30-minute break is highly recommended. If you are not able to take lunch, please note in the clinical log the reason for not taking one.

Any “rounding up” of clinical hours (i.e., counting 3.5 hours as 4) will be considered academic dishonesty and may result in failure of the course and possible dismissal from the program.

Logging Patient Encounters

You are required to document all patient encounters in the Field Encounters section of the clinical management system. This documentation must include information such as age, ethnicity, a SOAP note, and billing/coding details. You must ensure that your logs do not contain any personally identifiable information.

The minimum number of required field encounters is specified on each specific program's page. While these are the minimum requirements, you must log information for every patient you encounter during your clinical rotation, even if the total patients you saw exceeds the minimum. For example, if you see 200 patients but the course requires only 160, you must log all 200 encounters.

By logging all patient encounters, you demonstrate compliance with documentation standards and ensure that you have complete records for legal purposes.

Psychiatric Mental Health NP - Group Encounter Logs

If you are in the Psychiatric Mental Health Nurse Practitioner program, you may have the opportunity to participate in group sessions at your clinical site. A group session is equal to one field encounter. When logging this field encounter in the clinical management system, choose the option to mark it as a group session and then note how many patients were present.

Final Evaluations

You must have at least one final clinical evaluation per clinical course completed by your preceptor(s). If you log 40+ clinical hours with a preceptor, their evaluation is required. If under 40 hours is completed with a preceptor, that preceptor's evaluation is optional. To pass the clinical course, you must achieve 3.0 or above on all assessed items in every final preceptor evaluation. All completed preceptor evaluations contribute to the final grade in the clinical course. **If any final preceptor evaluation shows an unsatisfactory score on any assessed item, you will not pass the clinical and must retake the course.**

Unsuccessful Attempt at Clinical Course

The grade of “B” is the minimum acceptable grade for graduate nurse practitioner clinical courses. If you do not earn the required grade in a clinical course and must repeat the class, you must repeat all required clinical hours and field encounters. You must also have a passing preceptor evaluation from

your course repeat. If repeating a clinical course, please work with your Clinical Student Manager to submit a site and preceptor to be approved for the repeated course/rotation.

Approved Patient Populations

You will work with the following patient populations in General Psychiatry:

- Adults 18-64
- Geriatrics 65+
- Pediatrics/Adolescents 0-19

Your PMHNP Program Version

Some information differs depending on your practicum course sequence.

Navigate to your specific program path:

- For students in MN courses: See page 26
- For students in NU courses: See page 30

For students enrolled in MN courses

Clinical Course Overview

PMHNP MN Clinical Courses

Psychiatric Mental Health Nurse Practitioner Clinical Courses	Hours	Encounters	Sequence
MN662 PMHNP Psychotherapy for Individuals, Groups, and Families Clinical	130	130	1
MN664 PMHNP Diagnosis and Management Across the Lifespan Clinical I (Adult/Geriatric)	130	130	2 or 3
MN669 PMHNP Diagnosis and Management Across the Lifespan Clinical II (Pediatric/Adolescent)	130	130	3 or 2
MN668 PMHNP Diagnosis and Management Across the Lifespan Clinical III	130	130	4
Total Requirements	**520**	**520**	

- Each course requires 130 hours for a total of **520 hours**
- Patient encounter minimum: 1 patient for every 1 clinical hour, **520 minimum**
- Hours **cannot** be carried over between courses

MN662

Requires a minimum of 65 patient encounters to be psychotherapy patient visits.

Clinical Specifics:

- Counseling Center
- University Counseling Center
- Community Center Counseling
- Psychotherapy Clinic

MN664

Requires a minimum of 65 patient encounters to consist of elderly patient visits, ages 65 and older.

Clinical Specifics:

Outpatient (encouraged):

- Outpatient psychiatric and substance/mental health rehab facilities
- Primary care facilities (focus mental health)
- Psychiatry clinics
- VA Medical Center Psychiatric unit
- Community Health Center (focus mental health)
- FQHC (focus mental health)
- Geriatric facility with psychiatric specialist

Inpatient (acceptable):

- Inpatient psychiatric units
- Psychiatry Emergency Department
- Psychiatric focused Urgent Care

MN669

Requires a minimum of 65 patient encounters to consist of pediatric and adolescent patients: infant to age 19

Clinical Specifics:

Outpatient (encouraged):

- Outpatient psychiatric and substance/mental health rehab facilities
- Primary care facilities (focus mental health)
- Psychiatry clinics
- VA Medical Center Psychiatric unit
- Community Health Center (focus mental health)
- FQHC (focus mental health)
- Pediatric facility with psychiatric specialist

Inpatient (acceptable):

- Inpatient psychiatric units
- Psychiatry Emergency Department
- Psychiatric focused Urgent Care

MN668

MN668 is the final clinical course and includes board prep, licensing information, and final readiness support

**As a reminder, if all your other rotations have been with only one preceptor/site, you will need to fulfill all 130 hours of MN668 with a second preceptor/site (see "Site & Preceptor Arrangements").*

Clinical Specifics:

Higher acuity clinical settings (encouraged but not required):

- Inpatient psychiatric units
- Crisis stabilization units
- Partial hospitalization programs
- Intensive outpatient programs
- Psychiatry Emergency Department
- Psychiatric focused Urgent Care

Outpatient (acceptable):

- Outpatient psychiatric and substance/mental health rehab facilities
- Primary care facilities (focus mental health)
- Psychiatry clinics
- VA Medical Center Psychiatric unit
- Community Health Center (focus mental health)
- FQHC (focus mental health)

Acceptable Preceptor Credentials

Some of these preceptor types may be limited to a specific rotation or further requirements may be needed for a certain course.

MN662 Preceptor Requirements

The following preceptors are acceptable for MN662 (must provide psychotherapy to most of their patients):

- Psychiatric Mental Health Nurse Practitioner (PMHNP)*
- Psychiatrist (MD or DO)
  **NPs must be board certified in a Psychiatric Mental Health specialty (PMHNP).*

In addition, students may work with the following preceptors, provided they deliver psychotherapy to the majority of their patients:

- Licensed Professional Counselor (LPC)
- Marriage and Family Therapist (MFT)
- Licensed Clinical Social Worker (LCSW)
- Psychologist (PsyD)
- Licensed Mental Health Counselor (LMHC)
- Physician Assistant (PA)
- Clinical Nurse Specialist (CNS)

Note: State-specific regulations may limit preceptor eligibility. For example, students completing clinical experiences in Arizona are limited to PMHNP or MD/DO preceptors only.

For MN664, MN669, and MN668:

These clinical rotations must include medication management patients. Your preceptor must be licensed to prescribe medications.

- **Nurse Practitioner (NP)** that is board certified in a psych-mental health specialty (Psychiatric Mental Health Nurse Practitioner)
- **Psychiatrist (MD/DO)**
- **Certified Physician Assistant (PA)** practicing in psych-mental health (excludes AK, AZ, CA, KS, and PA students). If you're in a state that requires physician supervision, the physician's license and specialty will be reviewed.
- **Clinical Nurse Specialist (CNS)** that is board certified in a psych-mental health specialty, holds prescriptive authority, and is employed in a psych-mental health setting providing direct patient care (Adult Psychiatric-Mental Health Clinical Nurse Specialist, Child-Adolescent Psychiatric-Mental Health Clinical Nurse Specialist)

Final site and preceptor approval is required before beginning clinical hours. Site availability and requirements are subject to change by state regulations or program policy.

Course Outcomes

MN662 PMHNP Psychotherapy for Individuals, Groups, and Families Clinical

- Examine the mental health interview process for individuals, groups and families across the lifespan to evaluate and manage acute, complex, and chronic psychiatric mental health disorders in the acute and/or primary care setting.
- Formulate evidence-based, therapeutic, patient- centered treatment plans for psychotherapy of individuals, groups and families across the lifespan with consideration of cultural, gender, ethnicity, spiritual, and social competencies.

MN664 PMHNP Diagnosis and Management Across the Lifespan Clinical I

- Construct a consistent approach to the evaluation and management of mental health disorders and conditions for adult/geriatric clients and clients across the lifespan presenting in the acute and/or primary care setting.
- Design age-appropriate mental health and physical health maintenance screening plans for adult/geriatric clients and clients across the for psychiatric mental health disorders.

MN669 PMHNP Diagnosis and Management Across the Lifespan Clinical II

- Construct a consistent approach to the evaluation and management of mental health disorders and conditions for pediatric/adolescent clients and clients across the lifespan presenting in the acute and/or primary care setting.
- Design age-appropriate mental health and physical health maintenance screening plans for pediatric/ adolescent clients and clients for psychiatric mental health disorders.

MN668 PMHNP Diagnosis and Management Across the Lifespan Clinical III

- Construct a consistent approach to the evaluation and management of mental health disorders and conditions for clients across the lifespan presenting in the acute and/or primary care setting.
- Design a professional approach to transition to clinical practice in the PMHMP role.

For students enrolled in NU courses

Clinical Course Overview

PMHNP NU Clinical Courses

Psychiatric Mental Health Nurse Practitioner Clinical Courses	Hours	Encounters	Sequence
NU672 PMHNP Psychotherapy for Individuals, Groups, and Families Clinical	160	160	1
NU674 PMHNP Diagnosis and Management Across the Lifespan Clinical I (Adult/Geriatric)	160	160	2 or 3
NU676 PMHNP Diagnosis and Management Across the Lifespan Clinical II (Pediatric/Adolescent)	160	160	3 or 2
NU678 PMHNP Diagnosis and Management Across the Lifespan Clinical III	160	160	4
Total Requirements	**640**	**640**	

- Each course requires 160 hours for a total of **640 hours**
- Patient encounter minimum: 1 patient for every 1 clinical hour, **640 minimum**
- Hours cannot be carried over between courses

NU672

Requires a minimum of 80 patient encounters to be psychotherapy patient visits

Clinical Specifics:

- Counseling Center
- University Counseling Center
- Community Center Counseling
- Psychotherapy Clinic

NU674

Requires a minimum of 80 patient encounters to consist of elderly patient visits, ages 65 and older

Clinical Specifics:

Outpatient (encouraged):

- Outpatient psychiatric and substance/mental health rehab facilities
- Primary care facilities (focus mental health)
- Psychiatry clinics
- VA Medical Center Psychiatric unit
- Community Health Center (focus mental health)
- FQHC (focus mental health)
- Geriatric facility with psychiatric specialist

Inpatient (acceptable):

- Inpatient psychiatric units

- Psychiatry Emergency Department
- Psychiatric focused Urgent Care

NU676

Requires a minimum of 80 patient encounters to consist of pediatric and adolescent patients: infant to age 19

Clinical Specifics:

Outpatient (encouraged):

- Outpatient psychiatric and substance/mental health rehab facilities
- Primary care facilities (focus mental health)
- Psychiatry clinics
- VA Medical Center Psychiatric unit
- Community Health Center (focus mental health)
- FQHC (focus mental health)
- Pediatric facility with psychiatric specialist

Inpatient (acceptable):

- Inpatient psychiatric units
- Psychiatry Emergency Department
- Psychiatric focused Urgent Care

NU678

NU678 is the final clinical course and includes board prep, licensing information, and final readiness support.

**As a reminder, if all your other rotations have been with only one preceptor/site, you will need to fulfill all 160 hours of NU678 with a second preceptor/site (see "Site & Preceptor Arrangements").*

Clinical Specifics:

Higher acuity clinical settings (encouraged but not required):

- Inpatient psychiatric units
- Crisis stabilization units
- Partial hospitalization programs
- Intensive outpatient programs
- Psychiatry Emergency Department
- Psychiatric focused Urgent Care

Outpatient (acceptable):

- Outpatient psychiatric and substance/mental health rehab facilities
- Primary care facilities (focus mental health)
- Psychiatry clinics
- VA Medical Center Psychiatric unit
- Community Health Center (focus mental health)
- FQHC (focus mental health)

Acceptable Preceptor Credentials

Some of these preceptor types may be limited to a specific rotation or further requirements may be needed for a certain course.

NU672 Preceptor Requirements

The following preceptors are acceptable for NU672 (must provide psychotherapy to most of their patients):

- Psychiatric Mental Health Nurse Practitioner (PMHNP)*
- Psychiatrist (MD or DO)
  *NPs must be board certified in a Psychiatric Mental Health specialty (PMHNP).

In addition, students may work with the following preceptors, provided they deliver psychotherapy to the majority of their patients:

- Licensed Professional Counselor (LPC)
- Marriage and Family Therapist (MFT)
- Licensed Clinical Social Worker (LCSW)
- Psychologist (PsyD)
- Licensed Mental Health Counselor (LMHC)
- Physician Assistant (PA)
- Clinical Nurse Specialist (CNS)

Note: State-specific regulations may limit preceptor eligibility. For example, students completing clinical experiences in Arizona are limited to PMHNP or MD/DO preceptors only.

For NU674, NU676, and NU678:

These clinical rotations must include medication management patients. Your preceptor must be licensed to prescribe medications.

- **Nurse Practitioner (NP)** that is board certified in a psych-mental health specialty (Psychiatric Mental Health Nurse Practitioner)
- **Psychiatrist (MD/DO)**
- **Certified Physician Assistant (PA)** practicing in psych-mental health (excludes AK, AZ, CA, KS, and PA students). If you're in a state that requires physician supervision, the physician's license and specialty will be reviewed.
- **Clinical Nurse Specialist (CNS)** that is board certified in a psych-mental health specialty, holds prescriptive authority, and is employed in a psych-mental health setting providing direct patient care (Adult Psychiatric-Mental Health Clinical Nurse Specialist, Child-Adolescent Psychiatric-Mental Health Clinical Nurse Specialist)

Final site and preceptor approval is required before beginning clinical hours. Site availability and requirements are subject to change by state regulations or program policy.

Course Outcomes

NU672 PMHNP Psychotherapy for Individuals, Groups, and Families Clinical

- NU672-1: Examine the mental health interview process for individuals, groups, and families across the lifespan for acute, complex, and chronic psychiatric mental health disorders in the acute and/or primary care setting.
- NU672-2: Formulate evidence-based, therapeutic, patient-centered treatment plans for psychotherapy of individuals, groups, and families across the lifespan, taking into consideration cultural, gender, ethnic, spiritual, and social competencies.

NU674 PMHNP Diagnosis and Management Across the Lifespan Clinical I

- NU674-1: Construct a consistent approach to the assessment, evaluation, and management of mental health disorders and conditions for adult/geriatric patients, and patients across the lifespan, presenting in the acute and/or primary care setting.
- NU674-2: Design age-appropriate mental health and physical health maintenance screening plans for adult/geriatric patients, and patients across the lifespan, for psychiatric mental health disorders.

NU676 PMHNP Diagnosis and Management Across the Lifespan Clinical II

- NU676-1: Construct a consistent approach to the evaluation and management of mental health disorders and conditions for pediatric/adolescent patients, and patients across the lifespan, presenting in the acute and/or primary care setting.
- NU676-2: Design age-appropriate mental health and physical health maintenance screening plans for psychiatric mental health disorders for pediatric/adolescent clients.

NU678 PMHNP Diagnosis and Management Across the Lifespan Clinical III

- NU678-1: Construct a consistent approach to the evaluation and management of mental health disorders and conditions for patients across the lifespan presenting in the acute and/or primary care setting.
- NU678-2: Design a professional approach for transition to clinical practice in the PMHNP role.

Adult-Gerontology Acute Care Nurse Practitioner Program

Overview

The AGACNP program prepares nurse practitioners to care for acutely ill adult and older adult patients in hospital-based and high-acuity settings. Review the clinical sequence and select your program version below.

Clinical Requirements

- Multiple clinical courses with varying hour requirements (see program version for specifics)
- Hours cannot be carried over between courses
- Direct inpatient care only; telehealth not permitted
- Preceptor and site required for each course
- Preceptors must practice in inpatient/hospital settings (e.g., ICU, med-surg)
- Critical care units only allowed in later courses (MN655/MN657 or NU655/NU657)
- Visit the Clinical Placement Process Page for more information.

Course Sequence & Structure

- **Introductory Course:** Foundational skills in acute care assessment, diagnosis, and management (non-critical care units)
- **Intermediate Courses:** Management of medically/surgically complex patients; progression to critical care units
- **Final Course:** Immersion in critical care settings; board certification preparation

What counts toward clinical hours?

Time documented as clinical hours must be time spent in direct patient care activities.

The requirements for clinical sites and hours are detailed by the National Task Force on Quality Nurse Practitioner Education (NTF). Per Standard III of the NTF criteria, “Direct Patient Care Clinical Hours” refers to hours in which direct clinical care is provided to patients.

Clinical experiences and time spent in each experience should be varied and distributed in a way that prepares you to provide care to the populations served. All clinical experience activities must be completed under the direct supervision of your preceptor.

You may count the hours spent in “grand rounds” or other patient-focused medical education activities that occur on the assigned unit, for no more than 5% of your total hours for the clinical rotation.

All clinical hours must be supervised by your approved preceptor during the academic term in which you are registered for the clinical course. Your clinical hour logs must accurately reflect each date, time, and hours you were present at your approved clinical site and engaged in direct patient care activities under the supervision of your approved preceptor. Any instance of fabricated information in your hours or field encounter logs can result in disciplinary action under the university’s code of student conduct.

What is not considered direct care patient contact hours?

Lunch (whether spent in the office or out) and travel time to, from, or between sites (if traveling from one site to another). For clinical days of 8–9 hours, a minimum of one 30-minute break is highly recommended. If you are not able to take lunch, please note in the clinical log the reason for not taking one.

Any “rounding up” of clinical hours (i.e., counting 3.5 hours as 4) will be considered academic dishonesty and may result in failure of the course and possible dismissal from the program.

Logging Patient Encounters

You are required to document all patient encounters in the Field Encounters section of the clinical management system. This documentation must include information such as age, ethnicity, a SOAP note, and billing/coding details. You must ensure that your logs do not contain any personally identifiable information.

The minimum number of required field encounters is specified on each specific program's page. While these are the minimum requirements, you must log information for every patient you encounter during your clinical rotation, even if the total patients you saw exceeds the minimum. For example, if you see 200 patients but the course requires only 160, you must log all 200 encounters.

By logging all patient encounters, you demonstrate compliance with documentation standards and ensure that you have complete records for legal purposes.

Final Evaluations

You must have at least one final clinical evaluation per clinical course completed by your preceptor(s). If you log 40+ clinical hours with a preceptor, their evaluation is required. If under 40 hours is completed with a preceptor, that preceptor's evaluation is optional. To pass the clinical course, you must achieve 3.0 or above on all assessed items in every final preceptor evaluation. All completed preceptor evaluations contribute to the final grade in the clinical course. **If any final preceptor evaluation shows an unsatisfactory score on any assessed item, you will not pass the clinical and must retake the course.**

Unsuccessful Attempt at Clinical Course

The grade of “B” is the minimum acceptable grade for graduate nurse practitioner clinical courses. If you do not earn the required grade in a clinical course and must repeat the class, you must repeat all required clinical hours and field encounters. You must also have a passing preceptor evaluation from your course repeat. If repeating a clinical course, please work with your Clinical Student Manager to submit a site and preceptor to be approved for the repeated course/rotation.

Clinical Structure Highlights

- Each course builds in complexity and patient acuity
- Preceptor and site must be approved in advance
- Total required hours and encounters vary by version
- Visit the Clinical Placement Process Page for more information.

Acceptable Preceptor Credentials

Preceptors must be experienced in acute care and hold valid credentials. Some roles may be limited to specific rotations.

- **Nurse Practitioner (NP)** that is board certified in an acute care specialty (Adult-Gero Acute Care Nurse Practitioner, Adult Acute Care Nurse Practitioner, Emergency Nurse Practitioner)
- **Medical Doctor (MD)** or **Doctor of Osteopathic Medicine (DO)** that specializes in acute care specialty (Internal Medicine, Emergency Medicine, Cardiology, Pulmonology, Neurology, etc.)
- **Certified Physician Assistant (PA)** that practices in an acute care specialty (excludes AZ and PA students). If you're in a state that requires physician supervision, the physician's license and specialty will be reviewed.
- **Clinical Nurse Specialist (CNS)** that is board certified, holds prescriptive authority, and is employed in an acute care setting providing direct patient care (Adult Health CNS, Adult-Gerontology CNS)

Your AGACNP Program Version

Some information differs depending on your practicum course sequence.

Navigate to your specific program path:

- For students in MN courses: See page 37
- For students in NU courses: See page 39

For students enrolled in MN courses

Clinical Course Overview

AGACNP MN Clinical Courses

Adult-Gerontology Acute Care Nurse Practitioner Clinical Courses	Hours	Encounters	Sequence
MN653: AGACNP Acute Care Diagnosis and Management Clinical I	160	80	1
MN655: AGACNP Acute Care Diagnosis and Management Clinical II	160	80	2
MN657: AGACNP Critical Care Management Clinical	200	100	3
Total Requirements	**520**	**260**	

- Courses must be taken in sequence: MN653 → MN655 → MN657
- MN653 & MN655 requires 160 hours each
- MN657 requires 200 total hours, 100 of which must be in an approved critical care setting (emergency department excluded)
- Total clinical hours: **520 hours**
- Patient encounter minimum: 1 patient for every 2 clinical hours, **260 minimum**
- Hours cannot be carried over between courses
- MN653 includes a required **Virtual Reality (VR) intensive skills lab** to prepare for the final rotation
- MN657 is the final clinical course includes board prep, licensing information, and final readiness support

Appropriate Clinical Site Types (not a comprehensive list)

MN653

- Medical-surgical units (e.g., telemetry, cardiac telemetry, general med-surg)
- Step-down Units
- Hospitalist admission service
- Emergency department
- Non-critical care units
    - ICU/Critical care units are not permitted for MN653.

MN655

- Medical-surgical units (e.g., telemetry, cardiac telemetry, general med-surg)
- Step-down units
- Hospitalist admission service
- Critical care and specialty units
- Note: emergency department will not be approved for MN655

MN657

Critical care and specialty units (e.g. ICU, MICU, CICU, CVICU, SICU)

Not Permitted:

- Operating Room, Outpatient clinic, In-patient clinic, and Telehealth
- Critical Care units are not permitted for MN653 (critical care units are permitted for MN655 and MN657)

Course Outcomes

MN653: AGACNP Acute Care Diagnosis and Management Clinical I

- Demonstrate a consistent approach to screening, assessment, utilization of diagnostic procedures, diagnosis, acute care skills, and health promotion activities.
- Develop an evidence-based management plan for clients in the acute care setting with acute episodic and chronic illnesses, taking into consideration gender, culture, lifestyle, and ethnicity.
- Design age-appropriate health maintenance and screening plans for adult acute care clients.
- Form a collaborative relationship with the client, family, and the interprofessional acute care team.
- Explore the role of the advanced practice nurse in the acute care setting.
- Apply principles of informatics to the acute care setting.

MN655: AGACNP Acute Care Diagnosis and Management Clinical II

- Demonstrate a consistent approach to the evaluation and management of illnesses and conditions for clients in the acute care setting.
- Interpret diagnostic testing based on the history and physical assessment for clients with acute, episodic, and chronic illness in the acute care setting.
- Formulate a pharmacologic and nonpharmacologic evidence-based management plan for clients in the acute care setting with acute episodic and chronic illnesses, taking into consideration socioeconomic concerns, ethnicity, gender, and lifestyle.
- Apply the advanced practice nurse role in the acute care setting.
- Form a collaborative relationship with the client, family, and other health care providers.

MN657: AGACNP Critical Care Management Clinical

- Demonstrate a consistent approach to the evaluation of illnesses and conditions for clients presenting in the critical care setting.
- Interpret diagnostic testing based on the history and physical assessment for clients presenting with acute episodic and chronic illness in the critical care setting.
- Formulate an evidence-based management plan for clients in the critical care setting with acute episodic and chronic illnesses, taking into consideration gender, culture, lifestyle, and ethnicity.
- Apply the advanced practice nursing role in the critical care setting.
- Form a collaborative and therapeutic relationship with the client, family, and other members of the health care team.
- Apply principles of palliative and end-of-life care in the critical care setting in collaboration with the patient, family, and other members of the health care team.

For students enrolled in NU courses

Clinical Course Overview

AGACNP NU Clinical Courses

Adult-Gerontology Acute Care Nurse Practitioner Clinical Courses	Hours	Encounters	Sequence
NU651: AGACNP Introduction to Acute Care Management Clinical I	160	80	1
NU653: AGACNP Acute Care Diagnosis and Management Clinical II	160	80	2
NU655: AGACNP Acute Care Diagnosis and Management Clinical III	160	80	3
NU657: AGACNP Critical Care Management Clinical	160	80	4
Total Requirements	**640**	**320**	

- Courses must be taken in sequence: NU651 → NU653 → NU655 → NU657
- Each course requires 160 hours for a total of **640 hours**
- Patient encounter minimum: 1 patient for every 2 clinical hours, **320 minimum**
- Hours cannot be carried over between courses
- NU653 includes a required **Virtual Reality (VR) intensive skills lab** to prepare for the final rotation
- NU657 includes board prep, licensing information, and final readiness support

Appropriate Clinical Site Types (not a comprehensive list)

NU651

- Medical-surgical units (e.g., telemetry, cardiac telemetry, general med-surg)
- Hospitalist admission service
- Emergency department
- Non-critical care units
    - ICU/Critical care units are not permitted for NU651

NU653

- Medical-surgical units (e.g., telemetry, cardiac telemetry, general med-surg)
- Step-down Units
- Hospitalist admission service
- Emergency department
- Non-critical care units
    - ICU/Critical care units are not permitted for NU653

NU655

- Medical-surgical units (e.g., telemetry, cardiac telemetry, general med-surg)
- Step-down units
- Hospitalist admission service

- Critical care and specialty units
- **Note:** emergency department will not be approved for NU655

NU657
Critical care and specialty units (e.g. ICU, MICU, CICU, CVICU, SICU)

Not Permitted:
- Operating Room, Outpatient clinic, In-patient clinic, and Telehealth
- Critical Care units are not permitted for NU651 and NU653 (critical care units are permitted for NU655 and NU657)

Course Outcomes

NU653: AGACNP Acute Care Diagnosis and Management Clinical I
- NU653-1: Develop a consistent approach to screening, assessment, utilization of diagnostic procedures, diagnosis, acute care skills, and health promotion activities.
- NU653-2: Compose evidence-based management plans for patients in the acute care setting with acute, episodic, and chronic illnesses, with gender, culture, lifestyle, and ethnicity considered in decision-making.
- NU653-3: Explore the professional role, self-care, and leadership development as an advanced practice nurse.
- NU653-4: Examine collaborative relationships with patients, families, and the interprofessional acute care team.
- NU653-5: Investigate systems-based practice as a nurse practitioner within the complex systems of health care.

NU655: AGACNP Acute Care Diagnosis and Management Clinical II
- NU655-1: Develop a consistent approach to the evaluation and management of young adults, adults, and older adults with acute and complex chronic illness needs.
- NU655-2: Examine diagnostic testing with consideration of medical history and physical assessment for clients with acute and complex chronic illness needs in the acute care setting.
- NU655-3: Prepare a comprehensive pharmacologic and non-pharmacologic evidence-based management plan for clients in the acute care setting, taking into consideration socioeconomic, cultural, and individual concerns.
- NU655-4: Assess the role and developing personal identity of an acute care nurse practitioner in a variety of health care settings.
- NU655-5: Create collaborative relationships with clients, families, and other health care professionals in the acute care setting using traditional and innovative approaches.

NU657: AGACNP Critical Care Management Clinical
- NU657-1: Choose a consistent approach to the evaluation of illnesses and conditions for patients presenting in the critical care setting.
- NU657-2: Select diagnostic testing and management plans based on the history and physical assessment findings for patients presenting with acute, episodic, and chronic illness in the critical care setting.
- NU657-3: Formulate appropriate management plans for patients in the critical care setting with considerations regarding age, gender, culture, ethnicity, and socioeconomics.

- NU657-4: Integrate approaches to cultivate personal, professional, and leadership development as a nurse practitioner provider.
- NU657-5: Select effective strategies to foster relationships between patients, family, and the interprofessional team that facilitate a partnership approach to care delivery.

Executive Leader / Nurse Educator Programs

Executive Leader & Nurse Educator Program Overview

This page outlines expectations for Executive Leader / Nurse Educator (EL/NE) students completing clinical project coursework. All students complete two project-based clinical courses with preceptor support. Students are responsible for securing placement and tracking progress in the clinical system.

The **Executive Leader** track focuses on organizational leadership in healthcare settings, while the **Nurse Educator** track prepares you to teach patients, staff, or nursing students.

Note: Nurse Educator clinical projects must be completed on-site under preceptor supervision. Executive Leader projects may be completed remotely under the supervision of the preceptor in some cases (subject to approval).

Clinical Courses Overview

- Students complete a total of 500 clinical hours over two terms.
- Each course includes 125 direct and 125 indirect hours.
- Direct care hours include activities where students lead initiatives, instruct learners, or collaborate with stakeholders.
- Indirect care hours include literature reviews, data analysis, planning, and reflection.
- All hours must be tracked in the clinical documentation system. Indirect hours are verified by the course instructor. Direct hours are verified by the preceptor.
- Clinical projects focus on advanced leadership or education-based practice improvements.

Clinical Project Experience

- Two sequential courses focused on project planning, implementation, and dissemination **(courses cannot be taken concurrently)**
- Students work with the same preceptor and site throughout both terms
- Total required hours and encounters vary by version
- Project should address a tangible need in healthcare, such as improving patient outcomes or streamlining workflow

What counts toward clinical hours?

Clinical experience hours include activities completed under the direct supervision of your preceptor. You may count hours that are spent directly working toward the objectives of your clinical project. All direct clinical hours must be supervised by the preceptor during the academic term in which you are registered for the clinical course. Your clinical hour logs must accurately reflect the dates, times, and hours you were present at your approved clinical site and engaged in clinical activities under the supervision of the preceptor. Any instance of fabricated information in your clinical logs can result in disciplinary action under the university's code of student conduct.

What is not considered direct care patient contact hours?

Lunch (whether spent in the office or out) and travel time to, from, or between sites (if traveling from one site to another). For clinical days of 8–9 hours, a minimum of one 30-minute break is highly

recommended. If you are not able to take lunch, please note in the clinical log the reason for not taking one.

Any “rounding up” of clinical hours (i.e., counting 3.5 hours as 4) will be considered academic dishonesty and may result in failure of the course and possible dismissal from the program.

Communication & Evaluation

- Preceptor and faculty participate in 3 calls: start, midterm, and final
- Students must submit weekly logs in the clinical system
- All hours and activities must be verified weekly by the preceptor
- Course faculty monitor performance and provide feedback throughout

Clinical Documentation

- Students must log hours and weekly reflections in the clinical system
- Direct and indirect hours are tracked based on project activity
- Final evaluation is based on clinical documentation, project progress, and preceptor input

Confidentiality & Compliance

All students must adhere to HIPAA and institutional confidentiality standards.

- Do not include patient or staff identifiers in logs or documentation
- Refer to the Student Code & Confidentiality Page for more information

Preceptor & Site Requirements

- Students must secure one preceptor and one clinical site for the full two-course sequence.
- Preceptors must hold appropriate credentials in leadership or education (e.g., MSN, DNP, EdD).
- Sites must align with the student's area of focus (e.g., academic, hospital, organizational).
- Executive Leader sites may include colleges only if attached to a hospital system.

Note: Nurse Educator projects cannot be completed in academic settings (e.g., college classrooms). You must work in direct-care environments like clinics or hospitals.

Course Objectives

NU590: Applying Principles of Advanced Nursing Practice - Clinical

- NU590-1: Investigate concepts of systematic change to improve individual, population, and/or organizational outcomes.
- NU590-2: Appraise assessment data to drive informed decisions and optimize outcomes.
- NU590-3: Analyze how interprofessional teams can improve quality care and strengthen desired outcomes.
- NU590-4: Examine effective leadership skills in designing evidence-based practice projects for improved health care delivery in a manner that is consistent, positive, relevant, accurate, and distinctive.
- NU590-5: Integrate evidence-based research from nursing and other disciplines to inform and improve practice.

NU603: Evaluating and Disseminating Principles of Advanced Nursing Practice - Clinical

- NU603-1: Synthesize primary and secondary data and other information into quality initiatives.
- NU603-2: Integrate diverse sources of evidence into theoretical frameworks from nursing and other disciplines in advanced nursing roles.
- NU603-3: Show ethical behaviors in the professional leadership role for the improvement of healthcare outcomes.
- NU603-4: Evaluate effectiveness and impact of evidence-based practice interventions.
- NU603-5: Determine scholarly activities that will advance the nursing profession.

Your Executive Leader / Nurse Educator Program Concentration

Some information differs depending on your concentration.

Navigate to your specific program concentration:

- For students in the Executive Leader concentration: See page 44
- For students in the Nurse Educator concentration: See page 46

Executive Leader Concentration

MSN Virtual Practicum for Executive Nurse Leader Program

Onsite clinical practice is the standard expectation for all MSN Executive Nurse Leader students. Virtual clinical practice is permitted only under exceptional circumstances and requires prior written approval from MSN Program Leadership and validation from the student's Clinical Preceptor.

Students are expected to complete clinical/practicum hours through direct participation at an approved practice site under the supervision of a qualified preceptor. Onsite experiences promote professional engagement, interprofessional collaboration, organizational understanding, and application of advanced nursing competencies in authentic practice environments.

Exceptions for Virtual Clinical Practice

Limited virtual participation may be considered when:

- Documented extenuating circumstances prevent onsite participation.
- The practice organization's established operations require virtual engagement.
- Specialized virtual activities provide unique educational opportunities directly aligned with course competencies.
- Temporary disruptions prevent access to the approved practice site. When virtual/clinical practice is approved for temporary disruptions, the maximum virtual hours completed will not exceed 20% of the required clinical hours for the course.

NOTE: Student convenience, employment obligations, transportation preferences, or geographic considerations do not justify an exception.

Approval Requirements

Students requesting virtual clinical practice must submit a written justification identifying the proposed activities, relevant learning outcomes, anticipated hours, and preceptor supervision arrangements. The justification must also include validation by the student's clinical preceptor.

All requests require prior written approval from MSN Program Leadership. Retroactive approval will not be granted.

Clinical Hour Accountability
All clinical hours must reflect authentic, supervised practice activities and be documented in the University's designated clinical tracking system. Independent academic work, including literature reviews, assignment preparation, and routine coursework, does not qualify as virtual clinical practice, but can be considered for indirect clinical hours

Virtual activities completed without prior authorization will not count toward required clinical hours.

This policy supports consistent academic expectations while allowing limited flexibility when educationally justified.

Executive Leader Project Information

Focused on making a change. Many topics are saturated and further work would be redundant, such as the following:

- Technology/simulation in nursing
- The nursing shortage/nursing retention

You will need to be both creative and specific if you choose “saturated” topics such as the following:

- Creating a tool to assess critical thinking in simulated cardiac emergencies.
- Addressing spiritual needs to promote nurse retention in the hospital setting.

Examples of evidenced-based project topics students have used in the past:

- Central line infection reduction through evidence-based nursing education
- Supporting new graduate nurses throughout their transition and beyond
- Prevention of hospital-acquired infections in outpatient settings
- Health care navigator program for community-based geriatric patients
- Gentle cesarean: evidence-based project
- Reduction of a hospital blood contamination rate
- Promoting breastfeeding during the first 6 weeks postpartum

Appropriate Clinical Sites

Examples of Executive Leader sites:

- Hospitals
- Outpatient clinics
- Surgical centers
- Home health care
- Long-term care facilities
- Health departments
- Colleges and universities, if attached to a hospital system and the preceptor holds an executive or administrative position within that hospital system

Nurse Educator Concentration

Examples of Direct and Indirect Clinical Hours for MSN: Nurse Educator Students

Your clinical hours will be a combination of direct and indirect care clinical hours. More information will be available in your courses as to which activities count as direct and indirect care hours. Below is additional information from AACN regarding how these hours are defined.

Direct Care

Direct care refers to nursing care activities provided at the point of care to patients or working with other healthcare providers that are intended to achieve specific health goals or achieve selected health outcomes. Direct care may be provided in a wide range of settings, including acute and critical care, long term care, home health, community-based settings, and education settings.

Examples of direct care experiences include provision of nursing care directly to patients, which are defined as individuals, families, groups, communities, or populations; but also, may include:

- Working with other providers in any setting where health care is delivered, including the community, to identify gaps in care and implement a quality improvement strategy.
- Collaborating with nursing staff to implement a new procedure or nursing practice that is evidence-based.
- Working with an interprofessional team to evaluate the outcomes of a new practice guideline and implement recommended changes.
- Designing and implementing a coordinated, patient-centered plan of care with an interprofessional team.

Indirect Care

Indirect care refers to nursing decisions, actions, or interventions that are provided through or on behalf of patients. These decisions or interventions create the conditions under which nursing care or self-care may occur. Nurses might use administrative decisions, population or aggregate health planning, or policy development to affect health outcomes in this way.

Examples of indirect care experiences include:

- Educating other healthcare providers regarding the safe and effective use of new technology.
- Writing a policy and working with other stakeholders to have the policy approved by the state board of nursing.
- Working with community leaders to develop a disaster/emergency preparedness plan for a specific population in a community.
- Collaborating with the facility information technology staff to design or implement an electronic health record.
- Working with staff to write an administrative policy that will improve communication among the units in the facility.

MSN: Nurse Educator Clinical Project Information

Student develop, implement, and evaluate an evidenced-based project aimed at improving health care outcomes over the course of two terms. All projects include a teaching component for patients and/or families or other health care professionals, or the entire project could be teaching focused.

The following are examples of nurse educator clinical projects. These projects could be part of a larger project that is being undertaken at the clinical site as given in Example 1 and 2.

Example 1: Improving Asthma-Related Outcomes for At-Risk Youth

Project Location: School health clinic (a full-service health clinic within a public school). The clinic is administered by an Advanced Practice Registered Nurse (APRN) and primary care is delivered by APRNs, RNs, and certified medical assistants (CMAs) who also work at the clinic.

Population Taught: CMAs

Preceptor: Clinic administrator (an APRN)

Project: The larger project is aimed at improving asthma-related outcomes by developing and implementing an asthma screening tool and developing screening and treatment protocols at a public-school health clinic. The screening tool will be administered by the CMAs to all students within the school under RN supervision.

Nurse Educator Student Role: The nurse educator student's role in this project is to collaborate with the clinic staff and external public health officials to lead the development of the screening tool and develop and provide an education program to the CMAs on administration of the tool, develop screening tool education materials for use in orientation of new clinic CMA staff, and evaluate the effectiveness of this aspect of the project. The students will present their project outcomes to the school health clinic staff and the school's administrators.

Example 2: Increasing Medication and Dietary Adherence for Young Adults with Diabetes

Project Location: Community health clinic

Population Taught: Patients

Preceptor: Clinic RN (MSN prepared)

Project: The larger project is aimed at improving the health outcomes for the young adults (18–26) with diabetes who are seen at this community health clinic. This age group of patients has less optimal outcomes than other age groups of patients with diabetes seen within this clinic. The root cause of the poor outcomes was found to be poor medication and dietary adherence. The project includes implementing group diabetic visits versus individual patient visits at the clinic for young adults with diabetes.

Nurse Educator Student Role: The nurse educator student will collaborate with clinic administration and the interprofessional (physicians, APRNs, RNs, nutritionist, and social worker) team on this project. The student's role in this project is to develop a patient-focused education plan for delivery during the group visits and educational handouts. The student will also teach the group education, evaluate the

patient's perception of the effectiveness of the education, and develop a longer-term evaluation plan to assess impact on the participant's diabetes-related outcomes. The student will present the patient effectiveness perception outcomes to the interprofessional clinic team.

Example 3: Decreased Hospital-Acquired Infections Through Handwashing Education
Project Location: Hospital

Population Taught: RNs, respiratory therapists, and nursing assistants.

Preceptor: Clinical nurse specialist

Project: This hospital's acquired infection rate has increased over the past year. During a root cause analysis, it was discovered that a significant number of staff of all disciplines were not following proper handwashing protocols on the patient unit where infection rates are the highest.

Nurse Educator Student Role: The nurse educator student will collaborate with the nursing unit director, one of the hospital's infection control nurses, and the unit's clinical nurse specialist on this project. The student will develop an interactive handwashing educational program for interprofessional use; deliver the education to the unit RNs, respiratory therapists, and nursing assistants in group settings (the infection control staff will deliver the program to the other disciplines); and develop an evaluation plan for the project. The student will present the outcomes of the RN, respiratory therapist, and nursing assistant education to the unit director, clinical nurse specialist, and infection control staff.

Appropriate Clinical Sites

Examples of MSN: Nurse Educator clinical project sites:

- Public health departments
- Hospitals
- Community clinics
- Home health settings
- Outpatient clinics
- Hospice
- Extended care facilities
- School health clinics

Note: Colleges/universities will not be approved for MSN: Nurse Educator clinical experiences. The MSN: Nurse Educator clinical project is considered a direct care project and the clinical project outcomes cannot be met in an academic classroom setting.

MSN: Nurse Educator clinical projects must be done on site under the supervision of the preceptor and cannot be completed remotely

Women's Health Nurse Practitioner Program

Overview

This page provides essential information for all students enrolled in the Women's Health Nurse Practitioner (WHNP) track.

Clinical Courses Overview

WHNP Clinical Courses

Women's Health Nurse Practitioner Clinical Courses	Hours	Encounters	Sequence
NU577: NP II Clinical - Women's Health Focus	160	160	1
NU681: Women's Health Practicum I	200	200	2
NU683: Women's Health Practicum II	200	200	3
NU685: Women's Health Practicum III	190	190	4
Total Requirements	750	750	

NU577

The NU577 clinical experience requires students to see and provide primary care to women across the life span. Women's health patient visits should include annual well women screening exams including PAP smears, pre- and post-menopausal management, family planning, birth control management, care of gynecologic patients as well as the care of pre-, ante-, and postpartum patients.

A maximum of 80 hours telehealth is permitted for this experience. Up to 40 clinical hours may be obtained through assisting with labor or delivery, Uro-GYN, GYN-onc, and maternal fetal medicine. Students may attend inpatient surgical procedures including, but not limited to, Cesarean section deliveries.

A minimum of 80 patient encounters must consist of women's health visits, as described above.

Clinical Specifics:

- OB/GYN practices
- Primary care clinics (such as a family practice that see a considerable amount of patients for GYN services)
- Planned Parenthood (more than one site may be needed to ensure all course requirements are met)
- Federally Qualified Health Centers (that see a considerable amount of patients for GYN services)
- Boards of Health that include primary care clinics (that see a considerable amount of patients for GYN services)
- An urgent care is not an acceptable site for NU577

NU681

Women's Health Practicum I provides you with a supervised, hands-on clinical experience in women's health care settings. Emphasizing a holistic and evidence-based approach, the practicum integrates classroom knowledge with practical application in gynecology, prenatal and postpartum care, reproductive health, and health promotion across the female lifespan. You will develop foundational clinical skills, engage in patient-centered care, and begin to refine diagnostic reasoning and communication techniques within a multidisciplinary team. This course is the first in a two-part practicum sequence. It prepares you to assess and address the unique health needs of diverse female populations with cultural sensitivity and clinical competence.

Clinical Specifics:

- OB/GYN office
- Federally Qualified Health Centers focusing on Women's Health
- Boards of Health with primary care clinics that serve a large women's health population
- Women's Health clinic

NU683

Women's Health Practicum II is the advanced continuation of clinical training in women's health care, building upon the foundational skills developed in Practicum I. Under the guidance of clinical preceptors, you will further refine your ability to provide comprehensive, patient-centered care to women across the lifespan. Emphasis is placed on advanced assessment, diagnosis, and management of complex reproductive and gynecological health issues and prenatal and postpartum care. You will deepen your clinical reasoning, enhance procedural skills, and demonstrate increasing autonomy in delivering culturally competent, evidence-based care within diverse populations. This practicum also supports professional role development and prepares you for transition into advanced practice or specialized roles in women's health.

Clinical Specifics:

- OB/GYN office
- Women's Health clinic
- Fertility clinics

NU685

Women's Health Practicum III is the culminating clinical experience in the women's health practicum sequence. This advanced practicum focuses on integrating comprehensive clinical skills, critical thinking, and professional role development in the care of women across the lifespan. Students will manage increasingly complex reproductive, gynecologic, and obstetric cases more independently while demonstrating leadership in clinical decision-making and interdisciplinary collaboration. Emphasis is placed on patient education, health promotion, disease prevention, and culturally competent care. Under the supervision of qualified preceptors, you will prepare for transition into independent practice or specialty roles in women's health.

Clinical Specifics:

- OB/GYN clinic
- OB floor in hospital
- Midwifery clinical
- Birthing Center

Final site and preceptor approval is required before beginning clinical hours. Site availability and requirements are subject to change by state regulations or program policy.

Clinical Course Structure

- Four clinical courses completed sequentially
- Preceptor and site approval required before each course

Need help with forms or process? Visit the Clinical Placement Process Page.

What counts toward clinical hours?

Time documented as clinical hours must be time spent in direct patient care activities.

The requirements for clinical sites and hours are detailed by the National Task Force on Quality Nurse Practitioner Education (NTF). Per Standard III of the NTF criteria, “Direct Patient Care Clinical Hours” refers to hours in which direct clinical care is provided to patients.

Clinical experiences and time spent in each experience should be varied and distributed in a way that prepares you to provide care to the populations served. All clinical experience activities must be completed under the direct supervision of your preceptor.

You may count the hours spent in “grand rounds” or other patient-focused medical education activities that occur on the assigned unit, for no more than 5% of your total hours for the clinical rotation.

All clinical hours must be supervised by your approved preceptor during the academic term in which you are registered for the clinical course. Your clinical hour logs must accurately reflect each date, time, and hours you were present at your approved clinical site and engaged in direct patient care activities under the supervision of your approved preceptor. Any instance of fabricated information in your hours or field encounter logs can result in disciplinary action under the university’s code of student conduct.

Telehealth Hours

If you are in the Women’s Health Nurse Practitioner program, telehealth is permitted **only** within the NU577 course. Within NU577, up to 50% of the clinical hours designated for the course may be completed via telehealth. Telehealth is not permitted in any other Women’s Health clinical/practicum course; all other clinical hours required for the program must be completed through on-site patient care.

When completing telehealth hours, you must hold an active, unencumbered RN license in the state where the site and preceptor are based.

What is not considered direct care patient contact hours?

Lunch (whether spent in the office or out) and travel time to, from, or between sites (if traveling from one site to another). For clinical days of 8–9 hours, a minimum of one 30-minute break is highly

recommended. If you are not able to take lunch, please note in the clinical log the reason for not taking one.

Any “rounding up” of clinical hours (i.e., counting 3.5 hours as 4) will be considered academic dishonesty and may result in failure of the course and possible dismissal from the program.

Logging Patient Encounters

You are required to document all patient encounters in the Field Encounters section of the clinical management system. This documentation must include information such as age, ethnicity, a SOAP note, and billing/coding details. You must ensure that your logs do not contain any personally identifiable information.

The minimum number of required field encounters is specified on each specific program's page. While these are the minimum requirements, you must log information for every patient you encounter during your clinical rotation, even if the total patients you saw exceeds the minimum. For example, if you see 200 patients but the course requires only 160, you must log all 200 encounters.

By logging all patient encounters, you demonstrate compliance with documentation standards and ensure that you have complete records for legal purposes.

Final Evaluations

You must have at least one final clinical evaluation per clinical course completed by your preceptor(s). If you log 40+ clinical hours with a preceptor, their evaluation is required. If under 40 hours is completed with a preceptor, that preceptor's evaluation is optional. To pass the clinical course, you must achieve 3.0 or above on all assessed items in every final preceptor evaluation. All completed preceptor evaluations contribute to the final grade in the clinical course. **If any final preceptor evaluation shows an unsatisfactory score on any assessed item, you will not pass the clinical and must retake the course.**

Unsuccessful Attempt at Clinical Course

The grade of “B” is the minimum acceptable grade for graduate nurse practitioner clinical courses. If you do not earn the required grade in a clinical course and must repeat the class, you must repeat all required clinical hours and field encounters. You must also have a passing preceptor evaluation from your course repeat. If repeating a clinical course, please work with your Clinical Student Manager to submit a site and preceptor to be approved for the repeated course/rotation.

Acceptable Preceptor Credentials for Women's Health

Some roles may be limited to specific rotations or further requirements may be needed for a certain course.

- **Nurse Practitioner (NP)** that is board certified in a Women’s Health NP speciality specialty
- **Medical Doctor (MD)** or **Doctor of Osteopathic Medicine (DO)** that specializes in OB/GYN
- **Certified Nurse Midwife (CNW)**
- **Certified Physician Assistant (PA)** that practices in women’s health specialty. If you're in a state that requires physician supervision, the physician's license and specialty will be reviewed.

Physician Assistant (PAs) are restricted in Alaska, Arizona, California, Kansas, and Pennsylvania; students in these states cannot rotate with a PA.

Course Outcomes

NU577: NP II Clinical - Women's Health Focus

- NU577-1: Manage human responses to the changes in the personal, interpersonal, and social systems that affect women's health throughout the lifespan.
- NU577-2: Conduct a comprehensive or problem-focused women's health history and physical exam.
- NU577-3: Develop a comprehensive plan of care for acute and chronic conditions.
- NU577-4: Perform age-appropriate health maintenance activities and lifestyle interventions for long-term health.
- NU577-5: Develop a collaborative partnership with the client and other members of the health care team.

NU681: Women's Health Practicum I

- NU681-1: Choose foundational assessments and procedures relevant to women's health care under supervision, including history-taking and focused physical exams.(6: Evaluation)
- NU681-2: Synthesize current advanced nursing practice clinical guidelines and best practices in assessing and managing common women's health issues.(5:Synthesis)
- NU681-3: Recommend preventive care through education, screenings, and counseling related to nutrition, physical activity, reproductive health, chronic disease prevention, and other evidence-based health promotion opportunities.(6: Evaluation)
- NU681-4: Report, within the scope of the advanced nurse practitioner, accurate, comprehensive, and legal documentation of patient encounters in written and electronic formats.(5:Synthesis)
- NU681-5: Design interprofessional and collaboration strategies to support comprehensive care for women. (5:Synthesis)

NU683: Women's Health Practicum II

NU683-1: Conduct therapeutic communication and counseling techniques tailored to sensitive topics like fertility, sexuality, trauma, and chronic illness. (3: Application)
NU683-2: Develop advanced clinical strategies that integrate assessment, diagnostic reasoning, and management for complex women's health concerns throughout the lifespan. (5:Synthesis)
NU683-3: Develop innovative, advanced nursing practice protocols based on critical appraisal of current research and guidelines to enhance care in women's health. (5:Synthesis)
NU683-4: Design comprehensive, individualized, advanced nursing practice care plans for reproductive and gynecologic conditions. (5:Synthesis)
NU683-5: Design comprehensive advanced nursing practice strategies for integrating ethics, professionalism, and cultural humility across diverse clinical care interactions. (5:Synthesis)

NU685: Women's Health Practicum III

NU685-1: Analyze Advanced Nursing Practice Models that integrate assessment, diagnostic reasoning, and complex pregnancy complication management to improve maternal and neonatal outcomes. (4:Analysis)

NU685-2: Construct individualized models of care for women during pregnancy and postpartum that utilize clinical strategies and effective advanced nursing practice to reduce the risk of maternal and neonatal morbidity and mortality. (5:Synthesis)
NU685-3: Investigate evidence-based care models, integrating current research and clinical guidelines with autonomy and shared decision-making, to improve care during pregnancy, childbirth, and postpartum while emphasizing that these are normal physiologic processes. (4:Analysis)
NU685-4: Develop leadership strategies for clinical decision-making, patient education, and care coordination within interprofessional health care teams to improve outcomes for women with perinatal complications during pregnancy, childbirth, and postpartum. (5:Synthesis)
NU685-5: Design comprehensive, professionally ethical, culturally sensitive, and diverse care plans using therapeutic counseling and communication techniques for women experiencing a perinatal loss. (5:Synthesis)