The William Paterson University of NJ

School of Nursing

Online Graduate Program

WILLIAM PATERSON UNIVERSITY

WAYNE, NEW JERSEY 07470-2103

Online Student, Faculty and Preceptor Handbook

Adult Gerontology Nurse Practitioner in Primary Care Track
Family Nurse Practitioner Track

Partnerships For Learning

2025-2026

2025

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INTRODUCTION

The faculty and professional staff are pleased that you have chosen William Paterson University. The Student, Faculty and Preceptor Handbook "Partnerships for Learning" has been developed to provide you with a wealth of information that you will need throughout your clinical practicum experience. Specifically, information on selection and qualifications of a preceptor; faculty, student and preceptor responsibilities, new preceptor orientation, process of approving the preceptor and completed form required. It is important that students refer to the information in the handbook every semester that they are enrolled in the clinical course.

The faculty and staff of the William Paterson University Graduate Nursing Program take pride in our program, our students and their accomplishments and wish you great success throughout your clinical experience.

All updated versions of the handbook can be found at:
http://www.wpunj.edu/cosh/departments/nursing/graduate-programs/handbooks.dot

Cheryl Hollema, DNP, APN, FNP-BC
Director, Graduate Nursing Programs

DESCRIPTION OF PROGRAM

Master's Degree Program Outcomes

The content in the master's program in nursing is consistent with the mission and philosophy of the School of Nursing. It is designed to meet the program objectives which are derived fromthe overall framework guiding curriculum. Upon completion of the program, the graduate is ableto meet the program objectives, which reflect the roles of the advanced prepared nurse in practice, education and/or management.

The William Paterson University of New Jersey master's graduate in nursing will be prepared to:

1. Apply advanced knowledge of nursing theories, related sciences and humanities, and methods of inquiry in the delivery of healthcare services.
2. Develop leadership and communicate effectively using the collaborative approach to improve quality care.
3. Analyze changes in the healthcare system through the design and implementation of health-related projects that strengthen the outcomes in the healthcare delivery system.
4. Apply evidence, research, and theory to improve health services.
5. Apply current health information and technologies to advance the quality and accessibility of care.
6. Advocate for healthcare policies and systems to improve healthcare.
7. Analyze systems responses to health and illness to improve the promotion, restoration, and maintenance of health that reflect respect across diverse cultures.
8. Engage in advanced nursing care to individuals, families, communities, and clinical populations.

Contacts

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CLINICAL PLACEMENTS FOR GRADUATE PRACTICUM EXPERIENCE

Overview

The student in consultation with the Online Nurse Practitioner (NP) Coordinator and/or Graduate Nursing Program Director usually initiates clinical placements for graduate students a semester prior to registration of the clinical course. Each student is placed with a preceptor who serves as an appropriate role model as well as a clinical instructor at the practicum site. Placement is arranged in consultation with the clinical preceptor and student. The Online NP coordinator verifies that the student objectives are appropriate to the practicum, assures that the preceptor has been approved by the School of Nursing. The faculty teaching the course maintains appropriate contact with the preceptor and awards the final grade. In addition to the students' supervised clinical hours, on-line assignments willbe required within the designated Blackboard course (Bb). *Please note: William Paterson University Graduate Nursing Programs does not provide honorariums for services as a preceptor.

Procedure

The student must hold an active RN license in the state in which the student is practicing. Thegraduate student practices under his or her own RN license and is covered by the University professional liability insurance for course-related incidents. The student also has adequate individual professional liability insurance. Interpretation and proof of insurance status can be documented and provided for the agency if required. Proof of individual professional liability insurance include (NP rider) must be available for presentation upon request and a copymust be submitted to the faculty teaching the course to be kept in the student's file.

If a facility requires a formal contract with William Paterson University and does not currentlyhave one, we will need to be notified up to 6 months in advance prior to starting a clinical course, to secure a contract with the facility.

Students will only be able to select clinical placements in the state in which they are licensed. If a student resides out of state, they need to receive approval to complete their clinical practicum hours within the state they reside/practice prior to admission to the program

Students enrolling in NUR 7252/7253 – Advanced Nursing Role Practicum must have anurse practitioner as their preceptor in this course.

Appropriate student placement with a qualified preceptor is determined by course objectives,student objectives, and experiential background.

Sites or practices may require additional paperwork prior to the student beginning their clinical. It is the responsibility of the student to complete these requirements prior to the first day ofclass.

The student uploads the information in the Student and Preceptor Information Request Form in Exxat under the My Request wishlist found under coursework. The student must also upload a copy the preceptor's curriculum vitae (cv)/resume. Place the preceptor request under the course # and semester that the practicum will be taking place.

***Students**
Refer to MSN Student Handbook or Graduate Nursing webpage for policies.

Specific Guidelines for Students in Clinical Facilities

1. Students are to negotiate acceptable hours with the preceptor prior to starting clinical practicum. The student is expected to accommodate the preceptor's availability and schedule. The student's personal and work schedules are expected to accommodate participation in the required number of clinical hours specified by the clinical course.

2. Professional apparel that meets agency guidelines is expected. Conservative and professional dress clothing and a lab coat are the norm. No jeans, shorts, running shoes, bare midriff, or low-cut clothing are allowed in an agency.

3. Graduate Nursing students will demonstrate professional behavior during all placements in all settings, following the legal and ethical codes of nursing. Student behavior that is considered unsafe, according to the professional judgment of the faculty/preceptor or agency, is cause for immediate removal from the clinical site and faculty/administrative review for continuation in the nursing program.

4. The student will work within the policies of the agency and maintain a constructive relationship with the agency.

5. It is the responsibility of students to show proof of compliance on the Nursing Clinical Documentation Checklist forms required for clinical placements every semester by uploading documents in Exxat and checking the status of their clinical clearance. All clinical clearance documentation requirements are due **14 days prior** to the start of the clinical course. If a student is not cleared 7 days prior to the start of the first day of their clinical course, they will be administratively dropped without warning. **NO EXCEPTIONS**. These forms can be found on the https://www.wpunj.edu/cosh/departments/nursing/graduate-programs/clinical-track-forms.html.

6. The graduate student WPUNJ ID card is worn only when the student is participating in or involved in experiences related to the graduate student role.

7. The student is responsible for her or his individual travel or other costs related to clinical experiences.

Clinical Courses

Requirements prior to starting MSN graduate clinical courses:

1. Completed all nursing pre-requisites
2. Submission/approval of Student & Preceptor Information Request Form in Exxat
3. Completion of signed Confirmation of Clinical Placement Form - Signed & returned by preceptor.
4. Completed contract if required by agency. Signed by facility & university.
5. Health clearance (compliance documents) through Exxat – All clinical clearance documentation requirements are due **14 days prior** to the start of the clinical course. If a student is not cleared 7 days priorto the start of the first day of their clinical course, they will be administratively dropped without warning. NO EXCEPTIONS

   Student needs to upload COVID vaccine/religious exemption in Exxat. The exemption needs to be approved by practicum site prior start of clinical hours.
6. Completed Urine Drug Screen - Result of "Approved" through Universal (Students must go through Universal).
7. Completed Background Check - Result of "Approved" through Universal (Students must go through Universal). Complete initial background check first. Only complete the recheck if the initial background check is about to expire or has expired.

If the site requires a formal contract between the University and the site, please contact Dr. Iryna Surmachevska, surmachevskai@wpunj.edu. She handles all our contracts. Be sure to include the following:

Student's full name/program:

- Anticipated time/semester of the rotation:
- Precepting Agency/hospital name:
- Contact person full name:
- Contact person title:
- Contact person email address:
- Additional information, if needed:

Please note that if the Confirmation of Clinical Placement Form is not received or if a contract isnot fully executed by the due date outlined below - the student will have to drop the clinical course and resume the following semester on a seat availability basis. All signed forms will be kept on file.

	Summer I Semester	Summer II Semester	Fall I Semester	Fall II Semester	Spring I Semester	Spring II Semester
Signed confirmation of clinical placement form.	May 1	June 21	August 16	October 11	December 27	February 21
Fully executed contract (if required).	May 1	June 21	August 16	October 11	December 27	February 21

PRECEPTOR SELECTION FOR PRACTICUM COURSES

Practicum preceptor selections are made based on demonstrated commitment to the School of Nursing Graduate Program at The William Paterson University of New Jersey. Collaboration between agencies and the School of Nursing assure a pool of qualified clinical preceptors. This reciprocal relationship fosters the quality of services offered by both parties entering into this agreement.

Qualifications: Master's Degree in Nursing as an advanced practice nurse (or practicing physicians) A minimum of one year's experience in the practice area

Privileges: Opportunity to participate in the School of Nursing faculty meetings, instructional activities, conferences and collegial relationships with faculty.

Responsibilities: Preceptors are expected to:

- Use theories of adult instruction and learning in the education of the student.
- Provide experiences that engage the role of advanced practice nurse, manager/administrator, educator as defined by the needs of the client population and expertise of the preceptor.
- Collaborate with the student in the development of the informal learning contract and individualized objectives.
- Supervise and evaluate students' learning experiences.
- Maintain an on-going supervisory relationship for the duration of the practicum, which promotes students' use of advanced specialized knowledge.
- Guide the student in the selection of agency activities that promote students' progress in the role of the advanced practice nurse, administrator and/or educator.
- Encourage student involvement in the identification of research problems, collaboration with nurse researchers, and utilization of research findings among staff.
- Communicate with faculty relative to student progress or issues related to the practice experience.
- Guide the student in achieving goals relative to the informal learning contract and participate in the evaluation of those goals.
- Serve as a professional role model in their teaching-learning experience.
- Documents student's activities and evolving role behaviors/competencies.

WP ONLINE RESPONSIBILITIES IN THE PRECEPTOR PARTNERSHIP

The student, preceptor, and faculty have equal responsibility for providing a quality learning experience in the practicum. There are, however, specific responsibilities for each participant. This is necessary to promote student progress and role expectations. A pre-practicum meeting with the student and preceptor facilitates mutual understanding of the responsibilities of all parties. These responsibilities are identified as follows:

Student Responsibilities

1. Participates in selection of qualified preceptor (s).
2. Complete 170 clinical practicum hours for each practicum course (ie: 24.3 hours/week for 7 weeks).
3. Develops and completes an informal learning contract in accord with William Paterson University course objectives and agency policies.
4. It is the responsibility of students to show proof of compliance on the Nursing Clinical Documentation Checklist forms required for clinical placements every semester by uploading documents in Exxat and checking the status of their clinical clearance. All health clinical clearance requirements (compliance requirements in Exxat) are **due 14 days prior** to the start of the clinical course. If a student is not cleared 7 days prior to the start of the first day of their clinical course, they will be administratively dropped without warning. **NO EXCEPTIONS**
5. Completes the requirements on the Clinical Documentation Checklist no later than the first day of the clinical semester.
6. All graduate students are to report any criminal arrest or conviction immediately to Graduate Nursing Program and to the preceptor's supervisor. Our policy also requires that our Graduate Nursing Program report any arrests or convictions to the place they are precepting.
7. Maintains on-going student-preceptor relationship for duration of the practicum.
8. Keeps faculty informed of progress related to course objectives.
9. Keeps faculty informed of advanced practice nurse role progress.
10. Seeks faculty consultation on appropriate issues.
11. Practices in a safe and ethical manner cognizant of standards of care management/administration, education care, management/administration, education.
12. Submits practicum experience logs/narratives to faculty in a timely manner.
13. Completes assignments as identified in the course syllabus.
14. Completes required practicum hours with preceptor.

Flynn Ohara. You want the **WPU logo** on the lab coat and for the name bade **WPUNJ NURSE PRACTIONER STUDENT** for AGNP/FNP tracks or **WPUNJ ADM STUDENT or WPUNJ EDU STUDENT** for ADT/EDT tracks.

This is the site specific to WPU students to order: Lab coats: http://www.flynnohara.com/school/nj196

Name badge should state **first** and **last name**: https:wpunjgrad.lonestarbadge.com

Robert Rose, Business Development
10905 Dutton Road
Philadelphia, PA 19154
Work:1-800-441-4122 x 8108
Cell: 215-287-3722
www.flynnohara.com

Faculty Responsibilities

1. May recommend a qualified preceptor (with student participation)/clinical placement.
2. Verified student has completed the clinical Checklist Documentation form requirement by the firstclinical course.
3. Approves a student-preceptor learning contract.
4. Maintains communication with student and preceptor in relation to student progress and a minimum ofone site visit with student and preceptor.
5. Encourages student scholarly inquiry through the use of nursing and related research in clinicalpractice, management/administration, or education tracks.
6. Facilitates student/faculty seminar discussions of advanced specialized practice.
7. Facilitates seminar discussions relative to the role of the advanced practicenurse,manager/administrator or educator.
8. Assess and evaluate student progress with input from student and preceptor.
9. Reviews student practicum experiences/logs/narratives with feedback.
10. Assures completion of practicum hours and submits logs/narratives at the end of the semesterandsubmits this to the Graduate Program Assistant.
11. Complies with University and School of Nursing assessments, student evaluation of Preceptor & Clinical Agency and student's logs with cumulative earned hours.
12. Submits a grade on WPConnect for the student at the end of the semester.
13. Communicates with the WP Online Graduate Coordinator and/or Graduate Program Directorviolations of policy, unsafe/unethical practices.

Preceptor Responsibilities

1. Reads William Paterson University Preceptor Handbook of Policies and Procedures available on the graduate nursing website – handbooks, and familiarize self with curriculum content.
2. Uses theories of adult instruction and learning in the education of the student.
3. Provides experiences that reflect the role of advanced practice nurse, manager/administrator and educator as defined by the needs of the client population and expertise of the preceptor.
4. Supervises students' learning experience.
5. Maintains an on-going supervisory relationship for the duration of the practicum whichpromotes students' use of advanced specialized knowledge.
6. Guides student in the selection of agency activities that promote students' progress in the role of the advanced practice nurse, administrator and/or educator.
7. Encourages student involvement in the identification of research problems, collaboration with nurse researchers, and utilization of research findings among staff.
8. Communicates with faculty relative to student progress and facilitate faculty observation of student.
9. Guides student in achieving goals relative to the informal learning contract and participate in the evaluation of those goals.

BENEFITS FOR PRECEPTORS

- Will be granted the title of Clinical Preceptor
- Opportunity to guest lecture or lead a seminar in area of expertise.
- Receive a Certificate of Appreciation and Acknowledgement from the Graduate Program.
- Will receive a thank you letter from the Graduate Nursing Program and ANCC Verificationof Hours form at the end of the semester (if applicable.)

Site visits & facilitation of clinical activities

The faculty member will make scheduled visit(s) to the clinical site (a minimum of one visit is expected). The date and time are confirmed with the student. It is the student's responsibility to inform the preceptor of the date/time of the visit. Purpose of the site visit include observation and evaluation of the student's role performance (practitioner, educator or administrator) behaviors and the student's interaction with staff and preceptor. Additionally, it provides the faculty member, the preceptor and the student an opportunity to discuss the student's progress. Faculty will document site visit via Site Visit Observation Form.

Evaluation of student

The course syllabus and clinical evaluation forms include the requirements and evaluation criteria for successful student performance. Evaluations by the faculty member with input from the preceptor are important components of the student performance. Open communication between the faculty, preceptor and student is essential. Faculty assumes the ultimate responsibility for the evaluation of the student and employ several methods to achieve this. This includes at least one visit of clinical practicum site with preceptor, student, and faculty; Regular review of student's clinical documentation via Exxat. Assessment of student's clinical experiences/practice, along with review of supportive evidence from clinical preceptor.

WILLIAM PATERSON UNIVERSITY

INITIAL CLINICAL HEALTH CLEARANCE GUIDE

Pre-entrance and periodic health evaluations are required by all students in the nursing major going to a clinical setting. This required data meets the requirements of the state of New Jersey Department of Health, as well as the various clinical agencies in which students affiliate. Carefully review the requirements below to successfully complete the attached Health Clearance Packet in its entirety. **All clinical clearance requirements are due 14 days prior to the start of the clinical course.** **If a student is not cleared 7 days prior to the start of the first day of their clinical course, they will be administratively dropped without warning. NO EXCEPTIONS**

Initial Health Clearance Requirements:

1. **Initial Physical Exam for Clinical Clearance** form completed (front and back pages): Student must have a physical exam performed by a healthcare provider within 1 year of clinical start date. All information must be completed, including vision/color screen, date of physical exam, signed and stamped by the healthcare provider. Upload in Exxat.

2. **QuantiFERON-TB Gold/ T-SPOT (blood test**) within 3 months of clinical start date. Student must submit a copy of the lab report. Upload in Exxat.

   - **Positive QuantiFERON-TB/T-SPOT test: Action Required**
     Please submit a post-positive chest x-ray report. Documentation of (prophylactic) medication regimen by a healthcare provider required and yearly documentation of TB symptoms check.

3. **Complete blood count (CBC) lab report** within 1 year of clinical start date. Upload in Exxat.

4. **Varicella (Chickenpox):**
   IgG titer (laboratory blood test for antibodies): must submit a copy of the lab report regardless of past history of disease or vaccination. Upload in Exxat.

   - **For Negative Varicella Titer: Action Required:**
     If there is documented history of 2-dose Varicella vaccinations, then *1 dose of Varicella booster vaccine is required.* If there is no documented vaccination history, then 2 dose Varicella vaccination is required: second dose at least 28 days after the first dose. Please submit vaccination record, if not done so already. Upload in Exxat.

   - **For Equivocal Varicella Titer**:
     If there is documented history of 2-dose Varicella vaccination, then a booster is *highly recommended* but not required. If the student has only received 1 dose of the vaccine in the past then a *second dose of the vaccine is required.* Upload in Exxat.

5. **Measles, Mumps, and Rubella (MMR):**
   IgG titer (laboratory blood test for antibodies): must submit a copy of the lab report with each results. Upload in Exxat.

   - **For Negative Measles, Mumps, or Rubella Titer Results: Action Required:**
     If there is documented history of 2-dose MMR vaccinations, then *1 dose of MMR booster vaccine is required.* If there is no documented vaccination history, then 2 dose MMR vaccination is required: second dose at least 28 days after the first dose. Please submit vaccination record, if not done so already. Upload in Exxat.

- **For Equivocal Measles, Mumps, or Rubella Titers**:
  If there is documented history of 2-dose MMR vaccination, then a booster is *highly recommended* but not required. If the student has only received 1 dose of MMR vaccine in the past then a *second dose of the vaccine is required.* Upload in Exxat.

6. **Hepatitis B**

   Documentation of **positive Hepatitis B Surface Antibody test**: must submit a copy of the lab report. Upload in Exxat.

- **For Negative Hepatitis B Surface Antibody: Action Required**
  If there is documented history of 3-dose Hepatitis B vaccinations, then *1 dose of Hepatitis B booster vaccine is required.* If there is no documented vaccination history, then 3-dose Hepatitis B vaccination is required at 0, 1, and 6-month intervals. Upload in Exxat.

7. **Tetanus/Diphtheria/Pertussis Vaccine (Tdap/Td)**
   Documentation with date of vaccination of Tdap vaccine in a lifetime and Td booster every 10 years. If no documentation of Tdap is presented a single dose of Tdap is required. Upload in Exxat.

8. **Covid 19 vaccine**
   A copy of your Covid 19 vaccine record is required. Exemptions must be vetted by a physician. Upload in Exxat.
9. **Flu vaccine**
   Documentation of annual flu vaccine during the flu season (August through May). Upload in Exxat.

10. **Clinical Student Request and Authorization to Release Records and/or Information Form:** must be signed and dated annually. Upload in Exxat.

11. **Urine Drug Screen and background check** need to be completed annually. Results will be posted in Exxat.
    *Note, the initial background check must be completed first. The background recheck should only be completed when the initial background check is about to expire or has expired.

Please submit **ALL** completed forms and documents to Exxat. **Incomplete forms and documents will not be accepted and will cause a delay in your clearance.**

- **Exxat** will review the documents uploaded and categorize them as approved, pending, or not approved. **Exxat** will provide comments on documents that need further explanations and/or supplemental documentation. **Please check all comments before reaching out**. Exxat support, prism-support@exxat.com.

For further questions, please contact your program clinical coordinator:

Undergraduate Clinical Coordinator:	Iryna Surmachevska, surmachevskai@wpunj.edu
Graduate Program Assistant:	Jami Jennings, jenningsj3@wpunj.edu
WP Online Clinical Coordinator:	Ivy Sosoban, sosobani@wpunj.edu

William Paterson University

Physical Exam for *Initial* Clinical Clearance- Page 1

INCOMPLETE FORMS/DOCUMENTS WILL NOT BE ACCEPTED

Upload completed forms and all required documents in Exxat:

Patient Name:_____**DOB:**_____

Student ID#: 855_____ **Contact Phone#** _____

Program *(select one):* Nursing Graduate Nursing DNP Communication Disorders

Allergies *(specify reaction)*:_____**Current Medications**:_____

Past Medical History _____

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1. **Physical Examination** ***(To be filled out by a medical provider)*** **LMP** _____

HT_____ **WT**_____ **BP**_____ **HR**_____ **RR**_____ **TEMP**_____

Vision Screen-mandatory: Left Eye_____/_____Right Eye_____/_____*Circle:* With / Without Correction

	WNL	Abnormal/Comments
General		
Skin		
Nodes		
HEENT		
Mouth		
Chest/Breast		
Lungs		
Heart		
Abdomen		
Gent/Rect		
Extremities/Hips		
Back/Spine		
Musculoskeletal		
Neuro		

2. **Assessment:**

Patient is medically cleared to participate in the clinical setting ***(circle):*** **Yes** **No**

If no, explain reason _____

_____

Provider Name & Signature **Date**

Provider's Stamp (Required)

William Paterson University

Physical Exam for *Initial* Clinical Clearance- Page 2

(All the information below is to be filled out by a medical provider and stamped at the bottom)

Patient Name: _____

3. **Tuberculosis Screening** *(via blood test):* DOB:

Provide a copy of QuantiFERON TB-Gold –or- T-SPOT lab test results within the last 3 months

- **Positive QuantiFERON-TB-Gold/ T-SPOT test: Action Required**

Please submit a post-positive chest x-ray report. Documentation of (prophylactic) medication regimen by a healthcare provider required and yearly documentation of TB symptoms check.

CXR Date(s):_____ **Results**: Negative Positive

TB Symptoms Assessment (date & results): _____

Prophylaxis/Treatment History *(Include date started and end date):* _____

Precautions and follow-up instructions: _____

If treatment is not recommended, give reason: _____

_____

4. **CBC:** Provide copy of complete blood count lab report completed within 1 year of clinical start date

5. **Measles, Mumps, Rubella & Varicella Titers:** Provide copy of the titer lab results, **not** the vaccine dates

Non-immune titer results *require* a booster *Equivocal* titer results, booster recommended

_____ _____

MMR Booster Date *(if applicable)*_____ Varicella Booster Date *(if applicable)* _____

6. **Hepatitis B Vaccine:** *Provide copy of positive Hepatitis B Surface Antibody test result*

For **Negative Hepatitis B Surface Antibody***: Action Required*

If there is documented history of 3-dose Hepatitis B vaccinations, then 1 dose of Hepatitis B booster vaccine is required. If there is no documented vaccination history, then 3-dose Hepatitis B vaccination is required at 0, 1, and 6-month intervals.

_____ _____ _____

7. **Tdap* Vaccine:** *(tetanus, diphtheria & pertussis)* within the last 10 years. Vaccine Date: _____

8. **Flu* Vaccine:** *annually during current flu season* Vaccine Date: _____

Provider's Stamp (Required)

Revised 1/27/2023

William Paterson University
Clinical Student Request and Authorization to Release Records and/or Information

This form when completed and signed by you authorizes the Nursing Department, to release protected information from your clinical record to the person or agency you designate.

I,_____, authorize the Nursing
(Print name of student)

and administrative staff, and Exxat to release information to one another regarding my clinical physical and any relevant information related to participation in the nursing program at William Paterson University.

The records are to be discussed verbally, via fax, or via email for the purpose of coordination of care. This authorization shall remain in effect for one year from the date signed below (unless otherwise indicated).

I understand that I have the right to revoke this authorization in writing, at any time by uploading such written notification to Exxat

However, my revocation will not be effective to the extent that we have taken action in reliance on the authorization or if this authorization was obtained as a condition of obtaining insurance coverage and the insurer has a legal right to contest a claim.

I understand that information used or disclosed pursuant to the authorization may be subject to redisclosure by the recipient of my information and no longer protected by the HIPAA Privacy Rule.

_____ _____

Student ID# Date of Birth

_____ _____

Signature of student (*parent if minor)* Date

Revised 2023

WILLIAM PATERSON UNIVERSITY

CLINICAL RE-CLEARANCE GUIDE

A re-clearance is done annually after initial clinical clearance is completed. **All clinical clearance documentation requirements are due 14 days prior to the start of the clinical course. If a student is not cleared 7 days prior to the start of the first day of their clinical course, they will be administratively dropped without warning. NO EXCEPTIONS**

1. **Re-Clearance Form for Clinical Participation form**: all questions must be answered and provide any follow up information. Must be signed and dated by the student. Upload in Exxat.

2. **Clinical Student Request and Authorization to Release Records and/or Information Form:** must be signed and dated by student. Upload in Exxat.

3. **Annual TB Screen**
   a. **Annual Quantiferon TB-Gold/T-SPOT test**: must provide a copy of lab result. Upload in Exxat.

- If history of positive PPD or positive Quantiferon/T-SPOT, annual TB symptoms check will be done with the nurse. If symptomatic, please refer to WPU nursing student TB policy. Any updated medication regimen must be submitted from your healthcare provider indicating clearance to participate in clinical setting.

4. **Up-to-date Tdap/Td vaccine:** Documentation of up-to-date Tdap/Td vaccine within last 10 years. Please check your immunization record if you require a booster shot. Upload in Exxat.

5. **Flu vaccine**: Documentation of annual flu vaccine during the flu season (August through May). Upload in Exxat.

6. **Annual Urine Drug screen and Background Check** through Universal. Results will be posted in Exxat. *Note, the initial background check must be completed first. The background recheck should only be completed when the initial background check is about to expire or has expired.

   Please submit **ALL** completed forms and documents to Exxat. **Incomplete forms and documents will not be accepted and will cause a delay in your clearance.**

   - **Exxat** will review the documents uploaded and categorize them as approved, pending, or not approved. **Exxat** will provide comments on documents that need further explanations and/or supplemental documentation. **Please check all comments before reaching out**. Exxat support, prism-support@exxat.com.

For further questions, please contact your program clinical coordinator:

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Graduate Program Assistant:	Jami Jennings, jenningsj3@wpunj.edu
WP Online Clinical Coordinator:	Ivy Sosoban, sosobani@wpunj.edu

William Paterson University

Repeat Clearance for Clinical Participation

Upload completed forms and all required documents in Exxat:

Name:_____ DOB:_____

ID#: 855_____ **Contact Phone #** _____

Program (check one): ☐ Undergraduate Nursing ☐ Graduate Nursing ☐ DNP

Since your **last** clinical clearance, have you *(please check yes or no and explain if applicable):*

1. Had any changes in your general health? ☐ No ☐ Yes

If yes, explain: _____

2. Missed any clinical days due to an illness, injury, surgery, hospitalization or pregnancy? ☐ No ☐ Yes

If yes, explain: _____

3. Been diagnosed with an illness? ☐ No ☐ Yes

If yes, please explain: _____

4. Had any injuries/surgeries/procedures? ☐ No ☐ Yes

If yes, please explain: _____

5. Started any new medications (prescribed or OTC)? ☐ No ☐ Yes

If yes, please list medication, dosage, frequency & reason for use:

6. Had any *known* exposure to any communicable diseases including tuberculosis? ☐ No ☐ Yes

If yes, please explain: _____

7. Tuberculosis Screen: Provide records for one of the following**:**

- Annual QuantiFERON TB-Gold test – *(provide lab report-upload in Exxat)*
- Annual T-SPOT test - *(provide lab report-upload in Exxat)*

8. Tdap or Td Vaccine: If not already submitted, provide documentation of vaccine **within** the last 10 years

9. Flu Vaccine: Provide record of vaccine for the current/upcoming flu season *(*August-May*) upload in Exxat.*

10. Complete ***Clinical Student Request and Authorization to Release Records and/or Information Form***

Please sign & date: **To the best of my knowledge, the above information is accurate**

_____ _____

Student's Signature Date

William Paterson University
Clinical Student Request and Authorization to Release Records and/or Information

This form when completed and signed by you authorizes the Nursing Department, to release protected information from your clinical record to the person or agency you designate.

I,_____, authorize the Nursing
(Print name of student)

and administrative staff, and Exxat to release information to one another regarding my clinical physical and any relevant information related to participation in the nursing program at William Paterson University.

The records are to be discussed verbally, via fax, or via email for the purpose of coordination of care. This authorization shall remain in effect for one year from the date signed below (unless otherwise indicated).

I understand that I have the right to revoke this authorization in writing, at any time by uploading such written notification to Exxat

However, my revocation will not be effective to the extent that we have taken action in reliance on the authorization or if this authorization was obtained as a condition of obtaining insurance coverage and the insurer has a legal right to contest a claim.

I understand that information used or disclosed pursuant to the authorization may be subject to redisclosure by the recipient of my information and no longer protected by the HIPAA Privacy Rule.

_____ _____

Student ID# Date of Birth

_____ _____

Signature of student (*parent if minor)* Date

Revised 2023

DRUG SCREENING AND TESTING: POLICY AND PROCEDURE

Policy Statement

William Paterson University and the School of Nursing are committed to providing a quality education for students admitted into the Nursing Program. In order to protect the integrityof the Nursing Program and the nursing profession and to safeguard the welfare of nursing students and patients receiving treatment from these students, this policy addresses drug and alcohol testing of nursing students involved in clinical activities. The purpose of this policy is to notify the student and faculty of the University's rules and testing procedures and to provide assistance and due process for students who test positive for drugs or alcohol. This policy appliesto all students admitted to the Nursing Program and is effective immediately. It is the policy of William Paterson University to comply with federal and state laws and regulations dealing with the usage and detection of drugs and alcohol.

This policy is subject to change at the sole discretion of the University and is meant to supplement other relevant University policies including, but not limited to, the Alcohol and Drug Policy and the Drug-Free Workplace Policy. In addition, students must comply with individual clinical institution drug policies. All costs associated with services beyond those offered on campus are the sole responsibility of the student. Examples of this are: baseline drug testing, drug testing for a cause, remediation, or higher level of drug treatment (such as an inpatient drug treatment facility).

The goals of patient safety and optimizing student performance are at risk when a student is present who is under the influence of these substances. Nursing students involved in clinical activities must uphold the standards of the nursing profession to ensure safe, effective, and supportive client care. Because a student may have altered judgment and skills, appropriate management of abuse and addiction is critical for nursing education and practice.

Students who have admitted to previous drug/alcohol problems will be tested in accordance with this same policy as other students. These students are encouraged to continue their support group therapy during their academic semesters in clinical. Through this policy, the School of Nursing seeks to balance a sense of compassion for the individual student with concern for the community as a whole.

DRUG SCREENING CLEARANCE PRIOR TO CLINICAL COURSES

Drug screening clearance will be required of all nursing students prior to beginning their first clinical course and annually thereafter. Clearance will be completed prior to the beginning of the semester in which the first clinical laboratory takes place. Certain clinical facilities may require additional drug screen panels in which circumstance the individual students affected will be notified to retest at their own expense. Drug testing will take place off site at an independently contracted facility. Students will be given notice to report to the facility for testing. Positive results of the screening will be reviewed by a designated Medical Review Officer (MRO) from the independent contracted facility, a licensed physician who has knowledge of substance abuse disorders and has appropriate training to interpret and evaluate confirmed positive tests, medical

history and any other relevant biomedical information. The MRO will report test results to designated agents within the WPU Counseling, Health and Wellness Center.

Categories of Test Results

1. Refusal to Test: If a student fails to produce the requested sample by the date and time designated, the student will be treated as if the test result was positive.

2. Negative Test Result: If the Drug test is negative, the student will be allowed to participate in clinical activities.

3. Positive Test Result: Any student who tests positive for drugs shall be withdrawn from all clinical courses and may be subject to discipline up to and including dismissal from the program. Any student who does not comply with any request or step outlined in this policy shall also be withdrawn from all clinical courses and may be subject to discipline up to and including dismissal from the program. Any student who tests positive for drugs shall be referred to Judicial Affairs at William Paterson University.

   The decision to proceed in the program or be dismissed from the nursing program shall be jointly determined by a representative from Judicial Affairs, the Director of the Counseling, Health and Wellness Center and the Chair of the School of Nursing. If the student is not dismissed from the program, the student will not be permitted to participate in clinical until the student undergoes remediation (see below for remediation procedures). In addition, future participation in clinical is dependent on the length of time needed for the remediation process and clinical availability.

DRUG TESTING FOR A CAUSE

The University prohibits the use or possession of alcohol and the use or unlawful possession of drugs during any clinical nursing experience. Drug testing of students after the initial drug screening clearance will be done upon "reasonable suspicion," for specific behaviors observed when students are engaged in clinical nursing experiences. The testing will be conducted in accordance with the procedure set forth in this policy.

Students enrolled in clinical courses must consent for testing. Students using medications which may impact their ability to perform clinical duties must notify their faculty member prior to the clinical experience without disclosing the identity of their medication. The student is required to obtain documentation from his/her prescribing primary care provider that the medication will not interfere with the student's ability to perform the clinical requirements safely. This documentation will become part of the student's confidential Health and Wellness Center record.

If a "reasonable suspicion" exists that a student is under the influence of drugs or alcohol, the student shall be subject to immediate testing. Violations of this policy may result, subject to all of the due process rights to which a student is entitled, in disciplinary action, including dismissal from the University's Nursing Program.

PROCEDURE- DRUG TESTING BASED ON "REASONABLE SUSPICION"

Suspicion of Substance Abuse

1. If clinical faculty or staff at a clinical facility determines that "reasonable suspicion" exists that a student is under the influence of drugs or alcohol, the student must be immediately removed from any clinical activity. This will be reported directly to the Chair of the School of Nursing, or his/her designee, who will then consult with the Dean of Collegeand Health and the director of Judicial Affairs. A "reasonable suspicion" exists when a student exhibits behavior, or a pattern of behavior, or whose physical condition is consistentwith the signs and symptoms of being under the influence of alcohol or drugs.

   These behaviors may be, but are not limited to (1) unsteady gait (2) odor of alcohol or illegal drugs on the breath or body (3) rapid, thick or slurring speech (4) aggressive or abusive language or behavior (5) disorientation or lethargy (6) nausea, vomiting, sweating (7) dilated or pinpoint pupils.

   Other factors to consider include (1) time and attendance patterns (2) on-site accidents (3) difficulty remembering instructions or conversations (4) poor relationships with fellow students (5) appearance (6) blood shot eyes (7) fine motor tremors (8) confusion (9) deteriorating job performance.

2. The student will be asked to submit to an alcohol or drug screening test which will be immediate, or not later than two hours of the observed behavior, and will be accompanied to the test by a representative of William Paterson University student services.

3. The student will be removed from clinical laboratory activities pending results of the test(s). Test results will be sent to the Dean of the College of Science and Health or designee and the Director of Counseling, Health and Wellness Center, regardless of test results.

4. If a student is unwilling to produce the requested sample, the student will be allowed 30 minutes to reconsider the decision. Students who refuse to take the test after the 30 minutes waiting period will be treated as if the test result was positive.

<u>If screening/confirmation tests are positive, students are advised of the following:</u>

1. New Jersey laws may require additional penalties beyond University sanctions for drug-related offenses.

2. A positive test result for drugs or alcohol, interpreted by the Medical Review Officer available through the testing laboratory contract will require student withdrawal and/or dismissal from the Nursing program at the discretion of the Dean and Chairperson of the School of Nursing. Such sanctions shall be specified by a Review Panel charged withthis function.

3. If the student is a Certified Nursing Assistant, an LPN or an RN, notification of a positive screening result will be sent to the New Jersey State Board of Nursing or other jurisdiction where the student is registered, certified, or licensed.

4. Dismissal from the program will be a joint decision made by a representative from Judicial Affairs, the Director of Counseling, Health and Wellness Center and the Chairperson of the School of Nursing. If the student is not dismissed from the program, the student will notbe permitted to participate in clinical until the student undergoes remediation (see below for remediation procedures).

If the screening test is negative, the following applies:

Absent of any further indications of impairment, the student may resume all clinical nurse course activities.

1. If the student again displays suspicious behaviors, an evaluation/assessment will be necessary to determine the risk potential for client/patient safety and student capacity for required role performance. The student will be referred for both a medical and psychological evaluation at the Counseling, Health and Wellness Center.
2. Until clearance for participation in clinical courses from the Counseling, Health and Wellness Center reports are received by the Chairperson of the School of Nursing, the student cannot participate in any clinical course activities. The student is required to follow the recommendations included in such reports as a condition of resuming the clinical nursing course.

REMEDIATION FOR POSITIVE DRUG TESTING (Screening or Testing For A Cause)

If the student is not immediately dismissed from the School of Nursing following the joint review of the Judicial Affairs representative, the Director of the Counseling, Health and Wellness Center and the Chairperson of the School of Nursing, the student will be requiredto undergo a professional evaluation by the Counseling, Health and Wellness Center. The Counseling, Health and Wellness Center will determine whether appropriate care can be provided on-site, or referred to a higher level of care at an alternate site (such as an inpatient treatment facility).

If referral to an external facility is deemed necessary by the Counseling, Health and Wellness Center, all costs are incurred by the student. Students must provide evidence of successful completion at the external facility to the Counseling, Health and Wellness Center. Upon successful completion of the treatment plan, the counselor shall conduct a follow-up evaluation and issue a report to the Dean and the Chairperson of the School of Nursing. If the counselor reports that the student successfully completed the treatment plan and is ready to resume clinical, the student will be re-drug tested at the student's expense.

If the drug test is positive, the student will be dismissed from the School of Nursing. If the drug test result is negative, the student may resume clinical course work depending on space availability. Once a student has resumed clinical activities, the student may be subject to random drug testing until graduation from the program.

Revised and Approved April 2015 by Faculty

Confidentiality

The University will take reasonable measures to protect the confidentiality of individual test results and the student's medical history. Drug and alcohol test results will be kept confidentialto the extent possible, but the University will comply with applicable federal and state laws and regulations regarding the release of such information.

Adapted from parts of the Drug Free Workplace Act of 1988 and the WPUNJ Workplace Policy, Yavapai College, Clifton, NJ High School, Morris Catholic High School, Nutley Board of Education, Purdue University School of Nursing, Clemson School of Nursing.

5/5/09 Reviewed by Counsel, DAG C. Clarke

(All forms can be found on website, Nursing-Graduate Programs-Clinical forms)

- Student Information Request Form
- Preceptor Information Request Form
- COVID: Assumption of Risk Form
- Graduate Nursing Clinical Documentation Checklist
- Clinical Student Request & Authorization to Release Records and/or Info.
- Initial Clinical Health Clearance Form
- Re-Clearance Clinical Health Form
- Direct Observation of Graduate Student
- Course End Evaluation of Clinical Site
- Course End Evaluation of the Preceptor

All evaluations are on Exxat

- Preceptor Evaluation of the Student Adult Gerontology Nurse Practitioner

  NUR 6041 - Advanced Nursing Practicum I
  NUR 7011 - Advanced Nursing Practicum II
  NUR 7252 - Role Practicum for AGNP

- Preceptor Evaluation of the Family Nurse Practitioner

  NUR 6041 - Advanced Nursing Practicum I
  NUR 7011 - Advanced Nursing Practicum II
  NUR 7070 - Advanced Nursing Practicum III
  NUR 7253 - Role Practicum for FNP

SCHOOL OF NURSING

WILLIAM PATERSON UNIVERSITY

Graduate Program
Wayne, NJ 07470
973-720-3501

ONLINE MSN PRACTICUM / PRECEPTOR INFORMATION REQUEST FORM

Submission Deadline Dates

Spring 1 30 **Spring2** 30 **Summer 1** 30 **Summer 2** 30 **Fall 1** 3 **Fall 2** 3

Date Submitted: _____ Semester _____ 20____
(Fall, Spring, Summer)

Student Name:_____

Practicum Course # NUR ____ ☐ ☐

Track _____
(AGNP) (FNP) (Administration) (Educator)

Student's Place of Employment: _____

Phone #: Home:_____ Cell:_____ Work: _____

Preceptor Name & Credentials:

Population Focus (& specialty if applicable) Area of Practice

Preceptor's Facility

Preceptor **Business** Address:

Street

City, State & Zip

Phone:

Email:

Part II

Preceptor's Unit/Type of Site
(e.g., clinic, private practice, primary care setting, etc.)

General Characteristics of Patients in the clinical site:

a) Gender

b) age (children, young adult, adult, elderly)

c) ethnicity

d) primary languages spoken in office

Healthcare experience
(e.g., primary care, chronic, in-hospital)

If the signed confirmation of clinical placement form is not received by the due date as outlined in the WP Online Clinical Requirement Video, the student must drop all clinical classes, and resume the following semester on a seat availability basis.

Part III

MUST BE COMPLETED BY PRECEPTOR:
NP Preceptor complete a-f, **MD** Preceptor complete d-f

a) Certification (specify type e.g. adult or family) _____

b) (specify certifying body e.g. ANCC or AANP) _____

c) (specify expiration date) _____

d) Years of practice in the population focused or specialty area: _____

e) Number of students precepted concurrently: _____

f) State licensure #_____expiration
_____

Please also upload a copy of your preceptor's CV or Resume in Exxat (REQUIRED)

only finalized all requirements
have been approved

Rev: 0 4

GRADUATE NURSING CLINICAL DOCUMENTATION CHECKLIST

All students are required to provide the necessary documentation requested below.

All clinical clearance documentation requirements are due 14 days prior to the start of the clinical course. *If a student is not cleared 7 days prior to the start of the first day of their clinical course, they will be administratively dropped without warning* **(NO EXCEPTIONS).**

- **Criminal Background Checks - An annual background check is required for all students.** The only criminal background check accepted is with Universal. Complete in Exxat. *Note, the initial background check must be completed first. The background recheck should only be completed when the initial background check is about to expire or has expired.

- **Urine/Drug Screening - An annual urine/drug screening is required for all students.** The only urine/ drug screening accepted is with Universal. Complete in Exxat.

  A mandatory annual urine drug screen is required by all nursing students prior to the beginning of the first semester in which a clinical laboratory takes place. The lab will require a picture ID.

  **Requests for an additional urine drug screening will incur an additional fee payable by the student*

Any problems or issues, contact the dedicated team set up by UNIVERSAL, contact prism-support@exxat.com.

For billing inquires contact ExxatCS@universalbackground.com.

*Please submit **ALL** completed forms and documents to Exxat. **Incomplete forms and documents will not be accepted and will cause a delay in your clearance.**

***Exxat** will review the documents uploaded and categorize them as approved, pending, or not approved. **Exxat** will provide comments on documents that need further explanations and/or supplemental documentation. **Please check all comments before reaching out**. Exxat support, prism-support@exxat.com. It takes 48-72 hours for Exxat to review/respond.

- **CPR:** Students are required to maintain valid CPR certification throughout all clinical lab courses. The acceptable certifications are the American Heart Association's (AHA) BLS for the Healthcare Provider and BLS Provider (BLS is the only one accepted). (Upload a copy in Exxat)

- **Health Insurance Verification:** All nursing students in a clinical lab course are required to have health insurance. All students must provide documentation of health insurance coverage. Upload a copy in Exxat. If a student does not have health insurance, they will not be allowed in clinical. (Failure to do clinical will result in failure of the course). If a student does not have their own health insurance and is covered under a parent or spouse, supplemental documentation will be needed, showing the owner of the health insurance and their dependents.

- **Nursing License** (upload in Exxat)

- **Malpractice** cover sheet or certificate of professional liability insurance, $1 million per occurrence/ $6 million aggregate (NP students are required to have student nurse practitioner malpractice insurance. ADMIN/EDU students are required to purchase RN malpractice insurance). (Upload in Exxat)

William Paterson University of NJ

Graduate Program in Nursing

Clinical Evaluation Form: Nurse Practitioner Program Course:

NUR 6041/NUR 7011 Advanced Nursing Practicum I/II– WP Online

Student's Name:	Semester:
Preceptor:	
Preceptor's Agency:	
Evaluation Key: **1** = Does Not Meet Competencies **2** = Inconsistently Meets Competencies **3** = Meets Competencies **4** = Exceeds Competencies	**Directions:** Place a number in the box that best corresponds with the student's clinical performance for each competency.
Minimum rating average of 3.0 in each of the domains is required to pass the course. For any score below 3.0 a remediation plan will be put in place along with a student conference.	
***NUR 6041 students are expected to manage patients with low severity problems; with no comorbidity or uncomplicated comorbidity, routine visits including health promotion and screening. ***NUR 7011 students are expected to manage patients with moderate severity problem; with or without comorbidity and new patients.	

COMPETENCIES	**Week 4**	**Week 7**	**Comments**
A. Assessment of health status The nurse practitioner student assesses health status by:			
• Obtaining a comprehensive relevant health, social and medical history through patient/family/caregiver interview and reviewing records	Rate	Rate	
• Performing a thorough physical examination based on age and history	Rate	Rate	
• Differentiating between normal and abnormal changes associated with development and aging	Rate	Rate	
• Performing or ordering preventative and diagnostic procedures based on the patient's age and history	Rate	Rate	
• Identifying health risk factors	Rate	Rate	
• Evaluating social determinants of health that may influence the patient's health and wellness.	Rate	Rate	
B. Diagnosis The nurse practitioner student makes a diagnosis by:			
• Utilizing diagnostic reasoning	Rate	Rate	
• Synthesizing and analyzing the collected data from health history and any diagnostic information	Rate	Rate	

COMPETENCIES	Week 4	Week 7	Comments
• Formulating a differential diagnosis(es) based on the history, physical examination and diagnostic test results/information	Rate	Rate	
• Prioritizing differential diagnoses	Rate	Rate	
C. Development of a comprehensive plan of care The nurse practitioner student, together with the patient and family, establishes an evidence-based, mutually acceptable, cost-conscious, effective plan of care that maximizes health potential or end of life decisions. Formulation of the plan of care includes:			
• Ordering and interpreting additional necessary diagnostic tests	Rate	Rate	
• Establishing priorities to meet the health care needs of the individual, family, and/ or community	Rate	Rate	
• Prescribing or ordering appropriate necessary pharmacologic and non-pharmacologic interventions	Rate	Rate	
• Developing a patient education plan considering the patient's health literacy competencies/learning needs.	Rate	Rate	
• Ordering consultations or referrals based on evidence and standards of professional care and shared decisions with patient/family	Rate	Rate	
D. Implementation of the plan Interventions are based upon established priorities and consistent with the nurse practitioner's specialized education and clinical practice. Actions by nurse practitioner students are:			
• Individualized, recognizing the patient's preferences and abilities	Rate	Rate	
• Consistent with the appropriate plan for care	Rate	Rate	
• Based on scientific, evidenced based principles, theoretical knowledge, and clinical expertise	Rate	Rate	
• Inclusive of teaching and learning opportunities	Rate	Rate	
• Delivers safe patient care.	Rate	Rate	
E. Follow-up and evaluation of the patient status The nurse practitioner student maintains a process for systematic follow-up by:			
• Determining the effectiveness of the plan of care with documentation of patient care outcomes	Rate	Rate	
• Reassessing and modifying the plan with the patient and family as necessary to achieve health outcomes and patient goals	Rate	Rate	

Summary comments by Preceptor:

I verify _____ number of hours the student has completed. (Enter number of hours)

Printed Name of Preceptor

Signature of Preceptor Date

Comments by Student:

Printed Name of Students

Signature of Student Date

Comments by Faculty:

OVERALL GRADE SUMMARY:

The faculty will calculate the mean of all competencies. This will reflect as the clinical grade in the calculation of the course grade. **A minimum overall clinical evaluation grade of 3.0 is required to pass the course.**

Clinical evaluation grade: _____

Printed Name of Faculty

Signature of Faculty Date

Additional sheets may be added as needed for comments.

Updated 2023

William Paterson University of NJ

Graduate Program in Nursing

Clinical Evaluation Form: Nurse Practitioner Program

Course: NUR 7070 Advanced Nursing Practicum III (FNP's ONLY) – WP Online

Student's Name:		Semester: Fall 1	
Preceptor:			
Preceptor's Agency:			
Patient population: pediatric and obstetric patients			
Evaluation Key: **1** = Does Not Meet Competencies **2** = Inconsistently Meet Competencies **3** = Meets Competencies **4** = Exceeds Competencies	Directions: Place a number in the box that best corresponds with the student's clinical performance for each competency.		
Minimum rating average of 3.0 in each of the domains is required to pass the course. For any score below 3.0 a remediation plan will be put in place along with a student conference.			
*****NUR 7070 students are expected to manage pediatric primary care patients for well-care assessments and episodic visits. Obstetric well patients, along with post-partum follow-up care.**			
COMPETENCIES	**Week 4**	**Week 7**	**Comments**
A. Assessment of health status The nurse practitioner student assesses health status by: Obtain and document subjective patient information including but not limited to relevant medical history (e.g., social, economic, environmental, family, travel, and health promotion/ protection), chief complaint, history of present illness, and review of systems to determine health needs and problems by:			
• Interviewing patient/family/appropriate others	Rate	Rate	
• Reviewing records	Rate	Rate	
• Identifying health and medical risk factors	Rate	Rate	
• Evaluating caregiver competence as appropriate	Rate	Rate	
Obtain and document objective information based on patient age, health history, comorbidities to further define health needs and problems by:			
• Performing physical examinations	Rate	Rate	
• Ordering/performing/supervising diagnostic tests and procedures	Rate	Rate	
• Ordering/performing/supervising screening tests	Rate	Rate	

COMPETENCIES	Week 4	Week 7	Comments
B. Diagnosis The nurse practitioner student makes a diagnosis by:			
Formulate differential diagnoses by: • Synthesizing and analyzing subjective/objective information	Rate	Rate	
• Prioritizing potential differential diagnoses	Rate	Rate	
• Differentiating between normal and abnormal changes associated with development of the pediatric and/or obstetric patient	Rate	Rate	
Establish definitive diagnoses by: • Ordering, performing, and interpreting additional diagnostic testing	Rate	Rate	
• Performing and interpreting additional physical examinations	Rate	Rate	
• Synthesizing and analyzing additional information	Rate	Rate	
C: Develop a Comprehensive Plan of Care The nurse practitioner student, together with the patient/parent/family depending on patient population will formulate a plan of care:			
Establish an age appropriate, patient centered, culturally sensitive, cost-effective plan of care to address the diagnoses by: • Ordering, performing, supervising, and interpreting further tests	Rate	Rate	
• Prescribing/ordering/administering pharmacological therapies appropriate to patient population	Rate	Rate	
• Prescribing/ordering/administering non-pharmacological therapies	Rate	Rate	
• Providing relevant education	Rate	Rate	
• Making referrals to and consultations with other health professionals and community resources	Rate	Rate	
• Providing for appropriate follow-up	Rate	Rate	
• Including patient/family/appropriate others as active participants	Rate	Rate	
• Utilizing evidence-based criteria (for example, quality, safety, and outcomes)	Rate	Rate	
• Considering co-morbidities	Rate	Rate	
• Serving as a patient and family advocate	Rate	Rate	

COMPETENCIES	Week 4	Week 7	Comments
Implementation of the Plan			
Determine the effectiveness of plan of treatment/care based on outcomes by: • Reviewing patient responses(s)	Rate	Rate	
• Collecting additional subjective/objective information as needed	Rate	Rate	
Modify the plan of treatment/care based on outcomes by: • Ordering, conducting, supervising, and interpreting further tests	Rate	Rate	
• Adjusting therapies as necessary to achieve appropriate patient health outcomes.	Rate	Rate	
• Providing additional education	Rate	Rate	
• Making appropriate referrals/consultations	Rate	Rate	
• Providing for appropriate ongoing follow-up	Rate	Rate	
• Including patient/family/appropriate others as active participants	Rate	Rate	

Summary Comments by Preceptor:

Printed Name of Preceptor

Signature of Preceptor Date

Comments by Student:

Printed Name of Student

Signature of Student Date

Comments by Faculty:

OVERALL GRADE SUMMARY:
The faculty will calculate the mean of all the competencies. This will reflect as the clinical grade in the calculation of the course grade. **A minimum overall clinical evaluation grade of 3.0 is required to pass the course.**

Clinical Evaluation Grade: _____

Printed Name of Faculty

Signature of Faculty Date

Additional sheets may be added as needed for comments.

2023

William Paterson University of NJ
Graduate Program in Nursing
Clinical Evaluation Form: Nurse Practitioner Program
Course: NUR 7252/7253 Advanced Nursing Practicum II – WP Online

Student's Name:		Semester:	
Preceptor:			
Preceptor's Agency:			
Evaluation Key: **1** = Does Not Meet Competencies **2** = Inconsistently Meets Competencies **3** = Meets Competencies **4** = Exceeds Competencies	**Directions:** Place a number in the box that best corresponds with the student's clinical performance for each competency.		
Minimum rating average of 3.0 in each of the domains is required to pass the course. For any score below 3.0 a remediation plan will be put in place along with a student conference.			
***NUR 7252 students are expected to manage patients with moderate to high severity health problems, with multiple comorbidities and provide complex chronic care management. ***NUR 7253 students can also manage pediatric and OB patients.			
COMPETENCIES	**Week 4**	**Week 7**	**Comments**
A. Assessment of health status The nurse practitioner student assesses health status by:			
• Obtaining a comprehensive relevant health, social and medical history through patient/family/caregiver interview and reviewing records	Rate	Rate	
• Performing a thorough physical examination based on age and history	Rate	Rate	
• Differentiating between normal and abnormal changes associated with development and aging	Rate	Rate	
• Performing or ordering preventative and diagnostic procedures based on the patient's age and history	Rate	Rate	
• Identifying health risk factors	Rate	Rate	
• Evaluating social determinants of health that may influence the patient's health and wellness.	Rate	Rate	
B. Diagnosis The nurse practitioner student makes a diagnosis by:			
• Utilizing diagnostic reasoning	Rate	Rate	
• Synthesizing and analyzing the collected data from health history and any diagnostic information	Rate	Rate	
• Formulating a differential diagnosis(es) based on the history, physical examination and diagnostic test results/information	Rate	Rate	
• Prioritizing differential diagnoses	Rate	Rate	

C. Development of a comprehensive plan of care The nurse practitioner student, together with the patient and family, establishes an evidence-based, mutually acceptable, cost-conscious, effective plan of care that maximizes health potential or end of life decisions. Formulation of the plan of care includes:			
• Ordering and interpreting additional necessary diagnostic tests	Rate	Rate	
• Establishing priorities to meet the health care needs of the individual, family, and/ or community	Rate	Rate	
• Prescribing or ordering appropriate necessary pharmacologic and non-pharmacologic interventions	Rate	Rate	
• Developing a patient education plan considering the patient's health literacy competencies/learning needs.	Rate	Rate	
• Ordering consultations or referrals based on evidence and standards of professional care and shared decisions with patient/family	Rate	Rate	
D. Implementation of the plan Interventions are based upon established priorities and consistent with the nurse practitioner's specialized education and clinical practice. Actions by nurse practitioner students are:			
• Individualized, recognizing the patient's preferences and abilities	Rate	Rate	
• Consistent with the appropriate plan for care	Rate	Rate	
• Based on scientific, evidenced based principles, theoretical knowledge, and clinical expertise	Rate	Rate	
• Inclusive of teaching and learning opportunities	Rate	Rate	
• Delivers safe patient care	Rate	Rate	
E. Follow-up and evaluation of the patient status The nurse practitioner student maintains a process for systematic follow-up by:			
• Determining the effectiveness of the plan of care with documentation of patient care outcomes	Rate	Rate	
• Reassessing and modifying the plan with the patient and family as necessary to achieve health outcomes and patient goals	Rate	Rate	
F. Professional Role			
• Participates as a member of the health care team	Rate	Rate	
• Collaborates with other health care providers	Rate	Rate	
• Advocates for the advanced practice role of the nurse	Rate	Rate	
• Acts ethically	Rate	Rate	
• Accepts personal responsibility for professional development	Rate	Rate	

Summary Comments by Preceptor:

Printed Name of Preceptor

Signature of Preceptor Date

Comments by Student:

Printed Name of Student

Signature of Student Date

Comments by Faculty:

OVERALL GRADE SUMMARY:
The faculty will calculate the mean of all the competencies. This will reflect as the clinical grade in the calculation of the course grade. **A minimum overall clinical evaluation grade of 3.0 is required to pass the course.**

Clinical Evaluation Grade: _____

Printed Name of Faculty

Signature of Faculty Date

Additional sheets may be added as needed for comments.

Updated 2023

William Paterson University of New Jersey
Department of Nursing
Graduate Nursing Program

Direct Observation of Graduate Student Visit

Name of Student: _____
Course: _____
Clinical Preceptor: _____
Clinical Agency/Unit: _____
Address:_____

Please comment on the following:

I. Student performance/ experience:

II. Appropriateness of clinical placement:

III. Summary statement:

Faculty: _____Date:_____

Approved November 28, 2007 Graduate Program Committee

0

SCHOOL OF NURSING

WILLIAM PATERSON UNIVERSITY

GRADUATE PROGRAM

COURSE END EVALUATION OF CLINICAL SITE

Practicum Site: _____

Preceptor's Name : _____

Course #: _____ Semester: _____

Please complete by checking (√) all that apply in each category.

Type of site: ☐ ru al clinic ☐ private practice ☐ public health other _____

Experiences Available: ☐ a ute ☐ chronic ☐ in-hospital ☐ clinic

This evaluation is based on the course presented to students. **The practicum experience, itself is to be evaluated, not the faculty teaching the course.**

Directions: Rate your **practicum experience** on each item using the following rating scale:

RATING SCALE:

0 = Not Applicable
5 = Strongly Agree
4 = Moderately Agree
3 = Agree
2 = Moderately Disagree
1 = Strongly Disagree

	Rate Experience
1. Institution/Agency offers learning experiences needed to fulfill the objectives of the course.	
2. Agency/Practice offers a representation of age, gender and ethnicity.	
3. Clinical/patient management protocol/guidelines are consistent with the current evidence-based recommendations.	
4. Agency provided an orientation to the policies and procedures.	
5. I would recommend this agency for future practicum student's placements.	

Comments:

SCHOOL OF NURSING

WILLIAM PATERSON UNIVERSITY

GRADUATE PROGRAM

MASTER OF SCIENCE IN NURSING

COURSE END EVALUATION OF THE PRECEPTOR

Practicum Site: _____

Preceptor's Name: _____

Course Name: _____

Semester: _____ Date:

Directions: in the appropriate box for each question. Rate your experience with your **preceptor** on each item using the following rating scale:

RATING SCALE:
0 = Not Applicable
5 = Strongly Agree
4 = Moderately Agree
3 = Agree
2 = Moderately Disagree
1 = Strongly Disagree

	0	5	4	3	2	1
1. Preceptor demonstrates the ability to function as an effective role model.						
2. Preceptor demonstrates knowledge of the role of the advanced practice nurse, nurse educator or nurse administrator.						
3. Preceptor provides availability for consultation, collaboration, and guidance.						
4. Preceptor demonstrates knowledge of the student's own learning plan/objectives and course objectives.						
5. Preceptor and agency staff offer support in meeting clinical objectives.						
6. I would recommend this preceptor for future practicum student placements.						

Optional comments

DEPARTMENT OF NURSING ● UNIVERSITY HALL ROOM 354
300 POMPTON ROAD ● WAYNE, NEW JERSEY 07470-2103
973-720-2253/2673

Clinical Experiences: Assumption of Risk

Clinical experiences (practicum, clinical rotations, supervised practice, and simulations) are a required component of academic programs at William Paterson University, Department of Nursing. These experiences allow students to practice skills and techniques learned in didactic, laboratory and clinical courses as well as develop critical thinking skills that are important for health care providers. Clinical experiences occur in hospitals, clinics, schools, community organizations, and other appropriate settings where students can interact with patients and clients. Students may have the opportunity to be placed in a different setting, but alternative site options are not always available and changes may delay the completion of the student's degree.

Sites selected for students' clinical experiences are required to take reasonable and appropriate measures to protect students' health and safety in the clinical setting. Faculty will develop appropriate policies and procedures relating to student safety and prevention of exposure to disease. Students will have access to appropriate PPE during their clinical experiences. Students will receive training related to potential hazards and prevention techniques. Students have the responsibility to report any potential exposures to the supervisor at their site as well as their WPU faculty member.

However, even with such measures, there are risks inherent to clinical experiences. Potential risks of completing clinical experiences include, but are not limited to:

- Exposure to infectious diseases through blood or other body fluids via skin, mucus membranes or parenteral contact
- Exposure to infectious diseases through droplet or air-borne transmission
- Hazardous chemical exposure
- Radiation exposure
- Environmental hazards, including slippery floors and electrical hazards
- Physical injuries, including back injuries
- Psychosocial hazards
- Offensive, inappropriate, or dangerous conduct by patients or clients, including violence, harassment, and sexual harassment

These risks can lead to serious complications, trauma, bodily injury or death.

SPECIAL NOTICE REGARDING COVID-19

COVID-19, the disease caused by the novel coronavirus, is a highly contagious disease that causes symptoms that can range from mild (or no) symptoms to severe illness. COVID-19 can cause severe and lasting health complications, including death. Everyone is at risk of COVID-19. There is currently no vaccine to prevent COVID-19.

Although anyone who contracts COVID-19 may experience severe complications, the CDC has found that individuals with certain underlying health conditions are at higher risk of developing severe complications from COVID-19. These medical conditions include: chronic lung disease, asthma, conditions that cause a person to be immunocompromised, obesity, diabetes, chronic kidney disease and liver disease.

COVID-19 is believed to spread primarily by coming into close contact with a person who has COVID-19 and may also spread by touching a surface or object that has the virus on it, and then touching one's mouth, nose or eyes.

Much remains unknown about COVID-19. Further research may reveal additional information regarding the disease, including how it spreads and what health complications, including long-term complications, can result from contracting it.

Participating in clinical experiences, even when wearing recommended PPE, may increase the risk of contracting COVID-19, and these risks cannot be eliminated.

Credit: This form was adopted from the University of Oklahoma, Oxley College of Health Sciences

ACKNOWLEDGEMENT OF RISK FORM

I certify that I have carefully read and understand this document. I acknowledge and understand that, as explained in this document, my degree program requires the participation in clinical experiences, and that such participation carries risks that cannot be eliminated. I fully understand these risks.

I understand that it is my responsibility to follow all instructor and supervisor instructions and take all available precautions so that the risk of exposure is minimized. I will follow all program specific information relating to prevention of diseases.

Knowing these risks, I certify that I desire to pursue my chosen degree program, including the participation in clinical experiences. I expressly agree and promise to accept and assume all risks associated with doing so. I am voluntarily agreeing to be bound by this document's terms.

If for any reason, I do not agree to the terms of this document, I will not be able to continue with the nursing program at William Paterson University.

_____ _____

Student Signature Date

_____

Student (print name)

If Student is under 18 years of age, Parent/Guardian must also sign:

_____ _____

Parent/Guardian Signature Date

_____

Parent/Guardian (print name)

Attestation for MSN Programs

Students in the Online MSN and PM Programs at William Paterson University must be aware of and comply with the following:

License and Criminal Background Check

- Students are expected to comply with the electronic fingerprinting requirements for the purpose of obtaining federal and state criminal history checks.
- RN license and criminal background check(s) are expected to be in good standing at the time of program application.
- Students are also expected to maintain their license and criminal background history in good standing throughout the duration of the program—from program acceptance until program completion.
- Students are responsible for any costs incurred related to licensure and fingerprinting.
- Students are obligated to notify the **Online Graduate Nursing Coordinator or Online Clinical Coordinator** at William Paterson University of any changes in status of either RN license or criminal history/changes in criminal background check.
- If a change in status of either RN license or criminal background history occurs and the student should fall out of good standing, the student should understand they may not be eligible to complete the program.
- Please note that this is not inclusive of all penalties that may arise related to Board of Nursing requirements for the state in question.

Change in Primary Residence

- It is important for students to keep their address current.
- Students are expected to maintain residence in [insert state/approved states here] throughout the duration of the program.
- Any change in residence out of the state may result in student ineligibility to complete the program, based on states of operating authority for William Paterson University.
- In addition to notifying the [insert state] Board of nursing within [specify time period i.e. 30 days], students are obligated to notify the **Online Graduate Coordinator or Online Clinical Coordinator** at William Paterson University of any change in address.
- Failure to maintain an accurate address throughout the duration of the program can lead to an adverse action against program completion and application for licensure.

Attestation for MSN Programs

Attestation

Students are expected to submit the following attestation.

Instructions: Initial each statement, and electronically sign and date the end of the document.

I_____possess an unencumbered RN license from the state of_____. My primary residence is in the state of__. I have submitted the required background check(s) as of _____and verify that my criminal history is in good standing.

___I have read and understand the university requirements for RN licensure, criminal background history, and maintaining residence in the state of_____.

___I understand that I am expected to maintain my RN license and criminal background in good standing, and that I as the student am responsible for any associated costs related to licensure and criminal background checks.

___I understand that I am obligated to notify the university of any change in status that may impact either my RN license or my criminal background history, and that any such changes in status (regardless of notification) may preclude my completion of the program.

___I understand that I am expected to maintain residence in the state of____for the entire duration of the program—from program acceptance through program completion.

___I understand that I am expected to notify the University of any Change in address.

___I understand that any change in residence out of the state may preclude my completion of the program, based on states of operating authority for_____.

___I understand that university requirements may change at any time and it is my responsibility to keep abreast of and comply with any changes and/or updates.

_____ _____

Student Signature Date

Graduate Programs in Nursing
Contact Persons

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Handbook Disclaimer

Although the provisions of the William Paterson University Preceptor Handbook are as accurate and complete as possible, the School of Nursing Graduate Program reserves the right to change any provision herein without actual notice if circumstances so warrant. Every effort will be made to keep students advised of such changes. However, the student has the responsibility to know what changes havebeen made to the Preceptor Handbook and to meet completely and successfully the requirements of the graduate nursing program by reviewing updates in the handbook each semester.