NURSE ANESTHESIA PROGRAM (DNP)
FACULTY AND PRECEPTOR MANUAL
MARCH 2013

4301 Jones Bridge Road
Bethesda, MD 20814-4799
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Introduction

Dear Clinical Faculty, Preceptors, and Clinical Coordinators:

Thank you for your continued support and willingness to assist in the clinical education of Uniformed Services University Nurse Anesthesia Program students. Your expert guidance provides our students with the opportunity to apply their newly acquired clinical skills and knowledge in preparation for an advanced practice nursing role. As a busy professional with numerous demands and responsibilities, your commitment to this process is commendable and demonstrates your personal dedication to the continued development of qualified nurse anesthesia professionals and the nurse anesthesia profession, as a whole. Each student will gain confidence and validation through your exemplary teaching, coaching, and role modeling. It is difficult to imagine successfully preparing qualified professionals without the collaboration of our anesthesia colleagues!

This Guide contains documents to support the clinical affiliation between our program and your organization. Please review the information enclosed in this handbook. This Guide will be reviewed and updated on a regular basis, so please feel free to make comments for future improvement. Should you have any suggestions that will make the clinical experience more valuable for students, please contact any Nurse Anesthesia faculty member.

The USU Nurse Anesthesia faculty values your service as an excellent clinician and clinical Educator and welcomes your recommendations for making this role more effective and satisfying. Please feel free to contact us if you have any questions or concerns.

<table>
<thead>
<tr>
<th>CDR Robert Hawkins, USN</th>
<th>Lt. Col. Alan Todd, USAF</th>
<th>Dr. Matthew D’Angelo, CRNA, DNP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Director</td>
<td>Director of Clinical Education</td>
<td>Director of Evaluations and Assistant Program Director</td>
</tr>
<tr>
<td>USU Nurse Anesthesia Program</td>
<td>USU Nurse Anesthesia Program</td>
<td>USU Nurse Anesthesia Program</td>
</tr>
<tr>
<td><a href="mailto:Robert.Hawkins@usuhs.mil">Robert.Hawkins@usuhs.mil</a></td>
<td><a href="mailto:Larry.Todd@usuhs.edu">Larry.Todd@usuhs.edu</a></td>
<td><a href="mailto:matthew.dangelo@usuhs.edu">matthew.dangelo@usuhs.edu</a></td>
</tr>
<tr>
<td>301-295-1199</td>
<td>301-295-1039</td>
<td>301-319-0657</td>
</tr>
</tbody>
</table>
**Statement of Accreditation**

The Middle States Commission on Higher Education accredits the Uniformed Services University of the Health Sciences.

The Commission on Collegiate Nursing Education accredits the Uniformed Services University Graduate School of Nursing.

The Council on Accreditation of Nurse Anesthesia Educational Programs, a specialized accrediting body recognized by the Council on Postsecondary Education and the U. S. Department of Education, accredits the Nurse Anesthesia Program. The Council on Accreditation of Nurse Anesthesia Educational Programs (COA) approved the DNP for the USU Nurse Anesthesia. The Nurse Anesthesia program is accredited to offer a MSN and DNP by the COA. The address for the COA is 222 Prospect Avenue, Park Ridge, IL, 60068. The COA phone number is (847) 655-1160, and their e-mail address is accreditation@coa.us.com. Nurse anesthesia students matriculating in May of 2013 and after will enter the DNP program.

No person shall misrepresent the status of program accreditation. The accreditation status is public information and may be released to the community of interest. Students, prospective students and affiliating agencies are referred to the documentation published annually by the accrediting agencies listing all accredited programs in the country.

**Rights and Responsibilities of Program Stakeholders**

**Patients:** Students are required to introduce themselves as a Student Registered Nurse Anesthetist or Nurse Anesthesia Resident. This is required and enforced by clinical faculty as instructed in the USUHS RNA Program Faculty-Preceptor Manual.

**Applicants:** The Uniformed Services University Graduate School of Nursing (GSN) admits qualified students regardless of age, sex, race, handicap, color, national or ethnic origin to all programs within the GSN. The GSN does not discriminate on the basis of age, sex, religion, race, sexual orientation, handicap, color, national or ethnic origin in administration of its educational policies, admissions policies or other school administered programs.

**Students:** STUDENT RIGHTS AND RESPONSIBILITIES (Student Handbook, section III, A)

Students have a right to expect the following:

- That all materials shall be factual and fairly presented, and contain clearly understandable, detailed information pertaining to the program content, graduation requirements, and student rights and responsibilities.
- Fair and non-discriminatory practices in the selection process of the program
- That upon acceptance into a program, they will be provided the quality of education necessary to fulfill the objectives of the program.
- That they will not be exploited relative to time commitment of pay for profit of the conducting institution.
• That enrollment in the program of study is equivalent to the signing of a contract between the student and the program.
• That student failure to achieve goals within the expected time based on date of enrollment and projected graduation date are reviewed and dealt with on an individual basis.
• That they will receive due process when contesting evaluative decisions. Fair and accurate evaluations of their progress in the educational program and to be kept informed of the status of the progress.
• Fair and impartial treatment during all testing, evaluation and grading processes.
• Access to transcripts of their academic and clinical achievements.
• Upon their request have verified copies of transcripts to be furnished to institutions, agencies, or others specified by the student or graduate.
• Clearly stated terminal objectives and graduation requirements.
• A fair and impartial due process mechanism, which includes an appeal process

**Faculty:** Rights can be found within the Administrative Support Division and the USUHS EEO office [http://www.usuhs.mil/asd](http://www.usuhs.mil/asd)

**Institutions:** Memorandum of Understandings (MOU’s) are established between the Program and the Training Institution. Expectations between the Program and the Training Institution are clearly defined to the satisfaction of both parties.

**Accrediting Agency:**

1. The accrediting agency has the right to expect that the program will adhere to the Standards for Accreditation as published by the accrediting agency.
2. The accrediting agency has the right to expect open and honest replies to inquiries.
3. The accrediting agency has the right to expect access to the program’s academic and clinical sites for evaluation/accreditation purposes.

**Equal Opportunity and Sexual Harassment**
The USU policy is to provide equal opportunity in all employment matters for all persons; to prohibit discrimination because of race, color, age, religion, sex, national origin, physical or mental handicap, and/or reprisal for participation in protected EEO activity; and to promote the full realization of equal opportunity through continuing affirmative employment programs.

Sexual harassment is prohibited and will not be tolerated at USU. All personnel, military and civilian, will be provided a work environment free of sexual harassment. Through aggressive training programs, thorough investigative processes, and decisive resolution systems, USU will continue to take all necessary measures to eliminate and prevent sexual harassment.
**USUHS Policy for the Maintenance and Release of Student Academic Records and Information**

It is the intent of the USU GSN Nurse Anesthesia program to maintain confidential student academic information. It is expected that all information pertaining to student academic and clinical performance will be safeguarded in accordance with USU policy PPM-002-2013 (REG) and the Federal Privacy Act.

It is the responsibility of the faculty, student preceptor and those affiliated with the USU GSN RNA Program to adhere strictly to these policies and report violations to the Program Director or designee immediately.

http://www.usuhs.mil/oac/privacyact.html

History of Uniformed Services University

The 92nd Congress, with the passage of Public Law 92-426 providing the authority to grant appropriate advanced degrees, established the Uniformed Services University of the Health Sciences (USU). The 25-year effort of Congressman F. Edward Hébert (D-LA) led to the congressional passage of legislation that created USU. The University was initially established to provide a comprehensive education in medicine to select young men and women who demonstrated potential for and commitment to careers as Medical Corps Officers in the Uniformed Services. The University is organized under the Department of Defense, and is advised by a Board of Regents, composed of 15 members prominent in the fields of health and education, nine of whom are appointed by the President with the advice and consent of the Senate. In 1983 Congress passed legislation officially designating the School of Medicine at USU as the F. Edward Hébert School of Medicine.

The University's developmental progress has been marked. Four years after the passage of the legislation creating the University, the School of Medicine admitted its charter first-year class of 32 students in the fall of 1976. Sixty-eight medical students were admitted in 1977 and 108 in 1978. Current enrollment is 165 per class. The Graduate Program in the Biomedical Sciences has also grown steadily since the first graduate students were admitted in 1977. In 1994 there were 106 graduate students enrolled in Doctoral and Master's programs in the basic medical sciences.

The Graduate School of Nursing (GSN) is the newest School at USU. In the fall of 1992, the Department of Defense received the authority along with an appropriation to plan and implement a nurse practitioner education program at USU. The intent of the legislation was to meet the needs for advanced practice nurses in the Uniformed Services, which include the Army, Navy, Air Force and U.S. Public Health Service.

Since graduate degrees in nursing are granted only by a School of Nursing, the creation of a GSN at USU was appropriate to grant the Master of Science in Nursing (MSN) degree. The program areas initially targeted were Family Nurse Practitioner and Nurse Anesthesia. The Family Nurse Practitioner (FNP) Program admitted its first students in August 1993. The Nurse Anesthesia (RNA) program admitted students in June of 1994. The Clinical Nurse Specialist (CSN) Perioperative Program admitted students in June of 2003. The Adult Psychiatric Mental Health Practitioner (PMH-NP) Program admitted students in June of 2008. Students are prepared as future federal advanced practice nurses. Excellence in clinical practice along with the ability to respond to military mobilization, humanitarian needs and disaster relief during times of war and peace are the hallmarks of the graduates of this program.

The GSN Doctoral Program was established in 2002 for the purpose of meeting an evolving need for nursing research relevant to the federal health care system and military operational environments. This program prepares nurse scientists. Established in order to provide nurses with the opportunity to study in this unique environment where federal health care and military operational research is already a priority, nurses prepared in this program will be uniquely qualified leaders in research, education,
administration and clinical practice in federal health care and military operations. Another goal of this program is to prepare faculty to teach and conduct relevant research in federal and military health care.

Mission of the USU
The Uniformed Services University of the Health Sciences is the Nation's federal health services university and is committed to excellence in military medicine and public health during peace and war. We provide the Nation with health professionals dedicated to career service in the Department of Defense and the United States Public Health Service and with scientists who serve the public good. We serve the uniformed services and the Nation as an outstanding academic health sciences center with a worldwide perspective for education, research, service, and consultation; we are unique in relating these activities to military medicine, disaster medicine, and military medical readiness.

USU Vision
We are the Nation’s federal health sciences University, recognized as an outstanding scholarly education center. Our component schools and institutes are dedicated to excellence and innovation in education, research, and service worldwide.

We are a University that grants degrees in the health sciences at all levels, producing outstanding scientists and healthcare practitioners for the Nation.

We are recognized as the preeminent center for the study of military medicine, tropical disease, disaster medicine, and adaptation to extreme environments.

We are a major coordinating center for consultation, support, and advocacy education and operational readiness training in the health sciences throughout the careers of uniformed medical personnel.

We have cooperative, mutually supportive and valued interaction with DOD hospitals that enhances undergraduate education, graduate medical education, research programs and patient care.

We have a partnership with the Henry M. Jackson Foundation for the Advancement of Military Medicine that enriches our scholarship and contributes to our fiscal stability and maximum development.

We attract a diverse population of qualified individuals and encourage their personal and professional development. Our students, faculty and staff appreciate that they are essential to the work and success of each other and the University.

We prepare and inspire our students, faculty and staff for a lifetime of learning, leadership, and service.

Our programs, scholarly activities, faculty and graduates make outstanding contributions throughout the medical and scientific communities.
**Mission of the GSN**

The Graduate School of Nursing is a diverse, interdisciplinary community providing the nation with the highest quality advanced practice nurse clinicians, scientists and scholars dedicated to Federal Health Service.

**Nurse Anesthesia Program**

The mission, purpose, and goals of the Nurse Anesthesia Program are derived from, and consistent with, the mission, purpose, and goals of the Graduate School of Nursing (GSN) and Uniformed Services University of the Health Sciences (USU).

**RNA Mission**

The Mission of the USU Nurse Anesthesia Program is to graduate safe, competent Nurse Anesthetists for the uniformed services who are able to practice independently to meet the anesthesia needs of the nation’s uniformed members and their beneficiaries. The unique curriculum emphasizes the role of federal health agencies in response to worldwide missions.

**RNA Program Philosophy**

The Nurse Anesthesia Program is dedicated to the education of nurse anesthetists in the uniformed services at the graduate level. The uniformed services require that graduates independently provide quality anesthesia care in diverse settings throughout the world. Therefore the curriculum is designed to integrate scientific principles with anesthesia theory and practice, stressing unique aspects of the federal health services. An emphasis is placed on statistics and research methodology enabling the student to critically analyze anesthesia literature, evaluate problems in anesthesia and prepares the student to conduct research, ensuring a life-long evidence-based practice.
**DNP Design**

The 36-month front-loaded, regionalized program consists of two phases. The 15 month Phase I didactic component, conducted on the campus of USU, provides the student with the academic and professional education necessary for entrance into the clinical arena. All content areas identified in the Standards and Guidelines for Accreditation of Nurse Anesthesia Educational Programs are introduced during Phase I. The 21 month Phase II clinical component focuses on the application of science and research to clinical anesthesia. Students are assigned to a federal medical treatment facility as their principal clinical training site. Individual clinical training sites may be eliminated or added as needed to assure quality clinical education. The clinical phase is designed to guide graduate students toward the goal of functional autonomy by demanding that students care for patients in a manner reflecting comprehensive integration of scientific principle and, anesthesia theory, as well as, maximal independent decision-making appropriate to each student’s level of experience.

**GSN-DNP Terminal Competencies**

<table>
<thead>
<tr>
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<th>Synonym</th>
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<tbody>
<tr>
<td>1</td>
<td>Synthesize knowledge through integration of theories and concepts from nursing science with those of natural and social sciences to analyze complex health and health care delivery phenomenon within the military and federal health care systems.</td>
</tr>
<tr>
<td>2</td>
<td>Evaluate innovative practice approaches in military and federal health care systems based on nursing theories and theories from other disciplines to optimize the highest level of nursing practice and wholeness of health for individuals and systems.</td>
</tr>
<tr>
<td>3</td>
<td>Lead development of evidence based quality improvement initiatives across systems to optimize safety, cost effectiveness and sustainable system change in a dynamic global environment, addressing ethical dilemmas and health disparities as appropriate.</td>
</tr>
<tr>
<td>4</td>
<td>Demonstrate the process of appraisal, synthesis, implementation, evaluation and dissemination of evidence to improve practice, healthcare and/or system outcomes through collaboration, use of analytic methods and current technologies.</td>
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<tr>
<td>5</td>
<td>Evaluate consumer health information sources, clinical decision tools, healthcare information technologies and monitor outcomes for clinical decision making to improve and collaboratively transform healthcare in accordance with ethical and legal standards.</td>
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<tr>
<td>6</td>
<td>Critically appraise the development, implementation and evaluation of health policy from the perspective of public, private, military and/or global communities of interest.</td>
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<tr>
<td>7</td>
<td>Advocate for nursing, social justice, equity and ethical policies within the federal, military, healthcare and policy communities to improve care delivery and outcomes.</td>
</tr>
<tr>
<td>8</td>
<td>Collaborate within inter-professional teams to integrate peer review, practice guidelines, practice models, health policy, and standards of care to facilitate change and improve outcomes within complex healthcare systems.</td>
</tr>
</tbody>
</table>
Synthesize appropriate scientific data and concepts related to population health, psychosocial dimensions, and cultural diversity, and evaluate care delivery models to promote health, prevent disease and improve outcomes in individuals, communities, and populations.

Execute the autonomous role of the advance practice nurse using critical analysis, cultural sensitivity, ethical principles and scientific evidence to optimize patient outcomes and organizational effectiveness.

**RNA PROGRAM SPECIFIC TERMINAL OUTCOME COMPETENCIES**

*Patient safety is demonstrated by the ability of the graduate to:*

- Be vigilant in the delivery of patient care.
- Protect patients from iatrogenic complications.
- Participate in the positioning of patients to prevent injury.
- Conduct a comprehensive and appropriate equipment check.
- Utilize universal precautions and appropriate infection control measures.

*Individualized perianesthetic management is demonstrated by the ability of the graduate to:*

- Provide care throughout the perianesthetic continuum.
- Use a variety of current anesthesia techniques, agents, adjunctive drugs and equipment while providing anesthesia.
- Administer general anesthesia to patients of all ages and physical conditions for a variety of surgical and medically related procedures.
- Provide anesthesia services to patients, including trauma and emergency cases.
- Administer and manage a variety of regional anesthetics.
- Function as a resource person for airway and ventilatory management of patients.
- Possess current advanced cardiac life support (ACLS) recognition.
- Possess current pediatric advanced life support (PALS) recognition.
- Deliver culturally competent perianesthetic care throughout the anesthesia experience.

*Critical thinking is demonstrated by the graduate’s ability to:*

- Apply theory to practice in decision-making and problem solving.
- Provide nurse anesthesia care based on sound principles and research evidence.
- Perform a preanesthetic assessment and formulate an anesthesia care plan for patients to whom they are assigned to administer anesthesia.
- Identify and take appropriate action when confronted with anesthetic equipment-related malfunctions.
- Interpret and utilize data obtained from noninvasive and in invasive monitoring modalities.
- Calculate, initiate, manage fluid and blood component therapy.
- Recognize and appropriately respond to anesthetic complications that occur during the perianesthetic period.
- Pass the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA) certification examination in accordance with NBCRNA policies and procedures.

*Communication skills are demonstrated by the graduate’s ability to:*

- Effectively communicate with all individuals influencing patient care.
- Utilize appropriate verbal, nonverbal, and written communication in the delivery of perianesthetic care.
Professional role is demonstrated by the graduate’s ability to:

- Participate in activities that improve anesthesia care.
- Function within appropriate legal requirements as a registered professional nurse, accepting responsibility and accountability for his or her practice.
- Interact on a professional level with integrity.
- Teach others.
- Participate in continuing education activities to acquire new knowledge and improve his or her practice.
- Demonstrate knowledge of wellness and chemical dependency in the anesthesia profession through completion of content in wellness and chemical dependency.

Additional doctoral competencies:

**Biological Systems, Homeostasis and Pathogenesis**

- Analyze best practice models for nurse anesthesia patient care management through integration of knowledge acquired from arts and sciences within the context of the scope and standards of nurse anesthesia practice.
- Use a systematic outcomes analysis approach in the translation of research evidence and data in the arts and sciences to demonstrate they will have the expected effects on nurse anesthesia practice.

**Professional Role**

- Demonstrate ability to undertake complex leadership roles in nurse anesthesia.
- Demonstrate ability to provide leadership that facilitates intraprofessional and interprofessional collaboration.
- Integrate critical and reflective thinking in leadership style.
- Demonstrate ability to utilize a variety of leadership principles in the management of situations.

**Healthcare Improvement**

- Use evidence based practice to inform clinical decision making in nurse anesthesia.
- Evaluate how public processes impact the financing and delivery of healthcare.
- Develop and assess strategies to improve patient outcomes and quality of care.

**Practice Inquiry**

- Demonstrate the ability to assess and evaluate health outcomes in a variety of populations, clinical settings, and systems.
- Demonstrate ability to disseminate research evidence.
- Complete a scholarly work that demonstrates knowledge within the area of academic focus.

**Technology and Informatics**

- Use information systems/technology to support and improve patient care and healthcare systems.
- Critically evaluate clinical and research databases used as clinical decision support resources.

**Public and Social Policy**

- Advocate for health policy change to improve patient care and advance the specialty of nurse anesthesia.

**Health Systems Management**

- Analyze the structure, function and outcomes of healthcare delivery systems and organizations.
• Analyze business practices typically encountered in nurse anesthesia delivery settings.
• Analyze risk management plans based on information systems to promote outcome improvement for the patient, organization and community.

**Ethics**
• Apply ethically sound decision-making.
• Inform the public of the role and practice of the doctoral-prepared CRNA and represents themselves in accordance with the Code of Ethics for CRNAs.
• Fulfill the obligation as a doctoral-educated professional to uphold the Code of Ethics for CRNAs.

**DNP Outcome Criteria and Measures**
The graduate, upon completion of the program will be able to exhibit the following, either through written and/or oral examination or through behavioral demonstrations.

<table>
<thead>
<tr>
<th>CRITERIA</th>
<th>MEASURE</th>
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</table>
| 1. Comply with the GSN requirements for graduation. | - Completion of a minimum of 36 months of full time study.  
- Completion of 101 credit hours in the designated specialty.  
- Completion of a scholarly project.  
- Successful completion of practicum requirements. |
| 2. Comply with program requirements for graduation. | - Overall GPA is 3.0 or above  
- Minimum GPA of 3.0 (grade of B or better) is attained in all letter-graded courses and passing grade in pass/fail courses.  
- Completion of all required case experiences.  
- Successfully meets the GSN and RNA terminal competencies.  
- Receives recommendation for graduation from the Program Director. |
| 3. Meet or exceed COA and NBCRNA case requirements. | - Completion of all required case experiences. |
| 4. Satisfy eligibility requirements to write the Certification Examination. | - Completes graduation requirements.  
- Completes required case experiences.  
- Hold current BCLS, ACLS and PALS certificates. |
| 5. Demonstrate the academic capability to pass the Certification Examination. | - Uses a variety of current anesthesia techniques, agents, adjunctive drugs, and equipment while providing anesthesia to patients of all ages and physical conditions for a variety of surgical and medically related procedures as evidenced by the clinical case experiences, transcripts. Completion of all course work, and summative clinical evaluations. |
| 6. Practice independently to meet the anesthesia needs of the nation’s uniformed members and their beneficiaries. | - Meets the GSN and Nurse Anesthesia program’s terminal competencies.  
- Recommended by the Program Director for graduation. |
**DNP Course Content Map**

<table>
<thead>
<tr>
<th>Course #</th>
<th>Nursing Core Courses Required for:</th>
<th>Credits</th>
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</thead>
<tbody>
<tr>
<td>GSN701</td>
<td>Leadership Role in Interdisciplinary Health Care</td>
<td>1</td>
</tr>
<tr>
<td>GSN702</td>
<td>Organizational and Systems Leadership in Healthcare</td>
<td>4</td>
</tr>
<tr>
<td>GSN703</td>
<td>Ethics and Policy in Federal Health Systems</td>
<td>3</td>
</tr>
<tr>
<td>GSN704</td>
<td>Population Health and Epidemiology in Advanced Practice</td>
<td>4</td>
</tr>
<tr>
<td>GSN705</td>
<td>Health Economics and Advanced Practice</td>
<td>2</td>
</tr>
<tr>
<td>GSN706</td>
<td>Healthcare Informatics</td>
<td>3</td>
</tr>
<tr>
<td>GSN901</td>
<td>Healthcare Research &amp; Evidence Based Practice</td>
<td>2</td>
</tr>
<tr>
<td>GSN902</td>
<td>Statistical Measures and Analytic Methods: Application and Critique</td>
<td>3</td>
</tr>
<tr>
<td>GSN903</td>
<td>Translating Evidence Into Practice</td>
<td>3</td>
</tr>
<tr>
<td>GSN906</td>
<td>Scholarly Inquiry Project(taken over 3 semesters at 2 credits each)</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td><strong>Total Credits</strong></td>
<td><strong>31</strong></td>
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<thead>
<tr>
<th>Course #</th>
<th>Advanced Practice Core Courses Required for:</th>
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<tbody>
<tr>
<td>GSN601</td>
<td>Advanced Anatomy</td>
<td>3</td>
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<tr>
<td>GSN602</td>
<td>Advanced Health Assessment</td>
<td>3</td>
</tr>
<tr>
<td>GSN603</td>
<td>Advanced Physiology for Advanced Nursing Practice</td>
<td>3</td>
</tr>
<tr>
<td>GSN604</td>
<td>Applied Pathophysiology for Advanced Nursing Practice</td>
<td>3</td>
</tr>
<tr>
<td>GSN605</td>
<td>Advanced Pharmacology for Advanced Nursing Practice</td>
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<tr>
<th>Course #</th>
<th>Specialty Specific Courses Required for:</th>
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<tbody>
<tr>
<td>RNA602</td>
<td>Applied Biochemistry for Nurse Anesthetists</td>
<td>3</td>
</tr>
<tr>
<td>RNA601</td>
<td>DNP-Basic Anesthetic and Pharmacologic Principles of Anesthesia</td>
<td>5</td>
</tr>
<tr>
<td>RNA603</td>
<td>DNP-Advanced Anesthetic and Pharmacologic Principles of Anesthesia</td>
<td>5</td>
</tr>
<tr>
<td>RNA604</td>
<td>DNP-Clinical Pharmacology and Coexisting Disease of Anesthesia</td>
<td>3</td>
</tr>
<tr>
<td>RNA801</td>
<td>DNP-Clinical Practicum and Seminar for Nurse Anesthesia Practice I</td>
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</tr>
<tr>
<td>RNA802</td>
<td>DNP-Clinical Practicum and Seminar for Nurse Anesthesia Practice II</td>
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<tr>
<td>RNA803</td>
<td>DNP-Clinical Practicum and Seminar for Nurse Anesthesia Practice III</td>
<td>8</td>
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<tr>
<td>RNA804</td>
<td>DNP-Clinical Practicum and Seminar for Nurse Anesthesia Practice IV</td>
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<tr>
<td>RNA805</td>
<td>DNP-Clinical Practicum and Seminar for Nurse Anesthesia Practice V</td>
<td>8</td>
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<tr>
<td>RNA806</td>
<td>DNP-Clinical Practicum and Seminar for Nurse Anesthesia Practice VI</td>
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<tr>
<td></td>
<td><strong>Total Credits</strong></td>
<td><strong>54</strong></td>
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</table>

**Overall Credit Hours 101**

**GSN Clinical Sites**

Current clinical facilities utilized for clinical learning experiences by GSN programs provide rich and varied opportunities for the attainment of the curriculum objectives. Clinical sites selected for student learning experiences in the GSN programs are chosen to assist students in achieving the objectives of each specific course and specialty as well as attaining the terminal objectives of the program as reflected in the current student handbook. Clinical facilities must be willing to enter into an agreement with the GSN before a clinical experience can be initiated. Written Memoranda of Understanding (MOUs) are maintained for facilities where GSN students have a clinical experience and
such documents are kept in the Office of the Dean where they are updated periodically. MOUs should contain language permitting accreditors of the program access during accreditation visits. An annual review of clinical facilities is conducted by the GSN clinical teaching faculty, who assesses the quality of each clinical experience including clinical facilities, preceptors, and patient base, recommending any changes to the appropriate program director. A separate Business Associate Agreement with the Council on Accreditation and a HIPPA Hi-Tech Agreement may be required for clinical sites.

**Nurse Anesthesia Clinical Sites**

The Nurse Anesthesia Program for clinical practice utilizes numerous clinical facilities for its masters’ students. All clinical experiences are under the supervision of the Nurse Anesthesia Program Director. In addition, each site has a designated Site Director who is responsible for the day-to-day clinical supervision of the GSN students assigned to that site. Upon completion of Phase I, Didactic Education, students are assigned to a military or public health medical center as their primary clinical education site. Due to site limitations, not all clinical cases required for graduation may be obtained at the primary site (Required Site) so “out-rotations” with other medical institutions, hereafter referred to as “Enrichment Sites” have been arranged. These out-rotations are managed through Memoranda of Understanding and Training Affiliate Agreements. The enrichment sites provide experiences not available at some of the military facilities, such as trauma, large volume pediatrics, and cardiovascular experiences. All sites are approved by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA).

1. **Fort Belvoir Community Hospital and Walter Reed National Military Medical Center.** These two major military hospitals are located in the National Capitol Region. They are located in the Washington metropolitan area and are tertiary care centers dedicated to graduate medical education. Rotations are required for obstetrics, pediatrics, trauma, and cardiothoracic experiences. Rotation sites may include the following:
   
   a. Kimbrough Ambulatory Care Center, Fort Meade MD
   b. Malcolm Grow Medical Clinic, Joint Base Andrews, MD
   c. Washington Veterans Medical Center, Washington DC
   d. R.A. Cowley Shock Trauma Center, Baltimore MD
   e. Naval Medical Center Portsmouth, Portsmouth VA
   f. Beebe Medical Center, Lewes, DE
   g. Dayton Children’s Hospital, Dayton OH

2. **Naval Medical Center, San Diego, California**

NMC San Diego is a tertiary care center dedicated to graduate medical education. Students attend out-rotations for pediatrics, trauma, and cardiovascular experience. Out-rotation sites include:

   a. Kaiser Permanente Sunset, San Diego CA
   b. Arrowhead Regional Medical Center, Los Angeles CA
   c. Naval Hospital Camp Pendleton, Oceanside CA
   d. Forrest General Hospital, Hattiesburg MS
3. **Wright-Patterson Air Force Base Medical Center, Dayton, OH**

Wright-Patterson Medical Center is a major Air Force teaching hospital located near Dayton, Ohio. As a member of the Dayton Area Graduate Medical Education Consortium, the Medical Center also serves a training site for a number of civilian residency programs. Students attend out-rotations for obstetrics, trauma, cardiothoracic, and pediatrics experiences. The following facilities are utilized:

a. Kettering Medical Center, Dayton OH  
b. Miami Valley Hospital, Dayton OH  
c. Dayton Children’s Medical Center, Dayton OH  
d. Veterans Medical Center, Dayton OH  
e. Landstuhl Medical Center, Landstuhl Germany

4. **Mike O’Callaghan Federal Hospital, Nellis Air Force Base, Las Vegas, NV**

Mike O’Callaghan Federal Hospital is a major Air Force teaching hospital located near Las Vegas, NV. Students attend out-rotations for obstetrics, trauma, cardiothoracic, neurosurgical and pediatrics experiences. The following facilities are utilized:

a. Forrest General Hospital, Hattiesburg MS  
b. Landstuhl Medical Center, Landstuhl Germany

5. **Alaska Native Medical Center, Anchorage, AK**

Alaska Native Medical Center is a large Indian Health Service hospital located near Anchorage, Alaska with twelve anesthetizing locations, offering a full range of surgical cases with rotations provided for experience in cardiothoracic and regional experience. The following facilities are utilized:

a. Joint Base Ft Richardson/Elmendorf Hospital, Anchorage AK  
b. Forest General Hospital, Hattiesburg MS

6. **Naval Medical Center, Portsmouth, VA**

NMC Portsmouth is a tertiary care center dedicated to graduate medical education. Students attend rotations for neurosurgical, trauma and cardiothoracic experiences, facilities include:

a. Veterans Medical Center, Asheville NC  
b. Sentara Careplex, Hampton VA  
c. Norfolk Sentara Hospital, Norfolk VA

7. **Naval Hospital, Jacksonville, FL.**

Naval Hospital Jacksonville is a center providing graduate medical education. Students attend out-rotations for neurosurgical, trauma and cardiothoracic and pediatric experiences, enrichment sites include:

a. Flagler, St. Augustine, FL
b. University of Florida, Shands Medical Center, Jacksonville FL  
c. Kosair Children’s Hospital, Louisville KY  

**Rights and Responsibilities of the Affiliating Institution**

The affiliating institutions have MOU’s or TAA’s that define the relationship between the Program and the affiliating institution. To obtain a copy of the current MOU’s/TAA please contact the clinical site coordinator and/or program director.
**Position on SRNA supervision and clinical hours**

1. The clinical practicum phase of the Uniformed Services University (USU) Graduate Program in Nurse Anesthesia consists of one year of Phase I didactic study, followed by eighteen months of Phase II intensive clinical training. The Phase II clinical practicum takes place in multiple Army, Navy, Air Force, Public Health Service, Veteran Affairs, and civilian medical centers with graduate students addressed as Student Registered Nurse Anesthetists (SRNA). Phase II is an intensive clinical program in which the SRNAs learn to deliver all types of anesthesia to patients of all age ranges, all American Society of Anesthesiologists (ASA) categories, for all specialties in surgery ranging from minor to the most complex. Upon completion of Phase II, SRNAs will be fully capable of independent anesthesia practice.

2. Clinical mentoring and supervision of all anesthetics delivered by SRNAs during the Phase II clinical practicum is critical to their learning process and ultimately patient care. For all SRNA administered anesthetics, the licensed/credentialed provider (Certified Registered Nurse Anesthetist (CRNA) or Anesthesiologist) assigned to the case is ultimately responsible for all aspects of care. The acceptable supervision ratio for SRNAs by the licensed/credentialed provider is typically 1:1 and a 2:1 supervision ratio is the minimal acceptable ratio. This credentialed provider or another temporarily assigned credentialed provider supervising the SRNA is required to be immediately available throughout the entire anesthetic. In nonanesthetizing areas students will always be supervised by an appropriately credentialed provider.

3. The supervising Phase II CRNA or Anesthesiologist will direct the SRNA’s anesthesia care and provide an appropriate level of supervision based on the nature of the patient’s condition, the likelihood of major changes in the management plan, the complexity of anesthesia care, and the knowledge, skill, experience, and judgment of the SRNA being supervised. To build a solid clinical foundation, maximize patient safety and clinical teaching, provide mentorship in vigilance, dynamic decision making and crisis management, facilitate skill development, competence and confidence, the junior SRNA will be under the direct observation of a credentialed provider at all times during the first semester of Phase II; i.e., the supervising CRNA or Anesthesiologist will not leave the SRNA unattended during an anesthetic. This direct observed supervision may be extended on a case by case basis after the first semester, and the credentialed provider always can choose to directly observe the student at all times during the anesthetic. After completion of the first semester, the SRNA may be provided increased opportunities for autonomy at the discretion of the licensed, credentialed provider.

4. In order to ensure a smooth transition from a SRNA to an independent CRNA provider, direct supervision tapers off as the clinical competency of the SRNA develops. The last two semesters of clinical practicum may require only limited supervision, but, again, the
level of supervision is always at the discretion of the licensed, credentialed provider. The SRNA however is always supervised and the supervision ratio cannot be less than 1:2 (1:1 or 1:2), credentialed anesthesia provider to student ratio.

5. Increasingly the topic of total committed clinical hours that SRNAs can participate in per week is being raised. While it is clear that more frequent turnovers between providers may increase the chance of preventable mistakes, equally clear is that a tired provider is an impaired provider. Additionally, the ability for SRNAs to learn and process information is compromised if clinical hours become excessive. Therefore, it is the policy of the USU Nurse Anesthesia Program that SRNA hours include time spent in class and in clinical, in house call time and when taking call from home, time spent in the operating room, should not exceed 70 hours per week averaged over a 4 week period of time. Additionally there must be at least 10 hours of time between scheduled shifts. These total hours will be monitored using MEDATRAX or equivalent. In the event that a more restrictive time commitment policy is adopted by accreditation agencies, the most restrictive policy will apply and supersede USU’s internal policy effective the date of issuance.

CDR Robert Hawkins, PhD, DNP, MS, MBA, CRNA
Director, Nurse Anesthesia Program
Uniformed Services University
Introduction

This position is located in the Uniformed Services University of the Health Sciences, Graduate School of Nursing (GSN), Nurse Anesthesia Program. The incumbent of this position serves as the Program Director and in this capacity reports directly to the Associate Dean for Academic Affairs, GSN.

Major Duties

The Program Director: serves as Faculty Member/Program Director, Nurse Anesthesia Program in the GSN; oversees the development, execution and evaluation of curriculum; responsible for teaching, research, program policy and administrative assignments; coordinates all administrative responsibilities required by the program; insures compliance with the educational standards and guidelines published by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA); and provides academic and administrative guidance for the Nurse Anesthesia clinical site coordinator in selecting sites, development and maintenance of Memorandums of Understanding (MOUs) and Training Affiliation Agreements, selecting and educating preceptors, and placing students in appropriate clinical sites.

The incumbent directs the development and organization of Nurse Anesthesia specialty courses and is responsible for guiding faculty in the development and implementation of courses using simulation and technology to enhance curricular objectives.

The incumbent is responsible for the integration of didactic and clinical phases of the program and ensures the basic science, research, nursing knowledge, operational medicine, theory, role and leadership content is integrated into the curriculum to optimize student learning, and provides the overall supervision and review of student performance. Chairs and develops agendas for the biannual Faculty Steering Team Meetings.

The incumbent prepares materials for presentation within the university, to include reports on student and alumni evaluation, proposals for curriculum change, reports on student performance on certification examinations and overall programmatic summaries, and prepares and presents lectures in area of major expertise within and outside of the program at professional meetings.

The incumbent serves on major committees, prepares staff reports, represents the University at professional gatherings, delivers lectures, and participates in meetings and panel discussions at other institutions. The incumbent maintains professional contacts at local and national conferences with
other nursing schools, Nurse Anesthesia Programs and professional organizations throughout the country to exchange information of mutual interest.

**Supervisory Control**

The incumbent works under the general direction of the Associate Dean for Academic Affairs, GSN, partners with other Department Chairs in evaluating faculty assigned to the GSN and teaching within the Nurse Anesthesia Program, and provides direct supervision of the program administrative support person who is responsible for assuring that all program-specific administrative tasks are completed.

**Qualification Requirements**

- The incumbent must bring to this position an earned doctorate in nursing or a relevant field.
- The incumbent must be a Certified Registered Nurse Anesthetist with recent graduate level teaching experience preferred.
- The successful applicant should be a senior active duty 05 (or 06 preferred) with a demonstrated record of effective leadership and scholarly achievement within the nurse anesthesia community.
- The incumbent should set a standard of excellence for professional service, have strong interpersonal skills, a commitment to adult education, and dedicated to continued professional development of self and others.
- The candidate’s curriculum vita will be reviewed by the GSN’s Committee on Promotions, Appointment, and Tenure (CAPT) if judged eligible for academic appointment at the associate professor or professor level.
- As a Certified Registered Nurse Anesthetist, the selected candidate is required to obtain credentials at a military or federal health care facility and maintain a clinical practice.

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**ASSISTANT PROGRAM DIRECTOR**  
*Nurse Anesthesia Program*  
*Graduate School of Nursing*

**Position Relationship:**

This position is located in the Uniformed Services University of the Health Sciences, Graduate School of Nursing (GSN), Nurse Anesthesia Program. The incumbent of this position serves as the Assistant Program Director and in this capacity reports directly to the Program Director, Nurse Anesthesia Program.

**Definition of Position:**

- Coordinates activities with Program Director.
- Assumes responsibility of the program in the absence of the Program Director.
- Oversees Phase I curriculum
- Oversees RNA program evaluation system
Qualifications:

Education:

- Master of Science in Nursing (MSN) or Master of Science (MS) with nursing focus required.
- Doctor of Nursing Practice, (DNP) or PhD preferred.
- RN license and national certification: Certified Registered Nurse Anesthetist (CRNA) required.

Criteria and Competencies:

- Demonstrates competency and interest in the educational process.
- Must maintain current and valid state registration as a professional nurse.
- Must maintain current certification as a nurse anesthetist through the NBCRNA.
- Maintain professional clinical credentials.
- Member in good standing with the American Association of Nurse Anesthetists.

Position Responsibilities:

1. Department Management and Oversight
   - Assists in the establishment of department mission and goals.
   - Assists in the establishment of program policies and procedures.
   - Participates in short and long term planning.
   - Assists in oversight of all activities in the department.
   - Assists in program evaluation.
   - Assists and mentors new faculty members.

2. Program Management
   - Monitor Program's compliance with COA Standard's for Accreditation.
   - Review and update the Administrative manual as needed.
   - Participate in planning, development, and implementation of curriculum.
   - Assist in implementation of the evaluation plan.
   - Participate in committee meetings.
   - Assist in conducting site visits to all didactic and clinical sites.
   - Monitor program calendar.
   - Monitor admission process. Ensure all applicants meet program and COA requirements for admission.
   - Monitor student progress and participate in Student Promotion Committee meetings as needed.

3. Instructor Responsibilities
   - Assume Course Director responsibilities as assigned.
   - Provide lectures and other educational offerings.
   - Serve as advisor to students during the didactic
4. Research
   • Participate in student, personal, and/or University sponsored research.

DIRECTOR OF RESEARCH
Nurse Anesthesia Program
Graduate School of Nursing

Position Relationship:

This position is located in the Uniformed Services University of the Health Sciences, Graduate School of Nursing (GSN), Nurse Anesthesia Program. The incumbent of this position serves as the Director of Research, Nurse Anesthesia Clinical Training in this capacity reports directly to the Program Director and Dean, Graduate School of Nursing, USUHS.

Definition of Position:

• Responsible for implementing, coordinating, monitoring, evaluating student scholarly project.

Criteria and Competencies:

• Demonstrated knowledge of and interest in basic science and clinical research including grant writing, protocol development, clinical methodology, data collection and analysis, publication, and a solid foundation in anesthesia theory and practice.
• Educational preparation should be at the doctoral level, with sound background in clinical and bench research.
• Five years minimum experience as a Certified Registered Nurse Anesthetist.
• Maintain a current valid state license as a Registered Nurse.
• Maintain certification/recertification by the NBCRNA.
• Maintain professional clinical credentials and privileges at clinical site.

Duties and Responsibilities:

• Collaborate, coordinate, consults on and monitor student research projects with regard to scientific merit, methodology, institutional review board approval, data collection and evaluation.
• Supervise preparation of the research manuscript and oral presentation based on the guidelines established by the Director of Research, USUHS Nurse Anesthesia Program. Promote research utilization by oral and poster dissemination of the findings in local, state and national military and civilian forums.
• Provide advice, assistance and guidance to the Program Director in matters related to student and faculty research..
• Promote, endorse and serve as a mechanism for peer review for research endeavors by USUHS students and faculty and interested staff CRNAs. Promote collaboration with other health care disciplines.
• Maintain active involvement in ongoing personal and collaborative research projects.
• Participate in research policy, protocol and funding decisions by active involvement at the Anesthesia Department, Clinical Investigation Department and Commands.
• Identify potential researchable clinical practice / patient care issues.
● Plan and orchestrate student educational activities, interactions and collaborations that will create an academic and clinical environment that fosters and promotes a working knowledge of the research process.
● Monitor and orchestrate student progress with regard to proposal revisions, institutional review board submission, study implementation, data collection and evaluation and timely completion of the manuscript and oral presentation.
● Assist students in making application for funding, travel, and use of visual media resources for the purpose of presentation of research findings.

**DIRECTOR OF CLINICAL EDUCATION**
*Nurse Anesthesia Program*
*Graduate School of Nursing*

**Position Relationship:**

This position is located in the Uniformed Services University of the Health Sciences, Graduate School of Nursing (GSN), Nurse Anesthesia Program. The incumbent of this position serves as the Assistant Program Director and in this capacity reports directly to the Program Director, Nurse Anesthesia Program.

**Description:** Executes mission as Nurse Anesthesia Program/Clinical Sites Director and member of GSN Operational Management Team/Faculty Search Committee. Assists with planning joint-service training of 40 Army/AF/Navy/IHS students in a 30-month academic cycle; instructs, supervises, and mentors students throughout the program. Directs primary clinical sites, enrichment sites clinical site directors with in-direct direction of clinical preceptor faculty. Serves on GSN and University level committees.

**Qualifications:**

**Education:**

- Master of Science in Nursing (MSN) or Master of Science (MS) with nursing focus required. Doctor of Nursing Practice, (DNP) or PhD preferred.
- RN license and national certification: Certified Registered Nurse Anesthetist (CRNA) required.

**Experience:**

- CV/portfolio demonstrates evidence of effective leadership and scholarly achievement (e.g., teaching, national presentations, publications, implementation of evidence based practice, commitment to adult education and/or continued professional development of self and others, and strong interpersonal skills). Deployment experience is also desirable.
- Prior positions as: Assistant/Chief Nurse Anesthetist, Clinical Director/Assistant Director/Instructor, Element Chief or equivalent are highly desirable
- Ability to work/coordinate student and faculty issues across all Services

**Position summary and responsibilities:**
Accepting for oversight of the nurse anesthesia program clinical phase sites in consultation with Nurse Anesthesia Program Director
- Responsible for teaching, as well as advisement and mentorship of students and program faculty
- Assists with nurse anesthesia curriculum review as needed; incorporates operational readiness/deployment issues throughout curriculum
- Evaluates clinical training sites and Phase II students’ performance through clinical site visits, biannual meetings, and remote updates
- Assists with admissions packets for the nurse anesthesia program and presents recommendations to admission committee
- Coordinates Memorandums of Understanding and Training Affiliation Agreements with military and civilian hospitals to optimize training needs
- Seeks recommendations for course content improvement from recognized anesthesia experts and current literature
- Interprets and markets the Nurse Anesthetists role to the public, military, and public health services
- Maintains high level of knowledge and practice related to current issues in anesthesia care
- Provides anesthesia care in the clinical setting in order to meet NBCNRA guidelines for certification
- Coordinates with Phase II Site Directors to optimize student clinical experiences
- Counsels students and effectively uses resources available to resolve student academic issues
- Consults with colleagues, subject matter experts and professionals within healthcare industry for adjunct faculty support to implement courses and projects to enhance body of knowledge
- prepares and presents lectures in areas of major expertise
- Assists with reviews and critiques of research student scholarly projects
- Enhances scholarship of self and others through the “organization of” and “participation in” interdisciplinary educational programs for healthcare professionals (e.g., presents at conferences, and workshops in area of expertise)
- Writes/edits for publication to contribute to the advancement of nursing practice
- Engages in research studies in area of expertise to improve the quality of healthcare/education
- Maintains membership in professional organization (American Association of Nurse Anesthetists)
- Participates in professional activities at the military, local, state, and/or national levels
- Serves as a role model/preceptor/mentor to anesthesia practitioners/other healthcare providers

Didactic Instructor
Nurse Anesthesia Program
Graduate School of Nursing

Position Relationship:
This position is located in the Uniformed Services University of the Health Sciences, Graduate School of Nursing (GSN), Nurse Anesthesia Program. The incumbent of this position serves as Didactic Instructor
and in this capacity reports directly to the Department Chair and the Program and holds as a minimum an Assistant Professor of Nursing faculty position

**Definition of Position:**

- Coordinates activities with Program/Assistant Program Director.
- Serves as Course Director and instructor for assigned courses.
- Serves as an advisor for Phase I students.

**Criteria and Competencies:**

- Demonstrates competency and interest in the educational process.
- Doctoral degree preferred. The minimal requirement is a Master’s Degree in Nursing, Anesthesia, or a Basic Science, PhD or DNP preferred.
- Should hold the rank of O-3 or higher or a civilian equivalent.
- Must maintain current and valid state registration as a professional nurse.
- Must maintain current certification as a nurse anesthetist through the NBCRNA
- Maintain professional clinical credentials.
- Member in good standing with the American Association of Nurse Anesthetists.
- Must not be placed in a deployable billet.

**Position Responsibilities:**

- Assists in the establishment of department mission and goals.
- Assists in the establishment of program policies and procedures.
- Participates in short and long term program/course planning.
- Assists in program evaluation.
- Participates in the Faculty steering Team and other committees as assigned.
- Participate in planning, development, and implementation of curriculum.
- Assist in implementation of the evaluation plan.
- Participate in committee meetings.
- Monitor student progress and participate in Student Promotion Committee meetings as needed.
- Participate in student, personal, and/or University sponsored research.
- Assume Course Director responsibilities as assigned.
- Provide lectures and other educational offerings.
- Serve as advisor to students during the didactic phase.

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**Director of Nurse Anesthesia Clinical Training**  
*(Site Director)*  
**Nurse Anesthesia Program**  
**Graduate School of Nursing**

**Position Relationship:**
This position is located at a primary Clinical Site affiliated with the Uniformed Services University of the Health Sciences, Graduate School of Nursing (GSN), Nurse Anesthesia Program. The incumbent of this position serves as the Site Director for a Primary Clinical Training Site and in this capacity reports directly to the Director of Clinical Education, Nurse Anesthesia Program.

Definition of Position:

- Responsible for coordinating all clinical experiences of the Phase II Student Registered Nurse Anesthetists (SRNA).
- Ensure that each SRNA meets all established clinical and didactic criteria as defined in the USUHS syllabus and USUHS handbook.
- Oversees Phase II site compliance with the educational Standards and Guidelines published by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA).
- Provides direction for the clinical instructors.
- Ensures individualization of clinical learning for each student within departmental limitations.

Criteria and Competencies:

- Demonstrated competency and interest in the educational process, as reflected in prior officer fitness reports.
- MSN, Doctoral Degree in an appropriate field of study or attending an academic institution to obtain a Doctoral Degree.
- Military Officer with minimum rank of 04 (Major, Lieutenant Commander).
- Four years minimum experience as a Certified Registered Nurse Anesthetist.
- Maintain a current valid state license as a Registered Nurse.
- Maintains current certification/recertification by the National Board on Certification and Recertification of Nurse Anesthetists (NBCRNA).
- Maintains professional clinical credentials and privileges at clinical site.

Duties and Responsibilities:

- Instruct and supervise students in the art and science of anesthesia practice.
- Ensure students appropriately enter clinical cases into the Medatrax or equivalent software and cases reviewed monthly.
- Ensure clinical site and staff evaluations are administered to students utilizing Medatrax or equivalent.
- Ensure all student evaluation tools are used fairly and consistently.
- Ensure that students receive supervised clinical anesthesia experiences commensurate with their individual professional growth.
- Assists with grading of case reports or academic writing by students.
● Ensure that the Phase II clinical site complies with the Standards and Guidelines set by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA).
● Completes, in a timely fashion all administrative tasks of the position.
● Coordinates and monitors affiliations providing supplemental clinical experience as indicated.
● Develops, organizes, and implements a broad field orientation program to the Phase II student upon their arrival to the clinical site.
● Oversees the completion of the applications for the certification examination when the students have met graduation criteria.
● Facilitates obtaining current Memorandums of Understanding between USUHS and all affiliated organizations.
● Plans and manages budget for clinical site.

Assistant Director of Nurse Anesthesia Clinical Training
(Assistant Site Director)
Nurse Anesthesia Program
Graduate School of Nursing

Position Relationship:

This position is located at a primary clinical site affiliated with the Uniformed Services University of the Health Sciences, Graduate School of Nursing (GSN), Nurse Anesthesia Program. The incumbent of this position serves as the Assistant Clinical Site Director and in this capacity reports directly to the Clinical Site Director.

Definition of Position:

● Assist the Site Director in the execution of duties that coordinate learning experiences of nurse anesthesia students in all phases of their clinical training.
● Assist the Site Director in insuring that each student meets the certification requirements established by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA).

Criteria and Competencies:

● Demonstrated competency and interest in the educational process as reflected in prior officer fitness reports.
● Doctoral Degree in an appropriate field of study or attending an academic institution to obtain a Doctoral Degree.
● Demonstrated preparation in the area of curriculum development, instruction, testing, evaluation, or academic/research experience prior to assuming the role of Assistant Site Director.
● Military Officer with a minimum rank of 04 (Lieutenant Commander, Major).
● Three years minimum experience as a Certified Registered Nurse Anesthetist.
● Maintain a current valid state license as a Registered Nurse.
• Maintain certification/recertification by the NBCRNA
• Maintain professional clinical credentials and privileges at clinical site.
• Provide a positive role model for students as demonstrated by officer fitness reports and evaluations.
• Serve as an educational resource person for the adjunct clinical faculty and department heads.

**Duties and Responsibilities:**

• Assist the Site Director with administrative tasks and responsibilities required from USUHS Nurse Anesthesia Program.
• Instruct, teach, and supervise students in the art and practice of anesthesia.
• Assist the Site Director in the evaluation of student performance growth patterns and potential, via submission of written Semester and final evaluations to the Director.
• Assist in the continual updating and compliance of requirements of the Council on Accreditation of Nurse Anesthesia Educational Programs (COA).
• In conjunction with the Site Director, plan and orchestrate educational activities, simulation curriculum, and recommend programs and activities to enhance the clinical skills of students.
• Be able to assume all the responsibilities of the Site Director.
• Function as chairperson to appropriate committees as designated by the Site Director.
• Act as the liaison for rotating students from outside institutions.
• Assume responsibility for obtaining appropriate evaluations of students during out-rotations.
• With the Site Director, prepare and present relevant didactic information to enhance the learning process.
• Develop a yearly rotation schedule along with the Site Director,
• Serve as an ongoing role model and resource person for their respective Nurse Corps, and for student nurse anesthetists.

**DIRECTOR OF RESEARCH – SERVICE SPECIFIC**

*Nurse Anesthesia Program*

*Graduate School of Nursing*

**Position Relationship:**

This position is located in the Uniformed Services University of the Health Sciences, Graduate School of Nursing (GSN), Nurse Anesthesia Program. The incumbent of this position serves as the Director of Research for service specific research needs. This person reports directly to the Director of Research, USUHS.

**Definition of Position:**

• Responsible for implementing, coordinating, monitoring, evaluating and modifying student scholarly project.
Criteria and Competencies:

- Demonstrated knowledge of and interest in basic science and clinical research including grant writing, protocol development, clinical methodology, data collection and analysis, publication, and a solid foundation in anesthesia theory and practice.
- Educational preparation should include a Master’s degree or higher in a field of study requiring exposure to all facets of the clinical research process (Doctoral Degree preferred).
- Three years minimum experience as a Certified Registered Nurse Anesthetist.
- Maintain a current valid state license as a Registered Nurse.
- Maintain certification/recertification by the NBCRNA

Duties and Responsibilities:

- Collaborate, coordinate, consults on and monitor student research projects with regard to scientific merit, methodology, institutional review board approval, data collection and evaluation.
- Supervise preparation of the research manuscript and oral presentation based on the guidelines established by the Director of Research, USUHS Nurse Anesthesia Program. Promote research utilization by oral and poster dissemination of the findings in local, state and national military and civilian forums.
- Develop research, grant (as needed), and program evaluation proposals and tools appropriate to the needs of the local clinical site and the USUHS Nurse Anesthesia Program.
- Promote, endorse and serve as a mechanism for peer review for research endeavors by USUHS students and faculty and interested staff CRNAs. Promote collaboration with other health care disciplines.
- Maintain active involvement in ongoing personal and collaborative research projects.
- Participate in research policy, protocol and funding decisions by active involvement at the Anesthesia Department, Clinical Investigation Department and Commands.
- Identify potential researchable clinical practice / patient care issues.
- Plan and orchestrate student educational activities, interactions and collaborations that will create an academic and clinical environment that fosters and promotes a working knowledge of the research process.
- Monitor and orchestrate student progress with regard to proposal revisions, institutional review board submission, study implementation, data collection and evaluation and timely completion of the manuscript and oral presentation.
- Assist students in making application for funding, travel, and use of visual media resources for the purpose of presentation of research findings.
- Assist the Director of Research, USUHS in research program planning, implementation, and evaluation.
- Accountable for local clinical site research documentation and data and records maintenance.
**Position Relationship:**

This position is located in the Uniformed Services University of the Health Sciences, Graduate School of Nursing (GSN), Nurse Anesthesia Program. The incumbent of this position serves as the Director of Research, Nurse Anesthesia Clinical Training and reports directly to the Site Director.

**Definition of Position:**

- Responsible for implementing, coordinating, monitoring, evaluating and modifying as necessary the Phase II student scholarly project.

**Criteria and Competencies:**

- Demonstrated knowledge of and interest in basic science and clinical research including grant writing, protocol development, clinical methodology, data collection and analysis, publication, and a solid foundation in anesthesia theory and practice.
- Educational preparation should include a Master’s degree or higher in a field of study requiring exposure to all facets of the clinical research process (Doctoral Degree preferred).
- Three years minimum experience as a Certified Registered Nurse Anesthetist.
- Maintain a current valid state license as a Registered Nurse.
- Maintain certification/recertification by the NBCRNA.
- Maintain professional clinical credentials and privileges at clinical site.
- Provide a positive role model for students.

**Duties and Responsibilities:**

- Collaborate, coordinate, consults on and monitor student research projects with regard to scientific merit, methodology, institutional review board approval, data collection and evaluation.
- Supervise preparation of the research manuscript and oral presentation based on the guidelines established by the Director of Research, USUHS Nurse Anesthesia Program. Promote research utilization by oral and poster dissemination of the findings in local, state and national military and civilian forums.
- Provide advice, assistance and guidance to the Site Director in matters related to student and faculty research.
- Develop research, grant (as needed), and program evaluation proposals and tools appropriate to the needs of the local clinical site and the USUHS Nurse Anesthesia Program.
- Promote, endorse and serve as a mechanism for peer review for research endeavors by USUHS students and faculty and interested staff CRNAs. Promote collaboration with other health care disciplines.
- Maintain active involvement in ongoing personal and collaborative research projects.
● Participate in research policy, protocol and funding decisions by active involvement at the Anesthesia Department, Clinical Investigation Department and Commands.
● Identify potential researchable clinical practice / patient care issues.
● Plan and orchestrate student educational activities, interactions and collaborations that will create an academic and clinical environment that fosters and promotes a working knowledge of the research process.
● Monitor and orchestrate student progress with regard to proposal revisions, institutional review board submission, study implementation, data collection and evaluation and timely completion of the manuscript and oral presentation.
● Assist students in making application for funding, travel, and use of visual media. resources for the purpose of presentation of research findings.
● Assist the Director of Research, USUHS in research program planning, implementation, and evaluation.
● Accountable for local clinical site research documentation and data and records maintenance.

Clinical Coordinator

Description: A Certified Registered Nurse Anesthetist or Anesthesiologist who coordinates the clinical education of students enrolled in the USU Nurse Anesthesia Program. Clinical Preceptors will be offered adjunct assistant professor faculty positions at our clinical training sites.

Qualifications:

● Be currently certified or recertified by the NBCRNA or licensed in medicine holding anesthesia specialty training.
● Maintain a current, valid, professional/registered nursing/physician license in one jurisdiction of the United States that satisfies the requirement of the applicable state board of nursing or medicine.
● Minimum of 1 year of experience as a CRNA or Anesthesiologist
● Currently active in clinical anesthesia practice
● Managerial skills and experience necessary to coordinate student clinical activities.
● Effective interpersonal and leadership skills necessary to foster productive working relationships
● Effective oral and written communication skills

Position Summary:

● Assist the primary site nurse anesthesia directors in the coordination of clinical education of the students enrolled in the USU Nurse Anesthesia Program.
● In coordination with clinical site directors, develops and communicates clinical schedules for the student
● Directs and participates in the education of the students
● Regularly maintains communication regarding student education/performance with the clinical site directors
● Oversees the quality of educational opportunities the students are receiving at clinical site

**Position Responsibilities:**

- Coordination of anesthesia case assignments of each student in order to:
  - Facilitate and maximize the student’s clinical and learning experiences
  - Assist the clinical site director to assure the student obtains the required number of clinical experiences
- Insure that each student has immediate supervision during each of the clinical rotations.
- Ensures that the clinical preceptor has the understanding that they retain full responsibility and accountability for the anesthesia care at all times.
- Insures that at no time the ratio of students to preceptor exceed two (2) students to a credentialed anesthesia provider.
- Maintain the quality and standard of anesthesia care of students. by:
  - Evaluating student clinical performance competency and reporting any patterns of difficulty.
  - Notifying clinical site directors by email or phone of clinical discharge or patterns of difficulty.
- Guides and direct the student registered nurse anesthetist and or preceptor.
- Assures that confidentiality regarding the education of the student is upheld.

**Clinical Preceptor**

**Description:** A Certified Registered Nurse Anesthetist or Anesthesiologist who supervises the student nurse anesthetist during the administration of anesthesia. Clinical Preceptors may be offered adjunct instructor positions at our clinical sites. Those not desiring this academic appointment may still serve as clinical preceptors if they demonstrate they are credentialed anesthesia providers at the sites, with unencumbered privileges and full licensure IAW the facility.

**Qualifications:**

- Be currently certified or recertified by the NBCRNA or licensed in medicine holding anesthesia specialty training.
- Maintain a current, valid, professional/registered nursing/physician license in one jurisdiction of the United States that satisfies the requirement of the applicable state board of nursing or medicine.
- Currently active in clinical anesthesia practice
- Effective interpersonal and leadership skills necessary to foster productive working relationships
- Demonstrates competency in their area of responsibility and be knowledgeable in the teaching/learning process

**Position Responsibilities:**
• Supervises the student nurse anesthetist during the administration of anesthesia
• Discusses the patients status and rationale for the anesthetist management with the student
• Teaches by discussion and by demonstration
• Informs the Clinical Coordinator of pertinent student performances
• Encourages the student to ask questions and to utilize critical thinking skills
• Provides student feedback through daily student evaluations. (see attachment)
**Student Orientation to Clinical Facilities**

Each rotation site has a contact person assigned to assist the student with the particulars of that clinical area. These personnel are responsible for orienting students to their facility to ensure that they are able to maximally functional while working there. In the case of the home clinical sites, the clinical faculty will assume the responsibility of orienting the students.

**Schedules**

Each site director will schedule the students during their time in Phase II. This schedule will be coordinated with the clinical coordinator at each site. The schedule is designed to expose the students to as many different types of patients and cases as possible during their clinical training. It is in the application of scientific and research theory to practical clinical practice, in an environment of learning, that students will have the best chance of developing the skills necessary to become successful CRNAs. Clinical hours are not to exceed 70 hours per week averaged over a 4 week period of time. Students are required to have 10 hours of time between scheduled clinical days. USU policy also requires that each student is allotted 8 hours mandatory protected academic time every two weeks (to be part of the calculated 70 hours per week). Students in the local area of their primary training site may return to their training site for protected academic time or arrangements will be made with the clinical coordinator to provide equivalent protected academic time. For any questions or concerns about student scheduling or assignment, please contact the USU faculty.

**Communication Information**

Clinical site faculty will provide student information to the affiliate site clinical coordinators prior to start of the clinical rotation. The clinical coordinator's contact information will be provided to each student prior to starting clinical rotations. All contact information will be maintained with privacy.

**Student Rights and Responsibilities**

**Students have a right to expect the following:**

- That all materials shall be factual and fairly presented, and contain clearly understandable, detailed information pertaining to the program content, graduation requirements, and student rights and responsibilities.
- Fair and non-discriminatory practices in the selection process of the program.
- That upon acceptance into a program, they will be provided the quality of education necessary to fulfill the objectives of the program.
- That they will not be exploited relative to time commitment of pay for profit of the conducting institution.
- That enrollment in the program of study is equivalent to the signing of a contract between the student and the program.
- That student failure to achieve goals within the expected time based on date of enrollment and projected graduation date are reviewed and dealt with on an individual basis.
- That they will receive due process when contesting evaluative decisions.
• Fair and accurate evaluations of their progress in the educational program and to be kept informed of the status of the progress.
• Fair and impartial treatment during all testing, evaluation and grading processes.
• Access to transcripts of their academic and clinical achievements.
• Upon their request have verified copies of transcripts to be furnished to institutions, agencies, or others specified by the student or graduate.
• Clearly stated terminal objectives and graduation requirements.
• A fair and impartial due process mechanism, which includes an appeal process.
RNA Student & Program Evaluations

GSN Master Evaluation Plan (MEP):
The GSN Master Evaluation Plan (MEP) defines procedures to evaluate the missions, goals, and expected outcomes of GSN student work with those of USU and with professional nursing standards and guidelines. The MEP can be referenced at the USUHS website. ([http://www.usuhs.mil/gsn/pdf/gsnmasterevaluationplan.pdf](http://www.usuhs.mil/gsn/pdf/gsnmasterevaluationplan.pdf))


The GSN Student Promotion Council (SPC) is an advisory body to the Associate Dean for Academic Affairs. The purpose of the SPC is to objectively review a student's record when referred to the council. Students are referred to the SPC by the Program Director, Student Advisor or GSN Commandant. The SPC makes recommendations as to the status of the student. SPC recommendations may include suspension, return to status, probation, set back or program dismissal.

RNA Sakai Testing
The RNA Program utilizes a variety of methods to ensure student academic competency. The Sakai software platform is the preferred method of the GSN to deliver traditional examinations. The RNA Program will utilize this program to simulate the test taking skills required to be successful on the NBCRNA certification examination.

To protect the integrity of the RNA Program and ensure the exam process is fair and simulates NBCRNA testing conditions, we require the following:

- The test will be evaluated by at least 2 USU faculty before being administered.
- The test will be created, edited and finalized 24 hours prior to the testing date.
- There will be no feedback displayed to the student until the exam can be evaluated by faculty and grades are finalized.
- Test question post-evaluation will be conducted by the course coordinators.
- Sakai testing will be immediately stopped and rescheduled if there are any technical issues noted. Faculty will report the incident to the Sakai support staff immediately and the Course Coordinator/Director of Clinical Academics.
All exams will be readily available (on paper) in the event of technical issues on the day of the exam.

Access to Sakai tests are password protected with single log on access and are proctored by program faculty.

RNA Program Evaluation

The RNA Program Evaluation System was developed from the GSN Master Evaluation Plan (MEP) and the Standards for Accreditation of Nurse Anesthetist Education Programs by the Council on Accreditation of Nurse Anesthesia Education Programs. The RNA Program Evaluation System is characterized by Phase I, Phase II and End of Program Evaluations.

SCOPE: The purpose of this SOP is to ensure that a systematic evaluation program is in compliance with standards set forth by accrediting bodies (CCNE and COA) and meets the parameters set forth in the GSN Master Evaluation Plan SOP. The overriding goal is to improve the quality and effectiveness of the RNA program with the following goals in mind: 1) first time certification exam pass rate greater than 90% and 2) first and second year SEE exam scores at or above the national average (on average) and 3) to achieve an attrition rate less than or below the national average with the goal of decreasing attrition by 10% every year until this mark has been met. While this evaluation process is in place in a number of areas, it is essential that a systematic approach be employed and accountability maintained to ensure compliance with the goal of evaluating and improving RNA program quality and effectiveness. It is the responsibility of one member of the RNA program (the RNA Director of Program Evaluation as appointed by the Program Director) to oversee the evaluation system as set forth in this policy. This member will report findings directly to the RNA program director with recommendations for action. If appropriate, this responsibility may be delegated to other faculty members where appropriate.

Procedures: The evaluation system will be divided into three sections. As this is a front loaded program, the evaluation system will be divided into items pertaining to the various phases of education to include: didactic phase I, clinical phase II, and overall program evaluation. To ensure congruence with the GSN Master Evaluation Plan, a separate section is devoted to those areas of evaluation that require program compliance. Periodically, students and members outside of the GSN will be invited to participate in the monthly program meeting when these topics are on the agenda.

1. **Phase I Evaluation** – The USUHS RNA program is a front loaded program, the students receive one year of classroom based education prior to entering the clinical arena. The evaluation of this portion of the program has a focus on those courses received by the students during this year of training.
   a. **RNA Phase I Course Syllabus Review** - RNA Course Coordinators will review nurse anesthesia specific course syllabus at least 30 days prior to the beginning of the academic semester (DEC/APR/AUG). The review will evaluate the correctness of the document and if changes need to be made prior to the course. Findings of the syllabus
review will be reported to the Director of Evaluations and discussed at the next monthly RNA program meeting.

b. **Student Course Evaluations** – Students have the option to complete end of semester evaluations for every course in which they have been enrolled. Course coordinators should emphasize the importance of completing these course evaluations. As the GSN is on a three semester academic year, these evaluations become available to faculty in JAN, JUN, and SEP (approximately). Course evaluations are to be reviewed at the monthly RNA program meeting once this information is available to the coordinating faculty and program director.

c. **Student Mid-Term Conference** – Students will meet with their faculty advisor at the mid-term of each semester. This purpose of this meeting is to ensure that the student is meeting program objectives and ensure the student has appropriate resources to be successful.

d. **Student End of Semester Conference** – Students will meet with their faculty advisor at the completion of each semester. The purpose of this meeting is to provide the student with a summative review of performance at the completion of the academic semester. This evaluation will be completed by the students academic advisor and reported to the Director of Evaluations within 30 days and the Program Director as necessary.

e. **Student (self) End of Semester Evaluations** - This evaluation will be completed at the completion of the academic semester by the student. The evaluation will be a self appraisal of their didactic performance. The evaluation will be analyzed by the student’s phase I advisor and reported to the Director of Evaluations within 30 days and Program Director as necessary.

f. **Faculty Course Evaluations** – Course coordinators complete end of course evaluations on the classes for which they are responsible. This occurs in conjunction with the evaluations submitted by the students. This evaluation system is to be discussed in the same time frame as the student course evaluations to occur in JAN, JUN, and SEP annually.

g. **Phase I Annual Curriculum Review** – The RNA program conducts an overall phase I curriculum review as part of this evaluation process. This is to be an annual review of the education that the RNA students receive while in Phase I. This review is to be conducted during the summer semester of every year. The measures of program effectiveness and quality that will be reviewed are first year SEE scores, first year attrition rate and other information as appropriate. Major curriculum changes to individual course content and programmatic changes to curriculum will be evaluated for three years following this change. The same benchmarks will be utilized in this evaluation process.

h. **Phase I Faculty Performance** – As a member of the GSN, every faculty member receives an annual performance evaluation. This evaluation reviews the individuals performance in areas or teaching, research and publications, administrative activities, and participation in patient care. This evaluation is conducted by a member of the GSN within the individuals chain of command.

2. **Phase II Evaluation** – Upon completion of phase I, students enter clinical training in a variety of clinical sites located throughout the country. During this phase of training, the students take courses on the same semester system as mentioned in the above section. The scope of this evaluation program is different as it applies to both courses in which the students are enrolled and clinical activity of students, faculty, clinical sites, and clinical preceptors.
a. **RNA Phase II Course Syllabus Review** - RNA Course Coordinators will review nurse anesthesia specific course syllabus at least 30 days prior to the beginning of the academic semester (DEC/APR/AUG). The review will evaluate the correctness of the document and if changes need to be made prior to the course. Findings of the syllabus review will be reported to the Director of Evaluations and discussed at the next monthly RNA program meeting.

b. **Student Daily Clinical Evaluation** - This evaluation will be conducted daily by the clinical preceptor and analyzed and reviewed by Site Director. This evaluation will be used to assess student clinical activity. Negative evaluations will be reported to Director of Clinical Education and forwarded to the Director of Evaluations and Program Director as necessary.

c. **Student (voluntary) daily preceptor evaluations** - This evaluation is an option afforded to the student that will be used to evaluate the effectiveness of the daily clinical preceptors. Evaluations will be analyzed by the Director of Clinical Education and forwarded to the Director of Evaluations and Program Director as necessary.

d. **Student Time Study** – Student time commitment is evaluated based on student self report. In accordance with the COA, the goal for student time commitment is less than 70 hours per week averaged over a four-week period. This time includes clinical experience, classroom time, preparation time, and call time. A 10-hour rest period between shifts should be enforced. Clinical site faculty are responsible for monitoring these hours on a monthly basis. Average times that fall over 70 hours per week (when averaged over the month) will be reported to the Director of Clinical Education and the Program Director.

e. **Student & Preceptor Clinical Site Evaluations** - This evaluation will be completed every month by the student to evaluate the clinical site and clinical preceptors. The evaluation will be analyzed by the Director of Clinical Education and forwarded to the Director of Evaluations and Program Director as necessary.

f. **Student and Faculty Course Evaluations** – Students are enrolled in courses during phase II. These courses are on the same semester schedule as the courses in phase I. These courses receive the same student and instructor evaluation options as the phase I courses. These course evaluations will be reviewed in JAN, JUN, and SEP to coincide with the courses being evaluated in phase I. Responsible parties for evaluation of this material is the Director of Clinical Education and the Director of Phase II Clinical Academics. This information will be discussed and acted upon at the monthly RNA program meeting during those specified months.

g. **Student (self) End of Semester Evaluations** - This evaluation will be completed at the completion of the academic semester by the student. The evaluation will be a self appraisal of their clinical development, growth, and clinical performance. The evaluation will be analyzed by the Site Director and reported to the Director of Clinical Education within 30 days and Program Director as necessary.

h. **Site Director student summative evaluation** - Site Director creates a summative report of student’s progression at the completion of the academic semester. This evaluation will be a faculty appraisal of student development, growth and clinical performance throughout the semester. Evaluations are written and sent to the Director of Clinical Education

i. **Phase II Annual Curriculum Review** – There will be an annual review of the phase II curriculum. This review of the entire phase II curriculum will occur with all clinical faculty and will take place in FEB of every year. Measures to be reviewed will be phase
II attrition to that point in the program, second year SEE scores, Certification Exam results, and other information as appropriate.

j. Phase II Faculty Performance – Phase II faculty members receive an annual performance evaluation (much like phase I faculty). This evaluation reviews the individual's performance in areas or teaching, research and publications, administrative activities, and participation in patient care. This evaluation is conducted by a member of the GSN within the individual's chain of command. The parties responsible for this evaluation are the Director of Clinical Education and the Program Director in JUN/JUL of each year.

3. **END OF PROGRAM EVALUATION** – The program in it’s entirety is evaluated on an annual basis. This responsibility falls under the Director for Program Evaluation.

a. **Student End of Program Evaluation** – Upon graduation, students are offered an opportunity to evaluate their experience over the course of their education at USUHS. Students graduate in DEC of each year and the end of program evaluations go out to graduates by JAN by the GSN registrar. To allow ample return time, these program evaluations will be reviewed by the Program Director of Evaluation in JUL/AUG of every year (or as they become available).

b. **End of Program Director of Evaluation Report** – The Director of Evaluation will be responsible for reviewing the end of program student evaluations, certification exam scores and results, and other pertinent information in JUL/AUG of every year. He/she will submit a report to the Program Director with results and recommendations based on these various sources in SEP. The Director of Evaluation will submit recommendations to the Program Director for items that do not meet the benchmarks as laid out within this document. This content will be on the agenda for the Program meeting during the month that it is completed (SEP or potentially OCT based on survey response times)

c. **Alumni Evaluation and Employer Evaluation** – Alumni and Employers are given a one-year post graduation member evaluation in FEB or MAR of each year. The GSN registrar sends out these requests during that. This coincided with the end of program evaluations and will thus we reviewed in SEP/OCT of each year by the Director of Evaluation.

**GSN MASTER EVALUATION PLAN COMPLIANCE** – As the RNA Program is housed within the GSN, it is essential to comply with certain standards set forth in the GSN Master Evaluation Plan. A number of these standards are met within the other sections of this program evaluation plan as will be noted in the following section. If necessary, specific objectives will be addressed in a separate section of evaluation. Time frames will coincide with course, semester, and program evaluation as set forth in previous sections on Phase I, II, and Program Evaluations.

**GSN Mission, Goals, and Outcomes** – The mission, goals, and outcomes of the RNA program are found within the Student Handbook and the Faculty/Clinical Preceptor manual. These criteria will be evaluated on an annual basis in the End of Program Director of Evaluation report as these specific issues are part of the alumni evaluations that are reviewed in SEP/OCT annually.

a. **Student Handbook and Website Maintenance** – The Director for Evaluation will be responsible for maintaining and updating key information regarding accreditation, attrition rates, board certification pass rates, and other pertinent information as required on the RNA GSN website (available through www.usuhs.edu). This information should coincide with the End of Program Director of Evaluation Report due in SEP/OCT annually.
b) **Recruitment, Admission, and Retention** – These issues are discussed and evaluated in an ongoing fashion throughout the program. Recruitment and Admission are continuously evaluated based on the benchmarks of attrition and certification pass rate. Failure to meet goals in these areas will prompt re-evaluation of the admission process by the Program Director who will forward recommendations to the Admissions Committee. Retention is another ongoing evaluation process that is carried out in monthly program meeting where student progress is discussed for both phase I and phase II students.

c) **Faculty Development and Academic Qualification** – Annual faculty evaluations meet this criterion as they address areas related to teaching, scholarship, service, and clinical practice.

d) **Academic Support Services** – This criterion is addressed in end of program alumni evaluation course evaluations, and clinical site evaluations. Evaluation of this process includes infrastructure (library, computer access, and clinical site) and academic advisement. Official review of this subject will occur annually and will be included in the End of Program Director of Evaluation Report to the Program Director in SEP/OCT. It will also be evaluated within the course evaluations and the clinical site evaluations.

e) **Curriculum Development and Revision** – This is another ongoing process within the program. The curriculum is reviewed during phase I, phase II, and as part of the End of Program Director of Evaluation Report. It is also met in the course evaluations that occur at the end of each semester.

f) **Student Performance Evaluation** – This is another ongoing process that is addressed in a number of evaluations throughout the course of the program. Student progress is closely monitored during phase I and phase II. Benchmarks related to student performance include course evaluations, attrition and graduation rates, board certification exam pass rates, and alumni and employer surveys. Specific areas related to student performance issues can be found in the policy for the student’s promotion committee and the student handbook.

**RNA Program Evaluation System (Calendar of Events)**

<table>
<thead>
<tr>
<th>Phase I</th>
<th>Type</th>
<th>Schedule</th>
<th>Report</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>RNA Phase I Syllabus Review</td>
<td>Dec/Apr/Aug</td>
<td>RNA Course Coordinators will review nurse anesthesia specific course syllabus at least 30 days prior to the beginning of the academic semester. Findings of the syllabus review will be reported to the Director of Evaluations and discussed at the next monthly RNA program meeting.</td>
</tr>
<tr>
<td></td>
<td>Student Course Evaluations * voluntary</td>
<td>Jan/Jun/Sept</td>
<td>Evaluations will be analyzed by Director of Program Evaluation and reported to Program Director in writing NLT 30 days (Feb/July/Oct) after the evaluations are available. Report will be discussed at the RNA Program monthly meetings.</td>
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<tr>
<td></td>
<td>Student Mid-Term Conference</td>
<td>Mid Term</td>
<td>Students will meet with their faculty advisor at the mid term of each semester. Conference will be conducted by faculty advisor. Reports will be submitted to the Director of Evaluations.</td>
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<tr>
<td></td>
<td>Student End of Semester Conference</td>
<td>End of Semester</td>
<td>Students will meet with their faculty advisor for a summative review of semester performance. Reports will be submitted to the Director of Evaluations and the Program Director as</td>
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<tr>
<td>Evaluation Type</td>
<td>Frequency</td>
<td>Details</td>
<td></td>
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<td>-----------------------------------------</td>
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<td>------------------------------------------------------------------------------------------------------------------------------------------</td>
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<tr>
<td>Student (self) End of Semester Evaluations</td>
<td>End of Semester</td>
<td>Student self appraisal of their didactic performance. The evaluation will be analyzed by the student’s phase I advisor and reported to the Director of Evaluations within 30 days and Program Director as necessary.</td>
<td></td>
</tr>
<tr>
<td>Faculty Course Evaluations</td>
<td>Jan/Jun/Sept</td>
<td>Evaluations will be analyzed by Director of Program Evaluation and reported to Program Director in writing NLT 30 days (Feb/July/Oct) after the evaluations are available. Report will be discussed at the RNA Program monthly meetings.</td>
<td></td>
</tr>
<tr>
<td>End of 1st Year Evaluation</td>
<td>Annual -MAY</td>
<td>Students will complete an end of year evaluation. Results will be reported and analyzed by the Director of Evaluations and reported to the Program Director at the Phase I curriculum review.</td>
<td></td>
</tr>
<tr>
<td>Phase I Curriculum Review</td>
<td>Annual Jul – Aug</td>
<td>The syllabi or each course will be reviewed annually. Annual SEE scores and student attrition rates will be evaluated along with course evaluations for that year. Evaluation results will be submitted to the Program Director by Director of Program Evaluation within 30 days of the review. Report will be discussed at the RNA Program meeting or FST.</td>
<td></td>
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<tr>
<td>Phase I Faculty Performance Evaluation</td>
<td>Annual</td>
<td>Evaluation will be performed by Program Director in accordance with the individuals chain of command.</td>
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<tr>
<td>RNA Phase II Syllabus Reivew</td>
<td>Dec/Apr/Aug</td>
<td>RNA Course Coordinators will review nurse anesthesia specific course syllabus at least 30 days prior to the beginning of the academic semester. Findings of the syllabus review will be reported to the Director of Evaluations and discussed at the next monthly RNA program meeting.</td>
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<tr>
<td>Student Daily Clinical Evaluation</td>
<td>Daily^1,2,3</td>
<td>Evaluated daily by clinical preceptor. Analyzed and reviewed by Site Director. Negative evaluations will be reported to Director of Clinical Education and forwarded to the Director of Evaluations and Program Director as necessary.</td>
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<tr>
<td>Student (Voluntary) Daily Preceptor Evaluation</td>
<td>Daily</td>
<td>This is an optional evaluation. Students have the opportunity to evaluate clinical preceptors on a daily basis. Evaluations will be analyzed by the Director of Clinical Education and forwarded to the Director of Evaluations and Program Director as necessary.</td>
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<tr>
<td>Student Time Study</td>
<td>Week/monthly</td>
<td>Evaluation conducted by the Site Director based upon student time input. Average student times that are greater than 70 hours a week will be immediately reported to the Director of Clinical Education and the Program Director.</td>
<td></td>
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<tr>
<td>Student &amp; Preceptor Clinical Site Evaluation</td>
<td>Monthly</td>
<td>This evaluation will be completed by the student to evaluate the clinical site and clinical preceptors. The evaluation will be analyzed by the Director of Clinical Education and forwarded to the Director of Evaluations and Program Director as necessary.</td>
<td></td>
</tr>
<tr>
<td>Course Evaluations:</td>
<td>Jan/Jun/Sept</td>
<td>Evaluations will be analyzed by Director of Clinical Education/Clinical Academics and reported to the Director of Program Evaluation and the Program Director in writing NLT 30 days (Feb/July/Oct) after the evaluations are available. Report will be discussed at the RNA Program monthly meetings.</td>
<td></td>
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<tr>
<td>Student (self) End of Semester</td>
<td>Jan/Jun/Sept</td>
<td>This evaluation will be completed by the student that necessary.</td>
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</table>
Evaluations evaluates their clinical performance. The evaluation will be analyzed by the Site Director and reported to the Director of Clinical Education within 30 days and Program Director as necessary.

Site Director student summative evaluation Jan/Jun/Sept Site Director creates a summative report of student’s progression. Evaluations are written and sent to the Director of Clinical Education NLT 30 days (Feb/July/Oct) from the completion of the semester. All student evaluations below standards will be reported Director of Evaluations and Program Director as necessary.

End of 2nd Year Program Evaluation Annual - June Students will complete an end of year evaluation. Results will be reported and analyzed by the Director of Evaluations and reported to the Program Director & Director of Clinical at the September RNA monthly meeting.

Phase II Curriculum Review Annual – February The syllabi or each clinical course will be reviewed annually. Second year SEE scores and student attrition rates will be evaluated along with course, student and site evaluations for that year. Evaluations will be analyzed by Director of Clinical Education/Clinical Academics and reported to the Director of Program Evaluation and the Program Director in writing NLT 30 days (Feb/July/Oct) after the evaluations are available.

Phase II Faculty Performance Evaluation Annual Evaluation will be performed by the Director of Clinical Education and the Program Director in accordance with the individual’s chain of command.

End of Program Evaluation Student End of Program Evaluation Annual - Jan This evaluation will be completed by the graduate after program completion. Report will be discussed at the next RNA Program or FST meeting.

End of Program Director Evaluation Report Annual - July The Student End of Program evaluations will be analyzed by the Director of Evaluations and reported to the Program Director NLT 180 days from class graduation.

Alumni and Employer Evaluations Annual This evaluation will be completed by the program graduate and the graduate’s employer. Once reports become available, evaluation results will be submitted to the Program Director by Director of Program Evaluation within 30 days of the review. Report will be discussed at the RNA Program meeting or FST.

Preceptor Resources
A clinical preceptor is one who facilitates the learning process through established guidelines and supervision. The purpose of supervision is to protect the patient and to offer guidance and leadership to the student. In addition to USU faculty mentorship there are several online resources for the clinical preceptor. They include:

http://www.oucom.ohiou.edu/fd/monographs/effective.htm

http://www.oucom.ohiou.edu/fd/monographs/monographs.htm

http://nursinglink.monster.com/benefits/articles/8438-how-to-be-a-good-preceptor

http://www.med.unc.edu/epic/
Preceptors may apply for an adjunct faculty position. Preceptors who are granted an adjunct faculty positions at USU will have access to the electronic Learning Resource Center. This will provide them with free access to on-line publications and research materials.
Records Retention Policy

Section I. Initiation of Student Records
Section 1.01 A student record will be created when the student reports to USUHS for orientation for the nurse anesthesia program (Phase 1). Each record will contain, at a minimum, the following:

(a) Personal data sheet
(b) Copies of BLS and ACLS certification cards
(c) Copy of RN license (Updated annually)

Section 1.02 A student record will be created when the student arrives at phase II (clinical). The student record at the Phase II site will verify for accuracy and updated to contain, at a minimum, the following:

(a) Personal data sheet
(b) Copies of BCLS, ACLS, and PALS certification cards
(c) Copy of RN license (Updated annually)

Section II. Maintenance of Student and Program Records

Section 2.01 Student records will be maintained in individual folders and all records will be maintained in a secure location at all times. Record confidentiality is required and student records will not be left unattended in unsecured areas. Records may be stored electronically as long as hard copies can be created. Records may be archived in an offsite facility IAW USUHS Instruction 5015, USUHS Records Management Program1.

Section 2.02 Upon program completion all student records that must be kept indefinitely (Section 2.03) will be forwarded to the RNA Program administrative office. All other records will be securely maintained at the phase II clinical site. Disposal of non-indefinite documents after program completion will occur per USUHS policy (Section IV).

Section 2.03 In accordance with COA Accreditation Policies and Procedures2 the Program will retain all student records until the student passes the National Certification Examination. In specific circumstances, records are required to be maintained indefinitely.

(a) Student records to be kept indefinitely include any records:

(i) That may relate to litigation – to include SPC records
(ii) Final case records
(iii) Summative student evaluations
(iv) NBCRNA application and transcripts
Section 2.04 The Program will retain the following administrative program files:

(a) Program philosophy, objectives, and master schedule.
(b) Organizational charts.
(c) Administrative policies.
(d) Budget Data.
(e) Committee meeting minutes for 3 years.
(f) Hospital statistics and data.
(g) Current course outlines, objectives and student brochure.
(h) Examination and testing materials.
(i) Faculty teaching and time commitment data.
(j) Alumni and employer follow – up data.

Section III. Archiving of Records

Section 3.01 All records that the program must maintain indefinitely will be stored at USUHS until storage capacity is met. These documents may be stored electronically as long as hard copies can be created. Records will be archived in accordance with U.S. Government policy and Department of Defense directives. Program administrators will be able to access these files IAW the policies and procedures of the U.S. National Archives.

Section IV. Disposal of Student and Program Records.

Section 4.01 Student and program records will be disposed of by incineration or shredding. Program faculty and administrators will supervise the disposal of these documents to ensure privacy.

Section V. References

2. COA ACCREDITATION POLICIES AND PROCEDURES. May 2012
Attachments
<table>
<thead>
<tr>
<th>I. Pre anesthetic assessment</th>
<th>EC</th>
<th>MC</th>
<th>BC*</th>
<th>FC*</th>
<th>NA</th>
<th>Comments by Instructor and/or NA resident</th>
</tr>
</thead>
<tbody>
<tr>
<td>With assistance: Utilizes Electronic Health Record and/or paper chart to review/record pertinent health information (assessments, labs, Hx, PE, tests, medical records)</td>
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<td>With assistance: Conducts interview, performs physical exam, assesses psychosocial/cultural condition, assigns appropriate ASA class</td>
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<td>Consults with CRNA/MD regarding pertinent findings and further evaluation</td>
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<tr>
<td>With assistance: Counsels patient regarding proposed anesthesia techniques and obtains consent</td>
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<td>Completes an accurate preoperative evaluation note and orders</td>
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<thead>
<tr>
<th>II. Anesthesia Plan</th>
<th>EC</th>
<th>MC</th>
<th>BC*</th>
<th>FC*</th>
<th>NA</th>
<th>Comments by Instructor and/or NA resident</th>
</tr>
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<tbody>
<tr>
<td>With assistance: Develops a prioritized problem list with anesthetic implications and interventions</td>
<td></td>
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<tr>
<td>Prepares an evidenced based anesthesia plan that addresses fluid management, anesthetic technique, airway management, potential problems &amp; pain management. Presents plan to staff prior to start.</td>
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<td>With assistance: Anticipates complications with initial plan and prepares alternative anesthetic interventions and techniques, adapts to changes in plan</td>
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<table>
<thead>
<tr>
<th>III. Anesthesia Preparation</th>
<th>EC</th>
<th>MC</th>
<th>BC*</th>
<th>FC*</th>
<th>NA</th>
<th>Comments by Instructor and/or NA resident</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assembles and prepares appropriate drugs, supplies and equipment</td>
<td></td>
<td></td>
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<tr>
<td>Performs machine and equipment checks for proper function; knowledgeable in the set-up and function of anesthesia equipment</td>
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<tr>
<td>Establishes IV access with appropriate technique</td>
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<tr>
<td>Re-evaluates patient prior to induction</td>
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<tr>
<th>IV. Induction</th>
<th>EC</th>
<th>MC</th>
<th>BC*</th>
<th>FC*</th>
<th>NA</th>
<th>Comments by Instructor and/or NA resident</th>
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</thead>
<tbody>
<tr>
<td>With assistance: Places monitors and conducts a properly sequenced induction</td>
<td></td>
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<tr>
<td>Properly interprets data from patient and monitors, and responds to alarms/alerts in timely fashion</td>
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<tr>
<td>Demonstrates appropriate mask ventilation</td>
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<tr>
<td>Uses proper technique during laryngoscopy and intubation; safely performs tracheal intubation</td>
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<tr>
<th>V. Intraoperative Management</th>
<th>EC</th>
<th>MC</th>
<th>BC*</th>
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<th>NA</th>
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<tbody>
<tr>
<td>Verbalizes anatomical/physiological factors relative to proper positioning</td>
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<td>Initiates and manages fluid replacement according to plan</td>
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<td>Utilizes universal infection control procedures (provides for safety for pt, self and others)</td>
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<td>Demonstrates basic knowledge of anesthetic and adjunctive drugs, including dose, drug classification and basic anesthetic implications</td>
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<td><strong>VI. Emergence</strong></td>
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<td>FC*</td>
<td>N/A</td>
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<td>Can verbalize indications for use of reversal agents and determines doses</td>
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<td>With assistance: Confirms extubation criteria are met; provides vigilant monitoring</td>
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<tr>
<th><strong>VII. Post Anesthesia Management</strong></th>
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<tr>
<th><strong>VIII. Professional role/Leadership</strong></th>
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<th>FC*</th>
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<td>Demonstrates ability to utilize a variety of leadership principles in the management of clinical situations</td>
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<tr>
<th><strong>IX. Specialty areas (circle those that apply):</strong> Regional, Obstetrics, Pediatric, Neurosurgical, Vascular, Thoracic Anesthesia</th>
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<th>MC</th>
<th>BC*</th>
<th>FC*</th>
<th>N/A</th>
<th>Comments by Instructor and/or NA resident</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identifies anatomy related to specialty area</td>
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<td></td>
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<tr>
<td>Relates physiology and pathophysiology to specialty area</td>
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<td></td>
</tr>
<tr>
<td>Regional anesthesia reflects choice of proper technique and correct local anesthetic choice and dose</td>
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<thead>
<tr>
<th><strong>With assistance: Performs anesthesia techniques appropriate for the specialty area</strong></th>
<th>EC</th>
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<th>FC*</th>
<th>N/A</th>
<th>Comments by Instructor and/or NA resident</th>
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</table>

<table>
<thead>
<tr>
<th><strong>XI. List one clinical topic that was discussed with student</strong></th>
<th>EC</th>
<th>MC</th>
<th>BC*</th>
<th>FC*</th>
<th>N/A</th>
<th>Comments by Instructor and/or NA resident</th>
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</thead>
<tbody>
<tr>
<td>Demonstrated acceptable knowledge of topic for current level of training</td>
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<tr>
<td>Answers questions concisely and accurately related to topic</td>
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<table>
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<tr>
<th><strong>XII: Strengths, areas for improvement and recommendations</strong></th>
<th>EC</th>
<th>MC</th>
<th>BC*</th>
<th>FC*</th>
<th>N/A</th>
<th>Comments by Instructor and/or NA resident</th>
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</table>

Please sign and return to the Clinical Site Director within 5 working days

Nurse Anesthesia Resident/Date _________________________________ Clinical Preceptor/Date _________________________________
## Uniformed Services University Nurse Anesthesia Program Clinical Evaluation Tool

### Fall Semester- RNA 802

**Clinical Date__________________________       Rotation Site______________________       Cases ________________________________**

**Nurse Anesthesia Resident__________________________________________________
Instructor_________________________________________________________________**

**EC**: Exceeds criteria: Indicates that the student exceeds stated criteria for this term; **MC** = Meets criteria: Indicates the student is able to accomplish the objective; **BC** = Below Criteria: Indicates the student either has difficulty accomplishing the objective or needs further refinement for the current term in the program; **FC** = Fails to meet criteria: Indicates that the student does not meet the objective for the current term in the program; **NA** = Not applicable/did not observe

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<th>BC*</th>
<th>FC*</th>
<th>NA</th>
<th>Comments by Instructor and/or NA resident</th>
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</table>

### I. Pre anesthetic assessment

- Utilizes Electronic Health Record and/or paper chart to review/record pertinent health information (assessments, labs, Hx, PE, tests, medical records)
- With assistance: Conducts interview, performs physical exam, assesses psychosocial/cultural condition, assigns appropriate ASA class
- Consults with CRNA/MD regarding pertinent findings and further evaluation
- With assistance: Counsels patient regarding proposed anesthesia techniques and obtains consent
- Completes an accurate preoperative evaluation note and orders

### II. Anesthesia Plan

- With assistance: Develops a prioritized problem list with anesthetic implications and interventions
- Prepares an evidenced based anesthesia plan that addresses fluid management, anesthetic technique, airway management, potential problems & pain management. Presents plan to staff prior to start.
- With assistance: Anticipates complications with initial plan and prepares alternative anesthetic interventions and techniques, adapts to changes in plan

### III. Anesthesia Preparation

- Assembles and prepares appropriate drugs, supplies and equipment
- Performs machine and equipment checks for proper function; knowledgeable in the set-up and function of anesthesia equipment
- Establishes IV access with appropriate technique
- Re-evaluates patient prior to induction

### IV. Induction

- With assistance: Places monitors and conducts a properly sequenced induction
- Properly interprets data from patient and monitors, and responds to alarms/alerts in timely fashion
- Demonstrates appropriate mask ventilation
- Uses proper technique during laryngoscopy and intubation; safely performs tracheal intubation

### V. Intraoperative Management

- Verbalizes anatomical/physiological factors relative to proper positioning
- Monitoring: vigilant consistent with ASA/AANA standards
- Initiates and manages fluid replacement according to plan
- Utilizes universal infection control procedures (provides for safety for pt, self and others)
- **Consistently**: Utilizes electronic anesthesia record or paper chart to record patient data accurately, completely and in a timely manner
- Demonstrates basic knowledge of anesthetic and adjunctive drugs, including dose, drug classification and basic anesthetic implications
### VI. Emergence

- Can verbalize indications for use of reversal agents and determines doses
- With assistance: Confirms extubation criteria are met; provides vigilant monitoring

### VII. Post Anesthesia Management

- Monitors patient and transports safely to PACU/ICU
- With assistance: Initiates immediate postoperative care as necessary to treat post op nausea, pain and other problems
- Evaluates health outcomes related to surgery/anesthesia. Makes post anesthesia visit/note/follow-up on patient (inpatients) and as necessary reports back to instructor

### VIII. Professional role/Leadership

- Effectively communicates in a timely, responsible, positive, and respectful manner to everyone
- Demonstrates personal and professional integrity and the ability to interact on a professional level
- Punctual for assignments, eager to learn, accepts constructive feedback and takes responsibility for his/her actions
- Demonstrates ability to utilize a variety of leadership principles in the management of clinical situations
- Demonstrates ability to provide leadership that facilitates intraprofessional and interprofessional collaboration

### IX. Specialty areas (circle those that apply):

- Regional
- Obstetrics
- Pediatric
- Neurosurgical
- Vascular
- Thoracic Anesthesia

- Identifies anatomy related to specialty area
- Relates physiology and pathophysiology to specialty area
- Regional anesthesia reflects choice of proper technique and correct local anesthetic choice and dose
- With assistance: Performs anesthesia techniques appropriate for the specialty area

### XI. List one clinical topic that was discussed with student

- Demonstrated acceptable knowledge of topic for current level of training
- Answers questions concisely and accurately related to topic

### XII: Strengths, areas for improvement and recommendations
<table>
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<tr>
<th>EC</th>
<th>MC</th>
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<th>NA</th>
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<tr>
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<td></td>
<td></td>
<td><strong>I. Pre anesthetic assessment</strong></td>
</tr>
<tr>
<td>EC</td>
<td>MC</td>
<td>BC</td>
<td>FC</td>
<td>NA</td>
<td>Consistently: Conducts interview, performs physical exam, assesses psychosocial/cultural condition, assigns appropriate ASA class</td>
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<td></td>
<td></td>
<td></td>
<td>Consistently: Consults with CRNA/MD regarding pertinent findings and further evaluation</td>
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<td>Completes an accurate preoperative evaluation note and orders</td>
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<td></td>
<td><strong>II. Anesthesia Plan</strong></td>
</tr>
<tr>
<td>EC</td>
<td>MC</td>
<td>BC</td>
<td>FC</td>
<td>NA</td>
<td>Develops a prioritized problem list with anesthetic implications and interventions</td>
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<tr>
<td></td>
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<td></td>
<td>Verbalizes an evidence based anesthesia plan, able to modify plan as needed based on procedural/surgical/patient indications. Is able to provide sound rationale to defend plan</td>
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<tr>
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<td></td>
<td><strong>With assistance: Anticipates complications with initial plan and prepares alternative anesthetic interventions and techniques; adapts to changes in plan</strong></td>
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</tr>
<tr>
<td>EC</td>
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<td><strong>With assistance: Identifies and takes appropriate action when confronted with anesthesia equipment malfunctions</strong></td>
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<td></td>
<td>Re-evaluates patient prior to induction</td>
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<td><strong>IV. Induction</strong></td>
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<tr>
<td>EC</td>
<td>MC</td>
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<td>NA</td>
<td><strong>With assistance: recognizes obstruction &amp; relieves expeditiously</strong></td>
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<td>Properly interprets data from patient and monitors, and responds to alarms/alerts in timely fashion</td>
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<td></td>
<td></td>
<td>Uses proper technique during laryngoscopy and intubation: <strong>consistently performs safe tracheal intubation</strong></td>
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<td></td>
<td>Recognizes potentially difficult intubations preinductions, demonstrates proper use of a variety of laryngoscopes</td>
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<td><strong>V. Intraoperative Management</strong></td>
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<td></td>
<td>Utilizes Fluid management plan; initiates and manages fluid and blood component therapy as appropriate</td>
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<td>Consistently utilizes the electronic anesthesia record or paper chart to record patient data accurately, completely and in a timely manner</td>
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**VI. Emergence**

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**VII. Post Anesthesia Management**

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**IX. Specialty Areas (circle those that apply):** Regional, Obstetrics, Pediatric, Neurosurgical, Vascular, Thoracic Anesthesia

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<td>Regional anesthesia reflects choice of proper technique and correct local anesthetic choice and dose</td>
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<td>With assistance: Performs anesthesia techniques appropriate for the specialty area</td>
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**XII. Strengths, Areas for Improvement and Recommendations**

<table>
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<th>Demonstrated acceptable knowledge of topic for current level of training</th>
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<tr>
<td>Answers questions concisely and accurately related to topic</td>
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Please sign and return to the Clinical Site Director within 5 working days

**Nurse Anesthesia Resident/Date:** ____________________________

**Clinical Preceptor/Date:** ____________________________
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<th>Comments by Instructor and/or NA resident</th>
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### I. Pre anesthetic assessment

- Utilizes Electronic Health Record and/or paper chart to review/record pertinent health information. Conducts interview, performs physical exam, assesses psychosocial/cultural condition and assigns appropriate ASA class
- Consistently: Identifies all pertinent medical problems, therapies, and tests that impact on the delivery of safe quality anesthesia.
- Consistently: Identifies all pertinent medical problems, therapies, and tests that impact on the delivery of safe quality anesthesia.
- Consults with CRNA/MD regarding pertinent findings and further evaluation
- Counsels patient regarding proposed anesthesia techniques and obtains consent
- Completes an accurate preoperative evaluation note and orders

### II. Anesthesia Plan

- Develops a prioritized problem list with anesthetic implications and interventions
- Consistently: Anticipates complications with anesthetic plan and prepares alternative anesthetic interventions and techniques; adapts to changes in plan

### III. Anesthesia Preparation

- Assembles and prepares appropriate drugs, supplies and equipment
- Performs machine and equipment checks for proper function; knowledgeable in the set-up and function of anesthesia equipment;
- Consistently: Identifies and takes appropriate action when confronted with anesthesia equipment malfunctions
- Re-evaluates patient prior to induction

### IV. Induction

- Consistently: Recognizes obstruction & relieves expediently,
- Properly interprets data from patient and monitors, and responds to alarms/alerts in timely fashion
- With assistance: Uses proper technique for adjunct airway devices; seeks opportunities for use; safely performs tracheal intubations
- Uses proper technique during laryngoscopy and intubation; consistently performs safe tracheal intubation
- Recognizes potentially difficult intubations preinduction, demonstrates ability to know own limitations

### V. Intraoperative Management

- Monitoring: Vigilant consistent with ASA/AANA standards
- Independently utilizes the electronic anesthesia record or paper chart to record patient data accurately, completely and in a timely manner
- Maintains composure and responds appropriately during stressful situations
- Uses a variety of current anesthetic techniques, agents, adjunctive drugs & equipment
- Independently: Initiates and manages fluid therapy according to anesthetic plan
### VI. Emergence

| Consistently: Identifies indications for use of reversal agents and determines doses |
| Consistently: Identifies/misidentifies extubation criteria are met; provides vigilant monitoring |

### VII. Post Anesthesia Management

| Consistently: Initiates immediate postoperative care as necessary to treat post op nausea, pain and other problems |
| Consistently: Monitors patient and transports safely to PACU/ICU |
| Consistently: Evaluates health outcomes related to surgery/anaesthesia: makes post anesthesia visit/follow up on patient (inpatients) and as necessary reports back to instructor |

### VIII. Professional role

| Demonstrates self-directed, ongoing learning; aware of own limitations |
| Effectively communicates in a timely, responsible, positive, and respectful manner to everyone |
| Demonstrates personal and professional integrity and the ability to interact on a professional level |
| Seeks and benefits from constructive feedback and takes responsibility for his/her actions |
| Demonstrates ability to provide leadership that facilitates intraprofessional and interprofessional collaboration |
| Evaluates anesthesia care based upon current evidence and develops strategies to improve patient outcomes |
| Demonstrates critical and reflective thinking, uses appropriate problem solving skills, and shows sound judgement through ethically sound decision-making. Works effectively under stress |

### IX. Specialty areas (circle those that apply):

- Regional
- Obstetrics
- Pediatric
- Neurosurgical
- Vascular
- Thoracic Anesthesia

| Identifies anatomy related to specialty area |
| Relates physiology and pathophysiology to specialty area |
| Regional anesthesia reflects choice of proper technique and correct local anesthetic choice and dose |
| Consistently: Performs anesthesia techniques appropriate for the specialty area |

### XI. List one clinical topic that was discussed with student

- ____________________________

| Demonstrated acceptable knowledge of topic for current level of training |
| Answers questions concisely and accurately related to topic |

### XII: Strengths, areas for improvement and recommendations

Please sign and return to the Clinical Site Director within 5 working days

Nurse Anesthesia Resident/Date ________________________________  Clinical Preceptor/Date ________________________________
**Uniformed Services University Nurse Anesthesia Program Clinical Evaluation Tool**

**Fall Semester- RNA 805**

**Clinical Date__________________________       Rotation Site______________________       Cases ___________________________________**

**Nurse Anesthesia Resident__________________________________________________**

**Instructor_________________________________________________________________**

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**EC: Exceeds criteria:** Indicates that the student exceeds stated criteria for this term; **MC = Meets criteria:** Indicates the student is able to accomplish the objective; **BC = Below Criteria:** Indicates the student either has difficulty accomplishing the objective or needs further refinement for the current term in the program; **FC = Fails to meet criteria:** Indicates that the student does not meet the objective for the current term in the program; **NA = Not applicable/did not observe**

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| II. Anesthesia Plan                        |    |    |     |     |    |                                        |
| Develops a prioritized problem list with anesthetic implications and interventions |    |    |     |     |    |                                        |
| Verbalizes an evidenced based anesthesia plan, able to modify plan as needed based on procedural/surgical patient indications. Is able to provide sound rationale to defend anesthetic plan |    |    |     |     |    |                                        |
| Consistently: Anticipates complications with initial plan and prepares alternative anesthetic interventions and techniques; adapts to changes in plan |    |    |     |     |    |                                        |

| III. Anesthesia Preparation                |    |    |     |     |    |                                        |
| Assembles and prepares appropriate drugs, supplies and equipment |    |    |     |     |    |                                        |
| Performs machine and equipment checks for proper function; knowledgeable in the set-up and function of anesthesia equipment; |    |    |     |     |    |                                        |
| Consistently: Identifies and takes appropriate action when confronted with anesthesia equipment failures |    |    |     |     |    |                                        |
| Re-evaluates patient prior to induction |    |    |     |     |    |                                        |

| IV. Induction                              |    |    |     |     |    |                                        |
| Consistently: Recognizes obstruction & relieves expeditiously, |    |    |     |     |    |                                        |
| Properly interprets data from patient and monitors, and responds to alarms/alerts in timely fashion; recognizes and expeditiously relieves obstruction |    |    |     |     |    |                                        |
| Uses proper technique during laryngoscopy and for adjunct airway devices; seeks opportunities for use; safely performs tracheal intubations |    |    |     |     |    |                                        |
| Recognizes potentially difficult intubations preinductions, demonstrates ability to know own limitations |    |    |     |     |    |                                        |

| V. Intraoperative Management               |    |    |     |     |    |                                        |
| Monitoring: Vigilant consistent with ASA/AANA standards |    |    |     |     |    |                                        |
| Consistently: Manages anesthetic (MAC, regional, general) for all patient populations, ASA Classifications for a variety of surgical problems (including trauma and emergent procedures), keeping the patient's responses within the acceptable standards |    |    |     |     |    |                                        |
| Maintains composure and responds appropriately during stressful situations |    |    |     |     |    |                                        |
| Uses a variety of current anesthetic techniques, agents, adjunctive drugs & equipment |    |    |     |     |    |                                        |
| Independently: Initiates and manages fluid therapy according to anesthetic plan |    |    |     |     |    |                                        |
**VI. Emergence**

Consistently: identifies indications for use of reversal agents and determines doses

Consistently: Identifies/confirms extubation criteria are met; provides vigilant monitoring

**VII. Post Anesthesia Management**

Monitors patient and transports safely to PACU/ICU

Gives complete report to staff and makes pertinent note on record

Independently: Initiates immediate postoperative care as necessary to treat post op nausea, pain and other problems

Evaluates health outcomes related to surgery/anesthesia. Makes post anesthesia visit/note/follow-up on patients (inpatients) and as necessary reports back to instructor

**VIII. Professional role**

Demonstrates ability to be an independent practitioner

Demonstrates self-directed, ongoing learning; aware of own limitations

Effectively communicates in a timely, responsible, positive, and respectful manner to everyone

Demonstrates ability to utilize a variety of leadership principles in the management of clinical situations

Demonstrates ability to provide leadership that facilitates intraprofessional and interprofessional collaboration

Demonstrates personal and professional integrity and the ability to interact on a professional level; seeks constructive feedback, takes responsibility for actions

Evaluates anesthesia care based upon current evidence and develops strategies to improve patient outcomes

Demonstrates an understanding of and practices with an in-depth knowledge of professional ethics and medical laws as practiced by Nurse Anesthetists

Demonstrates clinical and reflexive thinking, uses appropriate problem solving skills, and shows sound judgment through ethically sound decision-making.

**IX. Specialty areas (circle those that apply):** Regional, Obstetrics, Pediatric, Neurosurgical, Vascular, Thoracic Anesthesia

Identifies anatomy related to specialty area

Relates physiology and pathophysiology to specialty area

Regional anesthesia reflects choice of proper technique and correct local anesthetic choice and dose

Consistently: Performs anesthesia techniques appropriate for the specialty area

**XI. List one clinical topic that was discussed with student**

Demonstrated acceptable knowledge of topic for current level of training

Answers questions concisely and accurately related to topic

**XII: Strengths, areas for improvement and recommendations**

Please sign and return to the Clinical Site Director within 5 working days

Nurse Anesthesia Resident/Date

Clinical Preceptor/Date
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