Welcome to the Uniformed Services University (USU) Graduate School of Nursing (GSN), a unique learning environment, where the focus is on preparing health care professionals for practice and research in federal and military health care systems.

The GSN is committed to promoting clinical excellence, and furthering research and scholarship in healthcare. Located within USU, the School enjoys interdisciplinary relationships with medicine, public health and other health related professions. GSN students include uniformed officers from the Army, Navy, Air Force and US Public Health Service, as well as nurses working in a variety of federal agencies (AHRQ, HRSA, VA, and NIH). Our graduates are prepared to foster growth and development of junior nurses, provide clinical expertise, support teaching and conduct clinically relevant research. They contribute to peacetime health care delivery systems, military health in support of combat operations, and civil disasters and humanitarian missions.

The GSN’s “signature curriculum” has three foci: 1) Operational Readiness in a Changing Environment, 2) Global, Environmental, Cultural & Political Context, and 3) Clinical Decision-Making in the Federal Health Care Delivery System, with cross cutting emphasis on patient safety, evidenced based practice/research leadership and health policy transition of technology to practice and educational health promotion for warriors and families.

Established by Congressional action in 1993, the GSN’s mission is to prepare nurses at the graduate level. Our faculty and staff have an exceptional blend of experience in the military and/or the federal health care systems, and are prepared to provide a distinctly different educational experience. Our “signature curriculum” prepares GSN graduates for practice and research roles in support of Active Duty members of the uniformed services, their families and all other eligible beneficiaries.

The GSN is accredited by the Commission on Collegiate Nursing Education (CCNE), the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) and the Middle States Commission on Higher Education (MSCHE). The Master of Science in nursing program options include

- Registered Nurse Anesthesia (RNA) - last class admitted in 2012
- Family Nurse Practitioner (FNP)
- Psychiatric Mental Health Nurse Practitioner (PMHNP) and
- Adult Gerontology Clinical Nurse Specialist (AGCNS): Perioperative Specialty

The Doctor of Nursing Practice (DNP) degree program was launched in May 2012 with inaugural students matriculating into the FNP and PMHNP options. In May 2013 the first RNA students matriculated.

The PhD program, established in 2003, has a research-intensive focus within the areas of population health and outcomes, operational readiness, and clinical decision making.

The University is located on spacious grounds near the Walter Reed National Military Medical Center and ideally located across the street from the National Institutes of Health. Direct access to the Washington beltway allows for convenient access to a number of major federal health facilities that through affiliations provide resources to enhance the education of students.
The GSN at USU is the University of Choice for military and federal nurses seeking to develop clinical expertise, enhance administrative acumen, and accomplish scholarly inquiry in their quest for growth in the profession of nursing. The faculty, staff and I welcome you and look forward to working with you in your professional journey.

*Ada Sue Hinshaw, PhD, RN, FAAN*
*Dean and Professor, Graduate School of Nursing*
PURPOSE

To establish specific guidelines, policies, responsibilities, and procedures for graduate nursing students assigned to the Uniformed Services University of the Health Sciences (USU).

APPLICABILITY

This handbook is applicable to all Graduate School of Nursing (GSN) Master of Science and Doctor of Nursing Practice students.

POLICY CHANGES

Students should not construe the provisions in this handbook as an irrevocable contract. The GSN reserves the right to make policy and regulatory changes at any time. The GSN does not assume responsibility for giving advance notice of changes made in policies.

Changes in such vital areas as curriculum or requirements for graduation, however, will not be made retroactively unless they are to the students’ advantage and can be accommodated within the remaining time before graduation.

Students and graduates of the GSN must also recognize that changes in the law or military service policy may affect their rights and obligations. The Student Handbook attempts to provide a general summary of the policies of the uniformed services that affect USU students. Individual military service policies may differ from those listed in this handbook, in which case the service policy governs.

GRADUATE SCHOOL OF NURSING OATH

I pledge myself to faithfully practice the profession of nursing. I recognize that with higher learning comes greater responsibility: first and foremost, to those placed in my care; to the advancement of nursing science; and to the promotion of the nursing profession. I will strive for personal and professional growth through empirical knowledge and within the highest moral and ethical standards of research. I will remember the long and prestigious traditions of nursing, dating from the early battlefields to the diverse professions of today; and upon this foundation I am called to build. Whether caring for those in my own country or in a foreign land, I will not compromise their safety or dignity, but instead will care for them within the highest standards and practices of my profession.
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Part 1.
GRADUATE SCHOOL OF NURSING
MASTER OF SCIENCE IN NURSING
AND
DOCTOR OF NURSING PRACTICE

PROGRAM POLICIES
AND
INFORMATION
I. HISTORY/MISSION

A. HISTORY OF USU

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 progress has been remarkable. 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.

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 awarded only by a school of nursing, the creation of a GSN at USU was appropriate. 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 (CNS) Perioperative Program admitted students in June of 2003 and in 2013 increased its scope to the Adult-Gerontology population across the wellness to acute care continuum with the continued specialty focus in perioperative nursing. The Adult Psychiatric Mental Health Practitioner (PMH-NP) Program admitted students in June of 2008. Starting with the students who matriculated in 2012, the Adult Psychiatric Mental Health Nurse Practitioner Program converted the curriculum to a Psychiatric Mental Health Nurse Practitioner program with a population focus across the life span. 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.

With the support of the University administration and Board of Regents and the partnership and collaboration with the Federal Nursing Service Corps Chiefs from Army, Navy, Air Force, Public Health Service and Veterans Administration, the GSN began matriculating Doctor of Nursing
Practice (DNP) students in May 2012, with full implementation for nurse practitioner and nurse anesthesia students in 2015. The DNP is being implemented in response to the 2004 American Association of Colleges of Nursing (AACN) statement on advanced practice nursing “the practice doctorate [should] be the graduate degree for advanced nursing practice preparation”. Based on the recommendation in 2007, by the American Association of Nurse Anesthetist, the, Council on Accreditation of Nurse Anesthesia Educational Programs mandated that all Nurse Anesthesia programs must be converted from a master’s to Doctor of Nursing Practice (DNP) degree for students matriculating after 2022. On 1 December 2010, Senator Daniel Inouye noted in the Congressional Record (Vol. 156, No. 155) that “To maintain professional standards for military APRNs and remain competitive for high quality students, the Graduate School of Nursing (GSN) at USUHS must transition to the DNP for its APRN programs.

The Doctor of Philosophy in Nursing Science (PhD) 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.

B. USU MISSION
The mission of the Uniformed Services University of the Health Sciences is to train, educate and prepare uniformed services health professionals, officers and leaders to directly support the Military Health System, the National Security and National Defense Strategies of the United States and the readiness of our Armed Forces.

C. USU VISION
By the end of 2015, the Uniformed Service University of the Health Sciences, recognized as the preeminent educational institution for the creation of career uniformed services health professionals and leaders prepared to serve the Nation wherever and whenever duty calls, will be a central hub for military-related health education and research, and the Nation’s center of excellence for the health dimensions of our national security strategies. USU will ensure that each graduate is prepared with an outstanding health education, interprofessional health training, and a deep and abiding commitment to selfless service, responsible leadership, the military ethos and the security of the United States.

D. USU Guiding Principles
As we strive to accomplish our mission, we are committed to all of the following principles. Each one represents an essential and equally important core value.

Caring
We foster an atmosphere of caring, mutual respect, courtesy, pride in work and personal development. Each member of the university community is important.

Communication
We interact and share information in a timely manner with openness, candor and sensitivity.

Integrity
We conduct ourselves responsibly, ethically and honestly.

**Loyalty**
We are dedicated to each other, the University, the Department of Defense and the Nation.

**Quality**
We strive to excel through continuous quality improvement.

**Scholarship**
We are committed to academic freedom as fundamental to the advancement of knowledge and a lifetime of learning.

**Service**
We are sensitive to the needs of those we serve and are responsive to new ideas and change.

**Teamwork**
We value the contributions of each member of our community and work to achieve an environment characterized by cooperation, collegiality, and an appreciation of diversity.

---

**E. GSN MISSION, VISION & GUIDING PRINCIPLES**

**GSN Mission Statement**
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.

**GSN Shared Vision**
The premier nursing education and research graduate school, innovative in serving the needs of the Federal Health System.

**GSN Guiding Principles (T-R-I-C-E)**

**Teamwork**
- build a community to achieve an environment characterized by cooperation, collegiality, and appreciation of diversity.

**Respect**
- genuine consideration of others’ rights, values, and traditions
- regard for others’ feelings, wishes, and traditions

**Integrity**
- adherence to one’s principles
- do what is morally and ethically right

**Communication**
- listen and share information in a timely and constructive manner with openness, candor, and honesty

**Excellence in all Pursuits**
- teaching, research, practice, service and collaboration
F. GSN PHILOSOPHY

The philosophy of the GSN is derived from the mission and goals of the University. The philosophy is built on a foundation of nursing theory, research, and advanced practice that fosters critical thinking and a vision of future health care with consideration of the unknown and unforeseen.

Graduate nursing education builds upon a foundation of undergraduate nursing education. Baccalaureate nurses enrolled in the advanced practice nursing programs are provided learning experiences that increase the breadth and depth of their knowledge base in nursing and students acquire a new advanced level of competence while preparing for role specialization. The advanced practice nurse utilizes nursing science as a basis for the delivery of health care by incorporating scientific knowledge and clinical skills. The curricula for advanced practice nursing are constructed upon a balanced theoretical and research base specific to the practice area. The GSN prepares students for collaborative and autonomous nursing roles with an emphasis on health promotion; disease prevention; primary care delivery; case management, anesthesia services; administration; and emergency preparedness. Further, they advance the profession of nursing by conducting research and applying findings to nursing practice.

Students accepted into the PhD program transition from a master's specialty domain to an educational program of study that includes emphasis on nursing leadership, research, education, and practice. The PhD program is uniquely focused on the needs of individuals and systems within the federal/military sector.

Inherent in the philosophy of the GSN are beliefs regarding the individual, society, environment and culture, nursing, health, and graduate nursing education. The GSN utilizes an eclectic approach to implementing theoretical concepts and nursing models, thus providing a broad yet selective foundation.

G. MSN TERMINAL COMPETENCY OUTCOMES

At the completion of the MSN program, graduates will have achieved the following competency outcomes and be prepared for the advanced practice nurse role within the Military and Federal Health Care System.

- Implement the autonomous role of the advanced practice nurse across the lifespan focused on individuals, families, and communities with an emphasis on clinical decision-making within the Military and Federal Health Care System and operational environment.

- Manage the delivery of safe, effective health care within a changing global environment focused on prevention of disease and injury and promotion of wellness and safety, based on research and evidence-based practices.

- Engage in consultative/collaborative relationships with multidisciplinary teams to manage the quality, cost-effectiveness, ethical, and legal aspects of health care.

- Maximize force health protection and delivery of safe, effective health care by engaging in leadership activities, political awareness and shared decision-making through joint service relationships within the federal health care system.
- Participate in generating and testing knowledge in the areas of operational readiness in the changing environment, clinical decision-making, and population health to advance nursing science within the federal health care systems.

- Engage in active self-directed learning in support of professional development through an array of educational venues to include the use of technologic interfaces.

- Communicate effectively, from the perspective of the advanced practice nurse in intellectual dialogue across disciplines, to promote research and collaborative decision making in support of service-specific health care missions.

- Promote education of self, staff, peers, patients, and the community in the areas of health promotion and prevention, risk management, clinical decision-making and evidence-based practice.

- Engage in advanced practice nursing care with compassion and respect for individual differences, as the advocate for basic human rights, to make informed health care decisions.

- Integrate eight core practice competencies of the Competency Outcomes Performance Assessment (COPA) model into comprehensive professional practice (knowledge integration, assessment & intervention, critical thinking, leadership, management, communication, teaching, and human caring interactions).

**H. DNP TERMINAL COMPETENCY OUTCOMES**

- 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.

- 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.

- 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.

- 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.

- 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.

- Critically appraise the development, implementation and evaluation of health policy from the perspective of public, private, military and/or global communities of interest.
Advocate for nursing, social justice, equity and ethical policies within the federal, military, healthcare and policy communities to improve care delivery and outcomes.

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.

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.

I. GSN DEFINITIONS

Nursing

Nursing is an art and a science. Care is the essence of nursing. The aim of nursing is to provide support to ameliorate, improve, or correct unfavorable internal and external environmental conditions and to promote health and prevent illness. Nursing promotes wellness by assisting individuals to accept responsibility for their own health. Nursing is characterized by collegial, collaborative, and complementary relationships with clients and with other health professionals. Nursing has a unique base of scientific knowledge and clinical skills. The synthesis of knowledge from other disciplines enhances the creation of a unique and comprehensive health care approach that incorporates practice, teaching, and research.

Graduate Nursing Education

The primary concepts of graduate nursing practice form the foundation of the graduate-nursing curriculum in the GSN. The position of the GSN within the interdisciplinary boundaries of the USU is a distinct strength. This environment offers a unique blend of interactive lecture and clinical experiences which support the preparation of competent advanced practice nurses for peacetime; for adverse conditions of international conflict; and for humanitarian and disaster relief services. Not only are the GSN graduates prepared to demonstrate excellence in clinical practice, management, research, and leadership, but also are qualified to influence health policy decisions throughout the world.
J. STATEMENT OF ACCREDITATION

Accreditation provides quality assurance concerning educational preparation through continued self-study and on-site review. The GSN received its initial accreditation in December 1996 from the National League for Nursing (NLN), the accrediting body for all programs in Schools of Nursing. Preliminary approval from the Commission on Collegiate Nursing Education (CCNE) was received in February 1998. In 2002, the GSN received continuing accreditation from the NLN Accrediting Commission and CCNE. Today, the GSN continues its accreditation with CCNE. In 2012 the GSN was reaccredited for 10 years by the CCNE for its master's degree program. Accreditation for the doctor of nursing practice program is anticipated in 2013. CCNE is recognized by the U.S. Secretary of Education as a national accreditation agency, ensuring the highest quality and integrity of graduate education programs. The programs in the GSN comply with the AACN Essentials of Masters Education in Nursing and the Essentials of Doctor of Nursing Practice Education in Nursing. Contact information for CCNE is: One Dupont Circle, NW, Suite 530, Washington, DC 20036, (202) 887-6791, http://www.aacn.nche.edu/ccne-accreditation.

The Council on Accreditation (COA) of Nurse Anesthesia Educational Programs, a specialized accrediting body recognized by the Council on Higher Education Accreditation and the U. S. Department of Education, accredits the Nurse Anesthesia Program. The Nurse Anesthesia Program received a 10-year accreditation from the COA in 2003 for the master's degree program. In October of 2012 the nurse anesthesia program approval for the DNP program to start in May 2013. The nurse anesthesia program is therefore accredited for both the masters and DNP degree. Contact information for the COA is: 222 S. Prospect Avenue, Park Ridge, Ill. 60068-4001, Main Number: 847-655-1160, Fax: 847-692-7137, Email: accreditation@coa.us.com

II. MILITARY COMMAND AND CONTROL

A. USU BRIGADE MISSION

Mission. USUHS is the Nation's federal health sciences' 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 common 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 whenever and wherever the need may arise.
B. CHAIN OF COMMAND

President of the United States

Secretary of Defense

Assistant Secretary of Defense
Health Affairs

TRICARE Management Activity

USU President

ACADEMIC CHAIN

DEAN
Graduate School of Nursing

Associate Dean for
Academic Affairs

Program Chairs/Directors

Deputy Program Directors

Course/Clinical Coordinators

GSN Student Leadership

MILITARY COMMAND AND CONTROL

USU Brigade Commander

Commandant,
Graduate School of Nursing

GSN
Company Commander

GSN
Leading Petty Officer/First Sergeant

Student
C. BRIGADE COMMANDER

The Brigade Commander is ultimately responsible for the accomplishment of the Brigade mission. The Brigade Commander is recognized as the “senior active duty military officer” of the University and implements the Uniformed Code of Military Justice (UCMJ) within the USU Brigade. It is the responsibility of the Brigade Commander to ensure that uniformed personnel assigned to the University adhere to the appropriate service specific standards set forth by their parent services. In addition, the Brigade Commander makes certain that the interests of the military members assigned to the University are addressed. Under the leadership of the Brigade Commander, the uniformed students, faculty and staff assigned and reporting to the School of Medicine, the School of Nursing, or other University programs and divisions must participate in activities and events as they would in any other command of the Uniformed Services. Physical fitness exercises, standards, and testing are adhered to; performance evaluations are completed and rated; and uniformed personnel are trained in the appropriate uniformed programs and customs.

D. COMMANDANT, GRADUATE SCHOOL OF NURSING & ASSISTANT DEAN FOR STUDENT AFFAIRS

The Commandant, Graduate School of Nursing, serves as the senior military officer in charge of all Brigade-assigned Army, Navy, Air Force and Public Health Service GSN students and is assisted by the GSN Student Company Commander. The commandant reports to the Brigade Commander for military issues and chain of command accountability, and serves as military advisor to the Dean, GSN. The mission of the Office of the GSN Commandant is to:

- Exercise military command and control of all brigade uniformed service students assigned within the GSN.
- Direct service-specific mandated programs, physical fitness, weight control, urinalysis, officer professional development and equal opportunity.
- Execute plans, programs, and policies to ensure accomplishment of all USU Brigade missions in compliance with directives of higher authority.
- Model, stimulate, and foster the qualities and attributes of professional leadership and officership.
- Serve as student resource for service-specific military career counseling, officer professional development and a facilitator for administrative requirements.

As the Assistant Dean for Student Affairs, the Commandant fosters educational and professional development of all assigned students, manages the administration of various student needs in cognitive and non-cognitive areas of growth, administers the student conduct process, coordinates career development programs, and oversees the academic performance of each student. The Assistant Dean for Student Affairs supervises the quality of student life and represents the student body to the University Administration.
E. IN/OUT PROCESSING

- All GSN students must formally In-process and Out-process through the USU Military Personnel Office (MILPO), Building C, Room C1016 during the hours of 0730-1530 Monday through Friday except holidays.
- All arriving/outgoing students will report to MILPO to obtain and In-processing or Out-processing checklist.
- Once the checklist has been completed it must be turned in to the MILPO office.

F. UNIFORM AND GROOMING STANDARDS

- Unless otherwise directed by the GSN Commandant, all USU students will wear the University prescribed uniform of the day while attending classes or conducting other official business on campus. All students are expected to follow these uniform guidelines. During the clinical rotations in the military treatment facilities, the normal duty uniform will be that prescribed by the local Commander. During clinical rotations in other than military treatment facilities, the Program/Clinical Director will prescribe the duty uniform.
- Every Monday, each Service will be dressed in the following:
  - Navy - Navy Service Uniform/Service Khakis
  - Army - Class "B"
  - Air Force - Class "B"
  - Marine Corps - Class "B"
  - Public Health Service - Service Khakis
- Tuesday - Friday, each Service will wear the following:
  - Navy - Navy Working Uniform Type I (NWU Type 1)
  - Army - Army Combat Uniform (ACU)
  - Air Force - Airman Battle Uniform (ABU)
  - Marine Corps - Woodland/Desert Camouflage Uniform (DCU)
  - Public Health Service – CUUs
- Camouflage Utility Uniform (CUU) is no longer authorized for wear as a Uniform of the Day for Navy personnel.
- The security badge must be worn at all times.

G. PROFESSIONAL AND STANDARD OF CONDUCT

Public confidence in the integrity of the Department of Defense is essential to the performance of its mission. Students are expected to uphold the standards of conduct and the values of their respective services. Observe the USU and GSN Guiding Principles and treat all members of the USU community with respect, regardless of rank or position, civilian or military, in word or in deed, in or out of uniform, in or outside the classroom. Students must adhere to all policies and instructions of the University.

All students are held to the standards of conduct requiring them to avoid any action, whether or not specifically prohibited, which might result in or reasonably be expected to create the appearance of:
- Using public office for private gain
- Giving preferential treatment to any person or entity
• Impeding government efficiency or economy
• Losing complete independence or impartiality
• Making a government decision outside official sanctions
• Adversely affecting the confidence of the public in the integrity of the government
• Engaging in any activity or acquiring or retaining any financial interest that results in a conflict between their private interest and the public interest of the United States related to their duties.
• Engaging in any activity that might result in or reasonably be expected to create the appearance of a conflict of interest. Not accepting gratuities from defense contractors.
• Using their official position to influence any person to provide any private benefit.
• Using inside information to further private gain.
• Using their rank, title, or position for commercial purposes.
• Engaging in outside employment or activity that is incompatible with one's duties or that may bring discredit to the service.
• Taking or using government property or services for other than officially approved purposes.
• Giving gifts to their superiors or accepting them from their subordinates.
• Conducting official business with persons whose participation in the transaction would be in violation of the law.
• Duplicating copyrighted documents that impinge on copyright law. Single copy of an article for personal educational use may be considered fair use.

H. ACCOUNTABILITY SYSTEM

• Normal duty hours are as prescribed by program academic schedule. Attendance at class, clinical, and other required events is mandatory unless officially excused by the appropriate Course/Clinical Coordinator and Commandant. If an unscheduled absence occurs for any reason, the Class Leader and Commandant’s office and appropriate Course/Clinical Coordinator must be notified immediately.
• Students who fail to report for didactic or clinical training will receive counseling from their Clinical/Course Coordinator. Repetitive incidents of absence or tardiness will be referred to GSN Student Company Commander for appropriate disciplinary/administrative action IAW GSN Student Company Commander Policy and Precedent on Student Accountability.
• When scheduled class and/or clinical rotation time is missed, the student is responsible for acquiring missed class notes and/or coordinating makeup of time lost.
• All students must provide any changes in name, telephone numbers or address to the Commandant’s Office no later than 7 days after the change. The information is used to update the recall roster.
• Students are responsible for checking their e-mail daily and mailboxes located in the Student Community Center at least twice weekly and are responsible for knowing and acting on the information contained therein.
• Accountability checks during semester breaks will be prescribed by the GSN Company Commander. Guidance will be published before each break.
• All accountability checks will be done through the on-line Roll-Call system, unless otherwise specified by the GSN Company Commander. Students not on leave/pass will receive a Roll-Call message every Tuesday and Thursday during scheduled break sessions. Students who fail to respond to the Roll-Call message NLT 1300 on the specified sign-in dates will be considered Absent Without Leave (AWOL) and subject to
disciplinary action. In the event the Roll-Call system is down, students must email or call the GSN Commandant Team (GSN-Commandant-Team@usuhs.edu), to ensure they are properly accounted for.

- Accountability checks as required by the University will be conducted by the GSN Company Commander. Accountability checks for students who have detached for their Phase II or MTF rotation but are still “administratively attached” to USU will be done through the clinical site directors.
- Attendance at Commandant’s Calls is mandatory. Do not schedule appointments which coincide with Commandant’s Calls. Only the Commandant can grant exceptions, except in cases of emergencies.

I. UNIFORM CODE OF MILITARY JUSTICE (UCMJ)

- The military justice system is one tool used to correct breaches of discipline. The purpose of the system is to protect the rights of both the institution and the individual service member. The uniformed officer has the responsibility to provide full support to the UCMJ when a breach in discipline occurs; to support the Commandant in the application of the military justice system for maintaining order and discipline; to take appropriate action when breaches of discipline occur; and to report all such violations to the proper authorities.
- Officers should do everything within their power to prevent breaches of discipline from occurring. If all efforts at prevention fail, the next most reasonable step is correction through expressions of disapproval, verbal reprimands, or remedial training. These corrective methods often bring more desirable results than more punitive methods. However, if these minor corrective methods prove unsuccessful, punitive action may be taken.
- Issues involving breaches in military conduct or officerhip will be dealt with by the USU Brigade chain of command. Adjudication will be directed through the member’s branch of the service. After adjudication, the Student Promotions Committee (SPC) will be briefed on actions taken. The SPC will determine the need for further action as it relates to student status at the university.
- Punitive methods are used, as a last resort, to punish those who repeatedly or seriously violate the standards of conduct required of military service members. Punishment may be rendered through nonjudicial (Article 15) or judicial means (court martial). Military services members shall not lie, cheat, steal, or engage in activities that bring discredit upon themselves, their service, and the United States Armed Forces.

J. PHYSICAL FITNESS AND WEIGHT CONTROL

Students are required to meet physical fitness, weight and body fat standards at all times in accordance with their service-specific regulations. Failure to meet these standards can result in adverse administrative actions, including entry into a supervised exercise or weight management program, restriction of clinical rotations to the local area, and potential removal from active duty. The University has master fitness instructors who, upon request, will tailor programs to meet individual needs.
K. DRUG ABUSE PREVENTION

The Brigade conducts random, unannounced urine drug screens. The Commandant’s office is notified 24 hours in advance. The Commandant’s office will notify individual students of this requirement when necessary or activate the student alert roster when appropriate. Urinalysis testing is considered a mandatory formation. Students selected to participate must report at the appropriate time, in duty uniform with their ID card. Failure to show is considered Absence Without Leave and will result in disciplinary action. Allowances are made for students who are on official TDY/TAD for clinical rotations.

L. LEAVE, PASS, AND LIBERTY POLICY

Leave, Pass and Liberty requests will be accompanied by an Individual Medical Readiness report from the student’s service-specific Medical Readiness System. If the medical readiness report shows any amber or red areas, the student must present proof of a scheduled appointment or completion of the requirement before the leave can be approved.

1. Leave
The following procedures for requesting and approving leave are applicable to all U.S. Military assigned in student status:

- Approving authority for all leave is the GSN Company Commander or the GSN Commandant when the company commander is not available.
- Leave shall be administered uniformly and equitably within the scope of applicable laws and regulations.
- Students will submit leave request in a timely manner, at a minimum, 96 hours prior to start of leave. For overseas request, submission must be in office 30 days in advance. The student must take the required security training and present proof of completion with the leave request.
- The GSN Company Commander will sign or approve leave forms through LeaveWeb (Air Force) and NSIPS (Navy) and forward to the Military Personnel Office (MILPO). MILPO will assign a control number and copies must be obtained from their office (Army only). Air Force personnel will receive approval via Air Force LeaveWeb email notification and Navy personnel will receive approval via NSIPS.
- A copy of the leave form or print-out of electronic approval must be carried while on leave.
- If unable to return from leave as scheduled, notify the GSN Company Commander immediately @ 301-256-9561 during duty hours or via cell number on recall roster as necessary. Failure to return from leave on time without approval will be considered absent without leave (AWOL).
- Use of leave not yet earned (advance leave) is not automatically approved nor recommended. Check with the GSN Company Commander for service specific policies.
- Emergency leave will be granted when appropriate. Notify the GSN Company commander, Leading Petty Officer/First Sergeant or the GSN Commandant. At a minimum the following information must be provided; the nature of the emergency, dates of the leave period, and the address and phone number for leave period.
- Leave during scheduled class time or clinical rotation time must be approved by the Program Director or their designee prior to submission to GSN Company Commander for processing. All absences during “normally” scheduled class/clinical time will be counted as leave.
• Holiday/Winter Recess Leave/Liberty/Pass shall be executed IAW GSN Company Commander guidance.

2. Pass/Liberty
• A PASS or liberty can be granted if students are away from their home (greater than 250 miles) for a period of 96 hours or less. Typically passes are used for 3-4 day holiday weekends.
• Passes must include the weekend (Sat and Sun) and may not include a school day. If a student wishes to be absent from classes, a leave form must be submitted. Pass/Liberty does not count against normal leave. Pass/liberty cannot occur concurrently with leave. Passes are requested by submitting a pass form to the GSN Company Commander.
• If unable to return from pass/liberty, for any reason, the GSN Company Commander is to be notified immediately. Extension of a pass/liberty may necessitate the entire absence be converted to leave. If the pass/liberty privilege is abused members will be subject to disciplinary action.

M. MEDICAL READINESS
• Medical Readiness is the responsibility of each Service member. Students should treat their medical readiness just like their nursing or driver’s license. Know the due dates for all requirements and take action before they expire.
• Students will present a copy of their medical readiness screen with their request for TDY/TAD, leave, pass or liberty. Request for leave, pass liberty/TDY may be denied if there are delinquencies in any area of the medical readiness requirements. Waivers may be granted depending on the availability of appointments.
• Students going on TDY/TAD for clinical rotations must ensure that they are “Green” on all medical readiness requirements. Students will report to the Commandant Team Office with their medical readiness screens prior to departing on TDY/TAD.
• Do not allow any aspect of your medical readiness to expire. Students who are notified of expired medical readiness requirements more than twice in a 6 month period during the academic year will be counseled in writing. Failure to address the delinquency within 30 days will generate counseling. Repeated counseling for expired medical readiness will be reflected in student evaluation.

N. ACADEMIC EVALUATION REPORTS/TRAINING REPORTS/fitness reports
• Academic/fitness reports are submitted to each service annually. A brief narrative noting academic progress, military performance, and essential identifying information (rank, SSN, etc.) will be forwarded to the Military Personnel Office (MPO). You will be required to submit input to the Commandant and your Program Director for this report.
O. Off-Duty Employment

- GSN students at USU receive full pay and allowances. Each uniformed service expects that the student’s primary emphasis and full attention be focused on their studies at USU. DOD Directive 5500.7-R, the Standards of Conduct Regulation, prohibits off-duty employment while attending USU.
- Off-duty employment is defined as any non-federal government activity that involves compensation, relates to the service member's military duty (to include attendance in a regular course of study at other educational institutions) or significantly impacts on the student’s time. Any questions as to whether a particular activity falls within this Directive should be addressed to the Brigade Legal Officer.

P. OFF-DUTY ACTIVITIES

- Attendance in a regular course of study at other educational institutions is prohibited while a student at USU. Courses that are completed in a relatively short time are exempt from DOD Directive 5500.7. If a student is in academic jeopardy, off-duty education will not be approved.
- While the university encourages students to volunteer in the local community, their activities must not interfere with program requirements.
- Any activity deemed to be an outside activity for the purpose of DOD Directive 5500.7-R must be approved before the student is authorized to engage in that activity. While each request will be evaluated on its own merits, as a general rule, activities that involve compensation and long term study will not be approved.
- The process for seeking approval of outside activities is as follows: The student will obtain a USU Form 1004, Request for Approval of Outside Activity, from the Commandant. The completed form will be staffed through the chain of command. The request will be reviewed by the Brigade Legal Officer to ensure compliance with the Joint Ethics Regulation. The Brigade Commander will take final approval action. Point of Contact for these concerns/issues is the Brigade General Counsel.

III. STUDENT AFFAIRS

A. 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.

B. 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.

C. STUDENT ORGANIZATIONS

The following are guidelines for the GSN student organizations and class officers:

• President: Senior ranking officer. Acts as the advocate for the GSN student class as a whole. Serves as voting member of the Student Advisory Council (SAC). Acts as the Commanding Officer for the student battalion during all military exercises.

• Vice President: Second highest ranking class officer. Acts as an extension of the President, replacing him/her in an official capacity during the President’s absence, either temporary or permanent. Works closely with the President and class officers and is responsible for special projects as designated by the President. Serves as voting member of the Student Advisory Council (SAC). Acts as the Executive Officer for the student battalion during all military exercises.

• Class Leaders: Each program will elect by plurality vote, a class leader to represent their individual peer group. These officers will be the representative point person for passing of information to and from the student body, serving as a conduit for information between the Commandant, Program Directors and the student body. Responsible for maintaining and initiating a recall roster when directed. Responsible for accountability of program specific students, if absent from class, and initiating required notification of Program Directors and chain of command. Serves as voting member of the SAC...
• **Social Representative:** Each program will elect by plurality a Social Representative. Plans and executes class social functions and participates in the planning and execution of University/school functions in which the class participates or from which it benefits (e.g., Dining-In/Dining-Out, Welcome Picnic, and Graduation). Serves as non-voting member of the SAC.

• **Committees:** Any class officer may establish a committee to assist him/her in the execution of his/her duties. The officer must notify the other class officers during the class officer meeting.

• **Vacant Positions:** If any elected officer is unable to complete his/her term, he/she must make a formal declaration of resignation in writing to the Office of the Commandant. Members may resign without prejudice. Once a resignation statement has been accepted, it is final. All vacant positions, with the exception of the office of President/Vice President, will be filled by class election. It is the responsibility of the class President to coordinate and supervise the election of new officers to vacant positions with the assistance of the Office of the Commandant. This election will follow the standard election format and will be conducted at the soonest feasible and reasonable time as determined by the class President.

If a class officer wishes to run for a class office position that has become vacant, they must first officially resign their current position. This will create another vacant position to be filled during the election. An individual may only run for one office during any election.

All resignations are final and individuals will not revert back to their original positions if they fail to get elected in the new office. Individuals may only hold one class office at any one time.

### D. STUDENT ADVISORY COUNCIL (SAC) – MSN and DNP PROGRAMS

**PURPOSE**

The Master’s Program Student Advisory Council (SAC) is an organization representing the Master students of the Graduate School of Nursing (GSN). It is designed to study student issues across class boundaries and provide a student body consensus which may then be communicated to the Dean, GSN and other responsible school officials. The SAC will also facilitate the transfer of information on matters or problems common to each student class or group.

**ORGANIZATION**

The SAC will be composed of the President, Vice President, FNP/RNA/CNS/PMHNP Class leaders, and an Academic Representative from each of the four MSN and DNP GSN programs. SAC members represent the consensus of their respective class at SAC meetings. The Dean of the GSN will appoint an advisor to guide and assist the SAC. The advisor will not be in the military rating chain and should hold a relatively neutral faculty or staff position. The faculty advisor can be from GSN, the F. Edward Hébert School of Medicine (SOM), or the University, Associate Dean for Student Affairs (ADSA) will serve as the faculty advisor to the SAC.

• **Chairperson.** The Chairperson of the SAC will be the second-year class President. The chairperson will supervise meetings, coordinate discussions and votes to establish a consensus representation of the entire student body. The SAC Chairperson may
establish a committee to assist in the execution of duties with 2/3 consent of the SAC. Such committee assignments terminate at the end of the SAC chairperson’s term.

- **Vice Chairperson.** The Vice Chairperson of the SAC will be the second-year class Vice President.

- **Secretary.** The Secretary for SAC will be the first-year class President who will provide an agenda for each SAC meeting consisting of input from the other SAC members. The Secretary will record and publish minutes of each SAC meeting and notify SAC members of the time and location of such meetings.

- **Treasurer.** The treasurer of the SAC will be the first year Vice President. Manages the finances of the class. Submits an annual class budget, oversees the collection of dues/graduation funds, and disseminates funds as approved by the class officers.

- **Regular Business Meetings.** The SAC will meet at a minimum every other month or more frequently as required. Approval of any issue requires a 2/3 vote by SAC members. Matters discussed and decided by vote at SAC meetings will be binding and represent the “official” student position in discussions with faculty and administrative officials.

- **Emergency Meetings.** The SAC Chairperson can, at any time, call an emergency meeting to discuss problems requiring immediate attention.

- **Meetings with the Dean, GSN.** The SAC will meet with the Dean, GSN following each meeting to discuss issues concerning or confronting the council or students at large.

### E. GSN Committees

Students are appointed by the Dean to several GSN committees and should use this opportunity to communicate with other GSN members and share information with other students.

### F. Office of the Brigade Chaplain

The University chaplain and staff support and enhance the quality of life of military personnel and their families through spiritual development. Members of the chaplain’s staff facilitate the free exercise of religion. Several faith-specific student associations are currently formed to meet the needs of the students. The office of the chaplain is located near the student lounge, in Room C1099, phone: (301) 295-9658/3193. For more information or to email the chaplain for an appointment or with questions, our website is: www.usuhs.mil/chaplain.

### G. Other Student Activities

The wide range of activities and organizations in which both medical students and graduate students are involved reflects the diversity of interests in the student body. Some examples include:

- CADUSUHS Yearbook Committee
- Student Spouses’ Club
- Dining-In Committee
- Dermatone Acapella Singing Group

**STUDENT SPOUSES’ CLUB:** The Student Spouses’ Club exists primarily to help spouses and significant others of USU students meet others in similar situations to their own and to form friendships to help them through the school years. The club offers many activities throughout
the year, including monthly meetings and social activities for each class. The club publishes a newsletter. All spouses and significant others are welcome to participate.

**DERMATONES:** The Dermatones is an acapella singing group, consisting of both men and women voices in barbershop and traditional choral arrangements. The group performs at numerous university functions throughout the year (including mess dinners, social occasions, and memorial services) and special functions (such as Christmas caroling at the Soldiers and Airmen’s Home of Washington, D.C.). The Dermatomes meet weekly for practice and enjoyment. No dues.

Students are encouraged to participate in the community health-based volunteer opportunities. Students are encouraged to attend state and local professional meetings after approval by their Program Director and Commandant.

**H. Student Expenses**

- **USU Local Travel Reimbursement Policy:** Travelers are authorized reimbursement for local transportation expenses when approved by their designated Approving Officials. Travel must be outside the boundaries of the established Permanent Duty Station (PDS). The Installation Commander may determine the boundaries of the PDS as long as it is not an arbitrary mileage radius.
- **Title 10, Section 1089, United States Code,** addresses student liability while functioning in an official governmental capacity.
- **Membership in professional organizations** is encouraged. Organizations of interest to advanced practice nurses include the Uniformed Nurse Practitioner Association, National Association of Clinical Nurse Specialists, Association of Perioperative Nurses, and the American Association of Nurse Anesthetists; membership fee is the responsibility of the student.
- **The fee for certification examinations and review courses** will be the responsibility of the student OR the sponsoring Service or Agency.

**I. GOVERNMENT CREDIT CARD**

- This card is authorized for use in conjunction with official travel only. It must be used for travel-related expenses. All transportation must be purchased through the government contracted agency.
- It is mandatory that you choose the split disbursement payment option when submitting your travel voucher so that funds will be sent directly by DFAS to current issuer of the government credit card.
- **If you are TDY/TAD for 45 days or longer, you must authorize “Partial Payments” so that DFAS will release funds every 30 days to your government travel card to avoid payment delinquencies.**
- **Government credit card bills** will be paid when it is due, regardless of the status of travel settlement.
- **Students are expected to maintain sufficient funds on hand** in case of delays in travel settlement, especially during the beginning or ending of the fiscal year.
- **Students with Credit card bills which are not paid when due will be counseled in writing.** The finance office reports delinquent accounts monthly to the University and Brigade leadership.
• The student’s account may be suspended if an account goes unpaid according to DoD timelines. Delaying payment while awaiting TDY/TAD settlement payments is NOT authorized.

• Credit card update: When in-processing or if you get a new card, you must go into DTS under “Profile,” update your card number and expiration date. Check that the checking account routing # is active and update it, if needed.

J. EMERGENCY PROCEDURES, PERSONAL AND BUILDING SECURITY, FACILITIES AND BASE ACCESS

• **Emergencies:**
  - Call 777 for Fire, or medical emergencies
  - Code “White” – Active shooter Incident
    - Shelter in place, call 777
    - Lock and barricade doors
    - Turn off lights, silence phones
    - Take cover, stay away from doors or windows

• **Security:** Call 301-295-3033 if you have any security concerns.

• **Building Access:** USU buildings are open from 0600-1900 hours, Monday through Friday. All other times, USU buildings are secured. Building access during those secured hours is only permitted at the Security Guard Office, Room G-192, on ground level of Building B. Identification badges are required at USU and must be worn on the right front pocket or shoulder area and visible at all times.

• **Base Access:** The USU Badge or the Military ID Card is required for gate entry. If a USU visitor has neither a military nor government agency ID, a request (via email) for access to the base must be coordinated through the GSN Commandant team.

• **Parking:** All USUHS members must park in designated parking locations within the garage, and must have a visible USU hang tag, carpool hang tag, or visitor pass. Parking is not permitted on Palmer Road and the garage entrance at any time.

  - **Overnight Parking: From the Security Office**
    “All vehicles parked overnight must have authorization and an overnight parking permit issued by the USU Security Office, Room UP001. The only allowance for parking overnight is as follows: weekends, holidays, Thanksgiving break, Christmas break, Spring break, and family emergencies. Although vehicles are permitted overnight parking during these periods, authorization and overnight parking permits are required.

    Overnight parking is not permitted during rotation assignments or during periods of official travel. The only exception is for special training at Quantico, VA (KERKESNER) and Ft. Sam Houston, TX (BUSHMASTER). The Department of Military and Emergency Medicine will provide special overnight parking permits for these training exercises.

    All vehicles parked overnight must have authorization and an overnight parking pass. Overnight parking is not available for rotation assignments or during periods of official travel”.

  - **Requesting Visitor Parking in the USU Garage:**

- **Photography:** (From the NSAB Installation Commander):
  - Photography by NSAB personnel (includes USU students) while on the compound is generally OK
  - Exceptions: Do not photograph sensitive things such as gates, fences, etc., or individuals who are NOT part of your “party” e.g. wounded warriors.

**K. ADVERSE WEATHER**

- **During inclement weather, obtain information regarding the operational status of the University as indicated below:**
  - Emergency conditions before the workday begins are posted on the USUHS home page @ http://www.usuhs.mil/sec/weather.html. You may also call 301-295-3039 for information.
  - The Announcement on the USU Home Page will reference one of the following categories: “early dismissal”, “delayed arrival”, “unscheduled leave”, or “Federal Government Closed”. NOTE: GSN students are considered essential personnel. For all categories, other than “Federal Gov’t Closed”, students will check USU email account for a message detailing instructions on class schedule changes or cancellations.
  - *During inclement weather no one should endanger him/herself or others by attempting to come to the University when common sense dictates otherwise.*
  - Notify your chain of command immediately if you are unable to make it in for class.
  - During times of inclement weather students may wear BDUs/ACUs instead of the prescribed uniform. Inclement weather is defined as: USUHS is operating under a DELAYED ARRIVAL/UNSCHEDULED LEAVE policy.

**L. ADMINISTRATIVE DETAILS**

- The GSN telephone number is (301) 295-9004 and fax is (301) 295-1707. Lines will be used for Official Business or Emergencies only. Do not give these numbers to anyone for personal business such as loan companies, merchants or mail order firms.
- Students may use the USU telephones centrally located in each building or in the Student Community Center @ (301) 295-9701/3015, for local and on-post dialing. Incoming calls to this number are limited to 3-5 minutes.
- Students must ensure that their mailing addresses are updated immediately prior to departing the losing command and upon arrival at USU.
- Students must also ensure that gaining MTF email and mailing addresses are on file prior to departing USU.
- See Appendix A for Student Telephone Directory.
IV. STUDENT HEALTH

A. THE UNIVERSITY HEALTH CENTER

The University Health Center (UHC) is a full service family health clinic managed by the Department of Family Medicine. It is located on the 1st floor of Building A in Room A1034. The clinic provides care for the students, faculty, staff, and family members enrolled in Tricare Prime and who are eligible for care through the DOD and the U.S. Public Health Service.

Scope of Care
The UHC provides broad-spectrum care for every family member:
- Adult General Medical Care
- Health Maintenance and Disease Prevention
- Family Planning Services
- Well Baby/Well Child Care
- Prenatal & Routine Obstetrical Care (including deliveries)
- Immunizations and TB Screening
- Minor Surgical Procedures (including vasectomy)
- Mental Health Counseling (individuals and families)
- Sports Medicine
- Weight Management

Clinic Schedule
For current clinic hours, see: http://www.usuhs.mil/fap/uhcpfaq.html

B. Appointments

The UHC has “Routine” and “Same Day” appointment availability for Tricare Prime patients, which can be scheduled by calling the UHC at (301) 295-3630. Same Day Appointments are for acute problems and can be made up to 24 hours in advance. Walk-in visits are discouraged and will be triaged by clinic personnel. Walk-ins will be given an appointment time that may be on a later day, depending on appointment availability.

C. SICK CALL/HOSPITAL ADMISSION/SURGERY/PREGNANCY

- There is no active duty “walk-in” sick call.
- For Same Day Appointments, call the clinic at (301) 295-3630. Active Duty have priority for appointments when they call between 0715 and 0800.
- Members who do not feel well enough to come to class can remain at home on quarters for up to 24 hours without being seen by a provider. Students must notify their Program Director and the GSN Commandant Team (GSN-Commandant-Team@usuhs.edu) the morning that class is missed, explaining that they are sick in quarters. Students who require more than 24 hours must schedule an appointment for a medical evaluation and report to the GSN Commandant Team’s office for accountability.
- If placed on the Sick List or admitted to a hospital, immediately notify the Course Coordinator and the GSN Commandant Team 301-295-9561 during normal duty hours. After duty hours, contact the GSN Student Company Commander/Commandant via
numbers listed on the GSN Student Alert Roster. These guidelines apply to students on official TDY/TAD travel as well.

- **Students requiring elective surgery** must obtain the concurrence of their Program Director then submit the request to the GSN Company Commander. Those students who are in Phase II training will seek prior approval through their assigned chain of command.

- **Pregnant students** should notify their Program Directors immediately upon diagnosis to ensure that they are not exposed to hazardous environments while performing clinical training. Bring a copy of Pregnancy Profile to the Company Commander. See further comments below in Section D, Extended Absence.

### D. Extended Absence

- Students with a medical condition which significantly interrupts the course of instruction or that has an adverse impact on their ability to carry out tasks associated with their studies shall be referred to the Student Promotions Committee for the appropriate disposition. In clinical training, all out-rotations are considered mandatory. Students are required to complete all rotations in order to graduate.

- Students who report to the school pregnant or become pregnant during training will be evaluated on a case-by-case basis and a referral submitted to the Student Promotions Committee as necessary. Pregnant students will be given a consult to the OB Clinic requesting evaluation of medical suitability for training status and fitness for duty to work in the operating room. Pregnant students in the clinical phase of training will be removed from rooms utilizing general anesthetics or assigned outside the operating room until clearance is obtained from their respective physician.

- The Program Director or Clinical Coordinator will ensure the student has been counseled by the Environmental Health Department on the risks of working in the OR while pregnant. The Program Director or Clinical Coordinator will review service-specific pregnancy guidelines with the student. Students, who desire to continue their education, will have a statement placed in their student record that indicates that they were counseled concerning the above. If the pregnancy occurs during clinical training, a memorandum is forwarded to the Program Director informing the Director of the student's medical status.

### V. ACADEMIC ISSUES/GUIDELINES

#### A. Academic Integrity

- Academic integrity is the hallmark of every student and is part of academic performance. **Students who have been found in violation of University and Service academic integrity/honor codes will be recommended for dismissal even though they are otherwise in good academic standing.**

- Students should understand that a violation of academic integrity is a matter of concern to both the military and academic communities. Consequently, violations of academic integrity will be addressed through the Uniform Code of Military Justice (UCMJ), and the University Institution governing the Student Promotions Committee (Academic Board). Academic dishonesty includes, but is not limited to, obtaining or giving aid on an
examination, having unauthorized prior knowledge of an examination; unauthorized collaboration; multiple submissions; and plagiarism. Students are responsible for review and understanding of these guidelines and implications. Students who commit serious acts of professional or personal misconduct will be recommended for disenrollment in accordance with the Dean’s Policy and Precedent Statement entitled Grading and Examination Policy.

Definitions:

**Cheating** is knowingly using unauthorized assistance in any academic activity.

**Lying** is to state a written or oral untruth with the intent to deceive.

**Unauthorized collaboration** is defined as students collaborating on an assignment for academic credit that is not otherwise authorized in the syllabus or directly by the instructor.

**Multiple submissions** are instances where students submit papers or work previously submitted for academic credit while at the Uniformed Service University Graduate School of Nursing without prior approval by the evaluating professor or instructor.

**Plagiarism** is the unauthorized use, intentional or unintentional, of intellectual work of another person without giving proper credit to the author. Articles, books, and other media (internet, video, CD, DVD, etc.) are rich sources of information for scholarly work, but the ideas and language from those works are the intellectual property of another person, and must therefore be used responsibly. Any information obtained from another source must be clearly credited to that source. Anytime someone else’s ideas or words (phrase, sentence, paragraph etc.) are used or heavily paraphrased, the text must be appropriately punctuated (quotation marks) and the original author cited. Failure to do so is plagiarism. It is also unethical to plagiarize yourself. Authors may not submit the same manuscript to two journals, nor are students permitted to submit the same (or heavily paraphrased) paper to more than one course director.

Students are expected to live by the values of their respective services, the guiding principles of the GSN, the Brigade and the USU. The personal integrity of commissioned officers and nurses is a signature feature of personal and professional identity. USU students are encouraged to make this feature the centerpiece of their lives.

**B. NON-ATTRIBUTION**

Lectures, discussions and all variety of presentations by guest speakers, seminar leaders, and panelists, including renowned public officials and scholars, constitute an important part of University curricula. So that these guests, as well as faculty and other University officials, may speak candidly, the University offers its assurance that their presentations, will be held in strict confidence. This assurance is derived from a policy of non-attribution that is morally binding on all who attend. Without the express permission of the speaker, nothing he or she says will be
attributed to that speaker directly or indirectly in the presence of anyone who was not authorized to attend the lecture.

C. ACADEMIC FREEDOM

USU students have the privilege of respectful dialogue amongst academic colleagues and may debate any subject related to the USU course materials within the classroom setting. Indeed, one of the goals of professional federal/military education is to develop officers who can employ innovative thinking when confronted with changing situations; it is imperative that the University provide a learning environment that encourages officers to cast a critical eye on traditional or accepted concepts. In this regard, the University is a safe and proper setting for students to practice the art of communicating innovative and non-traditional concepts. It is expected that officers will debate their viewpoint responsibly reflecting officership, professionalism and military courtesy.

D. GRADING POLICIES AND DEFINITIONS

1. Definitions of abbreviations used in the grade sheets/transcripts beyond the letter grade, consist of the following:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>P</td>
<td>Pass</td>
</tr>
<tr>
<td>F</td>
<td>Failure</td>
</tr>
</tbody>
</table>
| W     | Withdrawal  
  MSN/DNP Program- Withdrawal grade designation is used when a student withdraws from a course prior to the end of the semester without completing all the course requirements. Withdrawal grade designation carries no credit and is not averaged into the cumulative grade point average. |
| NR    | No report. The grade "NR" may be used for courses which extend over more than one semester. It may also be used if, through no fault of the student, the department faculty cannot complete grading procedures within the specified time for reporting grades. The grade "NR" is temporary and must be converted to a permanent grade within one year, as arranged by the program director. |
| TC    | Transfer credit. A program director may exempt a student from fulfilling a course requirement based upon proven expertise, "testing out", or academic degree(s), i.e., masters and/or doctoral. For each course for which exemption can be requested, the responsible program director should have written policies concerning the requirements for exemption. The decision to allow Transfer Credit is a decision made on an individual basis based on an assessment of the student’s program requirements, the previous course syllabus and student performance in the course. |
Incomplete. The student has not completed the requirements at the conclusion of the course. Prior to issuing a grade of Incomplete, the course coordinator and student must sign a contract that specifies:

a. The course assignments that must be satisfactorily completed to remove the grade of incomplete.

b. A timeline for those assignments to be completed.

The grade of "I" will be assigned only with the approval of the program director of the responsible department. The program director will notify the Registrar of the temporary "I" grade and the date by which the "I" grade must be converted to another grade. Failure to fulfill the stipulated requirements by the specified date will result in conversion of the "I" grade to a grade of "F".

E. STANDARDS OF PERFORMANCE

- Satisfactory academic standing is defined as a cumulative grade point average of B (3.0) or above. Individual program options may have specific requirements for minimum grades in selected courses. See program specific requirements in this handbook.

- Grading criteria for both didactic and clinical courses are determined by the course coordinator.

- Selected courses can be determined as "Pass/Fail" based on the recommendation of the course coordinator and the program director (program directors in the case of core courses) prior to commencement of the course and approved by the curriculum committee.

- In courses that have both a didactic and a clinical component, a student cannot achieve a passing grade without achieving a passing grade in both the didactic and the clinical portions of the course. The program director determines which courses have combination elements, and what constitutes a "passing" grade in each component.

- Curving the mean of an individual test will not routinely be done. In the event of an individual test mean score falling below approximately 80%, the course coordinator, in consultation with course faculty, may choose to adjust the exam mean up to but generally no higher than 85%.

- Grading of written assignments will be outlined in the course syllabus. Elements for consideration in creating the grading rubrics include: whether or not written assignments can be re-submitted for grading; procedures and grade consequences for late assignments, etc.

- In the event there is more than one faculty member that is expected to grades papers within a course, control of subjectivity becomes critical. To control inter-rater reliability, critical elements will be established:
  o Content
  o Creativity/Originality, and
  o Organization and quality of the content.

- The assignment will be evaluated using a structured tool developed by the course coordinator. A copy of this tool will be put in the syllabus.

- The course coordinator has the overall responsibility for ensuring that grading is equitable across graders. The course coordinator has the authority/responsibility to adjust grades prior to the products being handed back to ensure equity across students. Ultimately the course coordinator accepts the legal responsibility for the grades on all assignments.
F. STUDENT REQUESTS FOR REVIEW OF GRADES/APPEAL OF GRADES

- The purpose of the Student Appeal Process is to provide a mechanism for objective internal review of faculty and staff actions or School Committee decisions. This Review Process may be utilized by students enrolled in courses in the GSN who believe these decisions resulted from inequitable and/or discriminatory decision-making procedures or processes. The wisdom of a decision cannot be grieved; only the process believed to be inequitably applied within the referent group. Implicit in this process is the need for the cooperation, openness, and good faith of all parties involved.

- Students who wish to appeal a grade (exam, paper, presentation or final course grade), may request to do so in a written letter to the course coordinator. The chart below provides details regarding submission times, response times, and levels of appeal. All replies to the student will be in writing, and copies of the request and all subsequent correspondence will be maintained by the program director.

- Students who wish to appeal a final course grade may do so in a written letter to the course coordinator. Requests must be submitted within 14 days of receipt of final grade. The student will receive a final determination within 30 days of original appeal. The SPC will take no action on an unsatisfactory grade for which a request for grade change action has been initiated by the student within 14 days. The decision of the program chair will be final, however, and progression to the SPC may ensue after the review process is complete.

<table>
<thead>
<tr>
<th>Type of Grade</th>
<th>Appeal Time Limit</th>
<th>Submission Process Must Progress In The Following Order</th>
<th>Decision Time Limit</th>
</tr>
</thead>
</table>
| Exam Paper      | 3 working days    | 1) Submit to Course Coordinator  
| Presentation    | after posting of | 2) Submit to Program Director  
|                 | the grade        | 3) Submit to Associate Dean for Academic Affairs  
|                 |                   | 4) Submit to Dean, GSN if second appeal is requested                                                                | Within 2 weeks of original appeal. |
| Final Course    | 14 working days   | 1) Submit to Course Coordinator  
| Grade           | after receipt of | 2) Submit to Program Director  
|                 | grade.           | 3) Submit to Associate Dean for Academic Affairs  
|                 |                   | 4) Submit to Dean, GSN, if second appeal is requested  
|                 |                   | 5) Submit to GSN Registrar for recording                                                                            | With 30 days of original appeal.  |
G. ETHICAL AND SAFE CONDUCT

Satisfactory academic standing is determined both by performance in course work and by other aspects of academic performance, including skills, attitudes, and attributes judged by the graduate faculty to be important for success as an advanced practice nurse. These include factors such as academic and professional ethics, honesty, integrity, reliability, perception, balanced judgment, personal insight, and the ability to relate to others.

Students whose performance is academically and/or professionally unethical and/or unsafe are subject to discipline and/or dismissal even though they are otherwise in good academic standing.

Students shall not:

- Use, attempt to use, or copy any unauthorized material during an examination or graded exercise.
- Knowingly provide false information in any academic documents or in any academic exercise.
- Knowingly present the work of someone else as their own work.
- Forge or alter for advantage any academic document.
- Knowingly disregard instruction for the proper performance of any examination or graded exercise.
- Intentionally impede or interfere with the ability of fellow students to use academic materials or to complete academic work.
- Knowingly violate the ethical and moral standards defined by those professional groups having an impact on the student's program or profession.
- Knowingly assist a fellow student in any of the above activities.
- In addition to those actions listed above, the Student Promotions Committee (SPC) may determine that other actions demonstrate unethical, illegal academic behavior.

H. CRITERIA FOR REFERRAL TO THE STUDENT PROMOTIONS COMMITTEE (SPC)

Graduate nursing students will be referred to the SPC for review for any of the following reasons:

- Failure to meet course objectives or required academic standards.
- Failure to meet objectives for clinical training
- Requested by student
- Scheduled interim progress review
- Removal from probation
- Other. The Program Director, Commandant or other GSN Senior Leader may refer a student at any time for offenses including but not limited to the following: breach of professional and ethical standards of conduct, military officership, academic integrity, etc.

Refer to Student Promotions Committee (SPC) P&P #94-06
I. TRANSCRIPTS AND EXAMINATION/CREDENTIALING
RECOMMENDATIONS

At the end of each semester a transcript will be provided to each student. Upon graduation, the following transcripts will be provided:

- An unofficial transcript will be given to each student.
- An official degree posted transcript will be sent to the students sponsoring service.
- Official transcripts will be provided upon the graduate’s request.

J. REQUIREMENTS FOR GRADUATION

- The total academic credit requirement and minimum length of study shall be determined by the program option of study in which the student is enrolled. See specific option for this information.
- A scholarly project is required of all candidates.
- Practicum and clinical requirements must be successfully completed.

K. FACULTY ADVISORS

Students may be assigned faculty advisors. Students may meet with their respective advisor to:

- Apprise the advisor of progress with course work.
- Seek assistance in identifying resources/services available to students.
- Seek academic guidance.

L. EXAMINATIONS AND ASSIGNMENTS

The course coordinator will provide a syllabus with educational outcomes to guide students in the study and preparation for written examinations or other methods of evaluation and grading.

- The faculty ensures established methods for evaluating student performance and ensures that students receive feedback about their performance in a timely manner. The faculty may use written examinations, essays, research papers, class participation, or other recognized methods for evaluation of student performance. Objective criteria will be set for each graded exercise.
- Students who miss an examination for a justifiable reason as determined by the course coordinator will be administered the same or a comparable examination as soon as possible after the original examination was administered.

M. COURSE EVALUATIONS

Students are strongly encouraged to provide evaluations of the overall course and faculty performance at the completion of the semester. Evaluation is considered part of the students’ professional academic responsibility. Instructions for completion of the evaluations will be provided each semester.
N. REQUIRED ATTENDANCE

All students are expected to attend classes and clinical experiences. Exceptions may be permitted by the appropriate University Authority (i.e. Program Director, Course Coordinator(s), and Commandant). If an unscheduled absence occurs for any reason, the Commandant, Student Leadership, and appropriate Course Coordinator are to be notified as soon as possible.

O. REQUEST FOR TRANSFER CREDITS

The Transfer of Credit Policy (P&P #01-01) is sent to students in their welcome package. This policy provides guidance for students who wish to request transfer credit. A grade of B or higher must be achieved in the course(s) to be considered for credit transfer.

VI. GUIDELINES FOR USING THE UNIFORMED SERVICES UNIVERSITY LEARNING MANAGEMENT SYSTEM AND INTRANET

The Uniformed Services University Learning Management System and Intranet supports the USU’s Graduate School of Nursing, School of Medicine, University Departments and associated military medical programs. Access to the system is restricted to users with accounts. The site can be accessed at https://learning.usuhs.edu/xsl-portal

A. GUIDING PRINCIPLES

The following guidelines shall apply to all courses, modules and programs with a web-based education learning component:

- Web based teaching and learning environments may include correspondence, audio, video, or computer technologies. This policy shall apply to all credit-bearing courses, modules and programs offered using some form of web based education within the GSN
- While the GSN prizes academic freedom and wishes to encourage innovation in instruction, the faculty also has a collective responsibility to ensure the academic quality, consistency and integrity of the GSN courses, modules and programs. This responsibility extends to those courses, modules and programs offered through web based teaching and learning modalities
- Faculty and students have a right to know about and be oriented to the modes of delivery and technological requirements of courses, modules and programs offered by the GSN. Students shall have access to this information before enrolling in any GSN offering
- Web based teaching and learning courses, modules and program offerings shall be consistent with the educational mission of the USU and GSN
- Each web-based offering shall provide the opportunity for substantive, relevant and timely interaction between faculty and students as well as among students
- Students learning in a web-based environment shall have adequate access to library resources
The USU and GSN shall offer appropriate training and support services to faculty who teach in a web based environment.

Exams may be administered online using existing learning management systems. Several forms of exam security are in place. Including unique passwords for exam access, individual student logon names and passwords, proctoring in large groups and/or automatic limited exam times. At a minimum two security measures are in place to ensure exam security.

**B. CURRICULUM AND INSTRUCTION**

In the curricular review process, faculty teaching web based courses, modules and programs shall demonstrate that they provide the opportunity for substantive, relevant and timely interaction between faculty and students and among students. Collectively, faculty assumes responsibility for and oversight of web based offerings, ensuring the rigor of the courses, modules and programs and the quality of instruction. This oversight includes:

- Ensuring that the technology used suits the nature and objectives of the web based offering
- Ensuring the currency of web based offering
- Ensuring the integrity of student work and the credibility of the degrees and credits the USU and GSN awards. Faculty members are responsible to ensure that reasonable safeguards are in place to prevent academic dishonesty.

**C. EVALUATION AND ASSESSMENT**

- The method of delivery for new courses, modules and programs shall become part of each curriculum proposal, to be reviewed under the normal curricular process
- Any significant change in the method of delivery for existing courses or programs shall be submitted as a course change proposal, to be reviewed by the Curriculum Committee
- All courses shall be evaluated using standard evaluation assessments of student learning outcomes, student retention, and student satisfaction. This process shall be used to assure the conformity of web based teaching and learning environment courses, modules and programs to prevailing quality standards in the field of web based teaching and learning environment.

**D. LIBRARY AND LEARNING RESOURCES**

- Students shall have adequate access to and support in the use of appropriate library resources when geographically remote from the University
- Students shall have adequate access to laboratories, facilities, and equipment appropriate to the courses or programs when geographically remote from the University.
E. ON-LINE COMPETENCIES

In order to demonstrate their ability to benefit from the advantages of an online learning system, students must demonstrate the following competencies:

- **Access the online learning environment**
  - Knowledge of basic computer functions: turning on/off, accessing/saving files, opening/closing applications, using the mouse, etc.
  - Use the appropriate browser to locate the online learning environment
  - Enter the online learning environment via this url: [http://learning.usuhs.edu](http://learning.usuhs.edu)
  - Enter the online learning environment with a pre-assigned user name and password, changing the password after the first login.

- **Document Handling**
  - Locate, open and close a course document.
  - Upload documents into the Digital Drop box and/or Assignment
  - Open and use documents in the following formats:
    - Word
    - PowerPoint
    - Excel
    - PDF
    - Simple Text
    - HTML
  - Print course requirements / documents as needed

- **Communication**
  - Post new threads or reply to existing threads in the discussion area
  - Receive and send email through the online learning email application
  - Attach files to emails
  - Use the built in Blog, Wiki or Chat functions efficiently as needed
  - Take an online exam
  - Access the Gradebook to check grades

- **Resources**
  - Navigate to the LRC remote computer services site and register for remote access
  - Locate online learning assistance when needed

- **System maintenance**
  - Download, save and decompress files from web sites as needed
  - Install basic software such as online plug-ins or Windows updates and patches

F. ONLINE LEARNING ETIQUETTE OR “NETIQUETTE”

General internet etiquette rules must be considered whenever communicating in an online environment. Persons talking with another in the hall or on the phone can change voice tone or rephrase a comment or change facial expression to add “expression” to the communication thus helping to promote accurate understanding.

Electronic communication does not offer these non-verbal cues to the recipient, so some communication rules or “netiquette” should be understood and practiced whenever communicating in an electronic media that does not include a “visual” component.
These rules apply when entering posts in a discussion area, a live chat room or when communicating via email with professors, other students or other individuals. Some general guidelines:

- **Protect patient privacy:**
  - Adhere to existing patient confidentiality rules outlined in HIPAA and other government regulations and publications

- **Consider your message and your intended non-verbal cues:**
  - Think about the content and craft your message carefully prior to sending it
  - If angry or upset about something, consider the following actions
    - Put off responding for 12-24 hours; count to 10 and then begin writing; write your email, put it in the “Drafts” folder and look at it again when in a calmer state of mind
    - Make sure that the content is relevant to the recipient (do not forward junk email).
    - Be polite. The message should be respectful, friendly, and make the writer seem approachable. Read/re-write the message if necessary to get the “tone” right.
    - Maintain professionalism when communicating with professors and senior ranking officers
    - Use humor and irony sparingly
    - Be careful with the use of “emoticons” :-( -(They may be appropriate with friends, colleagues, but should not be used when corresponding with professionals or casual acquaintances
    - Use respect and proper military courtesy and titles when corresponding with senior officers or civilian faculty/ instructors, (i.e. ma’am, sir, v/r or r)

- **Get to the point**
  - Keep messages concise and to the point. Some people receive hundreds of e-mail messages a day; the last thing they want to see is a long email
  - Set the character limit to 80 characters per line to avoid a “never ending run on” email

- **Be careful with Punctuation!!!)))**
  - Do not use excessive punctuation. Emphasize the importance in the text, not in the punctuation
  - DO NOT SHOUT AT PEOPLE with capital letters
  - Consider using a “star” on either side of the word you want to stress

- **Simple is better**
  - Do not use fancy fonts, colors, backgrounds, etc. Many e-mail clients (and some servers) cannot / will not handle them
  - Do not use text shorthand (will U plz send me applcatn?’). This is not appropriate when communicating with peers, students, etc. via discussion boards, chat rooms or e-mail

- **There is no such thing as email “Privacy”**
  - There is no such thing as a private e-mail. With most e-mail systems, the e-mail administrator has the ability to read any and all e-mail messages
  - E-mail software can become infected and your e-mail may get sent to someone else - what you thought was private is not private anymore
Hackers can read your e-mail if they try hard enough. No form of security is one hundred percent hacker-proof.

- Do not make personal remarks about third parties. Email messages can come back to haunt the writer of the email.
- Do not post personal email addresses on web sites and other public parts of the Internet. If posted, get ready to be deluged with spam.

**How to respond to an inflammatory message**

- Email writers get “flamed” when they send e-mails that cause the recipient to respond in an angry/hostile way - a verbal attack in electronic form.
- How to respond?
  - Ignore it – the better option
  - Respond angrily – inciting a "flame war"
  - Have a non-electronic conversation to clear the air
- To prevent being “flamed”, do not:
  - Send an e-mail in all UPPER-CASE
  - Make a comment about grammar or punctuation
  - Send a mass-mailing

**Small, but important issues**

- Make sure the Subject line is relevant
- Include a signature to help the recipient understand who the email is from
- Make sure your signature block contains accurate information (i.e. phone numbers)
- Be careful when “replying to all”. Be sure that the reply is meant for the whole list
- Delete trivial or irrelevant items before forwarding
- Inform original senders whenever possible prior to forwarding their message
- Attachments
  - May contain viruses, people may be reluctant to open them
  - Opening attachments slows the recipient down
  - Large attachments take a long time to open, again, slowing the recipient
- Do not forward chain letters or "make money fast" messages
- Do not send inappropriate email or attachments
- Do not mark messages as “urgent” if they are not

**VII. FACULTY/UNIVERSITY RESOURCES**

**A. FACULTY AVAILABLITY**

- Faculty are available by appointment
- Responses to student questions/concerns/emails will be responded to within:
  - 24-48 hours during the week
  - 72-96 hours on the weekends/holidays

**B. GSN Policies**

- The following policies are posted on Sakai under the student lounge tab.
- Student Promotions Committee (SPC); Grading & Examination; Faculty Student Joint Authorship; GSN Student Travel
C. **LEARNING RESOURCE CENTER (LRC)**

The Learning Resource Center (LRC) provides a rich learning environment with resources that are accessible globally. Audiovisual materials, books, Government publications, and a wide variety of journals are available for use. There are many databases available for use in the LRC or through Remote Computer Services. Other in-house services include Interlibrary Loan, digital radiology workstations, and a computer use area (MAC and PC) that have numerous software programs and email available for student use. Computer classes/assistance is provided for most current application programs. For hours of operation and communication information, see [http://www.lrc.usuhs.mil/](http://www.lrc.usuhs.mil/).

The LRC is currently open to students 24/7 with limited services over night. Please check the USU home page for specific hours. *Note: The hours for checking books out are limited. Books must be checked out prior to leaving the LRC.*

Additionally the following are examples of online writing resources:


D. **INSTITUTIONAL REVIEW BOARD PROCESS (IRB)**

- [http://www.miami.edu/citireg/](http://www.miami.edu/citireg/)
- [http://www.usuhs.mil/usuhs_only/iacuc/](http://www.usuhs.mil/usuhs_only/iacuc/)

E. **MULTIDISCIPLINARY LAB (MDL)**

PART 2.
MASTER OF SCIENCE (MSN)
AND
DOCTOR OF NURSING PRACTICE
(DNP)
PROGRAMS
I. FAMILY NURSE PRACTITIONER (FNP) PROGRAM OPTION

A. MISSION

The Mission of the Uniformed Services University Family Nurse Practitioner Program is to educate safe, competent Family Nurse Practitioners who are able to practice independently in response to worldwide mission in the Uniformed Services.

B. PHILOSOPHY

The Family Nurse Practitioner Program is dedicated to preparing graduate nurses for clinical practice, management, research and leadership in the advanced practice role. The rigorous curriculum stresses concepts directed toward delivering care in the federal health care system; making USUHS graduates uniquely qualified to provide quality care in diverse settings. The program emphasizes research and statistical methodologies enabling our students to critically analyze scientific literature, evaluate nursing outcomes and participate in research activities.

C. DESIGN

The FNP program is 24 months (MSN) or 36 months (DNP) of full-time study combining lecture and clinical experiences. A life-span case study approach is used to develop differential diagnosis and critical thinking skills. On an average, graduates will obtain over 900 hours of clinical experience working with experienced nurse practitioner or physician preceptors in civilian and military agencies. The program meets or exceeds the revised 2011 National Organization of Nurse Practitioner Faculties’ guidelines for NP programs. A scholarly project is required for graduation.

D. TERMINAL COMPETENCIES

Upon completion of the program, the FNP Masters graduate will be prepared to meet all of the NONPF core and Family Nurse Practitioner population competencies and will also be prepared to:

- Critical thinking and diagnostic reasoning in clinical decision-making.
- Assessing, diagnosing, monitoring, coordinating, and managing the health status of clients over time: provides primary care.
- Communicating the client’s health status verbally or in writing, using appropriate terminology and format.
- Providing anticipatory guidance for expected changes, potential changes, and situational changes.
- Applying principles of epidemiology and demography in clinical practice.
- Using community assessment in evaluating client needs in program planning.
- Applying/developing a theory-based conceptual framework to guide practice.
- Applying/conducting research studies pertinent to primary care management.
- Selecting and recommending appropriate diagnostic and therapeutic interventions and regimens with attention to safety, and cost, invasiveness, simplicity, acceptability, and efficacy.
• Performing and interpreting common laboratory tests.
• Diagnosing and managing acute and chronic diseases, while attending the illness experience.
• Managing rapidly changing situations.

Upon graduation, the **USU DNP FNP Graduate** will be prepared to meet all of the NONPF core and Family Nurse Practitioner population competencies and will also be prepared to:

• Manage the unique healthcare needs of federal beneficiaries including active duty service members and their families, retirees, and other directed populations.
• Provide adaptive leadership in joint service environments within multidisciplinary teams.
• Deliver healthcare in unique and dynamic settings including military operational, austere, disaster, humanitarian and civic aid environments.

### E. FNP OUTCOME AND GRADUATION 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>
</tr>
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</table>
| 1. Comply with the GSN requirements for graduation. | Completion of required number of credit hours in the designated specialty.  
MN - Completion of 24 months of full time study.  
DNP - Completion of 36 months of full time study.  
- Completion of the DNP portfolio. |
| 2. Comply with program requirements for graduation. | Maintain an overall GPA of 3.0 or above.  
Achieve the minimum grade required in each course  
Be recommended for graduation by FNP Program Director.  
MN - Obtain a minimum of 840 clinical hours  
DNP - Obtain a minimum of 1500 clinical hours |
| 3. Be able to meet the mission of the USU Family Nurse Practitioner program. | Successfully meet GSN and FNP Program terminal objectives.  
Be recommended by the FNP Program Director for graduation. |

### F. CLINICAL ROTATIONS

Clinical rotations are integrated into all FNP specialty courses. Ultimately the evaluation of student performance is the responsibility of program faculty; however, clinical preceptors provide significant input because they observe student performance on a daily basis. Student clinical competency is also evaluated in an ongoing basis in the National Capitol Area Simulation Center (SIM Center). Students are required to track their clinical experiences using an electronic clinical tracking program. Through the combination of clinical data, preceptor and SIM Center evaluations, clinical learning needs are continually being assessed. If at any time a student feels their clinical needs are not being met, they are responsible to inform the program director/clinical coordinator so that appropriate action can be taken.
Over 200 different clinical sites have been utilized by FNP students. Some of the more heavily utilized clinical sites in the Washington, DC area include: Malcolm Grow, Andrews Air Force Base, MD; Walter Reed National Military Medical Center, Bethesda, MD; Fort Belvoir Community Hospital, Alexandria, VA. Additional TDY/TAD sites outside of the Washington, DC area are established based upon the needs of the program.

G. PHASE II SITE SPECIFIC GUIDELINES (DNP Only)

Students will PCS to a predetermined clinical site at the beginning of Phase II. Each Phase II site has specific guidelines that guide processes at the site. Students will receive an orientation upon arrival to the Phase II clinical site.

H. CLINICAL HOURS

Individual student’s clinical experiences will be coordinated by FNP faculty. Clinical experiences vary by semester and by course. Students should anticipate spending 1-5 days per week depending on the semester in their clinical site. All students will have a telephone so they may be notified of unexpected changes in preceptor availability or clinical activities.
I. Family Nurse Practitioner MSN Curriculum

<table>
<thead>
<tr>
<th>Course #</th>
<th>Required Nursing Core Courses</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>GSN701</td>
<td>Advanced Practice Role</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>GSN707</td>
<td>Integration and Application of Family Theory in Primary Care</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 &amp; Analytical Methods</td>
<td>3</td>
</tr>
<tr>
<td>GSN904</td>
<td>Clinical Inquiry Project I-II</td>
<td>4</td>
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</tbody>
</table>

**MSN Nursing Core Total** 20

<table>
<thead>
<tr>
<th>Course #</th>
<th>Required Advanced Practice Core Courses</th>
<th>Credits</th>
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</thead>
<tbody>
<tr>
<td>GSN601</td>
<td>Advanced Anatomy</td>
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</tr>
<tr>
<td>GSN602</td>
<td>Advanced Health Assessment</td>
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</tr>
<tr>
<td>GSN603</td>
<td>Advanced Physiology</td>
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<tr>
<td>GSN604</td>
<td>Advanced Pathophysiology</td>
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<tr>
<td>GSN605</td>
<td>Advanced Pharmacology</td>
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**MSN APN Core Total** 16

<table>
<thead>
<tr>
<th>Course #</th>
<th>Required Specialty Specific Courses</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>FNP601</td>
<td>Advanced Diagnosis and Management in Adult Primary Care</td>
<td>5</td>
</tr>
<tr>
<td>FNP602</td>
<td>Advanced Diagnosis and Management in Gynecology</td>
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</tr>
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<tr>
<td>FNP604</td>
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</tr>
<tr>
<td>FNP605</td>
<td>Advanced Diagnosis and Management in Geriatric Primary Care</td>
<td>1</td>
</tr>
<tr>
<td>FNP606</td>
<td>Foundations of Independent Practice</td>
<td>4</td>
</tr>
<tr>
<td>FNP607</td>
<td>Primary Care of the Military Member</td>
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</tr>
<tr>
<td>FNP608</td>
<td>Advanced Concepts in Independent Practice</td>
<td>5</td>
</tr>
<tr>
<td>MM04001</td>
<td>Military Contingency Medicine / Bushmaster</td>
<td>6</td>
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</table>

**Specialty Specific Total** 34

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<tr>
<td>GSN904</td>
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**Total Credits** 70

The implementation, timing of course offerings may vary depending on availability of clinical sites, adjunct faculty, USU resources and opportunities for interdisciplinary collaboration. Curriculum adjustments may be made throughout this program to meet any changes in national standards.
J. Family Nurse Practitioner DNP Curriculum

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<td>Translating Evidence Into Practice</td>
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<td>GSN906</td>
<td>Scholarly Inquiry Project I-III</td>
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<td>6</td>
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<tr>
<td>GSN801</td>
<td>GSN Residency I</td>
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<tr>
<td>GSN802</td>
<td>GSN Residency II</td>
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<td>GSN803</td>
<td>GSN Residency III</td>
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</tbody>
</table>

**Specialty Specific Total** 43

**Total Credits** 94

The implementation, timing of course offerings may vary depending on availability of clinical sites, adjunct faculty, USU resources and opportunities for interdisciplinary collaboration. Curriculum adjustments may be made throughout this program to meet any changes in national standards.
II. NURSE ANESTHESIA PROGRAM (RNA) OPTION - DNP

A. 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.

B. PHILOSOPHY

The Nurse Anesthesia Program is dedicated to the graduate education of nurse anesthetists in the uniformed services. The uniformed services require that graduates independently provide quality anesthesia care in diverse settings throughout the world. The rigorous curriculum is designed to integrate scientific principles with anesthesia theory and practice, stressing unique aspects of the federal health care system. An emphasis is placed on statistics and research methodology enabling the student to critically analyze anesthesia literature and evaluate potential problems in anesthesia. The primary goal of the program is to produce safe, competent, adaptable anesthetists who can meet the challenges of today's federal health care needs.

C. DESIGN

The 36-month DNP front-loaded, regionalized program consists of two phases. The Phase I didactic component, is a 15 month program of study conducted on the campus of USU that provides the student with the academic and professional education necessary for entrance into the clinical arena. All content areas identified in the Standards 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. Phase II assignments are made during the first year of phase I and may change (although rarely) if required for optimal student experience. Students also rotate to other clinical sites that may require travel outside of the local area. Travel is funded through TAD/TDY orders. 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.

D. 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 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 CCNA 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.
- Have the skills and knowledge to be active participants in Wellness activities for themselves and other members of the anesthesia community.
- 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.
**E. RNA OUTCOME AND GRADUATION 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>
</tr>
</thead>
<tbody>
<tr>
<td>1. Comply with the GSN requirements for graduation.</td>
<td>- Completion of a minimum of 36 months of full time study.</td>
</tr>
<tr>
<td></td>
<td>- Completion of 101 credit hours in the designated specialty.</td>
</tr>
<tr>
<td></td>
<td>- Completion of a scholarly project.</td>
</tr>
<tr>
<td></td>
<td>- Successful completion of clinical practicum requirements.</td>
</tr>
<tr>
<td>2. Comply with program requirements for graduation.</td>
<td>- Overall GPA is 3.0 or above</td>
</tr>
<tr>
<td></td>
<td>- Minimum GPA of 3.0 (grade of B or better) is attained in all letter-graded courses and passing grade in pass/fail courses.</td>
</tr>
<tr>
<td></td>
<td>- Completion of all required case experiences.</td>
</tr>
<tr>
<td></td>
<td>- Successfully meets the GSN and RNA terminal competencies.</td>
</tr>
<tr>
<td></td>
<td>- Receives recommendation for graduation from the Program Director.</td>
</tr>
<tr>
<td>3. Meet or exceed National Board of Certification and Recertification (NBCRNA) and Council on Accreditation (COA) case requirements.</td>
<td>- Completion of all required case experiences.</td>
</tr>
<tr>
<td>4. Satisfy eligibility requirements to write the Certification Examination.</td>
<td>- Completes graduation requirements.</td>
</tr>
<tr>
<td></td>
<td>- Completes required case experiences.</td>
</tr>
<tr>
<td></td>
<td>- Hold current BCLS, ACLS and PALS certificates.</td>
</tr>
<tr>
<td>5. Demonstrate the academic capability to pass the Certification Examination.</td>
<td>- 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.</td>
</tr>
<tr>
<td>6. Practice independently to meet the anesthesia needs of the nation’s uniformed members and their beneficiaries.</td>
<td>- Meets the GSN and Nurse Anesthesia program’s terminal competencies.</td>
</tr>
<tr>
<td></td>
<td>- Recommended by the Program Director for graduation.</td>
</tr>
</tbody>
</table>

**F. LICENSURE**

All nurse anesthesia students are required to obtain and maintain a valid, unrestricted nursing license. Licensure may be required in the state where out-rotations are completed. The cost of obtaining and maintaining licensure is the responsibility of the student. The student must provide the Program Director and Clinical Site Director/Coordinator with a copy of the current license and a copy of each renewal. Failure to comply with this requirement will result in immediate suspension and possible dismissal from the program.

**G. ACADEMIC COUNSELING AND GUIDANCE**

Academic counseling and guidance is available as needed and when requested by the student. End of semester evaluations and mid-semester counseling will be conducted during Phase II training. Counseling will also be conducted if student performance is declining or if student is in
jeopardy of dropping below minimum requirements. If a student is dismissed from the program for failure to meet stated objectives in the clinical training period, credit will not be given for the clinical caseload.

Levels of professional counseling include:
- Director/Associate Director, Nurse Anesthesia Program
- Clinical Site Director/Coordinator, Nurse Anesthesia Program
- Coordinator at clinical affiliations
- Hospital Commanders
- Dean, GSN
- Personal counseling can be arranged through military sick call.

H. PHASE II SITE- SPECIFIC GUIDELINES

Each Phase II site has specific guidelines that guide processes at the site. Students will receive an orientation upon arrival to the Phase II clinical site.

I. MAXIMUM NUMBER OF CLINICAL HOURS

A reasonable number of hours to promote effective student learning should not exceed 70 hours per week averaged over four weeks. This time commitment includes time spent in class and in clinical, preparing for class and clinical, in-house call time, and in taking call from home, time spent in the operating room, averaged over four weeks. This should include a 10-hour rest period between scheduled clinical shifts. Students are to notify clinical faculty prior to exceeding any clinical hour requirements, and under no circumstances can the total maximum hours be exceeded.

J. LEAVE AND TDY/TAD DURING CLINICAL TRAINING

- During Phase I, leave may only be taken during planned semester breaks.
- In Phase II, students are authorized to miss 24 clinical days for the purpose of leave or House-hunting TDY/TAD will be per local command policy. If leave in excess of 24 clinical days is needed for emergency or convalescent leave, students may be referred to the Student Promotions Committee (SPC) for consideration of extension in the program.
- Students who have posters or other presentations at professional meetings may be funded through TDY/TAD orders. This time will not count against their leave balance.

K. SUPPLEMENT TO STUDENT ILLNESS INFORMATION

- Any physical condition that significantly interrupts the course of instruction or adversely impacts on the student’s ability to carry out the tasks associated with anesthesia practice shall be referred to the Student Promotions Committee for the appropriate disposition.
- In clinical training, all of our rotations are considered mandatory. Students must be able to complete these rotations in order to graduate.
L. TRANSFERRING INTO ANOTHER NURSE ANESTHESIA PROGRAM

- Military Officers enrolled in the Nurse Anesthesia Program may not transfer to other programs, under normal circumstances, due to contractual obligations with the U.S. Government.
- In the event that a student is discharged from the service while attending the program the student will be dismissed from the program and will not receive credit for their clinical cases.
- If a student is dismissed from the program for failure to meet stated objectives in the clinical training period, credit will not be given for their clinical cases.
- Procedure for obtaining transcripts:
  - The student shall request in writing from the University registrar that a copy of the academic transcript is sent to the receiving academic institution. An additional request will be sent to the Program Director requesting a copy of the clinical transcripts.
  - The Program Director to whom the student is making application shall request a transcript of all experiences.
  - The Program Director shall remit the transcript and other appropriate data within thirty (30) days.
  - It is the responsibility of the accepting program to determine the transfer credit and notify the transferring student and the Council on Accreditation of their decision.

M. SELF-EVALUATION EXAMINATION

Students in the Nurse Anesthesia Program will take the Self-Evaluation Examination (SEE) from the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA) twice while in the program. First year and second year students will take the SEE between June and August. Students will receive a notice from the NBCRNA with instructions on how to schedule the exam with the testing site and must follow these directions.

N. TESTING DURING PHASE II

Students are required to take exams during Phase II and may be placed on remediation or probation based on performance on these exams. Specific guidance will be distributed prior to transition to Phase II and is included in each clinical semester syllabi.

O. END OF SEMESTER EVALUATIONS (PHASE II)

- Student self-evaluation and semester evaluations are mandatory. Evaluation results and summary reports are discussed with and signed by the student. These reports include:
  - Daily evaluation of clinical performance (formative)
  - Enrichment and specialty rotations
  - Self-Evaluations
  - Summative semester evaluations and grades
  - Faculty evaluations
  - Case experience tracking
• Students are responsible for submitting case totals on time and submitting daily clinical evaluation forms to their assigned preceptor for each day’s cases. Clinical course syllabi will contain additional information on the daily clinical evaluations.

P. POLICY ON STUDENT SUPERVISION

• A credentialed Certified Registered Nurse Anesthetist (CRNA) or anesthesiologist who is supervising a Student Registered Nurse Anesthetist (SRNA) shall be in-house and immediately available for consultation and/or assistance in all anesthetizing areas, at all times. Supervision of SRNAs in non-anesthetizing areas is restricted to credentialed experts who are authorized to assume responsibility for the student.
• The ratio of students to instructors in the clinical area shall not exceed 2:1 and shall directly relate to the student’s experience, patient condition, complexity of the procedure and anesthetic, and the ability of the student.
• Instruction by GRNAs (Graduate Registered Nurse Anesthetists) or physician residents is never appropriate if they act as the sole agents responsible for the students.
• A student nurse anesthetist may never supervise another nurse anesthesia student.
• Student will always identify himself or herself as a trainee to patients. This can include introduction as a student registered nurse anesthetist or nurse anesthesia resident as appropriate.

Q. GUIDELINES FOR WASTE ANESTHETIC GASES (WAG)

Although there is no conclusive evidence, epidemiological surveys has indicated that pregnant women who have been exposed to waste anesthetic gases (WAG), such as those gases present in an operating room, have experienced an increased risk of bearing children with congenital abnormalities and increased number of spontaneous abortions.

• All attempts are being made to reduce WAG exposure in the working environment, with significant success. However, the inconclusive nature of the epidemiological surveys and other testing has made it impossible to determine the “safe” exposure level that would insur against adverse effects. Generally, the obstetrical physicians will clear a member to work in general anesthesia rooms after the first trimester is completed.
• Until this safe level can be identified, all pregnant women will have the option of continuing to work or accepting assignment in positions with potential exposures to WAG or accepting reassignments to positions that would not expose them to WAG during their pregnancy.
• Pregnant students will be counseled by the Environmental or Occupational Health Department on the potential hazards to pregnant women of working in the operating room. The decision to accept the risks of working in a position with potential exposure to WAG is the student’s. Should students have any questions or concerns, they are urged to consult their respective obstetrician or a knowledgeable doctor on the medical staff.

R. OFF-DUTY EMPLOYMENT SUPPLEMENT

Nurse anesthesia students are prohibited from engaging in anesthesia care outside of the planned curriculum regardless of whether or not the student is compensated for the duties. Nurse anesthesia students are not to represent themselves as nurse anesthetists in any manner, such as by nametag, uniform, and/or signature.
### S. NURSE ANESTHESIA PROGRAM CURRICULUM

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</tr>
<tr>
<td>GSN906</td>
<td>Scholarly Inquiry Project (taken over 3 semesters at 2 credits each)</td>
<td>6</td>
</tr>
<tr>
<td><strong>Total Credits</strong></td>
<td></td>
<td><strong>31</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Course #</th>
<th>Advanced Practice Core Courses Required for: Nurse Anesthesia Program</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>GSN601</td>
<td>Advanced Anatomy</td>
<td>3</td>
</tr>
<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>
<td>4</td>
</tr>
<tr>
<td><strong>Total Credits</strong></td>
<td></td>
<td><strong>16</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Course #</th>
<th>Specialty Specific Courses Required for: Nurse Anesthesia Program</th>
<th>Credits</th>
</tr>
</thead>
<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>
<td>1</td>
</tr>
<tr>
<td>RNA802</td>
<td>DNP-Clinical Practicum and Seminar for Nurse Anesthesia Practice II</td>
<td>8</td>
</tr>
<tr>
<td>RNA803</td>
<td>DNP-Clinical Practicum and Seminar for Nurse Anesthesia Practice III</td>
<td>8</td>
</tr>
<tr>
<td>RNA804</td>
<td>DNP-Clinical Practicum and Seminar for Nurse Anesthesia Practice IV</td>
<td>5</td>
</tr>
<tr>
<td>RNA805</td>
<td>DNP-Clinical Practicum and Seminar for Nurse Anesthesia Practice V</td>
<td>8</td>
</tr>
<tr>
<td>RNA806</td>
<td>DNP-Clinical Practicum and Seminar for Nurse Anesthesia Practice VI</td>
<td>8</td>
</tr>
<tr>
<td><strong>Total Credits</strong></td>
<td></td>
<td><strong>54</strong></td>
</tr>
<tr>
<td><strong>Overall Credit Hours</strong></td>
<td></td>
<td><strong>101</strong></td>
</tr>
</tbody>
</table>

The implementation, timing of course offerings may vary depending on availability of clinical sites, adjunct faculty, USU resources and opportunities for interdisciplinary collaboration. Curriculum adjustments may be made throughout this program to meet any changes in national standards.
III. ADULT-GERONTOLOGY CLINICAL NURSE SPECIALIST PROGRAM OPTION (AGCNS)

Scope: Wellness to Acute Care
Specialty Focus: Perioperative Continuum of Care

A. MISSION

The Mission of the Uniformed Services University Adult-Gerontology Clinical Nurse Specialist (AGCNS) program is to educate safe, competent Clinical Nurse Specialists who are able to practice independently supporting the Adult-Gerontology population across the wellness through acute care continuum with a specialty focus in perioperative nursing in response to worldwide missions in the Uniformed Services.

B. PHILOSOPHY

The Adult-Gerontology Clinical Nurse Specialist (AGCNS) program is dedicated to graduate education of nurses in the uniformed services at the role and population level. This is an advanced practice role that prepares nurses for the care of the adult and geriatric population across the wellness to acute care continuum and includes specialty preparation in perioperative nursing. The educational focus is on the integration of clinical practice, management and leadership, evidence-based practice, education, and consultation into the single multifaceted Advanced Practice Registered Nurse (APRN) role of a CNS. The program integrates evidence-based theory and practice concepts to enable students to critically analyze scientific literature, evaluate nursing outcomes, translate evidence to support clinical decision-making, and develop advanced practice skills necessary to function in increasingly complex healthcare settings.

In addition to the role and population focus of the AGCNS program, additional content is provided to support the specialty focus of perioperative nursing. Overall, the program emphasizes the clinical management of the adult-geriatric population from wellness to acute care within the role of the Clinical Nurse Specialist. As such, students are prepared to diagnose and treat complex responses of clients (e.g., patient, family, and community) to actual and potential health problems in the acute care environment; and support the wellness continuum through health promotion, health protection, disease prevention, and end-of-life planning. When performing the APRN role of the CNS, students also foster a sense of patient advocacy and patient safety while formulating clinical decisions in the management of the adult and geriatric population. The specialty focus of the program supports advanced clinical nursing practice across the perioperative continuum of care to enhance specialized nursing knowledge and skills in the care of patients and families undergoing operative and other invasive procedures.

The primary goal of the program is to produce advanced practice nurses educated in the CNS role, for the adult-gerontology population with an additional specialty focus in perioperative nursing. Because of the multifaceted nature of the CNS, graduates not only provide direct care for individuals, but continually function in a collegial relationship with nurses, physicians, health care organizations and systems in an effort to improve patient outcomes. As such, graduates from the program are uniquely qualified to manage quality care of the adult-geriatric population across the continuum from wellness through acute care inclusive of the perioperative environment, analyze healthcare systems/processes to optimize patient outcomes, and guide
change for organizational success in the provision of evidence based / quality patient care in diverse settings world-wide.

C. DESIGN

The program’s curriculum is designed to prepare graduates to sit for the Clinical Nurse Specialist certification exam within the population focus of Adult-Gerontology. As such, the program is 24 months of full-time study combining didactic and clinical experiences across the wellness through acute care continuum within the five domains of the Clinical Nurse Specialist (CNS): leader/manager, consultant, educator, scholar (evidence-based practice) and clinical expert within the three spheres of influence (patient, nurse and organization) for CNS practice. Within the 2 year program, on average, graduates will obtain over 1056 hours of clinical experience working with masters-prepared managers, clinical nurse specialists, physician assistants, clinical and surgeon champions, and subject matter experts within national and international federal healthcare treatment facilities. In addition to educational preparation for the role and population, the program is designed to include clinical and didactic specialty content in perioperative nursing. The approximate clinical hour distribution supporting the CNS role across the wellness through acute care continuum as well as within the perioperative specialty for the adult-geriatric population is as follows: wellness/primary care – 256 clinical hours (24%); acute care – 380 clinical hours (35%); and perioperative continuum – 420 clinical hours (40%).

The curriculum meets or exceeds the National Association for Clinical Nurse Specialist (NACNS) guidelines for masters programs and is aligned with the American Association of Colleges of Nursing 2011 Essentials of Master’s Education in Nursing; 2008 Consensus Model for Advanced Practice Registered Nurses (APRN) Regulation: Licensure, Accreditation, Certification & Education (LACE); 2009/10 CNS Core Competencies established by NACNS; the 2010 Adult-Gerontology Clinical Nurse Specialist Competencies; 2010 AACN Scope and Standards for Acute and Critical Care Clinical Nurse Specialist Practice; Association of periOperative Nurses(AORN) 2006 Position Statement on the Perioperative Advanced Practice Nurse; and AORNs 2010 Perioperative Advanced Practice Nurse Competencies. Graduates from this program are prepared to sit for advanced practice certification as a Clinical Nurse Specialist in Adult-Gerontology offered by the American Nurses Credentialing Center (ANCC) and the American Association of Critical-Care Nurses (AACN) Certification Corporation.

D. PROGRAM-SPECIFIC TERMINAL OUTCOME COMPETENCIES

Upon completion of the program, the graduate student will demonstrate mastery of the following:

- **Sphere of Influence: Client**
  - **AGCNS as an Advanced Practitioner**
    - Demonstrate critical thinking and sound scientific reasoning skills in clinical decision-making for specialty populations.
    - Improve patient outcomes through application of advanced cognitive, psychomotor, cultural, and physiological principles in assessment, diagnosis, monitoring, management and evaluation of human response to acute and chronic illness, surgical intervention or the wellness continuum related to changes in life processes.
Develop comprehensive nursing care plans/critical pathways based on current theories, evidence-based practice, safety, efficacy, standards of care, and advanced clinical knowledge and expertise processes.

**Sphere of Influence: Nurse and Nursing Practice**

- **AGCNS as an Educator**
  - Identify and implement process/system interventions to decrease risk of iatrogenic injuries.
  - Apply adult learning theory/principles to enhance practice skills and knowledge of clinical staff.
  - Provide anticipatory guidance for expected and potential rapidly changing and complex situational events.
  - Develop, coordinate, implement and evaluate an educational program for clinical staff and/or patient education.

- **AGCNS as a Scholar**
  - Expand the scientific base of nursing practice by utilizing, facilitating, and conducting research-based/evidence-based clinical projects and integrating concepts within course assignments.
  - Explore practice protocols, ensuring ethical and legal practices are maintained throughout the process.
  - Apply a theory-based conceptual framework to guide practice.
  - Critically analyze and conduct evidence-based clinical projects and course assignments pertinent to clinical management of the adult-gerontology population.
  - Contribute to the scientific nursing literature by presenting and publishing scholarly works.
  - Disseminate recent innovations and evidence-based findings that are relevant to practice and patient outcomes.

**Sphere of Influence: Organization/System**

- **AGCNS as a Consultant**
  - Utilize clinical expertise to collaborate and/or consult with members of the health care team regarding patient outcome variations.
  - Serve as nursing expert in support of an inter-professional team in planning care for the adult-gerontology population.
  - Incorporate the role of clinical expert, educator, researcher, and manager in the application of change theory during the consultation process.

- **AGCNS as a Manager/Leader**
  - Perform departmental systems review to identify, develop, implement and evaluate programs in support of patient safety, patient outcomes, efficiency and/or productivity.
  - Provide leadership in building an inter-professional team for collaborative relationships and innovative partnering practices in support of program development.
  - Utilize financial and resource principles to formulate budgetary, staffing, supply, capital equipment management, and cost containment strategies.
- Evaluate implications of federal health care policy as they relate to health care professionals, clients, ethics and the delivery of care within the practice setting.

**E. PROGRAM OUTCOME AND GRADUATION 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>
</tr>
</thead>
<tbody>
<tr>
<td>1. Comply with GSN requirements for graduation.</td>
<td>- Completion of 24 months of full time study.</td>
</tr>
<tr>
<td></td>
<td>- Completion of required number of semester credit hours outlined for the program.</td>
</tr>
<tr>
<td>2. Comply with program requirements for graduation.</td>
<td>- Maintain an overall GPA of 3.0 or above.</td>
</tr>
<tr>
<td></td>
<td>- Achieve the minimum grade required in each course.</td>
</tr>
<tr>
<td></td>
<td>- Obtain a minimum of 500 clinical hours in the role of the CNS within the Adult-Gerontology population.</td>
</tr>
<tr>
<td></td>
<td>- Complete all practicum requirements.</td>
</tr>
<tr>
<td></td>
<td>- Complete or maintain CNOR certification.</td>
</tr>
<tr>
<td></td>
<td>- Maintain certification in BLS and ACLS (PALS, NRP optional) throughout the program.</td>
</tr>
<tr>
<td>3. Able to meet the mission of the USU Adult-Gerontology Clinical Nurse Specialist Program.</td>
<td>- Successful completion of both GSN and AGCNS program terminal competency outcomes.</td>
</tr>
<tr>
<td></td>
<td>- Be recommended by the CNS Program Director for graduation.</td>
</tr>
</tbody>
</table>

**F. CLINICAL ROTATIONS**

Clinical rotations are integrated into all the AGCNS specialty courses where students receive focused clinical site experiences and exposure to projects within the five CNS domains in consultation with their clinical preceptor. Although the evaluation of student performance is the responsibility of program faculty, clinical preceptors provide significant input regarding their observation of the student’s performance on a daily basis. Through the combination of clinical logs, preceptor evaluations, formative evaluations, and projects completed, clinical learning needs are continually assessed. Clinical experiences across the wellness to acute care continuum within the adult-geriatric population are established to meet the needs of each student depending upon their level of expertise demonstrated within the clinical setting. Additional rotations supporting advanced clinical practice for perioperative nursing will include rotations across the perioperative continuum. If at any time students feel their clinical needs are not being met, it is the student’s responsibility to inform the program director/clinical coordinator so that appropriate action can be taken.

Clinical site rotations are established each semester and rotate throughout the two year program of study to maximize student experiences. The primary clinical sites utilized in the program include: Walter Reed National Military Medical Center, Bethesda, MD and Fort Belvoir.
Community Hospital, Virginia. Additional clinical sites utilized within and beyond the national capital area may include: INOVA, Virginia; Malcolm Grow, Andrews Air Force Base, MD; Shock Trauma (C-STARS), Baltimore; Landstuhl Regional Medical Center, Germany; Kimbrough Ambulatory Care Clinic, Fort Meade, MD; Veterans Administration, Washington, D.C.; and National Institute of Technology (NIH), MD. Based on the needs of the program, additional sites will be established.

G. CLINICAL DUTY HOURS

Clinical Experience: Individual clinical assignments for clinical practice are made by the CNS faculty.

- Clinical experiences and time spent at the clinical site varies by semester, course, and clinical rotation.
- Individual student clinical assignments will be determined at the beginning of each semester.
H. ADULT-GERONTOLOGY CLINICAL NURSE SPECIALIST (MSN) PROGRAM CURRICULUM

<table>
<thead>
<tr>
<th>Course #</th>
<th>Nursing Core Courses Required for: Adult-Gerontology Clinical Nurse Specialist Program</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>GSN701</td>
<td>Advanced Practice Role</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>GSN901</td>
<td>Healthcare Research and 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>GSN904</td>
<td>Clinical Inquiry Project</td>
<td>4</td>
</tr>
</tbody>
</table>

**Nursing Core Total** 17

<table>
<thead>
<tr>
<th>Course #</th>
<th>Advanced Practice Core Courses Required for: Adult-Gerontology Clinical Nurse Specialist Program</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>GSN601</td>
<td>Advanced Anatomy</td>
<td>3</td>
</tr>
<tr>
<td>GSN602</td>
<td>Advanced Health Assessment</td>
<td>3</td>
</tr>
<tr>
<td>GSN603</td>
<td>Advanced Physiology</td>
<td>3</td>
</tr>
<tr>
<td>GSN604</td>
<td>Advanced Pathophysiology</td>
<td>3</td>
</tr>
<tr>
<td>GSN605</td>
<td>Advanced Pharmacology</td>
<td>4</td>
</tr>
</tbody>
</table>

**APN Core Total** 16

<table>
<thead>
<tr>
<th>Course #</th>
<th>Role/Population Specific Courses Required for: Adult-Gerontology Clinical Nurse Specialist Program</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>GSN708</td>
<td>Advanced Diagnosis and Management in Adult Primary Care</td>
<td>5</td>
</tr>
<tr>
<td>GSN709</td>
<td>Advanced Diagnosis and Management in Geriatric Primary Care</td>
<td>1</td>
</tr>
<tr>
<td>CNS601</td>
<td>Principles of CNS Practice I</td>
<td>3</td>
</tr>
<tr>
<td>CNS602</td>
<td>Principles of CNS Practice II</td>
<td>3</td>
</tr>
<tr>
<td>CNS603</td>
<td>Health Care Resource Management</td>
<td>3</td>
</tr>
<tr>
<td>CNS605</td>
<td>Medical Facility Master Planning and Hospital Architectural Design</td>
<td>2</td>
</tr>
<tr>
<td>CNS606</td>
<td>CNS Role in Trauma Management</td>
<td>2</td>
</tr>
<tr>
<td>CNS607</td>
<td>Advanced Diagnosis and Management in Adult-Geriatric Acute Care</td>
<td>3</td>
</tr>
<tr>
<td>CNS608</td>
<td>Advanced Principles for CNS Practice</td>
<td>3</td>
</tr>
<tr>
<td>CNS609</td>
<td>Clinical Practicum I</td>
<td>4</td>
</tr>
<tr>
<td>CNS801</td>
<td>Clinical Practicum II</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>ACLS (Certification) &amp; ATLS (Audit)</td>
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</tbody>
</table>

**CNS Role/Population Specific Total** 36

| Adult-Gerontology Clinical Nurse Specialist Program Total Credits | 69 |

**Approximation of Clinical Hours Distribution:**

- **Wellness/Primary Care:** 256 clinical hours (24%)
- **Acute Care Continuum:** 380 clinical hours (35%)
- **Perioperative Specific:** 420 clinical hours (40%)

Perioperative specialty content is woven in multiple courses across the 2-year program and is highlighted within the course description where this content is included.

The implementation, timing of course offerings may vary depending on availability of clinical sites, adjunct faculty, USU resources and opportunities for interdisciplinary collaboration. Curriculum adjustments may be made throughout this program to meet any changes in national standards.
IV. PSYCHIATRIC MENTAL HEALTH NURSE PRACTITIONER (PMHNP) PROGRAM OPTION

A. MISSION

The Mission of the Uniformed Services University’s Psychiatric Mental Health Nurse Practitioner (PMHNP) Program is to educate safe, competent Psychiatric Mental Health Nurse Practitioners who are able to practice independently within the federal healthcare system.

B. PHILOSOPHY

The Psychiatric Mental Health Nurse Practitioner Program (DNP Track) is dedicated to preparing graduate nurses for advanced clinical practice, the critical appraisal and translation of evidence into practice, and leadership in the advanced practice nursing role across healthcare systems. The rigorous curriculum stresses delivering operationally relevant psychiatric—mental health care across the lifespan that is consistent with current standards of practice for the psychiatric mental health nurse practitioner.

C. DESIGN

The PMHNP DNP track is a 36 month - full time program that refines critical thinking skills through the use case study, clinical simulation, and residency. Our curriculum stresses operationally relevant psychiatric—mental health care foundationally built upon evidenced based practice and systems orientation. Didactic learning is crystalized into knowledge within the clinical practice environment at military and federal facilities supervised by experienced nurse practitioner and other behavioral health providers. The first year of clinical exposure is executed exclusively via simulation. The second year of clinical exposure utilizes both simulation and direct patient care opportunities. The third year of clinical exposure is exclusively direct patient care. Program faculty members are experienced Nurse Practitioner clinicians and educators. The program meets or exceeds the revised 2011 National Organization of Nurse Practitioner Faculties (NONPF)’ guidelines for NP programs. A scholarly inquiry project is required for graduation.

D. TERMINAL COMPETENCIES

Upon graduation, the USU DNP PMHNP Graduate will be prepared to meet all of the NONPF core and Psychiatric—Mental Health Nurse Practitioner population competencies and will also be prepared to:

- Manage the unique healthcare needs of federal beneficiaries including active duty service members and their families, retirees, and other directed populations.
- Provide adaptive leadership in joint service environments within multidisciplinary teams.
- Deliver healthcare in unique and dynamic settings including military operational, austere, disaster, and humanitarian and civic aid environments.
E. OUTCOME AND GRADUATION 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>
</tr>
</thead>
<tbody>
<tr>
<td>1. Comply with the GSN requirements for graduation.</td>
<td>- Completion of 36 months of full time study for the DNP&lt;br&gt; - Completion of required number of credit hours in the designated specialty.&lt;br&gt; - Completion of DNP portfolio.</td>
</tr>
<tr>
<td>2. Comply with program requirements for graduation.</td>
<td>- Overall GPA of 3.0 or above.&lt;br&gt; - Minimum GPA of 3.0 is attained in all courses.&lt;br&gt; - Obtains a minimum of 1300 clinical hours.&lt;br&gt; - Successful completion of practicum requirements.&lt;br&gt; - Receives recommendation for graduation from Program Director.</td>
</tr>
<tr>
<td>3. Be able to meet the mission of the USU Psychiatric Mental Health Nurse Practitioner program.</td>
<td>- Successfully meets both GSN and PMH program terminal objectives.&lt;br&gt; - Be recommended by the Program Director for graduation.</td>
</tr>
<tr>
<td>4. Be able to meet the mission needs of the respective service who sponsored their education.</td>
<td>- Successfully pass the American Nursing Credentialing Center exam for Psychiatric Mental Nurse Practitioners.</td>
</tr>
</tbody>
</table>

F. CLINICAL ROTATIONS

Clinical rotations are integrated into all PMH specialty courses. Ultimately the evaluation of student performance is the responsibility of program faculty; however, clinical preceptors provide significant input because they observe student performance on a daily basis. Student clinical competency is also evaluated in an ongoing basis in the National Capital Area Simulation Center (SIM Center). Students are required to track their clinical experiences through the use of ELog, a web-based, electronic clinical tracking program. Through the combination of ELog data, preceptor and SIM Center evaluations, clinical learning needs are continually assessed. If at any time a student believes their clinical needs are not being met, they are responsible to inform the program director/clinical coordinator so that appropriate action can be taken.

Numerous clinical sites have been identified for PMH students. Some of the more heavily utilized clinical sites in the Washington DC area include: Walter Reed National Military Medical Center, Andrews Air Force Base, Fort Belvoir, and Fort Meade. Additional clinical sites outside the National Capital are established based upon program needs.
G. **PHASE II (Residency) SITE SPECIFIC GUIDELINES**

Students will PCS to a predetermined clinical site at the beginning of Phase II. Each Phase II site has specific guidelines that guide processes at the site. Students will receive an orientation upon arrival to the Phase II clinical site.

H. **CLINICAL HOURS**

Individual student’s clinical experiences will be coordinated by PMHNP faculty. Clinical experiences vary by semester and by course. Students should anticipate spending 1-5 days per week depending on the semester in their clinical site. All students will have a telephone so they may be notified of unexpected changes in preceptor availability or clinical.
## I. PSYCHIATRIC MENTAL HEALTH NURSE PRACTITIONER (PMHNP) PROGRAM CURRICULUM

<table>
<thead>
<tr>
<th>Course#</th>
<th>Required Nursing Core Courses</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>GSN701</td>
<td>Advanced Practice Role</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>GSN707</td>
<td>Integration and Application of Family Theory in Primary Care</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 &amp; Analytical Methods</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</td>
<td>6</td>
</tr>
</tbody>
</table>

**DNP Nursing Core Total**: 34

<table>
<thead>
<tr>
<th>Course#</th>
<th>Required Advanced Practice Core Courses</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>GSN602</td>
<td>Advanced Health Assessment</td>
<td>3</td>
</tr>
<tr>
<td>GSN603</td>
<td>Advanced Physiology</td>
<td>3</td>
</tr>
<tr>
<td>GSN604</td>
<td>Advanced Pathophysiology</td>
<td>3</td>
</tr>
<tr>
<td>GSN605</td>
<td>Advanced Pharmacology</td>
<td>4</td>
</tr>
</tbody>
</table>

**DNP APN Core Total**: 13

<table>
<thead>
<tr>
<th>Course#</th>
<th>Required Specialty Specific Courses</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>PMH601</td>
<td>Foundations of Advanced Practice Psychiatric Nursing</td>
<td>5</td>
</tr>
<tr>
<td>PMH602</td>
<td>Advanced Diagnosis of Mental Disorders Across the Lifespan</td>
<td>4</td>
</tr>
<tr>
<td>PMH603</td>
<td>Therapeutic Modalities</td>
<td>3</td>
</tr>
<tr>
<td>PMH604</td>
<td>Psychopharmacology</td>
<td>5</td>
</tr>
<tr>
<td>PMH605</td>
<td>Advanced Practice Psychiatric Nursing Specialty Practicum</td>
<td>2</td>
</tr>
<tr>
<td>PMH606</td>
<td>Operational Readiness for Advance Psychiatric Practice</td>
<td>5</td>
</tr>
<tr>
<td>PMH607</td>
<td>Treatment of Substance Abuse Disorders Across the Lifespan</td>
<td>2</td>
</tr>
<tr>
<td>PMH803</td>
<td>Applied Clinical Concepts</td>
<td>4</td>
</tr>
<tr>
<td>GSN801</td>
<td>GSN Residency I</td>
<td>3</td>
</tr>
<tr>
<td>GSN802</td>
<td>GSN Residency II</td>
<td>3</td>
</tr>
<tr>
<td>GSN803</td>
<td>GSN Residency III</td>
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</tbody>
</table>

**Specialty Specific Total**: 39

**Total Credits**: 86

The implementation, timing of course offerings may vary depending on availability of clinical sites, adjunct faculty, USU resources and opportunities for interdisciplinary collaboration. Curriculum adjustments may be made throughout this program to meet any changes in national standards.
<table>
<thead>
<tr>
<th><strong>FREQUENTLY CALLED NUMBERS (PREFIX: 301)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Brigade</td>
</tr>
<tr>
<td>Commandant, GSN</td>
</tr>
<tr>
<td>GSN Company Commander</td>
</tr>
<tr>
<td>GSN Company, Leading Petty Officer/1st Sergeant</td>
</tr>
<tr>
<td>GSN Secretary</td>
</tr>
<tr>
<td>Family Nurse Practitioner Program</td>
</tr>
<tr>
<td>Perioperative, Clinical Nurse Specialist Program</td>
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<td>Nurse Anesthesia Program</td>
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<tr>
<td>Family Psych Mental Health NP Program</td>
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<tr>
<td>Military Personnel Office (MILPO)</td>
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<tr>
<td>MILPO FAX</td>
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<tr>
<td>Brigade Adjutant/Awards</td>
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<tr>
<td>Equal Opportunity Office</td>
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<tr>
<td>Chaplain</td>
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<td>Chaplains Assistant</td>
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<tr>
<td>General Counsel</td>
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<tr>
<td>Security</td>
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<tr>
<td>Learning Resource Center (LRC)</td>
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<tr>
<td>Multi-Disciplinary Lab (MDL)</td>
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<td>WRNMMC Duty Desk</td>
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<td>ID Card/DEERS Office</td>
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<td>Optometry Clinic</td>
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<td>Medical Readiness Clinic</td>
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</tbody>
</table>
Appendix B
STUDENT ABSENCE ALGORITHM

***Attendance at Commandant’s Calls is mandatory. Except in cases of emergencies, only the Commandant can grant exceptions***

Student Absent

- Class Leader
- Course Coordinators or Clinical Director - Arrange make up
- Class President
- Commandant’s Office