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Welcome to the College of Health Professions. We are excited that you are a student in our professional program and I want to provide for you some information that I hope will be of assistance to you during your academic journey with us.

A very important person during your time with us is your advisor. This individual is available to assist you in planning your program of studies and answer questions about future career options. I urge you to meet regularly with your advisor especially if you have any questions, concerns or need help with any academic, College, or campus issues. Faculty and staff are prepared to work with you on an individual basis and help guide you through your journey with us. Additional career information can also be found in our Administrative Office, Sudro 123, and by attending our Annual Career Fair in September at the Fargodome.

The professional curriculum is designed to challenge you and to teach you to become an independent learner. Therefore, students are expected to take a very active role in their education and take responsibility for their own learning. Student active learning is a major emphasis of our program. You will be asked to apply your knowledge, dig for the answers to questions, communicate both verbally and in writing, critically think and problem-solve through case discussions, and participate in numerous experiential activities. I encourage you to ask questions in class and to learn by understanding and applying the material presented rather than by simply memorizing factual information. The goal of our curriculum is for you to achieve the necessary life-long learning skills which will become important to you in your future career as a health professional to be able to “keep up” with the plethora of new information associated with our rapidly changing health care system. Your ultimate success will be determined by the amount of effort you are willing to put into your academic studies. So work hard and give your best effort in all that you do. If you give us your best, you will receive the best in your educational experience with us.

We desire to provide a positive learning environment for all students here within the College and we strive to continually improve our program. Students are a very important part of this process and we actively solicit your input and active participation through various formats. Students are elected from each class to serve on the Dean’s Student Liaison Committee. This committee meets with the Associate Dean for Student Affairs & Faculty Development throughout the year to bring student concerns to the attention of the administration. In addition, the College holds a Deans’ Open Forum each semester to allow students an opportunity to interact directly with the Dean (and his administrative leadership team) on matters of interest and concern to students. And I also want you to know that my door is always open to you, so please don’t hesitate to stop by my office if you need my assistance for anything. We encourage you to use these sources as well as visits with faculty, or any of the members of the staff in our Administrative Office whenever you have issues that need to be brought to our attention. In addition, I encourage you to become actively involved with your profession by joining one of our student professional organizations. This is a great way to learn about what’s going on within your profession and begin contributing to the advancement of your future professional career and practice.

This “Handbook” is devoted to academic information to help enhance student success within our program. We hope you find it helpful to you. I wish you much success in your educational pursuits with us and in your later professional practice. Best wishes to you for a successful year!

Charles D. Peterson, Pharm.D.
Dean, NDSU College of Health Professions
INTRODUCTION

Welcome to graduate nursing study at North Dakota State University! We trust that time spent in scholarly pursuits will not only prepare you well for the next step in your nursing career but also enhance the breadth and depth of your understanding of nursing as a discipline.

The information and polices presented in this handbook complement and supplement information and polices pertinent to the North Dakota State University, the Graduate School (http://www.ndsu.edu/gradschool/), and the College of Health Professions (http://www.ndsu.edu/healthprofessions/)

NDSU e-mail Address: The student’s official NDSU e-mail address will be used for conveying and receiving information related to nursing courses. Students are responsible for monitoring their email for information.

NURSING PROGRAM HISTORY

The history of nursing education in Fargo dates back to the early 20th century when St. John’s Hospital and St. Luke’s Hospital each established a diploma school of nursing. The School of Nursing at St. John’s closed and North Dakota State University (NDSU) began an associate degree nursing program in 1969. In 1986, NDSU and Concordia College (CC) began a collaborative baccalaureate nursing program. St. Luke’s Hospital School of Nursing and the associate degree program at NDSU were discontinued. The collaborative program was the Tri-College University Nursing Consortium (TCU). Students took nursing courses on the CC campus and on the NDSU campus. In 1994 nursing faculty who had been employed by TCU became employees of either CC or NDSU but continued to teach on either or both campuses irrespective of faculty appointment.

In 2001 Minnesota State University Moorhead (MSUM), which operated a baccalaureate program for registered nurses, joined the nursing consortium and a collaborative master’s degree program in nursing was initiated. In 2005, the three undergraduate programs disassociated from the consortium and became independent of one another. NDSU initiated a doctor of nursing practice program in 2005. In 2007 graduate programs at the three institutions became independent of one another. Nursing programs in the area cooperate with one another in utilization of clinical sites, in addressing regional needs and through the sharing of teaching/learning resources.

In June 2014, NDSU acquired the Sanford College of Nursing (SCON) located in Bismarck, North Dakota. SCON has been a well-respected, successful, free-standing nursing program affiliated with the Bismarck Hospital for over 100 years. The Bismarck program became known as NDSU Nursing at Sanford Health. Fall semester, 2014 the pre-licensure BSN program on the Fargo campus expanded from admitting students each fall semester to admitting students each semester. In the fall semester of 2015, the DNP program expanded to the Bismarck site.

APPROVAL

The family nurse practitioner (DNP) program is approved by the North Dakota Board of Nursing. The DNP Program has been fully accredited by the Commission on Collegiate Nursing Education (CCNE) to December 31, 2016.
MISSION

The mission of the NDSU Department of Nursing is to provide baccalaureate and graduate nursing education, to advance knowledge of the discipline and demonstrate leadership in meeting the healthcare needs of a diverse society.

We will accomplish this by:

- Attracting and retaining high-quality faculty and staff.
- Ensuring program diversity and capacity that is responsive to societal needs.
- Generating, disseminating, and critically analyzing nursing knowledge.
- Ensuring faculty and program graduates are engaged in leadership activities.
- Delivering a dynamic curriculum that meets professional standards and addresses societal needs.

VISION

The vision of the Department of Nursing is to be a recognized leader in positively impacting the health of a diverse global society through professional preparation and interprofessional collaboration and advanced nursing education, advancing nursing knowledge, and responsiveness to societal needs. Indicators that we are achieving this vision:

- Ninety (90) percent pass rate on licensure and certification exams.
- Students and faculty represent cultural and other facets of diversity.
- Interdisciplinary coursework has been integrated into the nursing programs.
- Contributions to improved health status of the region.
- Faculty and alumni participation and leadership on local, regional, national, and international levels.
- Dissemination of research findings and clinical scholarship at the national level.
BELIEFS AND CORE VALUES NORTH DAKOTA STATE UNIVERSITY NURSING PROGRAM

The faculty, students, and graduates of the department of nursing believe in the inherent worth and dignity of individuals and the value of professional nursing as an integral part of the health of society. We believe the core values of autonomy, caring, integrity, justice, professionalism and respect guide the scholarship of education, service, practice, and research.

The role of faculty is to encourage, facilitate, and provide opportunities which support self-directed learning and critical thinking, enhance personal growth and socialize students as members of the profession in entry and advanced practice roles. The role of students is to develop the knowledge, skills and attitudes essential to professional nursing practice and continued study of nursing. The role of graduates is to promote the health of society, advance the discipline, and function as responsible citizens of the nation and the world.

Nursing is an art and science. It is a practice profession and an academic discipline. The domain of nursing is the human response to actual or potential variations in human functioning and life processes. Nursing involves interactions among the nurse, the person and the environment in the prevention of disease, the promotion and restoration of health, and the comfort of the dying.

Professional nursing practice is the creative application of therapeutic nursing interventions and nursing knowledge based on a synthesis of scientific knowledge, research, professional values and standards. Professional nurses work with individuals, families, communities and other aggregates to meet primary, secondary, and tertiary health care needs. Nurses practice independently, interdependently, and collaboratively in a variety of settings. Nurses balance career advancement, personal well-being, and fidelity to nursing’s social contract.

Core values provide a framework that supports education for and practice of professional nursing as envisioned by the Department of Nursing.

**Caring** is the central concept of nursing. The competence, sensitivity and compassion that characterize professional caring, guide our behavior in faculty/student and nurse/client interactions. **Respect** is reflected by nurses’ regard for human dignity and in our acceptance of the diversity of humankind. In our practice we demonstrate our respect for other disciplines through collegiality and collaboration.

**Autonomy** reflects a patient’s right to make decisions about his/her health care and nurses’ rights to make decisions about their professional practice. **Integrity** is manifested in our honesty with patients and the public, by adherence to standards of academic honesty, through our accountability for our actions, and through our provision of care based on practice standards.
The professional obligation to assure equal treatment and equal access to care is a facet of Justice. Nurses have a professional responsibility to encourage legislation and policy development that advances nursing care and quality health care for all people. Nursing faculty have an obligation to ensure that students have the opportunity to participate in and contribute to an excellent learning environment.

**Professionalism** encompasses a commitment to lifelong learning and professional development, participation in professional organizations and the political process, and adherence to professional values and regulations.

**Paradigm Definitions:**

1. “Nursing is the protection, promotion and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities and populations.”

2. Environment is comprised of internal and external forces including technological, legal, social, cultural, epidemiological, political, religious and economic phenomena.

3. A person is a holistic being with biopsychosocial, spiritual and cultural dimensions. An individual person is a rational and moral being with an inherent dignity and worth which persists throughout the lifespan despite any limitation in any dimension of being. Persons and groups of persons (family, community and other aggregates) are the focus of nursing care.

Health is “physical, mental and social well-being and not merely the absence of disease or infirmity.” Health may be described as a continuum and includes cultural and subjective perceptions of well-being. Disease is a dysfunction of a dimension of being. Illness is a subjective feeling of being unhealthy that may or may not be related to disease.

**Quality of Care Indicators – Institute of Medicine:**

See Schedule 4(a) below.

**Quality of Care:** The degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge.

**Effective:** Services are based on scientific knowledge and provided to all who could benefit and services likely to be non-beneficial are not provided (avoiding overuse and underuse).

**Efficient:** Waste, including waste of equipment, supplies, ideas, and energy is avoided.

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**Equitable**: Care provided does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location, and socioeconomic status.

**Patient Centered**: A partnership is established among practitioners, patients, and their families (when appropriate) to ensure that decisions respect patients’ wants, needs, and preferences and that patients have the education and support they need to make decisions and participate in their own care.

**Safe**: Patients are not injured by care that is intended to help them.

**Timely**: Needed care is obtained and unnecessary delays in getting that care are minimized.

**Evidence-based**: Decisions about care are based on conscientious, explicit, and judicious use of theory-derived, research-based information. Evidence-based health care requires the integration of individual clinical expertise with the best available external evidence from systematic research and the consideration of individual needs, values, circumstances, and preferences.
NURSING PARADIGM, CORE VALUES AND QUALITY HEALTHCARE INDICATORS

Nursing Paradigm, Core Values and Quality Healthcare Indicators

- Safe
- Justice
- Patient Centered
- Professionalism
- Caring
- Efficiency
- Effective
- Autonomy
- Respect
- Equitable
- Person
- Health
- Environment
- Quality Health Care
- Integrity
- Timely
DEFINITIONS

1. “Nursing is the protection, promotion and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities and populations.”¹

2. Environment is comprised of internal and external forces including technological, legal, social, cultural, epidemiological, political, religious and economic phenomena.

3. A person is a holistic being with biopsychosocial, spiritual and cultural dimensions. An individual person is a rational and moral being with an inherent dignity and worth which persists throughout the lifespan despite any limitation in any dimension of being. Persons and groups of persons (family, community and other aggregates) are the focus of nursing care.

4. Health is “physical, mental and social well-being and not merely the absence of disease or infirmity.”² Health may be described as a continuum and includes cultural and subjective perceptions of well-being. Disease is a dysfunction of a dimension of being. Illness is a subjective feeling of being unhealthy that may or may not be related to disease.


DOCTOR OF NURSING PRACTICE PROGRAM OUTCOMES

The curriculum of the North Dakota State University Doctor of Nursing Practice program prepares graduates to:

1. Demonstrate clinically expert practice in prevention and intervention that leads to improving the health of individuals, families, communities, and populations. (E1, E4, E7, and E8).

2. Evaluate outcomes of practice and incorporate best evidence in quality improvement methodologies. (E3).

3. Translate knowledge from nursing science, ethics, social, biological, and other sciences to benefit practice effectiveness and the health of individuals, families, communities, organizations, and populations. (E1).


5. Use technology (information and patient care) to enhance nursing practice for improvement of quality and efficiency of care. (E4).

6. Collaborate with other health disciplines and with makers of policy (public and institutional) to create and implement policy and practices that promote accessibility to healthcare and work toward elimination of health disparities. (E5, E6, and E8).
PROFESSIONAL GUIDELINES FOR
DOCTOR OF NURSING PRACTICE PROGRAM IN NURSING

The outcomes of the doctor of nursing practice program in nursing are derived from the mission, vision and core values of the Department of Nursing and the following professional guidelines:

1. The Essentials of Doctoral Education for Advanced Practice Nursing (AACN, 2006)
2. Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2012)
3. The Code of Ethics with Interpretive Statements (American Nurses Association, 2001)
5. The North Dakota Board of Nursing Rules and Regulations
6. Nurse Practitioner Core Competencies (NONPF 2012)
INFORMATION AND POLICIES

Copies of a map of the campus may be obtained at the following web site:
NDSU – http://www.ndsu.edu/ndsu/maps/CampusMap_2pg.pdf

Please see the following websites for information on graduate student policies:

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ADMISSION

See the NDSU graduate school website for policies and requirements for admission to and progression in graduate school http://www.ndsu.nodak.edu/gradschool.

- **Acceptance Deposit**: Applicants who are offered a position into the DNP nursing program are required to submit a non-refundable deposit fee of $250 to the College to assure a place in the cohort. This deposit is due in accordance with the admission letter. This fee will be applied to the differential tuition for the first semester of the professional program.

- **DNP Requirement** http://www.ndsu.edu/ndsu/nursing/programs/bsn-dnp.htm
  1. Completed application to graduate school. Application and directions are at http://www.ndsu.edu/gradschool/. Two of the required references are to be from professional colleagues and address clinical competence and ability to succeed in graduate study. The application essay should include a narrative of professional experience and a statement of professional goals.
  2. Unencumbered licensure in a US State as a registered nurse.
  3. Baccalaureate degree in nursing from a nationally accredited nursing program with a minimum GPA of 3.0 in Nursing.
  4. Interview with nursing faculty (Interviews are scheduled the first and/or second Friday and Saturday in March).
Soon after admission the following must be completed:
1. Documentation of health status.
2. Criminal background check.
3. Documentation of health insurance.
4. Documentation of ACLS certification.
5. Program of study completed in collaboration with faculty.
6. Inferential statistics required before nursing research course.

- **Licensure and Certification Records**
  The Program requires that students provide current evidence of the following:
  1. Certification in cardio-pulmonary resuscitation for health care provider or professional level
  2. ACLS certification
  3. Unencumbered professional nursing license (RN)

- **Criminal Background Checks**
  Criminal background checks are required. An FBI check is required for admission into the program. Multi-state background checks are required annually. Students sign the consent form providing residential addresses for the past seven years. A student who is disqualified from having patient contact based on results of a background check will be dismissed from the program. Minnesota clinical sites require the Minnesota DHS background check. All background check costs are the responsibility of the student.

- **Professional Liability Insurance**
  Professional liability insurance for students is provided by the NDSU program. The insurance is effective for all clinical learning situations in which the student is engaged as part of the NDSU graduate nursing program.

**PROGRESSION FOR ALL GRADUATE STUDENTS**
1. A cumulative GPA of 3.0 is required to continue in and graduate from the program. If the GPA falls below 3.0, the student is placed on warning by the Graduate School for the next semester in which courses are taken. If the GPA remains below 3.0 at the end of that semester, the student is placed on probation by the Graduate School.
2. No course with a grade of less than C may be applied to the program of study.
3. No more than two courses with a grade of C may be applied to the program of study.
4. A course with a grade of C (or less) may be repeated once or a comparable course may be substituted in the degree plan. No more than three courses may be retaken or substituted.
5. Program of study must be kept current.
6. Degree requirements must be completed within seven years after admission.

- **Program of Study**
  Forms for the program of study can be found on the graduate school website at [http://www.ndsu.edu/gradschool/current_students/forms/](http://www.ndsu.edu/gradschool/current_students/forms/) Students should consult with their academic advisor concerning the procedures for filing this plan. A tentative plan should be initiated on admission to the nursing program and should be completed no later than the end of the second semester full-time credits or after 16 credits are completed.

- **Course Registration**
  Registration is done electronically.

- **Full-time and Part-time Status**
  Full-time status is nine graduate credits in fall and spring sessions and six graduate credits in summer sessions. Teaching/research assistants engaged for 20 hours/week are considered full-time at four semester hours. Teaching/research assistants engaged for 10 hours/week are considered full-time if enrolled in a minimum of six graduate credits. Students who are not a teaching/research assistant and who are enrolled for less than nine semester hours are part-time.
• Advisement
The graduate student is responsible for initiating each step in progression toward the degree. Each student is assigned an advisor on admission. At the point of submission of the plan of study to the graduate office, the chair of the supervisory committee becomes the advisor. This may or may not be the same faculty member who was assigned as advisor for the student on admission to the nursing program. The student should notify the graduate nursing program academic assistant if there is a change in advisor.

• Scholarship
Doctor of nursing practice students complete a Clinical Dissertation that demonstrates synthesis of knowledge acquired through the program of study.

DNP Clinical Dissertation:
The doctor of nursing practice student selects a committee to supervise the development and completion of the plan of study and the Clinical Dissertation. The chair of the committee has background, expertise or interest in the topic and/or methodology that the student wishes to pursue. The student is required to meet with the committee as soon as a draft proposal has been prepared. The committee will provide input on the subject area, literature review, and methodology. At least three committee members must hold graduate faculty status at NDSU and, at least two must be members of the nursing faculty.

The Clinical Dissertation of the DNP degree candidate is a practice improvement project designed and implemented by the student. Clinical Dissertation guidelines are available at http://www.ndsu.edu/gradschool/current_students.

• Research Involving Human Subjects
Research Clinical Dissertations involving human subjects require advance approval by the Institutional Review Board (IRB). The approval or permission to conduct proposed activities must also be obtained from the site where research data or participants will be found. The proposal may be exempt from review, may qualify for an expedited review, or may require a review by the full board. Your committee chair will assist you in making this determination. IRB application information and material can be obtained from the Office of Research, Creative Activity and Technology Transfer or online: www.ndsu.edu/irb. All students complete a tutorial or class regarding the protection of human subjects. The tutorial may be found at: http://www.ndsu.edu/research/institutional_review_board/training.html. Documentation of completion of the tutorial must be submitted to IRB with the research proposal. The application must be approved by the academic advisor (supervisory committee chair) and IRB prior to any data collection. The committee chair will be designated as the principal investigator.
COMMUNICATION

• Computer Requirements
  Some courses are delivered on-line and components of other courses require on-line access. Personal Computer System Requirements for students enrolled in nursing courses can be accessed at:
  http://www.ndsu.edu/dce/student_resources/get_help1/tech_requirement_bb

• NDSU e-mail Address
  The student’s official NDSU e-mail address will be used for conveying and receiving information related to nursing courses. Students are responsible for monitoring their e-mail for information.

• ListServ
  A ListServ is used for communication between and among graduate nursing students and faculty. This is the primary mode of in-time information dissemination for the graduate nursing program. It is very important that every student read ListServ messages to receive up-to-date information.

  The Academic Assistant for the graduate program will add you to the relevant DNP ListServs. You will receive notification when you have been added to a ListServ list.

  Inform the Academic Assistant for the graduate program at (701) 231-5692 if you have any problems with the ListServ.

GOVERNANCE AND OTHER POLICIES

• Student Governance
  Graduate students participate in the governance of the program through attendance at the graduate student forum meetings that are held each semester and through membership on department committees. In addition, students are encouraged to discuss aspects of courses or of the program with faculty whenever questions or concerns arise.

• Academic Conduct
  Academic conduct policies of the University and of the College apply to students in the program. Students are expected to know policies on academic conduct and responsibility as well as institutional academic requirements and procedures.
  College policies are at http://www.ndsu.edu/pharmacy/college_information/policy_manual/ and institutional policies are at http://www.ndsu.edu/gradschool/bulletin/%20graduate_school_policies/general_policies/#c75123 A signed agreement to this policy is maintained in the student’s file and must be signed yearly.

  Students are expected to display the attributes of respect, autonomy, integrity, caring, justice, and professionalism in academic and clinical settings.

• Alcohol and Illegal Substances
  In accordance with state laws, the unlawful or unauthorized use, possession, storage, manufacture, distribution, or sale of alcoholic beverages and any illicit drugs or drug paraphernalia is prohibited in university/college buildings, any public campus area, housing units, university/college vehicles, or any university/college sponsored events either on or off campus.

  Students who fail to comply with this policy will be subject to disciplinary and/or legal action. Additionally, students who attend class or clinical activities under the influence of, or suspected of being under the influence of alcohol or drugs will be asked by the instructor to leave the classroom or clinical setting immediately. Further sanctions may be applied.
• **Student Appeals Procedure**
Students are encouraged to seek resolution of a problem at the lowest appropriate level, that is, the student should first discuss the problem with the person(s) directly involved. If this does not satisfactorily resolve the problem, the student should seek resolution with faculty, department chair, and college dean. In the event of an unsatisfactory resolution a formal grievance process may be initiated. The appeals process can be found at [http://www.ndsu.edu/fileadmin/policy/337.pdf](http://www.ndsu.edu/fileadmin/policy/337.pdf) for grades and at [http://www.ndsu.edu/fileadmin/policy/156.pdf](http://www.ndsu.edu/fileadmin/policy/156.pdf) for grievances of another nature. Questions regarding appeals may be e-mailed to NDSU.Policy.Manual@ndsu.edu

• **Infectious Diseases**
Student contact with clients in the health care setting is accompanied by risk of exposure to communicable disease as well as responsibility to avoid spreading communicable disease.

If you are exposed to body fluids while caring for a client:
1. Wash the exposed area (not eyes) immediately and thoroughly with soap and water. Cover with a dry sterile dressing if an open wound is present.
2. Notify nursing faculty immediately.
3. Complete an incident report (available from the clinical agency); submit one copy to the agency supervisor and one to your clinical faculty.
4. Seek medical advice immediately from your choice of provider. Students are not covered under workers’ compensation; costs of care are the responsibility of the student.

• **Clinical Assignments**
Students will be assigned to clinical sites according to learning objectives of the course. Client characteristics such as age, race, religion, socio-economic level, or health status will not be a factor in clinical assignment unless there is an identified need for clinical experience related to one or more of these characteristics.

A student who has a weakened immune status or who is pregnant is advised to inform the program director in writing whenever the condition becomes known. The program director will inform the chair. The chair and/or the student will discuss the student’s altered physical status with clinical faculty so that appropriate modifications of clinical assignments can be made. Such modification will be based on evidence-based practice guidelines and/or written recommendations of the student’s health care provider and will be designed to protect all parties at potential risk.

• **Records**
The transcript which lists credits and grades for all courses taken is the permanent record of each student’s progression. This record is confidential and is not released except at the request of the student. Transcripts are maintained by the Office of Registration and Records. An official transcript may be requested on-line from the Office of the Registrar to be sent to whomever the student designates.

An advisory folder for each student is kept on file in the School of Nursing while s/he is attending NDSU. The record contains admission papers, correspondence, evaluation forms, and other materials pertaining to the student. All advising/progression information is destroyed on the student’s graduation.

Records of health status and criminal background checks are maintained in a separate file during the student’s enrollment in the program. These documents are destroyed on program completion. A reference folder containing final transcript, final evaluation, and requests for references is maintained in the School of Nursing for each graduate and for students dismissed from the program.
CLINICAL COMPETENCY EXAMS
All DNP students will need to take and pass a clinical competency exam at the end of each practicum course. (Excluding 850) Students who do not pass the exam will have one opportunity to remediate the exam. Students cannot progress to the next semester’s courses without passing the clinical competency exam.

CLINICAL PRACTICE REQUIREMENTS
Direct patient/client care in a variety of clinical practice sites form an essential part of the NDSU nurse practitioner program. Clinical placements are an extension of classroom activities. Students are expected to perform in a professional manner and demonstrate growth towards professional practice. Students are expected to approach each clinical rotation with a willingness and desire to learn new clinical skills.

All students are expected to be familiar with the American Nurses Association Code of Ethics and the American Association of Nurse Practitioner Scope and Standards of Practice for nurse practitioners and to abide by them at all times.

- ANA Code of Ethics
  http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthics.aspx

- AANP Scope of Practice

- AANP Standards of Practice

NDSU DNP faculty determine whether a student has demonstrated reasonable competence in clinical practice. If faculty evaluation of student performance or health status indicates that safe clinical care is unlikely, the faculty has the legal responsibility to deny, and will deny the student, access to further clinical learning experiences.

The coursework and clinical practice requirements of the DNP program are significant. Students need time to contemplate, comprehend, and synthesize new knowledge. Faculty strongly encourage DNP students to consider their coursework and clinical time as equivalent to a full time job. We recommended that you work minimally, if at all.

CLINICAL PLACEMENTS AND PRECEPTORS
DNP students may have several practice sites and preceptors throughout the program and must be familiar with NDSU’s policies regarding professional standards, physical requirements and academic requirements. In addition, DNP students are required to be familiar with their clinical organization’s policies. Clinical placements involve the collaboration of many APRNs, physicians, physician assistants, and healthcare organizations. Numerous health care organizations have made available to NDSU the use of their facilities as well as their other agency personnel for the purpose of instructional experience. We appreciate the cooperation of many health care professionals. You play a major role in the determination of these relationships.

The preceptor is ultimately accountable for the FNP student’s patient care and performance in their clinical site. Consequently, the preceptor must approve student patient/client assessments and treatment plans and must be available on-site for consultation and approval. Patient communication, assessment, treatment plan, and all other aspects of patient care must be discussed with the preceptor before proceeding with care. When preceptor and student discuss patient/client management, the patient/client must not be placed in the position of responding to competing and contradictory messages.

Clinical placements are arranged and coordinated by DNP faculty and staff. Several variables are considered, such as where the student lives, the course objectives, and available clinical sites. Most clinical placements will be in North Dakota and Western Minnesota. All clinical placements must be approved by the course coordinator. Faculty site visits, professional recommendations, and student feedback are important sources of information as faculty determine the appropriateness of establishing or maintaining clinical sites. Students are not to arrange their own clinical placements or preceptors without faculty involvement or approval.
Prior approval from the DNP program coordinator is required before students can be placed with preceptors or in clinical sites where a strong personal relationship exits. Again, students are not to arrange clinical placements without the knowledge and involvement of the DNP faculty.

Clinicians can serve as preceptors for NDSU DNP students if they meet the following criteria:

1. The preceptor is licensed by the state and certified by a professional organization if required to practice in that state as an advance practice nurse, a physician assistant, or physician.
2. The preceptor has the educational preparation appropriate to their area(s) of practice and has at least one year of clinical experience in that area of practice.
3. The preceptor's practice is evidence based.
4. The preceptor’s practice site has sufficient space available for the student to see patients, document, and discuss patient care with the preceptor.
5. The preceptor has adequate time available for joint student/preceptor patient visits, to discuss patient care, and to evaluate the student.
6. The preceptor provides care for appropriate patients consistent with the student learning needs.
7. The preceptor agrees to confer with faculty per phone, email and/or on-site visits. (Travel to clinical sites and living arrangements (if needed) are the student’s responsibility.

Occasionally, DNP students will also be required to spend time (1-2 days) each semester with a DNP faculty at the faculty’s practice site. The DNP faculty will evaluate student clinical progress through preceptor communication, mock clinics, direct observation, and through other learning activities. If students have concerns related to a preceptor or clinical site, the student is responsible for discussing the concern with the clinical coordinator(s).

Students are encouraged to contact their preceptor at least two (2) weeks before the clinical experience is scheduled to begin. Students should plan to provide the clinical site with a current resume, skills record, and proof of immunizations. Students should ask the preceptor to recommend the “Top 5-10 diagnoses” seen in the preceptor’s practice. Knowing the common diagnoses allows the student to research and prepare for the clinical rotation. Students are required to post their proposed clinical schedule and the hours at the clinical site to the Typhon tracking system. The preceptor and faculty coordinator should also receive a written copy of the schedule.

A signed, current clinical contract between the agency/preceptor and the NDSU School of Nursing must be in place prior to starting a clinical rotation. A current, active, unencumbered RN license is also required and a copy must be on file at the School of Nursing prior to clinical participation. Students are required to have proof of current immunization, and annual TB test results on file at the School of Nursing prior to clinical practice.

In the assigned clinical site, the student will provide preceptor supervised patient health care. The student’s clinical experiences should build on learned advanced assessment skills, diagnostic reasoning, evidence-based practice, while providing holistic care to patients of a variety of age, gender, race, culture, economic status, and state of health. The individual student is accountable for incorporating and building upon information learned in previous courses and clinical experiences.

Providing health care is an interdisciplinary process, and students are encouraged to communicate and consult with other disciplines including ancillary staff, nurses, pharmacists, specialists, and others involved in patient care inside and outside of the clinical site. Students should take the initiative in this process in a manner consistent with professional courtesy, demonstrating respect in all communications. Professional courtesy requires the use of professional titles in formal and patient care settings.

**ATTENDANCE POLICY**

Attendance at clinical is required. No missed hours of clinical will be accrued in students’ clinical placements. Students are required to be at the clinical site during their scheduled clinical hours. The student must accrue the required number of clinical hours per semester or they will not progress. All hours will be made up before students may progress. If the student has an unforeseen absence from clinical because of illness, family
emergency, or weather, it is the student’s responsibility to contact the preceptor and the course coordinator as soon as possible. On a scheduled clinical day requiring travel away from home, the student is accountable for assessing the safety of road travel in light of climactic conditions. The student is required to make up time lost and is responsible to reschedule the clinical day another time during the semester. If the student is unable to reschedule the hours at the clinical site, arrangements are to be made with the course coordinator to find an alternate clinical site.

**VALID CLINICAL ACTIVITIES**
There are many educational activities that can occur in a clinical setting; however, the only activities that count toward required clinical hours for each DNP course include those that involve or are related to direct patient care. Examples of direct patient assessment activities include: seeing a patient (alone or with the preceptor); performing a patient-related procedure (e.g., microscopy, suturing); reviewing a chart or a clinical reference regarding a patient scheduled to see or have seen; discussing a patient’s plan of care with the preceptor or another member of the patient’s care team; reviewing a patients lab, cardiology, or radiology results; and documenting the patient’s care. Examples of non-patient related activities that do not count toward the required clinical hours include: simulated or mock patients, educational conferences or presentations, etc. Questions regarding the activities that count or do not count as a direct patient care should be discussed with the course coordinator. If the clinical site is experiencing a particularly slow day and a student is asked to go home, they may not count the scheduled hours; only the direct patient care hours can be counted. If the student’s assigned clinical site consistently has a limited number of direct patient experiences, the student is responsible to contact the course coordinator to find additional clinical hours at that clinical site or to locate an alternate placement.

**MAXIMAL WEEKLY HOURS**
Reflection is a critical aspect of clinical education. After each clinical day, students are expected to reflect upon and review the literature related to the patient’s encounters during the clinical experience. Spending too many hours in clinical at once takes away from this critical reflection and development time and undermines the learning process. Thus, students should limit clinical hours to 40 or less per week so that there is time for reflection and to absorb information.

**ATTIRE/DRESS CODE**

1. Personal Appearance/Professional Dress General Guidelines
   - The clinical agency’s guidelines will be followed. Students are required to follow the facilities policies regarding grooming and appearance.
   - The overall appearance will convey an image of professionalism.
   - Fingernails will be unaugmented (i.e., no acrylic nails), short, and without bright enamel.
   - The hair style will be such as the course instructor deems appropriate to the essential hygiene of the clinical area.
   - The color or shape of any undergarments will not be visible.
   - Jewelry will be minimal such as wedding rings, engagement ring, stud earrings (one set only), no dangling adornment (religious or secular), no observable ornamental device piercing any body part other than the earlobe.
   - Strong odors including, but not limited to, perfumes, colognes, aftershaves, or cigarette smoke are not permitted (this includes strongly scented lotions).
   - Tattoos must be covered.
   - Gum chewing is not appropriate in the clinical site, the classroom, or other places in which one is in a nursing role.
   - The course instructor is responsible for sharing with clinical instructors assisting in the conduct of the course the expectations regarding faculty and student attire in the clinical areas utilized in the course.
   - Insofar as agency guidelines are not violated, the course instructor is the arbiter of “appropriate” as descriptors of attire and general personal appearance.
   - If a student is unsure of the appropriateness of his/her attire, consulting with the preceptor and/or faculty is appropriate.
2. Visiting An Agency for Purposes Other Than Giving or Supervising Care of Clients
   - Students wear business professional clothes and, if indicated, a lab coat. If the student elects to wear street clothes and lab coat, the approved institutional identification name badge must be worn on the upper chest area of the lab coat. Jeans, shorts, sweats, low-cut tops, and sandals are not appropriate attire and cannot be worn to the clinical site.

3. Sanctions
   - The student who does not adhere to the personal appearance/professional dress guidelines in a clinical area will receive a warning for the first violation. A second offense may warrant dismissal from the clinical area for the day with the published corresponding effect on his/her course grade.

PREPARATION
In addition to appropriate attire, students must be prepared to engage in clinical care. Students should bring a stethoscope, a laptop computer and/or mobile device, and pertinent clinical textbooks.

CLINICAL LOG
Students are required to maintain a clinical/time log using Typhon Group Computerized Tracking System. No identifying data should be included on the log (see Confidentiality section). Students are expected to enter log data into the Typhon system immediately after completing each clinical day. The Typhon system has been set so that students cannot add or edit clinical data 14 days after the date has passed.

PERFORMANCE EVALUATIONS
A variety of mechanisms will be used to evaluate student clinical performance including clinical competency exams, preceptor evaluations, mock clinics, and case studies. Additionally, clinical faculty will maintain regular contact with preceptors via phone, email, Skype, and/or site visits.

IMMUNIZATION/HEALTH POLICY

1. Student contact with patients in the health care setting is accompanied by risk of exposure to communicable disease as well as responsibility to avoid spreading communicable disease. Documenting immunization and disease status is the responsibility of the student.
2. Students must submit evidence of having had a health examination within nine months prior to the beginning clinical experience.
3. Students are required to verify immunity against measles, mumps, and rubella prior to the initial clinical experience. Diphtheria-tetanus immunization within the past ten years is also required along with a varicella (chickenpox) titer.
4. Current immunization for hepatitis B is recommend as students’ potential exposure to body fluids presents a risk of infection. Nursing students admitted to the program will be required to provide documentation of hepatitis B immunization or declination.
5. Influenza vaccination is required annually. The only exemption is by physician’s or nurse practitioner’s order. Verification of vaccination must be submitted to the School of Nursing’s academic assistant by November 1st of each year or if otherwise designated. If this date for some reason does not work, you do need to contact the School of Nursing office.
6. Two-step tuberculosis testing or blood test for tuberculosis is required prior to the second semester in the program. Students will only need to retest in the event of travel to a high-risk area or if exposed to tuberculosis without protection. Any student with a positive tuberculosis test needs to have a chest x-ray within the past year. Based on clinical site requirements, students may be required to test annually. T-spot is not an acceptable test.
7. A health form documenting the exam and immunizations is maintained in the student’s file in the nursing office.
• **Student Services**
Students have access to general student services such as the wellness center, counseling, lactation lounge, meeting areas, food service, and opportunity to participate in cultural, intellectual, and sporting events. Information about graduate student housing may be obtained from the Office of Residence Life. In Sudro Hall there is a student lounge with computers for the use of students in the College of Health Professions. NDSU Wi-Fi access is available throughout Sudro Hall.

• **Financial Aid**
Students are advised to seek information from the Financial Aid Office regarding available loans and grants including the Nurse Educator Federal Loans. Federal traineeships for FNP and NE students are administered by the Department of Nursing. Information about the North Dakota Board of Nursing scholarship/loans can be obtained from [http://www.ndbon.org/](http://www.ndbon.org/). Information about other scholarships is disseminated over the graduate student ListServ.

**Graduate Nursing Student Organization**
The Graduate Nursing Student Organization (GNSO) is an organization open to all NDSU graduate nursing students. It was created in 2014 for the purposes of promoting educational and professional interests of the graduate student nurse population; to act as a liaison for graduate student-faculty communication; to provide mentor support between fellow graduate student nurses; to advocate for graduate student nurses to further the quality of nursing graduate education; to plan/provide funding to attend continuing education conferences; and to represent the graduate nursing students at NDSU.

• **Sigma Theta Tau International**
Sigma Theta Tau International, Honor Society of Nursing, is dedicated to improving the health of people worldwide through increasing the scientific base of nursing practice. Its members are nursing scholars committed to the pursuit of excellence in clinical practice, education, research and leadership. Sigma Theta Tau International’s philosophy of membership eligibility is based upon the purposes of the Society. Awarding membership recognizes, encourages and actively supports nursing excellence and scholarship by advancing professional development, scholarly pursuit, leadership, creativity and commitment to nursing. Graduate nursing students who have completed one-fourth of their curriculum, have achieved at least a 3.5 GPA, and meet the expectation of academic integrity may qualify for membership. Xi Kappa-at- Large is the local chapter of Sigma Theta Tau International. NDSU, Jamestown College, Concordia College and Minnesota State University, sponsor Xi Kappa Chapter.

• **AANP**
The American Association of Nurse Practitioners is the largest full-service national professional membership organization for NPs of all specialties. AANP’s mission is to lead NPs in transforming patient-centered health care. For more information, visit the AANP website: [www.aanp.org](http://www.aanp.org)

• **ANA**
The American Nurses Association (ANA) advances the nursing profession by fostering high standards of nursing practice, promoting the rights of nurses in the workplace, projecting a positive and realistic view of nursing, and by lobbying the Congress and regulatory agencies on health care issues affecting nurses and the public. As a member, one belongs to both the National as well as the State Organization. For more information, visit the ANA website: [http://www.nursingworld.org/](http://www.nursingworld.org/)
NORTH DAKOTA STATE UNIVERSITY  
DOCTOR OF NURSING PRACTICE  
BSN-DNP FACT SHEET

NDSU offers a program to prepare students for eligibility for certification as a family nurse practitioner. The full-time eight-semester course of study leads to a Doctor of Nursing Practice Degree (DNP). The curriculum is comprised of three components: 1) Graduate core courses; 2) Practice core courses; and 3) Specialty curriculum content. A minimum of 1,000 hours clinical practice are required.

### SAMPLE CURRICULUM PLAN (86 Credits) 3 year full-time

<table>
<thead>
<tr>
<th>YEAR 1 – Fall Semester 1</th>
<th>YEAR 1 – Spring Semester 2</th>
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<tbody>
<tr>
<td>3 N701 Theoretical Perspectives of the Discipline</td>
<td>3 N712 Advanced Health Assessment (includes lab)</td>
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<td>2 N714 Advanced Pathophysiology I</td>
<td>2 N716 Advanced Pathophysiology II</td>
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<tr>
<td>3 N715 Advanced Community Assessment</td>
<td>2 N710 Health Promotion &amp; Disease Prevention</td>
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<tr>
<td>3 STAT 725 Applied Statistics or MPH Bio Stats (11)</td>
<td>2 Pharm 685 Economic Outcomes Assessment</td>
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<tr>
<td>3 N712 Advanced Health Assessment (includes lab)</td>
<td>3 N704 Nursing Research/Evidenced Based Practice (12)</td>
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<tr>
<td>3 N704 Nursing Research/Evidenced Based Practice (12)</td>
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<tr>
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<tbody>
<tr>
<td>6 N712P Assessment Practicum</td>
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<td>2 N702 Ethics/Policy (8)</td>
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<tr>
<th>YEAR 2 – Fall Semester 4</th>
<th>YEAR 2 – Spring Semester 5</th>
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<tbody>
<tr>
<td>2 N731 Advanced Pharmacology I</td>
<td>2 N732 Advanced Pharmacology II</td>
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<tr>
<td>3 N733 Family Primary Care I: Assess &amp; Mgmt</td>
<td>3 N734 Family Primary Care II: Assess &amp; Mgmt</td>
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<tr>
<td>6 N733P Family Primary Care: Residency I</td>
<td>6 N734P Family Primary Care: Residency II</td>
</tr>
<tr>
<td>2 N799S-1 Clinical Dissertation I: Dev. of a Evidenced based practice study (13)</td>
<td>2 N799S-2 Clinical Dissertation II: Implementation of an evidenced based practice study (13)</td>
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<th>YEAR 2 – Summer Semester 6</th>
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<tbody>
<tr>
<td>2 N735 Family Primary Care III: Assess &amp; Mgmt</td>
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<td>2 N750P Family Primary Care: Specialty Practicum (4)</td>
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<tr>
<th>YEAR 3 – Fall Semester 7</th>
<th>YEAR 3 – Spring Semester 8</th>
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<tr>
<td>6 N735P Practicum IV: FNP Role Integration</td>
<td>8 N736P Practicum V: FNP Role Integration</td>
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<tr>
<td>2 N720 Advanced Practice Roles</td>
<td>3 N730 Clinical Applications</td>
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<tr>
<td>2 N799S-3 Clinical Dissertation III: Evaluation of a Evidenced based practice study (13)</td>
<td>1 N780 IPE</td>
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<tr>
<td>3 N706 Healthcare Del. Systems, Financing &amp; Informatics (13)</td>
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### CURRICULUM

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<tr>
<th>Core Graduate Courses</th>
<th>Practice Core Courses</th>
<th>Specialty Curriculum</th>
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<tr>
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<tr>
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<td>N780 IPE</td>
<td>N735 Family Primary Care III: Assess &amp; Mgmt</td>
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<td>Pharm685 Econ Out Assess Stat 725 Applied Statistics</td>
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<td>N736P Practicum V: FNP Role Integration</td>
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<td>N 750P Family Primary Care: Specialty Practicum</td>
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<td>N799S-1 Clinical Dissertation I:</td>
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<td>N799S-2 Clinical Dissertation II:</td>
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<td>N799S-3 Clinical Dissertation III</td>
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Curriculum Worksheet

Student: ___________________________ Specialty Track: ___________________________
Advisor: ___________________________ Expected Graduation Date: ________________

Indicate the courses that will be taken each semester. Indicate when plan of study will be submitted; when IRB approval, proposal meeting, and oral examinations will be scheduled; and when other required graduate school forms will be submitted. When completed, a copy of this form is placed in the advising file.

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<th>Fall Semester 1</th>
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DOCTOR OF NURSING PRACTICE
CLINICAL DISSERTATION

Clinical Dissertation information can be accessed at

Clinical Dissertation 899S-1 (2 credits); 899S-2 (2 credits); 899S-3 (2 credits)

1. Total credits are 6. Credits are distributed over three semesters.

2. Students must maintain continuous enrollment with at least 1 credit each semester until completion of
the study and oral examination. After completing 6 credits, students must register for one credit each
semester until finished.

The Clinical Dissertation is a scholarly documentation of an undertaking to improve practice.

CLINICAL DISSERTATION

1. Title Page
2. Table of Contents
3. Body of the Paper
   a. Background and Significance of Proposed Project/Intervention
      • Problem Statement or Purpose – Identification of the challenges, problems, situations,
opportunities leading to the proposed project.

   b. Theoretical Framework
      • Project Description
         o Literature Review and Synthesis
         o Congruence of Organizations Strategic Plan to Project
         o Project Objectives
      • Project Design
         o Evidence Based Project /Intervention Plan – Describe in detail the project plan
         o Timeline of Project Phases
         o Resources – Personnel, Technology, Budget, etc.
         o As appropriate to the individual project and determined by the advisor and mentor,
           the DNP student may include a market analysis, strategic analysis, and/or
           product/services, sales/marketing, operations, and financial plan that justifies the
           need, feasibility, and sustainability of the proposed project.
• Evaluation Plan
  o For each objective, include specific details as to how your project will be evaluated. What evidence-based measures will be applied to the evaluation plan? What evidence-based measures/instruments were used for each objective? What method of analysis will be used for each objective?

• Application to DNP Role

• Discussion and Conclusion
  o Presentation of Findings
  o Interpretation of Results
  o Limitations
  o Implications for Nursing Practice
  o Future Research

**Supervisory Committee**
Each student has a supervisory committee who guides the Clinical Dissertation and conducts the final oral examination. The committee consists of three members invited by the student: the committee chair (major advisor who is a full or associate member of the graduate faculty in nursing), a second member who is a full or associate member of the graduate faculty in nursing, a third member who is either a full or associate member of the graduate faculty of the University or an outside expert in the area of study, and a fourth member who is appointed by the Graduate School. The student and advisor may offer suggestions to the Graduate School. The student may invite additional members to serve on the committee. The supervisory committee should be formed in ample time to provide guidance for the design of the Clinical Dissertation.
FINAL ORAL EXAMINATION

The purpose of the final oral examination is to give the degree candidate the opportunity to a) demonstrate mastery of the essentials of his/her plan of study and readiness for advanced practice in nursing; b) present the findings of the culminating scholarly project; and c) demonstrate his/her ability to explain and define the culminating scholarly project and its contribution to the discipline.

1. To schedule the final oral examination, a student must be enrolled in or have completed at least 75 percent of the total credits required for the degree.

2. The final oral examination follows the completion of and precedes the final approval of the culminating scholarly work (Clinical Dissertation, Thesis, or Project).

3. Preparation for the examination includes the following
   o Seek permission to schedule the oral examination from the major advisor.
   o Schedule the examination with each member of the supervisory committee.
   o The request to schedule the examination form is sent to the Graduate School two weeks prior to the examination.
   o Submit the Thesis, Paper, or Clinical Dissertation in near final form to the supervisory committee members no fewer than seven days prior to the examination.

4. The final examination is conducted by the supervisory committee.

5. The examination, approximately 60 minutes in length, proceeds as follows:
   A. The examination begins promptly at the designated time.
   B. The chair invites the candidate to give a brief summary of her/his culminating scholarly work.
   C. The beginning of the examination focuses on the culminating scholarly work of the candidate. The candidate is expected to be prepared to defend all elements of the culminating scholarly work.
   D. The committee asks eight to ten questions pertinent to the core curriculum and specialty area study.
   E. The student is excused and asked to wait in a nearby area for the committee’s decision.

6. The committee decides if the student’s DNP Clinical Dissertation is accepted and if the student passes or fails the final examination. In addition:
   A. If the committee members agree that the student has mastered his/her program of study and is knowledgeable about the Clinical Dissertation topic, the student passes and the proper forms are sent to the Graduate School completed. See the Graduate School policies for consequences of failing the exam.
   B. If the committee members agree that the written paper requires revision, the student must make and submit the revisions to the committee. The committee determines whether the needed revisions are minor or major. If minor, the major advisor (chair) may be authorized to read and approve the revisions as specified. If major, the entire committee will review the revisions.

7. The committee completes the paperwork necessary for the student to proceed in the degree candidacy process.
Completion

- Submit a draft of the Clinical Dissertation electronically to the Graduate School for approval. Include a copy of the IRB approval letters and the Clinical Dissertation checklist on top of the draft. The completion package fee needs to be submitted to the Graduate School with the first draft. Revisions of the Clinical Dissertation may be required.
- Once approved by the Graduate School, submit an electronic copy of the Clinical Dissertation no later than one year after the oral defense. Degree date is based on the date when final copy is submitted to the Graduate School. The major advisor may request a bound copy and the student may choose to have bound copies made for themselves and others.
- Submit request to participate in commencement (optional).
- Participate in commencement (optional).
North Dakota State University Graduate Nursing Program  
Clinical Dissertation Completion


2. Student interviews eligible faculty members to learn additional information such as the faculty member’s nursing philosophy, research interests, and other relevant information (for example, if the faculty member is available during summer).

3. After discussing proposed topic, student requests faculty member to be Chair of his/her Supervisory Committee.

4. Faculty member accepts or declines.

5. Student relates to Nursing Graduate Academic Assistant the change of Academic Advisor to Supervisory Committee Chair if there is a change.

6. If student decides to change Supervisory Committee Chair, the student is responsible to communicate to the previous Supervisory Committee Chair that another faculty member is a better fit for the project and will be the new Supervisory Committee Chair.

7. Faculty member is listed as Advisor and Clinical Dissertation Committee Chair.

8. Student discusses potential committee members with chair.

9. Student secures agreement of another eligible nursing faculty member to serve on committee and of a third person who may be an outside expert or may be a member of the nursing faculty. (A fourth member of the committee is appointed by the Dean of the Graduate School). A student may choose to have more than four people on his/her committee.

10. Student sends Degree Plan of Study/Supervisory Committee form to the Graduate School.  
http://www.ndsu.edu/gradschool/current_students/forms/

11. Chair guides student in the development of his or her Clinical Dissertation proposal.

12. Turn-around times for student work submitted to chair/committee is no greater than ten (10) business days.

13. Student sends proposal to committee members after review and approval of the committee chair and a meeting of the Supervisory Committee is scheduled.

14. Committee members are given a minimum of ten (10) business days to review the proposal before the meeting.

15. Input is given by the Supervisory Clinical Dissertation Committee.

16. Chair mentors student in execution of the scholarly activity.

17. Chair and student mutually agree on timeline and on how components of Clinical Dissertation will be submitted to the chair for review.

18. Complete and submit Request for Oral Exam form to Graduate School at least two weeks prior to final Oral Examination http://www.ndsu.edu/gradschool/current_students/forms/
19. At the discretion of the chair and student, progress meetings with the entire committee may be scheduled.

20. Chair conducts the committee for the Final Oral Examination to determine if student has met the Program Outcomes.

21. In the nursing program, the final review of the Clinical Dissertation usually occurs at the time of the final oral examination.

23. Following the oral exam, the chair forwards to the Graduate Office the record of the outcome of the examination (Approve/Disapprove) on the form received from the Graduate Office. The student attends to the recommendations of the committee, if any. Revision to the final scholarly project and other recommendations are monitored by the chair; however, committee members individually or as a group may elect to participate in monitoring recommended revisions. The School of Nursing chair is required to sign off on the final scholarly project before the document is submitted to the graduate school for approval. [http://www.ndsu.edu/gradschool/current_students/forms/](http://www.ndsu.edu/gradschool/current_students/forms/)

24. Following incorporation of recommendations according to the agreed-upon process, the Thesis/Clinical Dissertation is electronically submitted to the Graduate School. [http://www.ndsu.edu/gradschool/current_students/forms/](http://www.ndsu.edu/gradschool/current_students/forms/)

25. Student completes form or statement regarding use or nonuse of humans, animals, or biohazards in the research project and submit form with Thesis/Clinical Dissertation. [http://www.ndsu.edu/gradschool/current_students/forms/](http://www.ndsu.edu/gradschool/current_students/forms/)

26. Student informs the Graduate School how s/he can be contacted and who will pick up the bound copies of the Dissertation if that option has been chosen.

27. Student fills out and sends to the IRB Office the Continuing Review or Completion Report form prior to graduation. This form lets NDSU IRB know the research project is completed.