



**GEORGE FOX**  
**U N I V E R S I T Y**

College of Nursing

**Student Handbook**  
**2025-2026**

“I hope that my achievements in life shall be these - that I will have fought for what was right and fair, that I will have risked for that which mattered, and that I will have given help to those who were in need, that I will have left the earth a better place for what I’ve done and who I’ve been...”

Carl Hoppe

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## Abbreviations and Term Definitions

**ACEMAPP:** Comprehensive program compliance, clinical onboarding, and clinical rotation management tool

**AACN:** American Association of Colleges of Nursing

**ANA:** American Nurses Association

**APPE:** Advanced professional practice experience

**ARC:** Academic Resource Center

**CCC:** Clinical Course Coordinator. The faculty who coordinates and manages student clinical experiences in collaboration with the simulation team and clinical partners.

**CCNE:** Commission on Collegiate Nursing Education

**CI:** Clinical Instructor

**Clinical Experience:** Training experiences where students apply clinical judgment in a variety of George Fox University College of Nursing approved settings. i.e., skills lab, simulation, clinical placements or APPE.

**CON:** College of Nursing

**Competency:** Expected level of skill and academic performance

**CPO:** Clinical Placement Office

**DAS:** Disability and Accessibility Services

**Didactic:** Instructional component of curriculum focused on theoretical knowledge, principles, and concepts

**Faculty:** Educators, scholars, and professionals who teach, mentor, and conduct research within a college or university. Responsibilities extend beyond teaching to include curriculum development, academic advising, service on committees, and professional contributions.

**Formative:** Refers to assessments or learning activities designed to provide ongoing feedback and support student growth throughout the learning process. Formative assignments help students develop their knowledge, skills, and understanding by identifying strengths and areas for improvement before final evaluations.

**GFU:** George Fox University

**GPA:** Grade Point Average, grades are calculated on a 4-point scale, pluses, and minuses are considered

**Holistic:** A philosophy of nursing practice that takes into account total patient care, considering the physical, emotional, social, economic, and spiritual needs of patients, their response to their illnesses, and the effect of illness on patients' abilities to meet self-care needs (*from Mosby's Medical, Nursing, and Allied Health Dictionary, 4th ed, p745*)  
*Year introduced: 1996*

**LMS:** Learning Management System, such as Canvas.

**NCLEX:** National Council Licensure Examination

**OPIM:** Other potentially infectious material

**OSBN:** Oregon State Board of Nursing

**Outcome:** Expected level of achievement at end of the course or upon graduation

**Nursing Curriculum:** Details the specific topics, concepts, skills, and learning objectives that will be taught in each course.

**Nursing Program:** The overall structure and sequence of courses required to achieve the BSN degree.

**Remediation:** Actions taken to improve and increase student outcomes on standardized assessments

**SBE:** Simulation-Based Experience, includes skills lab, open lab, & simulation experiences

**Standards:** All standards of safety, practice, and behavior as cited in ANA Nursing Standards, Nursing Code of Ethics, course handouts, textbooks, & course evaluation forms

**Summative:** refers to evaluations conducted to measure a student's overall learning, achievement, or competency against established standards or learning objectives. Summative assessments are typically graded, and used to determine final performance, such as exams, final projects, individual summative simulations, or capstone experiences. Unlike formative assessments, summative assessments focus on the culmination of learning rather than ongoing progress.

**The Essentials:** American Association of Colleges of Nursing Essentials are the core competencies for professional nursing education





## Welcome to the George Fox University College of Nursing

We are glad you have joined us in your journey to becoming a professional nurse. We share your commitment to excellence in health care and caring for others with compassion and hope. As a student in the College of Nursing you will have opportunities to learn about nursing through the varied perspectives of the humanities, natural and social sciences, and faith principles. You will experience the satisfaction of caring for hurting people and learning from dynamic healthcare environments and their leaders. As an emerging nurse professional at George Fox University, these opportunities to learn will open doors of service for you now and for a lifetime.

As a nursing student at George Fox University, diligence, excellence, and character matter. Our standards are high and our program of study is rigorous. I am excited for the opportunity to work and learn together with you and our faculty during your program of study.

The Nursing Student Handbook is designed to be a guide for the successful completion of this program. You are responsible to know and follow the policies and procedures in the handbook. This handbook has been created to make your experience as unique and fulfilling as possible.

I look forward to getting to know you as you pursue your nursing degree.

**Pam Fifer EdD, MS, RN, CNE**

Dean, College of Nursing  
George Fox University

## Purpose of the Nursing Student Handbook

This handbook is used to communicate the College of Nursing (CON) policies and provide guidelines specific to nursing students. It serves as an essential guide and resource during your time in the CON program at George Fox University (GFU). This handbook is not all-inclusive; it is designed to supplement information contained in the GFU Student Handbook, Lifestyle Statement, and Code of Ethics that apply to all GFU students. It is your responsibility to read and comply with the policies outlined in both handbooks.

The policies and procedures in the CON are subject to change without prior notice, as determined to benefit the students' learning experience. It will be updated as needed and students will be notified of changes through announcements sent via electronic mail and/or posted on the "Nursing Student Resource" page in Canvas. The policies and processes described in this handbook do not constitute a contract but help you understand the processes GFU and the CON normally follow.

## Accreditation

The baccalaureate degree program in nursing at George Fox University is accredited by the Commission of Collegiate Nursing Education (CCNE) until June 30, 2032.

Officially recognized by the U.S. Secretary of Education as a national accreditation agency, CCNE is an autonomous accrediting agency, contributing to the improvement of the public's health. CCNE ensures the quality and integrity of baccalaureate, graduate, and residency programs in nursing. <http://ccneaccreditation.org>

GFU CON is also approved by the Oregon State Board of Nursing (OSBN). The Oregon State Board of Nursing safeguards the public's health and well-being by providing guidance for, and regulation of, entry into the profession, nursing education, and continuing safe practice. <http://www.osbn.state.or.us>

## Campus Resources

<p align="center"><b>College of Nursing</b></p> <p>Office: 503-554-2950    Email: <a href="mailto:nursing@georgefox.edu">nursing@georgefox.edu</a>    <a href="#">Website</a>  Location: Roberts Center    Mailing: 414 N Meridian Street, Box 6273  501 N Villa Road, Suite 146    Newberg, OR 97132  Newberg, OR 97132</p>	
<p><b>Academic and Resource Center (ARC)</b>  Office: 503-554-2320    <a href="#">Website</a>  <a href="#">Schedule an appointment</a>  Location: Murdock Library</p>	<p><b>Disability &amp; Accessibility Services (DAS)</b>  Office: 503-554-2448  Email: <a href="mailto:das@georgefox.edu">das@georgefox.edu</a>    <a href="#">Website</a>  Location: Murdock Library</p>
<p><b>Registrar</b>  Office: 503-554-2218  Email: <a href="mailto:registrar@georgefox.edu">registrar@georgefox.edu</a>    <a href="#">Website</a>  Location: Stevens Center  330 N Meridian Street  Newberg, OR 97132</p>	<p><b>Career &amp; Academic Planning Center (CAP Center)</b>  Office: 503-554-2330  Email: <a href="mailto:careers@georgefox.edu">careers@georgefox.edu</a>    <a href="#">Website</a>  Location: Stevens Center  330 N Meridian Street  Newberg, OR 97132</p>

<b>Student Life</b> Office: 503-554-2316 <a href="#">Website</a> Email: <a href="mailto:studentlife@georgefox.edu">studentlife@georgefox.edu</a> Location: Hadlock Student Center	<b>Spiritual Life</b> Office: 503-554-2320 <a href="#">Website</a> Email: <a href="mailto:spirituallife@georgefox.edu">spirituallife@georgefox.edu</a> Location: Barclay House
<b>Bruin Community Pantry</b> Office: 503-554-2316 <a href="#">Website</a> Email: <a href="mailto:bruincommunitypantry@georgefox.edu">bruincommunitypantry@georgefox.edu</a> Location: Lewis Apartment #1 1404 E Sherman Newberg, OR 97132	<b>Health &amp; Counseling</b> Office: 503-554-2340 Email: <a href="mailto:hcc@georgefox.edu">hcc@georgefox.edu</a> <a href="#">Website</a> Location: Woodward House 200 N River Road Newberg, OR 97132
<b>Student Financial Services</b> Office: 503-554-2302 Email: <a href="mailto:finaid@georgefox.edu">finaid@georgefox.edu</a> <a href="#">Website</a> Location: Stevens Center 330 N Meridian Street Newberg, OR 97132 Mailing: 414 N Meridian Street, Box 6068 Newberg, OR 97132	<b>Campus Public Safety</b> Office: 503-554-2090 <a href="#">Website</a> Email: <a href="mailto:campussafety@georgefox.edu">campussafety@georgefox.edu</a> Location: Hiebert House 212 Carlton Way Newberg, OR 97132

## GFU Mission, Vision and Values

### Mission

GFU, a Christ-centered community, prepares students spiritually, academically, and professionally to think with clarity, act with integrity, and serve with passion. Our vision is to be the Christian university of choice known for empowering students to achieve exceptional life outcomes.

### Vision

To be the Christian university of choice known for empowering students to achieve exceptional life outcomes.

### Values

- Students First
- Christ in Everything
- Innovation to Improve Outcomes

## History of GFU and the CON

More than a century ago, early Oregon Quaker pioneers helped settle the rich and fruitful Chehalem Valley of Oregon. One of their first priorities, along with the founding of their church, was the education of their children. At the same time, founding pioneers were looking ahead with a dream of a college to provide more advanced education. That time came on September 9, 1891, with the opening of the doors of Pacific College. Fifteen students were counted on opening day.

In the 131 years since GFU's founding, major changes have included the name of the university itself. Retitled in 1949 to distinguish it from other "Pacific" colleges, the school was named in honor of the founder of the Friends Church, George Fox. The name changed again in July 1996 when George Fox College became George Fox University, incorporating Western Evangelical Seminary.

From only a handful of courses in the 1890s, GFU now offers more than 40 undergraduate majors, six seminary degrees, 13 master's and doctoral degrees. Over the years, more than 30,000 students have called this institution their alma mater.

The Christian atmosphere is a campus priority. With other Christians, GFU holds to the historic truths and teachings of Christianity, as outlined in the statement of faith. Since its founding, GFU has been guided by the Northwest Yearly Meeting of Friends Church. It historically has emphasized the necessity of a genuinely experiential Christian faith, personal integrity and purity, the spiritual nature of the ordinances, the importance of peacemaking and responsible social action, the involvement of women in ministry and leadership, the valuing of simplicity, and the right and duty of each person to hear and follow God's call.

Aligned with the mission of GFU, a nursing program was begun and the first nursing class was admitted in the spring of 2006. Since that time, 60-90 students graduate each year and find employment in varying capacities and agencies. Many are employed locally, some have moved to other states, and several are enrolled in graduate programs to further expand their roles as nurses.

## Mission of the CON

The mission of the CON is to cultivate exceptional clinicians, leaders, scholars, and innovators. We prepare graduates to integrate mind, body, and spirit to positively impact the world, embodying the service, integrity, and compassion exemplified by Christ.

## The Philosophy of the CON

The GFU CON is grounded in the belief that every individual deserves compassionate, holistic, and evidence-based care across the lifespan. We uphold the intrinsic dignity of all people, supporting the physical, emotional, and spiritual well-being of our patients through the art and science of nursing.

## The Core Values of the CON

1. **Holistic Care:** We believe in caring for the whole person—mind, body, and spirit—tailoring care to the unique needs of each patient and family. By honoring the individuality of every person, we foster health and well-being at every stage of life.
2. **Cultural Humility:** We are committed to providing inclusive, equitable care to individuals from diverse cultural, socioeconomic, spiritual, and ethnic backgrounds. We believe in fostering cultural humility and empowering patients to make informed decisions within the context of their personal values and traditions.
3. **Evidence-Based Practice:** We strive to merge the art of nursing with the latest evidence-based practices. Through research, critical thinking, and ongoing professional development, we ensure that our graduates provide the highest standard of care, advocating for both the patient and the advancement of the profession.
4. **Collaboration:** Our program emphasizes interprofessional collaboration. We prepare our graduates to work alongside other members of the healthcare team to deliver seamless and comprehensive care that respects the contributions of every team member.
5. **Empowerment and Advocacy:** We believe in empowering patients to take control of their health and make informed decisions. Our graduates act as advocates for their patients, fostering autonomy and shared decision-making.
6. **Christ-Centered Care:** In alignment with the principles of Christian faith, we embody the love, compassion, and service exemplified by Christ. We seek to honor these values in all aspects of care, recognizing the spiritual dimension of health and healing.



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7. **Leadership and Innovation:** Our philosophy values the continuous pursuit of knowledge, leadership, and innovation. We encourage our graduates to be leaders and innovators in their field, advocating for policies that improve health outcomes and advance the profession.

## Civility in Nursing

The GFU CON is a community of staff, faculty, and students that are committed to a respectful, safe, and protected environment, founded in civility, in which all can work and learn. The CON requires that all members of our community value and recognize the worth of each person. As a community, all members will make every effort to discourage incivility and protect their members from all forms of unacceptable interpersonal aggression including, but not limited to, verbal, written, and physical aggression.

All members of the CON will strive to maintain an environment that is free from violence, threats of violence, harassment, intimidation, and other disruptive behavior from each other or outside persons. The CON will take seriously and deal promptly and appropriately with all incidents to ensure a safe and protected environment.

## American Nurses Association Code of Ethics for Nurses

1. The nurse practices with compassion and respect for the inherent dignity, worth and unique attributes of every person.
2. The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
3. The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
4. The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.
5. The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
6. The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work settings and conditions of employment that are conducive to safe, quality health care.
7. The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
8. The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
9. The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

American Nurses Association. (2015). *Code of ethics for nurses with interpretive statements*. Washington, D.C.: American Nurses Publishing. Retrieved from: [View the Code of Ethics for Nurses | ANA](#)

## Nursing Community Pledge

Professionalism in nursing practice requires accountability and responsibility in all aspects of the nursing program. Students are required to sign the GFU Nursing Community Pledge to affirm their understanding and commitment to upholding the expectations of the program throughout their time of enrollment in the nursing program.

## Program Outcomes

1. Synthesize a comprehensive understanding of evidence-based nursing knowledge and clinical judgment founded upon liberal arts, sciences, expertise from other disciplines, and ethical principles to promote wellness in diverse populations.
2. Deliver person-centered, equitable, compassionate, coordinated, developmentally appropriate and Christ-centered care to individuals with diverse perspectives and needs using the clinical judgment model.
3. Integrate population health principles including advocacy, health promotion, disease prevention and management, social determinants of health, and health policy alongside community resource partnerships to improve equitable health outcomes among individuals, families, and communities.
4. Demonstrate the ability to ethically synthesize, translate, apply, and communicate nursing knowledge to improve health outcomes and transform healthcare.
5. Implement evidence-based quality and safety principles to enhance health outcomes and minimize risk of harm to self, patients, and providers through individual performance and knowledge of system effectiveness.
6. Collaborate with interprofessional team members and other stakeholders through professional communication, teamwork, and respect for diversity to enhance healthcare outcomes and safety.
7. Incorporate knowledge of healthcare and system complexities with responsible resource management that align with Christian values to provide safe, quality, and equitable care to diverse populations.
8. Utilize informatics and communication technologies to gather and synthesize data, accurately document information, support evidence-based decision-making, and deliver safe, high-quality care in accordance with professional and regulatory standards.
9. Exhibit professional identity through civility, integrity, accountability, ethical conduct, and collaboration to reflect nursing core values and standards.
10. Engage in activities and self-reflection to promote personal well-being, sustained expansion of nursing expertise, and leadership behaviors.

## Core Competencies

- **Patient-Centered Care:** Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient preferences, values, and needs.
- **Teamwork & Collaboration:** Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.
- **Evidence-Based Practice:** Integrate best current evidence with clinical expertise and patient/family preference and values for delivery of optimal health care.
- **Quality Improvement:** Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of healthcare systems.
- **Safety:** Minimize the risk of harm to patients and providers through both system effectiveness and individual performance.
- **Informatics:** Use information and technology to communicate, manage knowledge, mitigate error, and support decision-making.

- **Christ-Centered:** Take the challenge of Jesus Christ to be God's agents of love and reconciliation in the world through the promotion of peace, justice, and care of the earth.
- **Professionalism:** Behaviors indicating the presence of professionalism include placing the patient's welfare first, committing to nursing and CON policies, cooperating, and displaying intellectual and personal integrity.

## Program Outcomes Mapped to AACN Essentials, Core Competencies, and Concepts

GFU CON Program Outcome	AACN (2021) The Essentials: Core Competencies for Nursing Education	AACN Concepts
1. Synthesize a comprehensive understanding of evidence-based nursing knowledge and clinical judgment founded upon liberal arts, sciences, expertise from other disciplines, and ethical principles to promote wellness in diverse populations.	1. Knowledge for nursing practice	Clinical Judgment Evidence Based Practice Ethics Diversity, Equity and Inclusion
2. Deliver person-centered, equitable, compassionate, coordinated, developmentally appropriate and Christ-centered care to individuals with diverse perspectives and needs using the clinical judgment model.	2. Person-centered care	Compassionate Care Christ-Centered Care Clinical Judgment Communication Diversity, Equity and Inclusion
3. Integrate population health principles including advocacy, health promotion, disease prevention and management, social determinants of health, and health policy alongside community resource partnerships to improve equitable health outcomes among individuals, families and communities	3. Population Health	Social Determinants of Health Diversity, Equity and Inclusion Health Policy
4. Demonstrate the ability to ethically synthesize, translate, apply, and communicate nursing knowledge to improve health outcomes and transform healthcare.	4. Scholarship for the nursing discipline	Communication Ethics Evidence-Based Practice
5. Implement evidence-based quality and safety principles to enhance health outcomes and minimize risk of harm to self, patients, and providers through individual performance and knowledge of system effectiveness.	5. Quality and safety	Evidence-Based Practice Clinical Judgment
6. Collaborate with interprofessional team members and other stakeholders through professional communication, teamwork, and	6. Interprofessional partnerships	Communication Diversity, Equity and Inclusion

respect for diversity to enhance healthcare outcomes and safety.		
7. Incorporate knowledge of healthcare and system complexities with responsible resource management that align with Christian values to provide safe, quality, and equitable care to diverse populations	7. Systems-based practice	Christ-Centered Care Diversity, Equity and Inclusion Social Determinants of Health Health Policy
8. Utilize informatics and communication technologies to gather and synthesize data, accurately document information, support evidence-based decision-making, and deliver safe, high-quality care in accordance with professional and regulatory standards.	8. Informatics and health care technologies.	Communication Clinical Judgment Ethics
9. Exhibit professional identity through civility, integrity, accountability, ethical conduct, and collaboration to reflect nursing core values and standards.	9. Professionalism	Ethics Christ-Centered Care Compassionate Care
10. Engage in activities and self-reflection to promote personal well-being, sustained expansion of nursing expertise, and leadership behaviors.	10. Personal, professional, & leadership development	Ethics Communication

## Curriculum Plans

Refer to the following appendices for current and future curriculum plans

- [Appendix B](#): Four semester curricular plan
- [Appendix C](#): Four semester curricular plan (Honors)

## Pain Content Across the Curriculum

The Oregon Pain Management Commission provides Oregon specific training required for certain licensed health care professionals as directed by ORS 413.590. Completion of the pain management module Advancing Pain Management in Oregon fulfills this requirement. This one-hour module is completed as a part of NURS 330: Essentials of Nursing Practice. <http://www.oregon.gov/oha/HPA/CSI-PMC/Pages/required-module.aspx>

Pain Content	Course	Dedicated Time (hours)
Physiological mechanisms of pain	BIO 221 & 222 - Anatomy & Physiology	0.5
Noticing, interpreting, responding and reflecting for clients experiencing pain	NURS 353 - Health Alterations Across the Lifespan 1 simulation: Peptic ulcer (1) in and addiction (1), and Lower GI Bleed (1). NURS 440 - Health Alterations Across the Lifespan II simulation: ARDS (2), Burn (2), DKA (1), and meningitis (1)	9



Concept: Pain & Comfort - Concept introduction to pain, types of pain: acute vs. chronic nociceptive neuropathic visceral, includes noticing, interpreting, responding and reflecting for clients experiencing pain	NURS 330 - Essentials	6
Concept: Inflammation, includes assessment and management of pain and pain as an interrelated concept for inflammation	NURS 311 - Pathophysiology	0.5
Pain management medications (Opioids, NSAIDs, Adjuvant Analgesia)	NURS 312 - Pharmacology	4
Concept: Pain & Comfort - Pancreatitis exemplar Next Gen case study, includes noticing, interpreting, responding and reflecting for a client experiencing severe acute pain due to pancreatitis	NURS 440 - Health Alterations Across the Lifespan II	4
Concept: Pain & Comfort - Fibromyalgia, mixed complex pain, chronic pain with acute flares, includes noticing, interpreting, responding and reflecting	NURS 353 - Health Alterations Across the Lifespan I	6
Concept: Grief and Loss - End of Life care exemplar, includes pain management in hospice and palliative care	NURS 430 - Population Health Nursing	0.5
Assessment, pharmacological, and non-pharmacological interventions in labor and postpartum as well as with neonatal and pediatric clients	NURS 400 - Care of the Childbearing Family	1
<b>Total Pain Content</b>		<b>31.5 hrs.</b>

## Cultural Competency/Humility Across the Curriculum

This table indicates the amount of time students have received cultural competency/humility instruction and developed skills throughout the curriculum.

<b>Content</b>	<b>Course</b>	<b>Dedicated Time (hours)</b>
Cultural competence related to medication adverse effects and medications across the lifespan	NURS 312 - Pharmacology	0.3
Simulation: Hypoxic patient who is Muslim	NURS 330 - Essentials	4
Culture and Diversity presentations - beliefs, values, practices, economics, psychosocial	NURS 330 - Essentials	3.5
Communication and cultural humility Lecture, role play	NURS 320 - Introduction to Professional Practice	1
Cross cultural communication and cultural humility	NURS 410 - Trends and Issues	1.3

Healthcare disparities - related to vulnerable populations and the importance of culturally competent care to improve healthcare access Culture & Diversity - care of the family and family developmental roles, Think Cultural health modules	NURS 430 - Population Health	7
Discussion of cultural considerations integrated within 22 concept introductions across the curriculum	NURS 311 - Pathophysiology, NURS 330 - Essentials, NURS 353 - Health Alterations Across the Lifespan I & NURS 400 - Care of the Childbearing Family	5.5
<b>Total Cultural Competency/Humility Content</b>		<b>22.6 hrs.</b>

## Understanding the Conceptual Curriculum

Conceptual teaching and learning is an educational method that centers on big-picture ideas and learning how to organize and categorize information. It is a broad approach versus the topic-heavy model used in more traditional learning. Unlike traditional methods, which concentrate on the student's ability to remember specific topics, the conceptual method focuses on understanding broader principles ("concepts") that can later be applied to a variety of specific examples.

Applying knowledge to new situations is a crucial skill that allows nurses to respond to patients' unique needs and adapt to fast-paced patient care environments. Conceptual teaching and learning is an evidence-based approach to help students prepare for the challenging professional nurse role. This may be a new approach to learning for you and will require a change in how you engage with learning activities in and outside the classroom.

Here is a list of what to expect for conceptual learning at GFU.

- Students will receive a list of all of the concepts and their definitions at the beginning of the nursing program.
- Concepts will be introduced and studied in depth. After each concept is introduced, students will deepen their understanding through specific examples. These are called exemplars.
- Faculty facilitate learning and are no longer the "giver of knowledge." Students will take ownership of their learning and are not passive receptacles. Classes will include more active learning and less lecture, promoting application and clinical judgment.
- Students will frequently complete pre-class and post-class learning assignments to facilitate long-term retention. Students should anticipate for every 1 credit of class, they will have 3 hours of homework per week outside of class. Example: a 3-credit course is 3 hours of class time and 9 hours of homework per week.
- Students are responsible for locating, appraising, and using quality information to inform thinking and engage in evidence-based nursing practice.
- Students will most likely need to change their study methods. Memorization alone will not produce a successful outcome. Students will learn to apply knowledge, skills, and attitudes within complex clinical scenarios.
- Students will learn to adapt to ambiguity. In healthcare settings, there is rarely one correct solution for every patient. Humans are unique and the best course of action depends on the situation.
- Conceptual learning will be challenging, and it will help students successfully transition to professional nursing practice.

## Student Advisement

Each CON student is assigned an academic advisor, who is faculty in the nursing program. The advisor will work with the student to support his/her progress through the program of study.

- Students are expected to make appointments and get acquainted with their advisors early in their university experience. Advisors may be contacted by email, phone, or in person.
- Faculty will post a link to their office hours appointment calendar in each course and on the [Nursing Faculty & Staff webpage](#).
- A link to each syllabus will be on each course page.
- Advisors are available to help students with curriculum advising; academic and professional issues; problem-solving; answering questions; and providing appropriate guidance. Student concerns about teaching strategies, grading policies, and test questions must first be discussed with the faculty teaching the course where the concern has occurred.
- Students who desire to change advisors need to complete the [Major/Advisor Change Form](#).

## Progression in the Nursing Program

### Academic Progression

The CON is committed to providing opportunities for the success of all students. Faculty may become concerned about a student's likelihood of success for many reasons. Examples of behaviors that place a student at risk for not passing a theory course may include frequent tardiness to class, frequent absence from class, sleeping in class, low performance on course tests and quizzes, or poor writing skills.

A student may also be considered at risk of failing a course with a clinical experience component if a student is:

- Frequently tardy to or absent from clinical experiences
- Endangers the safety of patients, classmates, or staff with a decision of poor judgment
- Violates any other of the standards of practice expectations
- Makes (a) medication error(s)
- Unable to satisfactorily meet any clinical competency.
- Accumulates multiple N ratings or one U rating during the clinical experience.

### Student Improvement Plan

The SIP is to be initiated by faculty in collaboration with the student to develop goals and implement plans to accomplish successful completion of course and program outcomes. The SIP process involves the student and faculty defining the problem, desired outcomes, plan, and evaluation of whether the student outcomes were met by the agreed upon review date, or the end of the course. The document is to be signed and placed in the student's permanent file. If the outcome is met and documented within the course time frame, no further action is needed. If the outcome is not met, student progression in the program may be negatively affected, and additional remediation and reflection may be required. All course learning outcomes must be met for a student to pass a course.

Students themselves may initiate a SIP if they feel the need for additional support. The SIP is intended to call attention as early as possible to a situation that, if uncorrected, could lead to academic failure. Students are offered a copy of the SIP. There are two types of SIP:

- **Didactic SIP:** The faculty meets with the student whose classroom related performance indicates a need for improvement. Examples of such performance include a cumulative theory grade average below 73.00% after one or more tests, submitting assigned work late, a trend of tardiness, and missing or arriving late for quizzes or tests.



- **Clinical SIP:** The Clinical Instructor (CI) will identify improvement needs and meet with the student whose clinical performance needs improvement or is unsatisfactory. The CI will notify the Clinical Course Coordinator (CCC). The CCC will initiate the SIP and meet with the student and the CI. Some examples include:
  - Unsafe practice and refer to practice parameters
  - Unprofessional behavior such as late assignment submissions, and/or unprofessional communication behaviors
  - Unprofessional clinical attire
  - Trend of arriving late and/or missing clinical time during clinical experiences (on-campus and off-campus)
  - Inadequate preparation for clinical assignments
  - Repeated “No Pass” on skill competency check offs
  - One unsatisfactory (U) rating at any time on the clinical evaluation tool
  - Three or more needs improvement (N) ratings on the clinical evaluation tool (by the instructor)
    - Three or more N ratings within the same core competency across weekly clinical experiences
    - Three or more N ratings within the same clinical day

In NURS 430 Population Health courses, students at mid-rotation evaluation may have up to two needs improvement (N) per core competency section. The CI will notify the CCC and begin the SIP process when a student has more than six total needs improvement (N) ratings across all core competencies or any one unsatisfactory (U) rating at the mid-rotation evaluation. By the final rotation evaluation, all sub-competencies must be at the satisfactory level (S) to pass the course.

In NURS 490 at the mid rotation, if 7 or more level 3 are present or at any time for a level 1 or 2, begin initiation of a Student Improvement plan. Items with a N/O rating will not affect the overall score, but must have a plan for developing to level 4 by end of rotation. Students must achieve an overall score of 4 on all sub-competencies in the final clinical evaluation to pass clinical. Failure to earn a 4 on the final clinical evaluation will result in a course grade of C- and not pass the course.

### **Probation Record**

The PR is a notice to a student that immediate improvements are needed for identified student actions and behavior(s) to prevent either failure or dismissal from the program. Subsequent occurrences of the identified behavior(s) during a probationary period may result in additional remediation and/or disciplinary action, which may include dismissal from the program.

1. The faculty (CI, CCC, or didactic) identifying the concerning behavior informs the Program Director and the student about the reason for probation. Alternatively, the Program Director may initiate a PR upon noticing concerning trends across the program of study.
2. The Instructor and the Program Director collaborate to write the PR document to include the concern(s), desired outcomes, remediation plan, and evaluation methods to determine when and how the student met the stated remediation outcomes. Alternatively, the Program Director may write the PR document independently if the PR is initiated by the Program Director.
3. The Instructor will meet with the student and Program Director to conduct the probation meeting and obtain student commitment to participate in remediation and resolve the concerns. Students are given a



copy of the PR. The student, instructor, and Program Director will sign the original version of the PR document.

4. The original signed PR document is placed in the student's academic file. The Program Director will add the probation information to a probation monitoring document.
5. The Program Director and Instructor (CCC and didactic faculty) will monitor Probation Records and student outcomes.
6. The Program Director will feed-forward PR information to faculty who need to know the information.

There are two types of PRs:

- **Didactic:** Students who do not meet outcomes from a didactic SIP and/or an unprofessional behavior lapse SIP. This includes students who have a continual trend or demonstrate a pattern of concerns throughout the nursing program of study, including but not limited to trends of late assignment submission, tardiness, and missing deadlines or due dates.
- **Clinical Performance:** Students who demonstrate unsatisfactory clinical performance, unsafe practice, and/or unprofessional behavior may be placed on probation, if not dismissed from the program. It is expected that students will practice safely and in alignment with clinical practice parameters, and ethical professional standards at all times during all clinical experiences. Safe practice in the performance of nursing care requires the application of scientific knowledge, technical and cognitive skills, and professional behaviors to provide for the welfare and to protect the well-being of patients. Safe practice demands that practitioners be aware of personal and professional limitations that could affect the safety of their performance. Decisions and actions that threaten or disrupt the biological, psychosocial, physical, or physiological integrity of patients constitute an unsafe practice. Students who demonstrate unsafe clinical behaviors while on probation:
  - will be barred from clinical experiences until deemed safe to return,
  - and receive a failing grade for the course,
  - and may be dismissed from the program.

If unsafe behavior is demonstrated too late in one course to allow the opportunity for a student to demonstrate remediation, that student may be allowed to progress into the next semester and will remain on clinical experience probation.

### **Clinical Evaluation and Progression Decisions**

Problems in student performance resulting in remediation, SIP, PR, or dismissal from the program are faculty decisions. In making this decision, the faculty consider the implications of prior and current student performance related to patient safety, professional and personal integrity, student success, professional judgment, and personal responsibility. While faculty make every effort to alert students as early as possible to problem situations, no implied process requires that an SIP must precede a PR or that either of these must precede dismissal. Students who leave the program while on a SIP or PR will be required to re-enter with that SIP or PR still in place.

Students may appeal a clinical evaluation and progression decision. The appeal process must be initiated within two days after the clinical evaluation and progression decision is determined.

The appeal must be based solely on the following criteria:

1. There is evidence that evaluation procedures were inconsistent (capricious), and
2. There is evidence that the student was evaluated differently than their classmates.

The appeal process is as follows:

1. Provide written documentation, within two business days of the clinical evaluation posting, to the faculty/CCC with specific evidence that:
  - a. clinical evaluation procedures were inconsistent and/or
  - b. the student was evaluated differently than classmates.
2. Meet with faculty/CCC and discuss the appeal documentation with supporting evidence. Must occur within two business days of receiving the written appeal documentation with supporting evidence.
3. If the student and faculty/CCC are unable to resolve the appeal concern, the student will provide written documentation and evidence about the appeal to the CON Program Director. In the written documentation to the Program Director, the student will include the original grade appeal documentation and a summary of the faculty meeting and the student's rationale for pursuing the grade appeal, specifically addressing why the faculty meeting did not adequately resolve the student's grade appeal. The written appeal must be submitted to the Program Director within two business days after meeting with the faculty.
4. The student, faculty/CCC, and Program Director will meet and discuss the appeal documentation, summary of faculty meeting and appeal rationale. This meeting must occur within two business days after the student's written documentation to the Program Director is received.
5. If the student, faculty/CCC and Program Director are unable to resolve the appeal concern, the student will provide written documentation and evidence about the appeal to the Dean of Nursing. The written documentation must also include the original appeal documentation and a summary of the meeting with the Program Director and faculty/CCC. Also, specifically addressing why the student's appeal is not resolved.
6. The student, faculty/CCC, Program Director, and Dean will meet and discuss the appeal documentation, summary of meetings, and appeal rationale. This meeting must occur within two business days after the student's written documentation to the Dean is received.
7. **The Dean's decision shall be final.** Students may not attend clinical experiences while their appeal is pending.

## Grading in Nursing Courses

Progression in the nursing program is dependent upon meeting the minimum standards of core nursing courses as outlined in the course syllabi. The minimum grade standard for passing a nursing course is 73.00% (C). When calculating course grades in core nursing courses all examinations with their appropriate weights are computed first. If the cumulative grade on examinations does not average at least 73.00% further grade calculations cease and the grade for the course becomes the letter grade equivalent to the cumulative examination percentage. If the examination grade achieved is 73.00% or better, THEN all other graded course work (e.g. quizzes, papers, and other assignments) will be included with the examination grades to arrive at the overall course grade.

The rationale for this method of calculations is to ensure that cumulative test grades that are below the CON's 73.00% required test grade will not be outweighed by other assignments. **All scores (tests, assignments, quizzes, etc.) are recorded out to the hundredths place. The CON does not round grades to the tenth or the whole number. Final course grades will not be rounded.** For example, a student's final course grade is 72.97% and the final grade will be recorded as a C-. Faculty will not round up the grade to 73.00%.

Final course grades are determined by evaluating how the student meets the learning outcomes including performance on periodic quizzes and tests, submission of papers, assignments and class projects, and achievement of clinical learning outcomes in courses that have clinical learning experiences. Grade points are assigned for each hour of credit earned according to the following system:

Letter Grade	Range %	Points per Semester Hour
A	93.00 - 100.0	4.0

A -	90.00 - 92.99	3.7
B+	87.00 - 89.99	3.3
B	83.00 - 86.99	3.0
B -	80.00 - 82.99	2.7
C+	77.00 - 79.99	2.3
C	73.00 - 76.99	2.0
C -	70.00 - 72.99	1.7
D+	67.00 - 69.99	1.3
D	60.00 - 66.99	1.0
F	0 - 59.99	0.0
I	Incomplete	

### **Didactic Grade Appeal**

Students may appeal a course grade and the appeal process must be initiated within two days after the final course grade is posted. The appeal must be based solely on the following criteria:

- There is evidence that grading procedures were inconsistent (capricious), and
- There is evidence that the student was graded differently than classmates.

The grade appeal process includes:

1. The student will provide written documentation to the faculty with specific evidence that a) grading procedures were inconsistent and/or b) the student was graded differently than classmates. This must occur within two business days of the final course grade posting.
2. The student will then schedule to meet with the faculty and discuss the grade appeal documentation with supporting evidence. This meeting must occur within two business days of faculty receiving the written grade appeal documentation with supporting evidence.
3. If the student and the faculty are unable to resolve the appeal concern, the student will provide written documentation and evidence about the appeal to the CON Program Director. In the written documentation to the Program Director, the student will include the original grade appeal documentation and a summary of the faculty meeting and the student's rationale for pursuing the grade appeal. Specifically address why the faculty meeting did not adequately resolve the student's grade appeal. The written appeal must be submitted to the Program Director within two business days after meeting with the faculty.
4. The student, faculty, and Program Director will meet and discuss the grade appeal documentation, summary of faculty meeting and grade appeal rationale. This meeting must occur within two business days after the student's written documentation to the Program Director is received.
5. If the student, faculty, and Program Director are unable to resolve the appeal concern, the student will provide written documentation and evidence about the appeal to the Dean of Nursing. The written documentation must also include the original grade appeal documentation and a summary of the meeting with the Program Director and faculty. Also, specifically address why the student's grade appeal is not resolved.
6. The student, faculty, Program Director, and Dean will meet and discuss the grade appeal documentation, summary of meetings and grade appeal rationale. This meeting must occur within two business days after the student's written documentation to the Dean is received.

If the student does not agree with the Dean's decision he/she may initiate the university's [Academic Appeals Process](#) using the [Academic Appeal form](#).

### **Incomplete Grades**

Continuation in the nursing program by students who have one or two incomplete grades in the nursing major is contingent upon approval/disapproval of the faculty member responsible for the course(s) in which the incomplete grade(s) was/were given. It is the responsibility of the faculty to monitor student progress towards removing his/her incomplete grade(s). Incomplete grades must be resolved before the end of the following semester or the incomplete will be converted to a failing grade.

## **National Standardized Testing**

The CON, as part of its overall assessment plan, requires all students to participate in a series of national standardized tests. The assessments help identify strengths and gaps in content mastery for students, provide remediation plans, as well as guide faculty in curriculum evaluation. National assessments are designed to prepare nursing students for the National Council Licensure Examination-Registered Nurse (NCLEX-RN). A full description of the standardized assessment procedure is outlined in specific course syllabi. The nursing program requires a one credit nursing course, NURS 451: NCLEX Test Taking Strategies.

## **Testing Policy**

Tests are used to evaluate learning in nursing courses. Students are responsible for classroom content and learning based on required course outcomes and class objectives. Tests may include questions that require math calculations, and it is at the professor's discretion to allow the use of a calculator on the test. If a calculator is permitted, this will be included in the testing browser (such as ExamSoft). Test questions may be cumulative and may evaluate prior learning from prerequisite and corequisite courses. Final tests are comprehensive, covering the learning objectives expected in each course.

### **Scheduled Tests**

Tests will be given as scheduled. Test-taking times will be strictly adhered to. Tests will not be administered early (before the scheduled test date) except at the instructor's discretion for extenuating circumstances; travel plans are not extenuating circumstances. Students should not make travel plans until the final testing schedule has been determined for all tests for the semester.

Students who arrive late for a test may endanger their progression in the program. If a student arrives less than 30 minutes late for a test, the student will take the test and will not have additional time to complete the test. If a student arrives more than 30 minutes late, the student will need to reschedule the test with the instructor and the instructor will deduct 10% off the score the student achieves on that test.

For students who repeatedly arrive late for or miss tests, 10% of the maximum attainable points may be deducted from the student's scores for each test that they miss or for which they arrive late (10 minutes or more past start time). Emergent or mitigating situations will be reviewed by faculty as to whether a loss of points will occur for repeated absences even with proper advance notification.

If unforeseen illness or emergency situations cause a student to be unable to take a test or arrive on time, students are required to notify the designated faculty member by emailing BEFORE the test is given. Students must make arrangements to take missed tests with the designated faculty. Upon returning to campus, students should take the test during the first available time offered.

If a student sees an open test on the learning management system (LMS) and it is not a test day, they should contact the instructor and not open or look at the test.

### **Computerized Testing**



Standardized computer testing is used throughout the nursing program to prepare students for success on the NCLEX-RN examination. Students will take a variety of standardized tests and complete required remediation and re-testing as indicated. The purpose of using these tests is to help individualize and guide the student's educational plan, as well as allow the student to practice taking questions similar to those on the NCLEX-RN. To prepare for the tests, the student should be well rested before the test and take the test seriously. Standardized tests may constitute up to 5% of a course grade. A conversion score will be used for the calculation of the course grade.

All students are required to bring their computers for testing. The technical specifications are listed on the [GFU IT specifications website](#). Students must download ExamSoft tests as soon as they are available and at least 24- hours before the test date and time. If a student is unable to download an ExamSoft test, they should immediately notify the faculty by email and immediately contact the [ExamSoft help center](#) to solve the issue as soon as possible.

Failure to download a test before the scheduled date and time may result in the inability to take the test on time. Students who do not download the test and who experience technical difficulties will not receive extra time to take the test nor will they be rescheduled. This may result in a reduced exam grade or no exam grade.

Technology issues occur in all settings. If a technology issue arises during a test, students are to **remain quiet and maintain a suitable testing environment with limited distractions**. Students will need to follow instructions from the proctor until the issue is resolved or the test is rescheduled. Instructors have the right to assign or rearrange seating before or during any test.

#### **Waiving DAS Test Accommodations**

The CON desires to support student success and to collaborate with the DAS office on behalf of students. The CON supports those with testing accommodations by having tests proctored through the DAS office. To receive testing accommodations, students must schedule to take tests with the DAS office.

If a student decides to waive their DAS testing accommodations, they may take the test during the scheduled class time and will be proctored by faculty for the duration of the standard test time, without the following accommodations:

- No extra time
- no low distraction environment
- no alternate test environment

For example, if a test is scheduled for an 80 minute duration and a student has an accommodation for 1.5X the length of the test, but the student chooses to waive DAS accommodations, the test will end in 80 minutes and no extended time will be permitted.

#### **Cheating**

*Cheating* is defined as looking at another's test paper or computer, any communication between students, utilizing notes or any assistance during the test, violating test taking procedures, or accessing any computerized test without faculty/staff present (see also the statement about academic honesty). Students who are observed cheating will be informed of this observation by the instructor(s) who detected the cheating. Cheating is a violation of academic integrity and will incur serious consequences which may include a grade of zero for the test connected with cheating, course failure, or dismissal.

In no instance may students keep or copy any portion of their tests in any format (paper, digital, etc.). Sharing topics or questions with other students or cohorts is prohibited.

#### **Test Grades**

Test grades will be posted to the LMS following scoring and faculty review of test results. Test grades will be posted within 48 hours of all students completing the test. No changes to test grades will be made once the test is finalized.

If a student fails one or more tests in one course (failure is defined as a test score less than 73.00%), the instructor will meet with the student, and they will complete a SIP together. Note: in courses that have three examinations/tests, the faculty should consider initiating a SIP if a student fails one test (test score less than 73.00%).

### **Test Taking Procedures**

The following test taking procedures are implemented to ensure an equitable and consistent test environment. These policies are similar to those implemented in the NCLEX-RN. Backward navigation to prior test questions is not permitted on proctored tests.

When students enter the test environment, all personal items are to be placed in the designated “Personal Belongings” area. Cell phones and smartwatches are to be turned off or on airplane mode. If you have a special circumstance requiring your cell phone to be on and left with the proctor, please make arrangements before the test.

Items allowed at the student’s desk include:

- A pen or pencil
- A blank sheet of paper will be provided to the student after the student’s computer is in exam lockdown mode. Additional paper will be provided upon request. All papers will be returned to the proctor before leaving the test room.
- Ear plugs if needed. Ear plugs must not be connected to electronic devices.
- Gum is permissible as long as the use is not distracting to others.

Items not allowed at the student’s desk include, but not limited to:

- Personal items: backpacks, bags, books, etc.
- Smart Devices: cell phones, smartwatches, or other electronic devices are not needed for the test.
- Food and drinks
- Apparel or device (e.g. brimmed hats or sunglasses) that obscures the student’s eyes from observation by the test proctor(s).

Although noise and distractions will occur during testing, proctors will try to keep them to a minimum. The student is responsible for providing their plain, non-electronic earplugs and using them as needed. Noise and distractions are not grounds to retake a test. Noise-canceling headphones may be an approved accommodation in DAS.

During the test, students are not allowed to access any other website while in the test room. If a student needs technical assistance, he/she may signal this to the test proctor by a raised hand. Students may ask questions about typographical and technological issues. The proctor will not answer questions directly related to test content.

The length of time for each test will be stated by the proctor. The proctor will be responsible for monitoring time, indicating when five minutes are remaining (for any test 30 minutes or longer), and ensuring that all students submit their test in the allotted time.

### **Breaks**

Students must inform the proctor before taking a screen break. When taking a screen break, students may move to the test environment’s designated space to quietly stand, stretch, or walk. Students are not permitted to leave the testing environment.

Students who need access to medications, water, or snacks must have those items in the designated area. Students may not access their cell phones, smartwatches, or any other personal belongings during the break. While the student is taking a break, the timer for the test will continue running and no additional time will be added.

Students must inform the proctor before taking a bathroom break during a proctored examination. Students should make every effort to avoid unnecessarily leaving the testing environment during the test. The proctor may accompany the student to the bathroom area. Students may not have access to their cell phones or smartwatches during the bathroom break. The timer for the test will continue running and no additional time will be added.

Students who are observed violating any portion of this test taking policy will incur a 5% grade penalty on the test for the first offense. Subsequent offenses will result in a 50% grade penalty on that subsequent test.

### **Completing Tests**

Students are responsible for “saving” all answers; otherwise, the question(s) will be scored as incorrect. If the student has technical difficulties, the student must inform the proctor before the test is submitted.

When a student has completed the test, they must show the proctor the green screen on the computer and the test proctor will confirm that the test has been submitted. The first time a student fails to submit the test before they leave the testing environment will incur a 10% grade penalty. Any additional subsequent failure to submit the test before leaving the test environment will incur a 50% grade penalty for that test.

### **Review of Tests**

If a student has questions about a test question after the test is completed, they should make an appointment with the instructor during their office hours to discuss the content of the question and the rationale. Test scores may not be disclosed until all students have completed the test.

Group test review will be proctored and will occur during the first class after the test date. Students will have 10 minutes to review incorrect answers only. During the test review, students may not take notes or screenshots of test questions. Individual test reviews may occur by making an appointment with the instructor during their office hours.

## **Graduation Requirements**

To graduate with a Bachelor of Science in Nursing degree the following criteria must be met:

- Accumulate at least 120 semester hours with a minimum cumulative GPA of 2.0. The GPA is calculated on work taken at GFU only;
- Accumulate at least 39 upper-division semester hours (courses numbered 300 or above);
- Complete the general education requirements;
- Complete all nursing classes with no grade below a C;
- Meet all academic milestones;
- Complete at least 30 semester hours in residency (20 hours must be in senior year; 20 of the last 30 hours must be completed at GFU);
- File an Application for Degree form not later than the completion of 90 semester hours toward graduation (normally two semesters before expected graduation);
- Pay in full all accounts at the University Student Financial Services office.

To participate in commencement and baccalaureate ceremonies, a student must have completed all degree requirements. Exceptions include a student registered for a post-commencement May term course or an incomplete in one nursing course (that is in progress) that is part of the degree program.

Students will receive instruction on how to apply for RN licensure and NCLEX-RN in the last semester of the nursing program. Approximate costs include but are not limited to:

- NCLEX-RN - \$450-\$500
- Oregon RN licensure - \$169 (\$160 application/\$9.00 processing fee)
- Fingerprinting - \$75

*NOTE: These fees are for Oregon. Other states may have a different fee structure. It is the responsibility of the student to research the fees if they plan to get licensed in a different state.*

Per OAR 851-031, the OSBN has limits on eligibility for licensure. Licensure may be denied to graduates with a criminal offense and those with a major physical or mental condition that could affect the individual's ability to practice nursing safely. OSBN will only evaluate each situation upon receiving an application for licensure (not prior).

## Course Dismissal, Failure, Withdrawal, or Leave of Absence

### Nursing Course Failure

A student will fail a nursing course if they do not maintain a 73.00% average in the exam grades of the course and/or if their course average does not meet 73.00% at the time of course completion. A student will also fail a course if they fail the clinical component of the course, regardless of the overall grade and the exam grade average. A student who fails the clinical component of the course before the end of the semester will need to withdraw from the course. A student who fails a nursing course may be eligible to retake it once, with approval from faculty and the Dean of Nursing. To progress in the program, all retaken courses must be passed according to nursing policies outlined in the syllabus. If retaking a course, a student may also choose to retake a previously passed nursing course in the same semester. All retaken courses must be completed with a grade of C or higher. Re-entry into the nursing program is not guaranteed and is subject to space availability.

A student may have up to **two failures** (C- or below) in **two different** courses throughout the nursing program. If a student fails (C- or below) the same course twice, the student will be dismissed from the program. If a student has three failures (C- or below) within the nursing program, the student will be dismissed from the program. Once dismissed, the student cannot reapply or re-enter the program.

### Withdrawal

Withdrawal from a nursing course(s) may be necessary for various reasons. Withdrawal means that the student will not continue to attend class, complete course assignments, take course quizzes, tests, or continue to participate in clinical experiences. To withdraw from courses for any reason (personal or academic) it is necessary for the student to:

- Notify the faculty in all courses for which the student is registered.
- Meet with the Dean or Program Director to discuss reasons for withdrawal, future plans, and withdrawal process.
- Meet with the Career and Academic Planning (CAP) Coach.
- Withdraw from all nursing courses.
- Follow general university policy for withdrawal.

See guidelines stated in the GFU Student Handbook as found on the university website ([Withdrawal from Courses](#)). Timelines for withdrawal refunds may also be found on the website.

When a student withdraws from a course, the student will be removed from the Canvas course page and will not have access to course resources. A student may withdraw from a nursing course only once but must wait until the next curriculum cycle to re-enter. Re-entry will only occur if there is space available. At the time of withdrawal, if a student has an exam average of less than 73.00%, an overall grade of less than 73.00%, or fails the clinical component of the course, this will be considered a course failure. **If multiple withdrawals occur, the faculty and Dean will evaluate the student's potential to complete the nursing program given the extensive time-lapse.**

### **Leave of Absence (LOA)**

LOAs are typically one semester. The CON will consider extenuating circumstances for a longer LOA period. If a student needs more than two semesters, they will need to meet with the Program Director to discuss reapplying to the program. A student who takes an extended LOA, which is defined as two or more semesters may be subject to repeating some or all courses upon return to the program.

### **Dismissal from a Nursing Course(s) and/or Program**

A student nurse is expected to perform as a professional nurse in providing patient centered, safe, and ethical care. The faculty are expected to orient and monitor the nursing practice of students. Students therefore must be aware of the Scope of Nursing Standards for Licensed Nurses and Registered Nurses (ORS 851-045-0040 and 851-045-0060), as well as the ANA Code of Ethics. Failure to provide safe patient care may result in dismissal from the nursing program.

Other behaviors that may result in dismissal include the following:

- Violating the Scope of Nursing Standards for Licensed Nurses (ORS 851-045-0040 and 851-045-0060)
- A pattern of behavior or conduct or a single incident of serious misconduct or inappropriate behavior that reflects poorly on GFU or the CON, including but not limited to failure or refusal to follow GFU or syllabus requirements, standards, or guidelines; boundary violations with faculty, staff, or students; or speaking negatively about GFU or anyone affiliated with GFU
- A pattern of behavior or conduct or a single incident of serious misconduct or inappropriate behavior that reflects poorly on clinical partners, including but not limited to failure or refusal to follow clinical partner requirements, standards, or guidelines; boundary violations with patients or staff; or speaking negatively about clinical partners, or anyone affiliated with the clinical partners
- Academic or other types of dishonesty
- Lack of safety in clinical learning experiences; this may occur at any point throughout a clinical experience
- Unethical or unprofessional conduct or behavior as outlined in the International Council of Code of Ethics, ANA Code of Ethics for Nurses, and ANA Scope and Standards of Practice
- Aggressive or intimidating behavior to others, including patients, staff, faculty, and peers
- Disruptive behavior in the classroom. Removal from class for any reason may result in dismissal
- Dismissal from the university for not following policies and procedures stated in the GFU Student Handbook
- Lack of preparation for safe patient care such as lack of knowledge about the patient, patient's diagnosis, medication, procedures, or treatments
- Unsatisfactory clinical performance including failure to communicate appropriately and adequately with patient, staff, or faculty
- Failure to attend the clinical orientation
- Failure to comply with CON program requirements as mandated by the Oregon Health Authority
- Failure to notify the nursing program of any change in criminal background status

## **Re-Entry to the Nursing Program**

Students seeking re-entry to the program following an unsatisfactory grade, withdrawal, or leave of absence in a nursing course must meet the current admission criteria. The re-entry process involves the following steps:

### **1. Initial Progression Interview:**

- Within one week of failing the course(s), the student must schedule and attend a Progression Interview with the Dean or Program Director.
- The purpose of this meeting is to:
  - Review the reason(s) for the unsatisfactory grade, withdrawal, or leave of absence.
  - Discuss strategies for future academic success.

- Review relevant program policies.
  - The Dean or Program Director may gather additional information regarding the student's performance and suitability for progression from the academic advisor, faculty, and the student.
2. Progression Letter and Student Response:
- Following the Progression Interview, the Dean or Program Director will send a letter to the student that includes:
    - A summary of the Progression Interview.
    - Details about the re-entry process.
    - Requirements for continued enrollment in the nursing program, if applicable.
  - The student must respond to this letter within the designated timeline with a written document outlining specific and measurable academic improvement goals they will implement, if permitted to repeat the course/semester and continue in the program.
3. Decision and Notification:
- The Dean or Program Director will make a final decision regarding the re-entry plan or dismissal from the CON.
  - This decision will be based on evidence indicating a strong potential for successful program completion upon re-entry.
  - The student will be notified of the Dean or Program Director's decision.
4. Course Retake and Progression:
- If the re-entry petition is approved, the student may retake the failed course during the next regularly scheduled fall or spring semester, contingent upon space availability.
  - Students who have failed a nursing course cannot progress to subsequent required nursing courses until they successfully complete the failed course.
  - If a student fails two courses in the same semester, they must retake both courses together during the next regularly scheduled fall or spring semester if space is available. Retaking only one of the failed courses is not permitted.
5. Maintaining Program Requirements Upon Return:
- Students returning the following semester must maintain clinical experience compliance and meet all other program requirements.
  - Students unable to return for a semester or more will have additional requirements:
    - Successful completion of a 10-panel drug screen at their own expense.
    - An updated criminal background check at their own expense.
    - Completion of a re-entry competency assessment if they have been out of a clinical course for part of a semester or longer.
    - A minimum score of 73.00% is required on the re-entry competency assessment.
    - Students who score below 73.00% on the initial assessment will be allowed one attempt to remediate and re-assess.
    - Failure to achieve 73.00% after the remediation attempt will result in dismissal from the program.
6. Appeal Process for Denied Re-entry:
- If the petition for re-entry is denied, the student may pursue the George Fox University (GFU) Academic Appeal Procedure as outlined in the Student Handbook.
  - Appeals related to failing a course must include documented evidence demonstrating inconsistent treatment compared to grading policies and classmates.

## Attendance

### **Didactic Attendance**

Regular class attendance is essential for academic success. Students are expected to attend all classes. A trend of missing class may negatively impact academic success. Faculty may monitor and document class attendance. Class attendance trends may be used to determine future clinical placements including the NURS 490 Capstone clinical placement.

In case of illness or other emergency, the student must notify the faculty before the absence, or as soon as possible afterward. The student is responsible for all knowledge and materials covered during the absence and is responsible to obtain that information from classmates. If a student experiences prolonged illness (absent more than three days), they must collaborate with the faculty and the DAS office to make accommodations as needed to meet course outcomes. A reasonable accommodation for students with DAS approval for medical conditions is allowing the student to be excused up to 25% of class time in each course. In the case of a known future absence students must make arrangements with the faculty as soon as possible and at least three days before the absence.

If a student has any medical or other issue that could impact their ability to complete class or clinical experience requirements during the semester, the student should immediately contact faculty and the faculty advisor. The student may also wish to contact the DAS office.

### **Clinical Attendance**

All clinical experiences are mandatory. Clinical experience absences will negatively impact a student's ability to meet clinical course competencies, which may result in course failure. Students must make clinical attendance a priority (i.e., do not schedule family, personal or work-related events during clinical experiences throughout the semester). Clinical experiences may occur at any time of day, any day of the week, and on campus holidays. Refer to course syllabus to determine actual clinical days.

If a student has a personal conflict with a scheduled clinical experience, the student must immediately notify the CCC. Vacations, work obligations and family celebrations are never a reason to miss a scheduled clinical experience.

Students are expected to be on time for all clinical experiences and to be dressed in appropriate professional GFU clinical attire. Students who arrive late, are inappropriately dressed, or fail to wear their clinical ID badge will be sent home and marked absent for the time they are away.

If a student misses one on-campus clinical day such as a simulation experience, the clinical day must be made up. Simulation video recordings are available to be viewed through Vault. The viewing must be in a private space on campus such as a reserved debrief room or a private library room. The course coordinator will share the link to the recording along with a written make up assignment. The course coordinator grades the assignment. If a student misses one off-campus clinical day, the student must meet with the CCC to discuss a plan for meeting the clinical competencies during the remaining clinical experiences in the course. If the student misses a second clinical day (either on-campus or off-campus), the student is required to attend a clinical makeup day or experience designated by the CCC(s) and a SIP will be initiated. The SIP may include additional mandatory learning activities to support and ensure the student's ability to demonstrate and achieve course clinical competencies. Students are expected to modify work and personal schedules to ensure attendance at the mandatory clinical make-up session. If the CI is concerned about the student's ability to consistently demonstrate clinical competencies at any time, the CCC will initiate a SIP. Students in precepted clinical experiences must meet the total clinical hour requirements. Students are expected to coordinate with the preceptor's schedule to ensure total hours are met.



## Illness or Injury

Students should not come to in-person class sessions if they have a fever (a temperature of 100.4°F or greater), a new cough, shortness of breath, muscle aches and chills, a sore throat, severe diarrhea, vomiting, or a loss of taste or smell. If a student has been diagnosed with COVID-19, they should follow the protocols recommended by the Centers for Disease Control. Additionally, anyone asked by a medical professional or local public health official to self-isolate or quarantine should follow those instructions and not attend school-related functions until the recommended quarantine time has ended. If a student is ill, the student is required to notify the faculty as soon as possible and as directed in the specific course syllabus.

Students who are injured to an extent that limits their ability to attend didactic class should notify the professor who teaches the course(s) and DAS. The faculty will consult with DAS staff, the Program Director, and Dean of Nursing to evaluate the situation and make a determination about student progression, which may include a recommendation to withdraw or apply for a leave of absence.

Students who are injured to an extent that limits their ability to safely perform patient care must notify the CCC immediately about the injury. The student's ability to participate in clinical experiences will be determined by the CCC in collaboration with the DAS staff. A student's ability to participate in clinical experiences may require documentation from a licensed healthcare provider regarding mobility restrictions, including ambulation, weight-bearing, lifting, pushing, and pulling limitations. Clinical sites reserve the right to restrict student participation in patient care based on weight bearing and mobility limitations. If a clinical site will not permit a student to participate in clinical activities, the student will not be able to complete and pass the clinical portion of the course and will need to repeat the course in a future semester if space is available.

## Dress Code for College-Related Activities or Presentations Not Requiring a Uniform

Students are expected to dress appropriately in business professional attire.

- Dress slacks and/or skirts (knee length or longer). Slacks should not touch the floor. **Jeans, leggings, shorts, sweats, and torn or frayed clothing are not allowed.**
- Tops should be modest (**no midriff or cleavage showing**).
- Shoes should provide safe, secure footing, and offer reasonable protection from hazards. Shoes should be clean, conservative, and in good repair. **No sandals, flip-flops, or tennis shoes.**
- Hair should be clean and well-groomed.
- Jewelry should be conservative and students are expected to use professional judgment.
- Student Nurse ID badge must be worn at all off-site locations.

## Independent Arranged Shadow Experiences Arranged by Student

When students arrange an independent shadowing experience at any clinical site, the student will not be supervised by a CON CI and as such, must not represent themselves as a GFU CON student. While participating in a shadow experience at a clinical site, the student must not wear the GFU nursing uniform, University ID badge, CON clinical ID badge, or any item that would connect the student with GFU and the CON.



A nursing student who independently arranges a shadowing experience at a clinical site does so outside the scope of the CON's supervised clinical education. During such experiences, the CON has no oversight or involvement, and the student is not under the supervision of a CI affiliated with the nursing program. The student is solely responsible for any actions taken while engaging in the student-arranged independent shadow experience, and the CON assumes no obligations or liabilities regarding the student's conduct or activities during this independently arranged shadowing experience.

## **Pregnancy, Maternity, Adoption, & Parenting Adjustment Request**

GFU wishes to support academic success as students progress through pregnancy, childbirth, adoption, and/or the early days of parenting. This is a transformational time of life and the goal is to ensure clear communication with professors and departments about student rights under Title IX and decisions about implementing those rights. Toward that end, students should review the Title IX information and complete the Pregnancy, Maternity, Adoption, & Parenting adjustment request form. Submission of the form serves as the student's "signature," indicating they have read and understood the information in the form, and are giving permission for communication with professors, department chairs, or others involved in the educational program who need to be involved in the process.

Students should complete the Pregnancy, Maternity, Adoption, & Parenting adjustment request form at least six weeks before the anticipated need for adjustments.

Students should contact the GFU Title IX and Equity specialist if they have questions. Students should schedule a meeting with the Equity specialist to discuss their request and the particulars of their situation.

Title IX stipulates that students may utilize 42 days (six weeks) of parental leave without jeopardizing participation in an academic program. The student should create a plan for reasonable classroom attendance modifications in collaboration with professors and Department Chairs/Program Directors. Chairs/Directors should confirm that their faculty are aware of their obligations and parameters around adjustments for the student. Adjustments or support might include attending class remotely, occasional absence from class, recording of lectures for the student, class notes, test-taking arrangements, extensions for assignments, etc.

A private lactation space is provided in Roberts Center to support lactation needs. For students, a reasonable academic adjustment includes consideration of lactation needs, specifically, granting reasonable rest periods to breastfeeding students, to allow time to pump or express breast milk for your child or children 12 months of age or younger. The reasonable rest period is no less than 30 minutes during each 4-hour period.

If absences will affect the objectives of a course or program, the Program Director, in collaboration with the Equity specialist and Associate Director of Disability Services, will determine the maximum allowable absences that would enable a student to continue in courses for the given term/semester. Regardless of length of absence from a course, all coursework would still be required.

If a student desires a longer absence than has been approved for continuation in courses, the student may take a leave of absence without jeopardizing participation in the program. For instance, if university staff determine that three weeks is the maximum a student can miss without compromising essential learning, a student desiring a full six-week parental leave may request a leave of absence for the academic term, then return to courses the following term.

## Infants & Children

Infants and children are not permitted in classes, audiovisual conferences, laboratories, during a quiz, test or examination, or any clinical experience settings. Students who bring children to class will be asked to leave with the absence being treated as unexcused. Children should not be left unsupervised on campus at any time.

## Academic Honesty Guidelines, Procedures & Policies

It is assumed that all students at GFU will endeavor to be honest and of high integrity in all matters about university life. A lack of respect and integrity is evidenced by cheating, fabricating, plagiarizing, misuse of keys and facilities, removing books and other property not one's own, defacing and altering the property, and disrupting classes. Cheating is defined as intentionally using or attempting to use unauthorized materials, information, or study aids in any academic exercise. It is assumed that whatever work is submitted is the student's work and is new work for that course. Fabrication is defined as intentional and unauthorized falsification or invention of any information or citation in an academic exercise. One who facilitates any of the above is equally responsible with the primary violator. Penalties may include restitution, a failing grade on an individual paper or exam, loss of campus position or employment, a failing grade for the course, disciplinary probation, suspension, or dismissal. The office of Academic Affairs handles academic dishonesty issues in conjunction with the Office of Student Life.

Cheating includes but is not limited to the following examples:

- Obtaining, providing, or using unauthorized information during a test, either verbally, or visually, or notes, books, or other materials.
- Acquiring, possessing, or providing to others, test, or other course materials without authorization of the faculty. This is understood to include providing information about a test in advance of the scheduled administration of that test.
- Taking a test for another person or arranging for someone else to take a test for you.
- Submitting for course credit, the same work, or substantial portions of the same work more than once.
- Fabricating information without the permission of the faculty for any report or other academic exercise.

**PLAGIARISM** is defined as representing another person's words, ideas, data, or work as one's own. Plagiarism includes, but is not limited to the exact duplication of another's work, and the incorporation of a substantial, or essential portion thereof. Other examples of plagiarism are the acts of appropriating the artistic or musical composition of another, or portions thereof and presenting them as one's own. Using your own prior work without citation is also plagiarism.

The guiding principle is that all work submitted must be properly credited to the source(s) of the information. In written work, direct quotations, statements that are paraphrased, summarizations of the work of another, and other information which is not considered common knowledge must be cited or acknowledged, usually in the form of a footnote. Quotation marks or a proper form of identification shall be used to indicate direct quotations.

As long as a student adequately acknowledges sources of information, plagiarism is not present. However, students should be aware that most professors require certain forms of acknowledgment or referencing and may evaluate a project based on form and penalize the student in the grade assigned if citation of sources is improper.

Dishonest conduct is unacceptable. In cases of academic dishonesty, such as cheating or plagiarism, students will be dismissed from class, given failing grades, or otherwise disciplined by the faculty. Faculty are responsible for the disposition of cases involving academic dishonesty, and notification of such disposition to the Academic Affairs Office. <https://www.georgefox.edu/catalog/handbook/academic/standing/honesty.html>

### **Use of Artificial Intelligence (AI)**

The use of AI tools to achieve learning outcomes in a course is *not permitted* at GFU, without the express permission of the faculty. If for whatever reason a student does use AI tools to generate responses, phrases, outlines, text, images, or any other content, the student must disclose that fact and cite the AI program they used.

Failure to do so is plagiarism and will be treated formally as academic dishonesty, according to the Academic Handbook. In general, the unauthorized use of generative AI shall be treated analogously to forbidden assistance from another person or disallowed resource, digital or otherwise (and thus would be forbidden under the same circumstances as any other form of academic dishonesty).

Students should refer to the GFU Statement on Artificial Intelligence (AI) Language Models policy:

<https://www.georgefox.edu/ai-policy/index.html>.

### **General Guidelines in Suspected Incidents of Academic Dishonesty**

The faculty of the course is responsible for initiating an investigation of each suspected incident of academic dishonesty. Each incident for which sanctions are to be imposed is to be reported, in writing, to the Dean of Nursing (or designee).

A written copy of the incident will be prepared by the faculty and sent to the Dean (or designees) and the student. In addition, a copy is to be placed in the student's permanent file in the CON and the Academic Affairs Office. The permanent file is to be maintained in accordance with the Family Educational Rights and Privacy Act (i.e., Buckley Amendment). See "Family Educational Rights and Privacy Act" section in Undergraduate Catalog.

- The severity of the offense shall be determined by the circumstances and the nature of the dishonest act. Any sanction applied should be in proportion to the severity of the offense.
- The faculty shall obtain appropriate consultation from the CON Program Director (or designee).
- Every effort should be made to resolve questions of academic dishonesty as expeditiously as possible.
- Students have the right to appeal as outlined in the university's [Academic Appeals Procedure](#).

### **Procedure for Determination of Academic Dishonesty**

Determination of Academic Dishonesty: The faculty or professional staff member who suspects academic dishonesty shall follow the procedure below:

- The faculty of the course is responsible for initiating an investigation of any incident of academic dishonesty. Any student wishing to report an incident of academic dishonesty should notify the faculty of the course in which the incident occurred.
- The faculty or professional staff member who suspects academic dishonesty shall notify the individual involved of the faculty's suspicions, receive and consider the student's response, and collect any available evidence and testimony from any witnesses. In cases of suspected plagiarism, the student may be asked to supply the reference(s) used. The student must comply with any such request.
- If the faculty concludes that academic dishonesty has occurred and that further action is warranted, the incident is to be reported in writing to the CON Program Director.

The written report should include the student's name, the date of the incident, a description of the incident, a description of any available evidence, and an indication of any action taken by the faculty up to that time.

Imposition of Sanctions: Any sanction imposed shall be in proportion to the severity of the offense. The faculty shall consider the circumstances and nature of the dishonest act in assessing the severity of the offense and a preliminary determination of the sanction to be imposed shall be made.

**Student's Rights:** The student has the right to procedural fairness and appeal in all situations involving academic dishonesty. Any student suspected of academic dishonesty will be notified in writing as to the findings of the investigation of academic dishonesty and the penalty, if any, to be imposed.

### **Procedures for Appealing an Academic Dishonesty Disciplinary Action**

Students may appeal an Academic Dishonesty Disciplinary Action decision. The appeal process must be initiated within two days after the disciplinary action decision is determined. The appeal must be based solely on the following criteria:

- There is evidence that disciplinary action decision was inconsistent (capricious) with program and University policies and
- There is evidence that the student was treated differently than classmates with regard to the specific Academic Dishonesty issue.

The appeal process is as follows:

1. Provide written documentation to the CON Program Director with specific evidence that
  - a. There is evidence that the disciplinary action decision was inconsistent (capricious) with program and university policies, and
  - b. There is evidence that the student was treated differently than classmates with regard to the specific Academic Dishonesty issue. Must occur within two business days of receiving the disciplinary action decision.
2. Meet with the Program Director to review the written documentation. The meeting must occur within two business days of the Program Director receiving the appeal documentation from the student.
3. If the student and Program Director are unable to resolve the appeal concern, the student will provide written documentation and evidence about the appeal to the Dean of Nursing. In the written documentation to the Dean, the student will include the original appeal documentation and a summary of the Program Director meeting and the student's rationale for pursuing the appeal. Specifically address why the meeting with the Program Director did not adequately resolve the student's appeal. The written appeal must be submitted to the Dean within two business days after meeting with the Program Director.
4. The Dean will review all documentation, meet with the student, and make a final decision. The Dean's decision may be appealed to the Academic Appeals Board. To request a hearing, the student must submit a written appeal to the Academic Appeals Board within two working days after receipt of the written decision from the Dean. The Academic Appeals Board decides whether or not to hear the appeal. If the Board meets to consider the appeal, then the decision is submitted in writing to the Provost, faculty, Dean, and the student.
5. The decision of the Academic Appeals Board is final.

## **Communication and Resolving Conflict: The Importance of Chain-of-Command**

The CON faculty and staff strive to support professional growth, and one of the components of professionalism is respectful communication which includes following the chain-of-command. Chain-of-command means your first contact needs to be made directly with the person with whom you have the concern. Communication must be clear, objective, specific and respectful. Concerns with another student should be discussed directly with that student. Academic concerns should follow the CON Chain of Command.

Chain of command is important because it provides a solid foundation for problem-solving and builds an environment of trust. In the CON, the chain-of-command is:

1. Faculty (didactic) and/or CI (clinical)
2. CCC (if a clinical course)



3. Program Director
4. Dean

Some suggestions for effective communication include:

- Be clear about what it is that you need or want. Use the ISBAR format ([Appendix A](#)). Present your issues or requests in a professional, respectful, and objective way.
- Use “I” statements when expressing your concerns.
- Be open-minded and challenge automatic assumptions. Be willing to negotiate and collaborate.
- Repeat back the resolution as you understand it and have the instructor confirm that this is their understanding as well.
- Respect individual rights to hold opinions other than your own.
- Promote a positive climate.
- Avoid gossip and slander including via social media.

Ineffective communication and incivility will not be tolerated and may be identified as:

- Speech or action that is disrespectful or rude indicating disregard and insolence for others.
- Speech or actions that cause an atmosphere of disrespect, conflict, and stress.
- A lack of manners, consideration, and courtesy.
- Lack of regard for others’ rights, opinions, backgrounds, and beliefs.
- A self-centered behavior that is impolite and boorish, or shows a disrespect for rights & concerns of others.
- Selfishly elevating the wants of one over another.
- Incivility violates an unspoken or implied understanding of respect for the learning process and the institution. Incivility is contrary to the wellbeing of the classroom community, and includes behaviors that distract the instructor or other students, disrupt classroom learning, discourage the instructor from teaching, discourage other students from participating, or derail the instructor’s goals.

If you cannot resolve the issue with your instructor, you should follow the chain-of-command as listed above. For example: If a student comes to the CCC or another instructor with a complaint about the CI, that instructor would listen to them but the first question would be, “Have you discussed this concern with your Clinical Instructor?” If the student has not, then the instructor would remind the student to first speak with the CI. If the issue cannot be resolved between the student and the CI, then the student would follow the defined chain-of-command.

## **Lodging a Formal Student Complaint**

A student who wishes to lodge a formal complaint with the university must complete and submit the [formal complaint form](#) to the appropriate Dean, Assistant Provost, or Provost. This form is available in the Office of Student Life and Office of Academic Affairs, as well as online.

# Clinical Policies & Procedures

## Clinical Experience Expectations

Clinical experiences are a key part of the nursing program, involving lab, simulation, advanced professional practice experiences (APPE), and off-campus clinical placements. During these experiences, students represent the nursing profession and GFU CON. Students must be prepared, demonstrate professionalism, and provide safe client care, which includes:

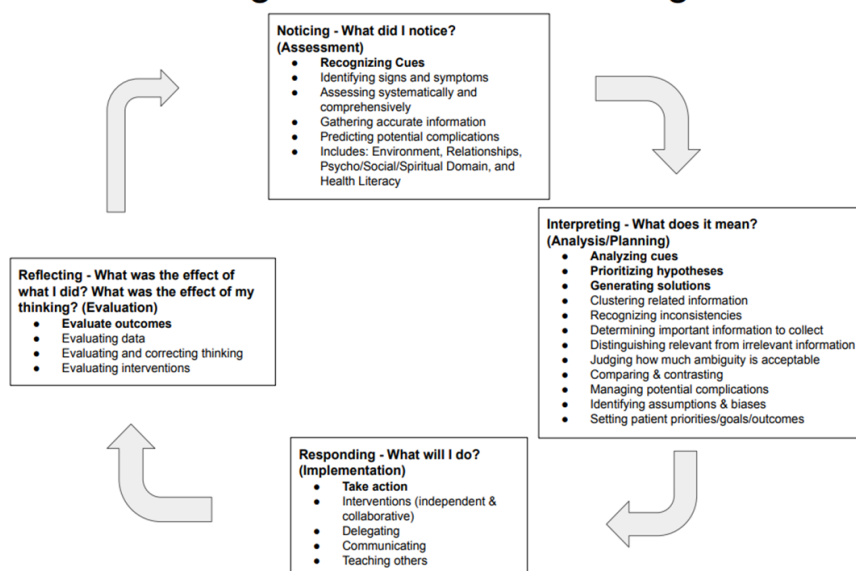
1. **Preparation:** Complete all required clinical onboarding by the assigned due date. Unprepared students will be sent home and may face dismissal from the clinical site or course after repeated incidents.
2. **Safe Client Care:** Students are expected to apply classroom knowledge to provide safe, evidence-based care. Evaluation of performance is based on student nurse practice parameters and the clinical evaluation tool. Unsafe practice may result in dismissal from the clinical site and course failure.
3. **Building on previous experiences:** Clinical experiences build upon each other and will increase in complexity and performance expectations. Expectations for the student to pass a clinical course increases as their ability to perform more independent complex client care increases. Expected performance is detailed by program outcomes in the clinical evaluation tool.
4. **Student Credentials:** All students must adhere to nursing practice parameters outlined by the Oregon Nurse Practice Act (OSBN-Division 45). They must sign documentation with their legal name, SN, GFU, i.e., "Jane Doe, SN, GFU."

A SIP may be initiated for students who fail to meet these expectations. This may lead to dismissal from the clinical experience, which may result in a student's failure to progress in the program.

## Clinical Judgment Model & Nursing Process

The GFU CON uses a clinical judgment model to guide our didactic and clinical instruction. The model represents a combination of the nursing process and theories developed by Linda Caputi, Christine Tanner, and the National Council of State Boards of Nursing (NCSBN) Clinical Judgment Measurement Model. By using this model across clinical experiences and classroom teaching, we can reinforce and build on a student's clinical judgment.

### Clinical Judgment Model & Nursing Process



## **Behaviors Implying the Presence of Professionalism**

### **Placing the patient's welfare first**

- Is accessible and prompt in answering patients' requests
- Prioritizes activities to reflect patients' needs
- Explains treatments and procedures; keeps patient well informed
- Is responsive and reliable when needs are identified by patients, staff, or faculty
- Calls and makes appropriate arrangements if unable to be on time or present for clinical experiences

### **Commitment to nursing and nursing department policies**

- Is present and willing to learn; complies voluntarily with rules and policies of the nursing department
- Demonstrates enthusiasm for clinical assignments; appears to enjoy nursing
- Appearance and conduct are consistent with the ANA Standards of Practice and Code of Ethics
- Pleasant to staff, peers, and faculty
- Gives accurate, timely, and data driven information to other nurses
- Completes charts and records

### **Cooperation**

- Able to disagree diplomatically
- Knows when to stop discussing and start helping
- Takes criticism constructively
- Accepts the roles of others and works in an appropriate capacity in response to others
- Deals with stress and frustration without taking it out on others
- Objectively handles conflict with others; tries to see both sides of issues

### **Intellectual and personal integrity**

- Forthright with peers, staff, and faculty
- Selects appropriate response to patients even if preferring to focus on something else
- Observes safe techniques at all times
- Accepts responsibility for errors and tries to take appropriate corrective action
- Statements appear to be based on fact and believable; does not provide information or facts unless known to be correct
- Does own work and does not represent the work of others as being original
- Respectful of faculty, staff, peers, and patients

## **Behaviors Implying the Absence of Professionalism**

### **Not placing the patient's welfare first**

- Unreliable in completion of tasks
- Difficult to find when needed
- Elicits hostility from patients and others
- Displays hostility towards difficult patients
- Justifies doing things "just for the experience" without taking patients' needs into consideration
- The approach is "who is right" not "what is right"
- Fails to make appropriate arrangements if unable to be on time or present for clinical experiences

### **Not committed to nursing and nursing department policies**

- Chronically tardy or absent





- Chronically late in submitting compliance and onboarding requirements
- Skips clinical assignments or other obligations if not supervised
- Passing of assignments or tasks to others when possible
- Chronic malcontent and complainer
- Sloppy
- Gives inaccurate or incomplete information to others
- Chronically deficient on the upkeep of charts and records
- Feels existent policies are irrelevant, unimportant, and non-obligatory

### **Not Cooperating**

- Argumentative or stubborn
- Sullen or arrogant with faculty, peers, staff, and patients
- Uncommunicative with staff and faculty
- Hostile responses to frustrating situations
- Passive-aggressive behavior when dissatisfied

### **Not having intellectual and personal integrity**

- Lies or fabricates data when needed to cover up mistakes and oversights
- Fails to use safe techniques when not being supervised
- Blames others for their shortcomings
- Provides data without checking for correctness
- Disappears from the unit or does not show up if unsupervised
- Represents the work of others as being original
- Disrespectful to faculty, staff, peers, or patients

## **Standard of Expected Practice**

The Oregon Nurse Practice Act (OSBN-Division 45) requires the nursing student to practice as a reasonably prudent Registered Nurse. Students are responsible for practicing within the limits of their education and experience, GFU CON policies, and the assigned clinical partner/site policies. Any question about whether or not a student nurse can perform a particular intervention or skill should be referred to the CI or the CCC.

Unacceptable behaviors include, but are not limited to the following:

- Failure to report data, regarding the listed situations, to the faculty and appropriate clinical site personnel:
  - the student's medication errors of either omission or commission;
  - the treatments omitted or improperly done by the students; or
  - other aspects of client care not completed by the student, without appropriate arrangements having been made, with faculty and site personnel.
- Falsification of entries made in client charts and/or records, either through omission or commission.
- Breach of nurse-client confidentiality by discussing clients or specific information about clients in inappropriate situations.

A student making an error of omission or commission in a clinical experience must IMMEDIATELY:

- notify CI and/or CCC
- follow the protocol that has been established by the clinical site
- notify the clinical site personnel per clinical site policy
- determine appropriate measures to be taken regarding client safety (with charge person and faculty member)
- carry out directions as necessary to rectify error

- record incident following clinical site and CON policies

Disciplinary action will be taken when behavior does not meet this standard of practice.

## Confidentiality of Information

**All information about patients, including the nature of the patient's disease, diagnosis, and treatment, is to be considered protected by applicable state and federal laws and by this policy. Incident reports relating to risk management issues and any other information designated as of a private or sensitive nature are also included in the category of confidential information.** These matters should only be discussed in a private and confidential area.

This policy applies to information maintained electronically by the clinical site's computerized information system as well as to written or spoken information and records. Computer or medication dispensing machine passwords are solely for the use of the person to whom they are assigned (unless the clinical site assigns one password to an instructor for the use of students) and must not be shared to prevent unauthorized access to confidential information.

Patients and clients are entitled to the confidentiality of their medical information. **The Health Insurance Portability and Accountability Act (HIPAA) mandates that no personally identifiable patient information be released without the patient's permission.** All GFU CON clinical policies and procedures are compliant with HIPAA. While students may share non-identifiable information in the learning environment for course and learning purposes, no patient information of any kind should be shared outside confidential settings. **No part of the electronic health record (EHR) should be reproduced in any format (digital, photographed, copied, downloaded, etc.).**

**NO reference to patients, even if de-identified, should ever be shared electronically by any means, such as text, email, or any social media platforms. Additionally, no clinical site or staff information should be shared in text, email, on social media platforms, or by other means outside the learning environment. NO photos of patients should ever be taken, even if the patient requests a photo.**

Clinical site conferences done via Zoom or teleconferencing must be done in a private setting where the conversation cannot be overheard. The faculty and/or CI may direct students to share select de-identified patient information via email for course preparation or learning purposes. Extensive notes that could identify a patient, such as nursing patient care notes, must be shredded at the clinical site prior to leaving for the day. Notes related to assignments, with the patient de-identified, can be used for class assignments. Sharing de-identified patient information on the LMS is permissible, as directed by the faculty because LMS access is encrypted and password-protected.

## Drug Dosage & Medication Administration

One of the GFU CON's core competencies is safety. The competency states that safe care must minimize the risk of harm to patients and providers through both system effectiveness and individual performance. Included within the concept of safe care are safe and accurate drug calculation and medication administration.

### Medication Math Testing

To ensure accurate drug dosage calculation and medication administration safety:

- Students will be tested regularly regarding drug dosage calculation and medication administration.
- Testing will reflect the educational level of the student and become increasingly more complex throughout the nursing curriculum.
- Students must achieve 100% accuracy on the drug dosage calculation test before being allowed to administer medications in the off-campus clinical setting.



- Med math score will account for 3% of the course grade. The score the student achieves on the first attempt is the score that will be entered into the gradebook.
- Students must take each med math test until a score of 100% is achieved.
- If a student does not achieve 100% after the second med math test attempt, the student will receive an SIP and may need to attend math tutoring sessions.

### **Administering Medications**

Students are expected to know the appropriate and complete information for every medication that is ordered and administered to their assigned patients. This includes action, dose, route of administration, side effects, contraindications, and patient teaching points. A student who does not know this information may be determined to be unsafe and removed from the clinical site.

Students must adhere to the Eight Rights of Medication Administration at all times. Any deviation from these rights may be grounds for removal from the clinical experience and/or the clinical site. If a student makes a medication error in any of the following areas, it must be immediately reported to the CI.

The rights are as follows:

1. Right patient
2. Right medication
3. Right dose
4. Right route of administration
5. Right time of administration
6. Right documentation
7. Right reason
8. Right response

## **Simulation-Based Experiences**

A simulation-based experience (SBE) is a structured activity that helps learners develop skills and knowledge in a safe, controlled environment. This includes skills lab, open lab, and simulation experiences. These experiences allow students to apply theoretical knowledge and practice clinical skills in a controlled setting.

### **General Conduct in the Simulation Center**

Professional behavior is expected at all times in the simulation center. Faculty and students will review and sign the Simulation Center Confidentiality and Consent Form upon entry into the program.

- All simulation center users must be punctual for each simulated learning session.
- All students must wear their GFU CON uniform and student nurse identification during their simulation sessions.
- The simulation center is not responsible for personal items left unattended in any simulation space.
- All users should act in a manner that does not disturb academic activities occurring in other areas.
- Food and drink:
  - are not permitted within the simulation hospital in patient care areas during actively running SBEs
  - in the simulation lab must be kept at tables at all times
- Unauthorized photography or video capture is not permitted in the simulation center. Anyone requiring photographs or video capture must request permission from the Simulation Manager.
- Computers and other electronic devices in the simulation center are for SBE purposes only.
- Those caught intentionally damaging simulation center property or removing supplies or equipment without



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permission may be reported to Campus Safety, the CCC, and the Dean.

### **Confidentiality**

Maintaining patient confidentiality is an essential component of nursing practice. All participants in SBEs agree to maintain the confidentiality of SBE content and student performance. Individual feedback provided to students regarding their performance in SBEs must remain confidential in alignment with FERPA policies. All participants in SBEs are expected to refrain from discussing details of SBE content with others.

### **Simulation Safety**

Simulation center users should follow general safety guidelines including:

- Hand hygiene
- Standard precautions
- Sharps disposal in a sharps container
- Using equipment, medications, and supplies only for SBE activities
- Immediately reporting equipment issues to the Simulation Manager or Simulation Coordinator for evaluation
- Responding to injuries or health concerns according to the Department Handbook guidelines and completing an Incident Report

### **Psychological Safety**

Psychological Safety: A sense from learners that they are encouraged to express thoughts and feelings without fear of negative consequences. Psychological safety requires a commitment from all participants to integrity, trust, respect, approachability, confidentiality, and professionalism which supports learning and development of a professional identity.

Psychological safety impacts the ability of students to engage in SBEs and critical reflection. Engagement in these activities is essential in attaining learning outcomes and critical thinking behaviors. To ensure psychological safety in SBEs, the facilitator will:

- Demonstrate respect for learners and hold learners in positive regard
- Communicate expectations for all participants in SBE
- Promote and maintain confidentiality
- Negotiate a suspension of disbelief
- Facilitate debriefing using GFU CON standards of debriefing
- Ensure that students who experience emotional distress are supported as needed
- Assure students engaged in formative simulations that SBEs are designed to practice skills, apply clinical judgment, and enhance critical thinking and that mistakes are expected as part of the learning process

### **Recording Policy**

Video recording students in the Simulation Center is allowed only for authorized educational purposes by authorized personnel using authorized recording technology. Educational purposes that may require video recordings include but are not limited to, a) make-up clinical experience assignments for students unable to attend scheduled simulations, b) video review as a required intervention for students on a Student Improvement Plan or probation plan and c) video review of students completing a summative simulation experience.

All students who will be recorded will receive the following notice prior to recording “Today’s simulation will be recorded for educational purposes only. The recording will only include patient care, debriefing is not included in any

video recordings. All video recordings are stored in a confidential database and are only viewed for educational purposes.”

Students who will be recorded for summative purposes will be individually notified that they will be recorded for this purpose.

Video recording students and review of video recordings must follow established procedures to ensure transparency, confidentiality, and security of student data. The GFU CON has an established process for secure storage and handling of student data in compliance with FERPA.

### **Simulation Evaluation**

Student evaluations of SBEs are an important part of the overall simulation experience. These allow the nursing program to evaluate a student's performance while enrolled in the program. All high-fidelity sessions will include a student evaluation which is completed immediately following their simulation session. There are two types of simulation evaluations:

- A formative simulation evaluation is used to identify performance gaps, provide feedback, explore assumptions, frames, and mental models contributing to performance gaps, and help close performance gaps through discussion and targeted instruction. Within formative simulations, professional risk-taking is encouraged and contributes to the learning and development of the student. No grades are associated with student performance during formative simulation experiences.
- A summative simulation evaluation follows a set of predetermined criteria to evaluate what degree learners achieve educational objectives or competencies. A grade or score will be associated with student performance during summative simulation experiences.

### **Illness & Attendance**

If ill and/or unable to participate in simulation, the student shall notify the CCC. The CCC will determine if this illness or missed clinical experience will be excused, and an alternate clinical assignment will need to be completed. Simulation recordings are available for many simulations, and a video link may be shared that must be viewed in a private area such as a reserved debriefing room on campus. Videos are not available for viewing off campus. The CCC will facilitate and provide instructions about the alternate make up assignment. The CCC is responsible for ensuring students meet clinical learning outcomes.

### **Electronic Devices**

Technology in the learning environment should be used for learning and not for social or work-related purposes. Electronic devices may be used for simulation-specific learning while in an active simulation experience. Examples of proper use include note-taking, communication with simulation personnel, pharmacology research, and the use of an electronic health record (EHR). Electronic devices are prohibited in the simulation center for any other purpose and must be set to silent or vibrate mode when in the simulation center unless otherwise instructed.

## **Program Compliance**

Maintaining program compliance is a fundamental professional responsibility and is essential for ensuring patient safety and the integrity of clinical experiences. Students must meet requirements in accordance with the Oregon Health Authority (OHA) and are responsible for keeping their records current and submitting documentation on time as instructed by the Clinical Placement Office (CPO). Failure to meet compliance requirements will result in a SIP and the inability to attend any clinical experiences.

### **Background Check**

The CON is required to screen admitted students for a criminal background check per OHA rule 409-030-0220. All admitted students must complete and pass a criminal background check before matriculation. Students who fail or refuse to consent to a background check will have their offer of admission withdrawn.

Students with background check results that reveal criminal convictions or other concerning details may be denied access to a clinical rotation. This decision ultimately rests with the clinical site where the rotation is taking place. The CON does not provide alternative clinical placements in these circumstances. Students denied access to a clinical site may be required to withdraw from the course or the program.

### **Controlled Substance Drug Screening**

Students must complete and pass a controlled substance drug screening facilitated by the CON compliance vendor before being enrolled in nursing program courses. If a student refuses to submit to drug screening, the student's offer of admission to the CON will be withdrawn.

A student with a negative dilute result must repeat the drug screening at their expense within five business days of receiving notification from the CPO. If a student receives a second negative dilute result the student must meet with the Program Director. A student's offer of admission to the CON may be withdrawn if they have more than one negative dilute result.

If the drug screen result is positive, the student's offer of admission to the CON will be withdrawn and they may reapply at the next application cycle.

### **Drug screening includes the following controlled substances:**

- Amphetamines
- Barbiturates
- Benzodiazepines
- Cannabis (Marijuana)
- Cocaine
- Fentanyl
- Methadone
- Methaqualone
- Opioids
- Phencyclidine
- Propoxyphene

**NOTE:** Students are required to sign a background check and drug screen disclosure statement annually. Failure to disclose any changes that have occurred since the initial background check and/or previous disclosure may result in dismissal from the program.

If a student is charged with a crime (even if dismissed) or tests positive for a controlled substance (other than those legally prescribed) they must notify the Program Director in writing within three (3) business days of the incident **and** before the next clinical day.

Students with a history of any criminal charges, convictions, or positive drug screening should contact the state board of nursing to determine or inquire if such history may impact their eligibility for licensure.

### **Required Immunizations and Screenings**

Listed below are the mandatory immunization and screening requirements. Refer to the GFU Program Requirements list for documentation requirements.

- Hepatitis B



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- Mumps, Measles, Rubella (MMR)
- Tetanus, Diphtheria, Pertussis (TDap)
- Tuberculosis (TB) Screening
- Varicella
- COVID-19 (Optional)
- Influenza (Optional)

**NOTE:** Immunization and screening requirements are subject to change without notice. Clinical partners may require additional immunizations and/or screenings before a student can complete a clinical experience at their site.

#### **Additional Program Compliance Requirements**

- Basic Life Support Certification (BLS)
- Driver's license or state-issued identification
- Health Insurance
- HIPAA training
- OSHA training
- Universal Precautions and Bloodborne Pathogens training

## **Clinical Onboarding**

Clinical onboarding is defined as the site-specific requirements that students must review and complete for all clinical rotations. Once students are assigned to a rotation, onboarding instructions and requirements can be found in ACEMAPP. Students will only have access to onboarding requirements that apply to their assigned rotations.

#### **Clinical Onboarding Due Dates**

Onboarding due dates are assigned by the CPO and/or the clinical partner. Students who fail to complete the requirements by the due date will receive an SIP and will not be allowed to attend any clinical experience for the relevant course until all requirements have been completed. Repeated offenses of missed clinical onboarding due dates may result in a Probation Record.

Clinical partners may revoke a student's placement if onboarding due dates are not met. This means the student would fail that course and would not progress in the program until the course is completed.

#### **Clinical Orientation**

Students are required to review and understand the specific orientation information for each of their assigned clinical placements. Some clinical partners may require students to attend a site-specific orientation, either virtual or in-person. Students must attend all clinical orientations required by clinical sites regardless of prior attendance. Failure to attend or late arrival to the clinical site orientation may affect the student's ability to participate in the clinical rotation and their progression in the program.

Students must attend all orientation sessions in their CON uniform unless otherwise instructed. If students wear unprofessional dress or are disruptive in any way, they may be asked to leave the orientation session and the student will receive a SIP.

#### **Authorization to Release Information**

Clinical partners may require copies of various clearance forms, including background check results, drug test results, immunization records, and personal identifiable information. Students are required to sign the Authorization to Release Information to Clinical Partners form upon entry into the program.

#### **Deadline Extension Request**

Students are expected to meet all deadlines for program compliance and clinical onboarding. If extenuating circumstances prevent the student from meeting the assigned deadline, they must submit a Deadline Extension Request form in ACEMAPP before the deadline. Throughout their enrollment in the CON, students are required to meet program compliance and clinical onboarding requirements. Due dates for these requirements are established and communicated by the CPO and/or clinical partner. Students must complete all requirements by the assigned due dates before the deadline. If the request is approved, all required documentation must be submitted and approved by the new deadline. Students may attend clinical experiences with an approved deadline extension request at the discretion of clinical partners.

If a student fails to meet the new deadline, the SIP process will be initiated, and the student will not be permitted to attend any clinical experience until all requirements have been met.

## Compliance Grade

Throughout their enrollment in the CON, students are required to meet program compliance and clinical onboarding requirements. Due dates for these requirements are established and communicated by the CPO and/or clinical partners. Students must complete all requirements by the assigned due dates.

Failure to complete program compliance and/or clinical onboarding requirements by the assigned due dates will result in the student receiving a zero for the compliance grade as defined in the syllabus for courses with a clinical component.

## Clinical Experience Assignment

Clinical experience assignments are the responsibility of the Clinical Experience Planning Team (CEPT). Off-campus clinical placements could be up to sixty (60) miles from the Newberg campus. Clinical assignments are determined based on student clinical experience history, faculty input, and available clinical placements. Decisions are not made based on convenience, transportation limitations, or childcare needs.

Students are expected to complete a Student Information survey each semester. This survey is for informational purposes only and does not guarantee that preferences or requests will be accommodated. Failure to complete the survey by the due date means the student's input will not be taken into consideration for all clinical assignments.

Clinical assignments are final and not negotiable. Trading with classmates is not permitted. Students must not seek their own off-campus clinical placements or clinical preceptors.

### **Student Clinical Experience Schedules**

Student Clinical Experience (CE) Schedules will be distributed by the CPO prior to the start of the semester and supersede schedules posted in MyGFU. It is the student's responsibility to regularly check their Student CE Schedule for any updates or changes. By signing the Consent to Share CE Schedule form, students acknowledge and consent to the distribution of their clinical schedules to classmates as needed to facilitate clinical placement and coordination.

## Dress Code

Clinical attire and appearance standards promote professionalism, safety, and infection prevention. Students are expected to comply with these standards when functioning in a professional capacity in all clinical experiences.

Students must be easily identified as a GFU nursing student, which facilitates transparency and safety when working in the clinical setting. It also serves as a sign of respect for the patient and organization (hospital, clinic, etc.). A nursing student's appearance is a direct reflection of their attitude regarding the nursing profession and a direct



reflection of the CON program. Consequences for not following the dress code policy may include the student being sent home from any clinical experience, and may result in the student receiving a SIP. If a student is sent home, they may not be able to make up missed clinical hours.

### **Clothing**

Students must only wear scrubs from the CON-approved vendor. Students will receive an email link from the vendor to order a CON logoed scrub top and scrub bottom. The first top and bottom are paid for by the CON. Students may purchase additional scrubs, including a scrub jacket, if desired.

The complete uniform is to be worn for all clinical experiences. The CON uniform consists of scrub top, scrub bottoms, socks, shoes, and student nurse identification. A uniform skirt may be worn if desired.

The student uniform must:

- be neat, clean, and wrinkle-free.
- be laundered after each day of client contact to reduce the spread of infection.
- completely cover the torso. Students must be able to sit at a desk, bend down, and reach up without exposing skin or undergarments. Pants must not touch the floor.
- fit well; not too tight or too loose.
- footwear must be:
  - closed toe and closed heel
  - non-porous shoes
  - have non-skid soles

Other approved clothing includes:

- Plain white, navy, or black undershirt. This may be a long sleeve or a tank top.
- Scrub jackets ordered from the GFU CON-approved vendor.

Non-approved clothing includes:

- Hats, scarves, or headwear, except those required by religious mandates. Religious headwear must be white, black, or navy and approved by the Program Director.
- Hoodies, sweaters, etc.

The CON student nurse ID badge must be worn in all clinical experiences. Student nurse badges are distributed to students in the first semester of the nursing program.

The student nurse badge must:

- be worn with the name and photo visible.
- be affixed to a collar, pocket, or lapel on the front upper torso.
- contain the student's emergency contact information on the back.
  - Emergency contact information must be different from the student's phone number.

Lost badges must be reported to the CPO. A replacement badge will be issued for a \$10 fee. Emergency contact information must be added to the replacement badge.

Students who lose their site-specific badge must notify their CI and clinical site security office. Lost badge fees will be charged to the student's GFU account.

### **Dress Code Accommodations**

Students may request exceptions to the CON dress code through the Program Director, for the following reasons:



- documented disability
- verified medical condition
- association with a religious group that requires certain dress styles that are exceptions to this policy

Requests will be accommodated provided that safety, infection management, and hygiene requirements are satisfied. Approved dress code accommodations will be communicated by the Program Director to the CCC(s).

### **Grooming/Hygiene**

Students are expected to follow the grooming and hygiene standards listed below. These standards will be enforced during all clinical experiences.

Students must:

- wear the CON approved uniform in all clinical experiences.
- be meticulous regarding personal hygiene.
  - The skin is to be clean and free of communicable diseases.
  - Use deodorant and mouthwash.
- maintain clean, natural fingernails only.
  - Nails should not extend beyond the fingertips.
  - Any type of artificial nail is not allowed.
  - No nail polish of any kind may be worn.
- keep hair clean and neatly groomed.
  - hair must comply with the requirements of clinical partners for off-campus clinical experiences. If it doesn't comply, a scrub cap may be required.
  - hair should not cover the eyes or touch the shoulders. Long hair, including dreadlocks, braids, and long bangs must be secured so as not to fall into the patient care field.
  - beards, mustaches, and sideburns should be neatly trimmed to 1" or shorter.
- wear conservative makeup.
  - Dramatic makeup including eye shadow, mascara, and lipstick is not allowed.

Students must not:

- wear scented perfume, cologne, lotion, aftershave, or other fragrances.
- chew gum or tobacco products in the clinical setting.

### **Jewelry/Tattoos/Body Art**

Students are discouraged from obtaining piercings and/or body art/tattoos for infection control reasons while enrolled in the program. See below for details. Tattoos with hate symbols, violent images, misogynistic symbols or quotes, anti-religious symbols, profanity, gang-related symbols, and sexually explicit content must be covered.

Allowed:

- post earrings only. All others must be removed
- ear gauges with solid, skin-tone colored plugs
- one discreet nose stud

Not allowed:

- facial piercings, including tongue
- necklaces
- bracelets

### **Protective Equipment (PPE)**

Students will use personal protective equipment (eyewear, masks, gowns, gloves) as prescribed by the policy of the clinical site to which they are assigned. It is expected that the clinical site will provide this equipment for students. Students are required to complete an annual personal protective equipment donning and doffing online education module in ACEMAPP under the Learning Modules section.

### **Additional Considerations**

In some clinical settings, the dress requirements may vary. Students are expected to comply with dress requirements for each clinical experience.

## **Personal Equipment for Clinical Experiences**

The following equipment is **REQUIRED** for clinical experiences:

Item	Description	Suggested Item
ADULT Stethoscope	Must have rotatable bell/diaphragm with a dual head and one tube.	<a href="#">3M Littman Lightweight II</a>
Sphygmomanometer (Blood Pressure Cuff)	Must be a manual type (not electronic) and with a nylon cuff. Look for a 'Standard Aneroid Sphygmomanometer' in normal adult size.	<a href="#">Adult Deluxe Blood Pressure Monitor</a>
Wrist Watch	Watch with a second hand. Can be an analog watch or a smartwatch.	
Pen Light	Disposable or battery operated.	<a href="#">Pen Light, Reusable</a>

## **Clinical Site Conduct**

As guests at the clinical site, students are expected to maintain professionalism and respect toward agency and hospital personnel. Students should not criticize the practices, observations, or feedback of clinical site staff, nor should they offer unsolicited advice or criticism. If students have concerns regarding care delivery or nursing practice at their clinical site, they should consult with their CI for guidance.

## **Transportation**

Clinical experiences may be up to 60 miles from the Newberg campus. Students are responsible for providing their own transportation to off-campus clinical experiences, including parking fees and cost of fuel. Students must follow the guidelines for vehicle registration and parking for the clinical site.

Students are expected to have a valid driver's license, and are responsible for operating the vehicle in compliance with local, state, and federal regulations, including Oregon State laws regarding automobile insurance. Students are reminded that if they transport other classmates, they are assuming personal liability in the event of an accident.

## **Inclement Weather and Other Emergency Closings**

Students are responsible for checking the George Fox School Closure Policies & Procedures website to obtain information regarding emergency weather closing: <http://www.georgefox.edu/news/closures/index.html>.

Classes may have a delayed start time, be online via Zoom, or be recorded and posted to the Canvas course page due to inclement weather and hazardous road conditions. In the event of multiple weather delays, faculty may adjust the

class schedule to make up for class cancellations. For example, if an early morning class is canceled due to a weather delay and then there is a second weather delay, the faculty may switch class times.

Off-campus clinical experiences may be held even if the GFU campus is closed or is on a delayed opening schedule due to inclement weather and hazardous road conditions. In the event of inclement weather, the CCC and the CI will work together to determine if clinical experiences will start on time, be delayed, switched to an alternate experience, or be canceled entirely. In all inclement weather situations, personal safety is the first priority.

If a CI arrives at an off-campus clinical site, the CI will be available to facilitate learning for those students who are able to safely make it to the clinical learning experience. In some situations, clinical learning may be delayed and students will have a late or delayed start time. Students can improve their opportunity to attend clinical experiences by planning ahead for the possibility of inclement weather and hazardous road conditions.

In the rare event that an off campus clinical day is canceled, the CI will contact the site and notify the staff that students will not be attending their clinical rotation that day. This information will be conveyed to students by telephone, text message, and email. In the case of a delayed opening, the CI will discuss with the site staff if students can attend at the designated delayed time on that day. If students are already at the site and an emergency weather closure is announced for GFU, the CI and CCC will jointly decide based on safety factors if students should remain and continue their work or leave to return home.

If the Newberg campus is closed due to inclement weather, on-campus labs and simulations will be changed to remote clinical experiences.

If the university campus is on a delayed start time:

- For simulation in a delayed start: Morning simulations will change to a remote clinical experience. Afternoon simulations may run as scheduled as coordinated between the CCC, simulation team, sim ops, CI, and SP.
- For labs in a delayed start: the CCC, CI and simulation team will coordinate to determine a plan for a delayed start lab. Lab activities may not begin before the delayed start time.

In all instances, the CCC will determine alternate clinical learning activities as needed.

Many CON students are participating in clinical experiences on weekends, evenings, and nights when GFU is not routinely open. These students may be in a cohort clinical rotation with a CI present or working on their own in precepted clinical experiences. CON students also have clinical experiences in geographically diverse locations in Oregon where weather and road conditions can vary. During these hours, if a student feels that it is not safe to travel to a clinical site due to inclement weather and hazardous road conditions, the student should first contact his/her CI. The CI will consult with the CCC and decide if the student will or will not attend their clinical rotation that day. The CI will then notify the site staff. A student in a precepted clinical rotation must make arrangements to schedule another shift to complete the required number of clinical hours for the course. Students need to exercise good judgment regarding their safety before deciding.

## Incident Reporting

If a student becomes ill or injured during a clinical rotation, the student should immediately notify the CI. The student must not leave the clinical site without notifying the CI about the destination and phone number at which the student can be reached, and a general plan for safe transportation. Under the direction of the CI, the student should also notify the supervisor/nurse manager of the unit or clinical site. The CI will identify required clinical partner

forms to complete if the student is injured. The GFU CON Incident Report must also be completed if the student is injured.

### **Return to Clinical Experience**

If a student has been ill or suffered an injury that restricts the ability to safely provide patient care, the faculty may require written documentation from the student's healthcare provider that he or she can return to the clinical duties and safely provide care to patients. A list of any restrictions (for example, lifting, pushing, pulling, and weight bearing restrictions) must be included in the provider's note. While all efforts will be made to accommodate students with restrictions, some restrictions may limit the student's ability to meet the course and clinical outcomes.

Decisions on whether a student may return to practice are based on the nature of the injury or illness, the restrictions required by the care provider, patient safety, clinical site policies, and the conditions at the clinical site.

### **Incident Reporting: On Campus & Clinical**

An Incident Report is completed if a student nurse experiences any of the following while on campus (class/lab/simulation) or at a clinical site.

- Bloodborne pathogen or other potentially infectious material exposure (OPIM).
- Injury related to clinical practice.
- Student personal health condition.

The Incident Report shall be completed by the University employee (faculty, CI, or CCC) who is supervising the student when the incident occurs. If the incident occurs during a precepted clinical experience, the student or preceptor should contact the CI or CCC. The report form shall be completed and signed as soon as possible and within 24 hours of the incident. For all incidents, the Program Director will follow up with the student and faculty as soon as possible and within 48 hours.

### **Bloodborne Pathogens or OPIM Exposure**

Bloodborne pathogens and OPIM may cause serious diseases in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV), the virus that causes AIDS.

All students will function in the clinical setting under OSHA standards and follow universal precautions in the clinical area. This policy is designed to minimize the risk of exposure or transmission of bloodborne pathogens and OPIM. The practice of "Universal Precautions" is observed to prevent contact with blood and other potentially infectious materials. Appropriate barrier protection should be used when contact with blood or OPIM is anticipated. The precautions are designed to protect you and the patient. Every individual is considered to be at risk for potential contamination. Latex or vinyl gloves should be worn whenever blood or body fluids, mucous membranes, or non-intact skin is handled or when coming in contact with items or surfaces soiled with blood or body fluids. Gloves should be changed and hands washed after each contact. Gowns, masks, and eye protection should be used if there is the potential for the splashing of fluids.

Exposures are defined as needle-stick injuries with a contaminated needle or other sharp; blood or body fluids sprayed or splashed in the eyes, nose, or mouth; blood or body fluids on open cuts or sores; and human bites with broken skin. Body fluids include blood; semen; vaginal secretions; peritoneal, pleural, amniotic, pericardial, synovial, or cerebrospinal fluids; or any other bloody fluid (saliva, urine, stool, etc.) containing visible blood.

### **Response to exposure:**



1. Implement first-aid procedures. Wash the exposed site with warm water and soap. Flush exposed mucous membranes with water.
2. Seek immediate assistance from a health care provider (either at the clinical site or at the [GFU Health and Counseling Center](#))
3. Immediately report the exposure to their CI and/or Clinical Preceptor.
4. With faculty, evaluate the patient's risk status for HIV, hepatitis B, and hepatitis C. Following clinical site procedures, obtain as much information as possible about the patient, e.g., diagnosis and pertinent lab data (HIV status, HBsAG status). Confidentiality of the patient's identity and information should be maintained at all times. Inquire if HIV and Hepatitis B and C screens can be run by the clinical site and inquire about the cost. Take all available information to your health care provider.
5. Complete the clinical site Incident Report form according to clinical site policy where the exposure occurred.
6. Complete the GFU CON Incident Report and process as outlined in the Incident Reporting opening section.

### **Injury or Potential Injury: Clinical Incident**

For any incident involving potential or actual injury to the student or the student's patient, the following steps should be taken in **response to injury**:

1. The student will immediately report the occurrence to the staff nurse, CI, and/or preceptor.
2. The student, CI, staff nurse, or preceptor will immediately consult with health care providers at the site to take measures to reduce or reverse any injury or potential injury.
3. The CI or CCC will immediately complete the clinical site Incident Report, before leaving the clinical site.
4. The CCC will debrief with the student and the CI as soon as possible and within 24 hours.
5. Complete the GFU CON Incident Report and process as outlined in the Incident Reporting opening section.

### **Student Personal Health Condition**

If a student experiences a personal health condition exacerbation during class or a clinical experience, and is able to make their own decisions, the student should manage their personal health condition without faculty intervention. Students who are alert and oriented make their own decisions and have full autonomy in choosing whether to seek medical evaluation follow up. No GFU staff or faculty are required to provide or administer health care for students.

If the student's condition is unstable and they are unable to make their own decisions, the faculty, CI / CCC or other GFU staff may initiate emergency services, if needed, by calling 911. If 911 is called, George Fox Campus Public Safety (503-554-2090) must be notified. For any incident involving a **serious** health condition exacerbation, whether or not 911 was called, the following steps should be taken.

Response to student's personal health condition:

1. The faculty and student will collaborate to determine personal health condition treatment steps, if needed, and based on student condition.
2. Complete the GFU CON Incident Report and process as outlined in the Incident Reporting opening section.

## **Errors & Near Miss Documentation**

Student reporting of errors and near miss events in the clinical setting aid in the identification of gaps in curriculum, types of errors/near misses, and why they are occurring to improve safety and to create a practice of just culture. In this just culture environment, students will take accountability for any errors and near misses by self-reporting instances that occur during clinical experiences within 24 hours of the event.

Students will access the reporting system through all canvas pages and syllabi of each course with clinical experiences. The report will be created by filling out the Google Survey: [Errors and Near Miss Reporting Tool](#). This documentation will be used for process and performance improvement.

# General Information

## Student Life Policies

### **TITLE IX**

GFU is committed to providing a Christ-centered community that fosters a safe living, learning, and work setting for students, employees, and visitors. A core value of this institution is to maintain a respectful environment for all individuals that is free of the following:

- Sexual Harassment
- Sexual Assault
- Domestic Violence
- Dating Violence
- Stalking
- Sexual Exploitation

These behaviors and actions are contrary to the mission, values, and Lifestyle Standards of our community, and are violations of federal and/or state law. It is our firm belief that engaging in any aspect of this behavior is unacceptable and will not be tolerated by members of the George Fox community.

The sexual misconduct and sexual violence policies, information, avenues for reporting, resources, and support can be found on the [George Fox University Title IX website](#).

### **Discrimination, Bias, & Harassment**

For information on this policy go to [GFU Policy on Discrimination, Bias, and Harassment](#).

## Substance Use Policy

The following are strictly prohibited on GFU-owned and GFU-controlled property or while representing the university in any capacity, including during off-campus clinical assignments. Substance use: using or being under the influence of alcohol or other drugs. (Note: for purposes of this policy, a student is considered to be “under the influence” if laboratory test results are positive [i.e. any detectable blood or urine level of alcohol or other chemical substances not derived from medication prescribed for the student by a qualified healthcare professional]. This includes marijuana - see Marijuana Use policy in the Student Handbook.

**Illegal activity:** Possession, distribution, manufacture, transfer, sale, or offering for sale alcohol or any narcotic, hallucinogen, stimulant, sedative, or a similar drug other than in accordance with legal requirements.

Nursing students engaging in any of the aforementioned conduct will be subject to disciplinary action up to and including dismissal from the program.

Students who need advice or assistance in dealing with a substance use problem should seek out a counselor in the Health and Counseling Center.

All allegations of illegal activity related to chemical substances will be referred to the Dean of Nursing. The student will not be allowed to attend any off-campus clinical experiences while the investigation is conducted. If the investigation reveals that the student did engage in illegal activity on university-owned and university-controlled property or while representing the university in any capacity, the student will be dismissed from the nursing program.

In all aspects of providing patient care, nursing students must perform safely and effectively. They are, therefore, responsible for avoiding potential adverse effects on their behavioral, physical, emotional, and mental states that could result from the use of drugs, whenever and wherever taken, including alcohol and any “over the counter” or prescription medications. Students who are authorized to use marijuana for medical reasons under the Oregon



Medical Marijuana Act must submit a copy of their current registry ID card to the Dean of Nursing. The authorized use of marijuana for medical reasons does not relieve students of the responsibility to perform safely and effectively when providing patient care. Students are encouraged to notify their instructor if they are taking any medications that may harm their clinical performance so that faculty may help students manage potential problems.

Based on the contractual agreements of the nursing program with clinical sites, an instructor must dismiss students from the clinical setting if there is any question of the student's ability to function safely and responsibly in patient care. These contractual agreements recognize the right of clinical sites to exclude students who exhibit unsafe or irresponsible behavior. Such exclusion could mean that a student would not be able to achieve course outcomes and could, therefore, not be able to continue in the nursing program.

Performance, behavior, appearance, or breath odor may suggest the use of alcohol or other drugs. Some examples of signs that may indicate substance use are:

- A change in a person's behavior
- Bloodshot eyes
- Emaciated or unusual weight loss
- Tremor, especially early morning
- Dilated or constricted pupils
- Slurred speech
- Inappropriate or bizarre emotional responses
- Altered/impaired gait
- Breath odors
- Repeated tardiness or absence
- Diminished work performance, including mental functioning
- Accidents or near-misses involving patients or equipment

When indications of substance use are detected while a student is engaged in activities on campus, the student will be required to explain the findings. At the discretion of the nursing faculty, such explanations may need to include the report of testing of body fluids for chemical substances. In consultation with the Dean of Nursing and Program Director, faculty will decide whether and what disciplinary action is appropriate. At a minimum, the student will be directed to read this policy again. Any further indications of substance use will require that the student undergo immediate testing for the presence of alcohol or other chemical substances. Test results will be used to review the student's status in the program.

A student nurse is subject to additional drug testing upon request if there is reasonable cause to believe that the student may be using illegal drugs, misusing legal drugs and dietary supplements, or misusing alcohol or tobacco products. The faculty and the Dean of Nursing will review the student status in the program. Factors that will be considered in this review include whether the student exhibited unsafe performance or irresponsible behavior in patient care and whether test results are positive.

- Possible outcomes of the review of a student's status in the program include continuation in the program with a SIP to develop support strategies and identify resources to prevent a recurrence of the problem, continuation in the program on probation, or dismissal. Any of these decisions can be appealed using the Academic Appeal Procedure process outlined in the GFU Student Handbook.
- Testing for substance use consists of conducting laboratory tests on samples of the student's blood, breath, and/or urine, whichever is appropriate, to detect alcohol and other chemical substances. Whenever possible, students must provide the sample needed for testing within 60 minutes of the time the clinical experience was suspended or within 60 minutes of the time indications of substance use were suspected on campus. Collection and testing of body fluid specimen(s) will employ procedures that maintain the integrity



of the specimen(s) and be done at a site of the CON's choosing. Students will be responsible for arranging their transportation for testing.

Testing required by the nursing program to corroborate or refute a suspicion of substance use will be arranged for and paid by the program. Payment for any subsequent testing will be the responsibility of the student. The test results will be reported directly to the Dean of Nursing by the testing facility.

Refusal to provide specimens of body fluids for testing or failure to provide the necessary consents to implement this policy, including consent for direct reporting of test results to the Dean of Nursing, will be interpreted as an implied admission of substance use and grounds for dismissal.

Students found to have positive test results will be placed on probation or dismissed from the Program. Students suspected of substance use who refuse testing may be dismissed from the program.

- Continuation on probation has the following conditions before the student is permitted to continue in the nursing program:
  - Students must undergo, at their expense, evaluation by a qualified drug and alcohol abuse counselor.
  - Students must permit the counselor to document to the Dean of Nursing that such an evaluation has been done and if test results were positive that a treatment plan has been developed.
  - Students must sign an agreement to follow the program's substance use policy and any treatment and monitoring program prescribed by the counselor, including submitting to random drug testing.
  - Students must agree that the counselor may document to the Dean of Nursing every two weeks the student's ongoing abstinence and continued participation in treatment and rehabilitation.
  - Other conditions may be specified for a student's continuation in the program based on the circumstances of the situation.
- After being permitted to continue in the program:
  - Students must demonstrate safe, responsible, and effective care of patients at all times.
  - Students must comply with the conditions of probation or be dismissed from the program.
- Clinical or class time missed while the requirements and procedures of this policy are implemented will be regarded as follows:
  - When lab tests for substance use are positive or when the student is shown to have engaged in illegal activity, time missed will be regarded as unexcused absences. There is no obligation by the nursing faculty to offer make-up time.
  - When lab tests are negative and when a student is cleared of an allegation of substance use or illegal activity, students will be provided opportunities to make up missed clinical time and assignments and missed class content. Students will be expected to take advantage of these opportunities to demonstrate their achievement of the course outcomes.
  - Notwithstanding the preceding, there are time limits on accommodating missed time from the nursing program. Any protracted time needed for implementing this policy (e.g., obtaining consents and samples for testing, reporting results, assembling documentation required for continuation on probation) may require that students withdraw from the program.
- Students may choose to withdraw from the nursing program to manage and control a substance use problem. Students who withdraw, as well as students dismissed for substance use, may be permitted to return to the program on the condition that they provide documentation to the Dean of Nursing that abstinence has been maintained for six months before returning to the program. Students who return to the program after withdrawal or dismissal for substance use will be on probation with the conditions outlined



above. The process and conditions outlined in this handbook in the section on student re-entry apply here also.

- The ANA Nursing Code of Ethics includes provisions to protect patient safety and create a safe work environment. Students have an ethical responsibility to report peers who are suspected substance users. This may be done by contacting nursing instructors or the Dean of Nursing and may be done anonymously.
- As licensees of the OSBN, the faculty and Dean of Nursing are required to report to OSBN any knowledge they have about substance use or illegal activities for any nursing personnel regulated by OSBN.

## **Marijuana Use**

As a GFU nursing student, a commitment to the highest professional standard and the solemn contract we hold with society to be safe, competent caregivers is expected. Our legal contracts with clinical partners require clean controlled substance drug screen results. State laws that legalize marijuana do not change our standard and our commitment to a drug-free lifestyle, both during the school year and during breaks. The use of marijuana, even though legal in Oregon and other states, will not be permitted in the CON. Violations of the CON substance use guidelines will result in disciplinary action up to and including dismissal. Per the Oregon Nurse Practice Act (OAR 851-045-0090), substance abuse, including recreational marijuana as defined by ORS 678.111(1)(e) shall always be reported to the Board of Nursing.

## **General Student Complaint Procedures**

[GFU General Student Complaint Procedures](#)

## **Accommodations for Students**

In keeping with the central tenets of its mission - teaching, faith, and service - GFU is committed to the full access and inclusion of all qualified students in its programs. It is the policy of the university to ensure that students with disabilities have equal opportunity for participation in the university's academic programs and activities, per Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act. The CON statement incorporates the university policy and is more specific to the technical standards of nursing, in preparing students to fulfill the professional role of practicing nurses.

### **DAS Process**

A member of DAS meets with a student who requests services and reviews relevant documentation of a disability. The DAS Services office generates an email to the student's instructors, including accommodations that have been approved based on documentation and the individual student history. Until faculty receive such an email, no accommodations should be implemented for the student. If a student indicates that they have a disability but haven't received DAS approval, the student must immediately contact the DAS office. No accommodations will be provided until DAS documentation and approval has been completed.

Students who have DAS accommodations should meet with their professor to discuss the accommodation requests. The student's request for accommodations is initiated by them. The conversation should center around the accommodations, not the diagnosis that leads to accommodations. Professors should not inquire about the diagnosis, though the student might voluntarily disclose their diagnoses.

Accommodations are not retroactive. For example, if an exam was given before a student received the notification email from the DAS office, faculty have no obligation to give the exam again with the requested accommodations.

Students requesting accommodations or adjustments based on a disability should work through DAS. Faculty will not provide accommodations to a student who has not followed the formal registration process.

Quizzes and exams must be scheduled through DAS on the same day that the quiz or exam was originally scheduled. Tests will not be administered before or after the scheduled test date.

### **Service Animals**

GFU is committed to making reasonable accommodations for students with disabilities. As part of our commitment, students with disabilities who have a Service Animal (SA) or who are determined eligible for an Emotional Support Animal (ESA) are permitted to house their animal in their campus room, apartment, or house. Only students with disabilities are eligible for this exception to the pet policy.

A student may qualify to have an Emotional Support Animal (ESA) or a Service Animal in campus housing if:

- the student has a documented disability (ESA);
- the animal is necessary to afford the student with a disability an equal opportunity to use and enjoy their dwelling (ESA);
- there is an identifiable and documented relationship between the disability and the assistance that the animal provides (SA).

Descriptions of the types of animals, along with additional information about animals on campus and the process for requesting a Service Animal (SA) or an Emotional Support Animal (ESA) in campus housing, can be found on the link: <https://www.georgefox.edu/offices/das/student-resources/animals.html>.

The CON adheres to GFU's service animal policy, which can be located [here](#). However, clinical sites may also have policies that students are required to follow. The failure to comply with the policies of clinical sites and/or the failure to complete a clinical rotation could impact the student's ability to progress in the program.

### **Allergies: Food, Latex, and Other**

Students with a known or suspected allergy or sensitivity must take proactive steps to ensure their safety in all clinical experience settings. These steps include:

- Notify each CCC of their allergy or sensitivity before the semester begins.
- Contact DAS to request accommodations if needed.
- Inform the CCC of their emergency action plan.
- Avoid medical supplies, equipment, and other known allergen sources.
- Carry any prescribed medication, including emergency medications.
- Wear allergy identification bracelet or necklace as needed

If a student has a latex allergy, the CON will communicate with clinical sites to determine if they are a latex-free environment. In the event the clinical site cannot guarantee they are latex-free, students are responsible for providing their own non-latex gloves.

### **Technical Standards**

The knowledge, skills, and abilities required to safely and effectively practice nursing are varied and complex. Throughout your educational program, you will find yourself in a variety of learning experiences. The GFU CON has the responsibility to educate competent nurses to care for their clients (persons, families, and/or communities) with critical judgment, broadly based knowledge, and well-honed technical and interpersonal communication skills. The CON has academic as well as technical standards that must be met by students to successfully progress in and graduate from its programs.

Technical Standards: GFU CON provides the following description/examples of technical standards to inform prospective and enrolled students about the standards required to complete the nursing program.

1. The technical standards reflect a sample of the performance abilities and characteristics necessary to successfully complete the requirements of the nursing program. The standards are not requirements of admission into the programs and the key areas are not all-inclusive.
2. Individuals interested in applying for admission to the programs and those currently enrolled should review these standards to develop a better understanding of the skills, abilities, and behavioral characteristics required to successfully complete the program.

Key areas for technical standards in nursing include having abilities and skills in the areas of:

- (1) acquiring fundamental knowledge;
- (2) developing communication skills;
- (3) interpreting data;
- (4) integrating knowledge to establish clinical judgment;
- (5) incorporating appropriate professional attitudes and behaviors;
- (6) possessing gross and fine motor skills essential for professional nursing practice.

The CON wishes to ensure that access to its facilities, programs, and services is available to all students, including students with disabilities (as defined by Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act (ADA) of 1990 and the ADA Amendments Act of 2008) and all students can study and practice nursing with or without reasonable accommodation. The GFU CON program provides reasonable accommodations to all students on a nondiscriminatory basis consistent with legal requirements as outlined in the Rehabilitation Act of 1973, the Americans with Disabilities Act (ADA) of 1990, and the ADA Amendments Act of 2008. A reasonable accommodation is a modification or adjustment to an instructional activity, equipment, facility, program, or service that enables a qualified student with a disability to have an equal opportunity to fulfill the requirements necessary for graduation from the nursing program. To be eligible for accommodations, a student must have a documented disability of:

- (a) a physical or mental impairment that substantially limits one or more major life activities of such an individual;
- (b) a record of such impairment; or,
- (c) be regarded as having such a condition.

To request an accommodation and discuss reasonable accommodations for clinical experiences, students should contact the GFU DAS Office (503-554-2448 [das@georgefox.edu](mailto:das@georgefox.edu)).

### **Accommodation Plan**

Some students may need accommodation(s) to participate fully in the nursing program. Accommodations may include extended time on tests, textbooks in auditory format, the ability to use an amplified stethoscope in clinical experiences, and other accommodation(s) for a student to fully participate in any nursing program classroom or clinical experience. Students must contact DAS at [das@georgefox.edu](mailto:das@georgefox.edu) and follow the steps to apply for DAS accommodations. If you currently have a DAS Accommodation Plan, please discuss your accommodations with your faculty and your advisor at the start of each semester, to optimize your learning opportunities.

If a student has approved accommodations that may impact their clinical experiences, a Field Experience Accessibility Plan may be developed. This process is initiated by the DAS team in collaboration with the CCC. Students are not responsible for initiating this plan but are expected to engage in the process once contacted.

When applicable, the student will be required to participate in a meeting with DAS, the CCC, the CI, and the Program Director to review accommodation needs. This meeting should occur at least eight weeks prior to the start

of the lab or clinical placement to ensure appropriate planning and support. If a student does not notify University staff and faculty in a timely manner, the student may not be able to participate in clinical experiences. In such situations, the student will meet with the Program Director to identify necessary actions, which may include withdrawing from the course and an interruption in program progression..

**IMPORTANT:** The nursing program includes a variety of clinical experiences, including skills labs, simulation, clinical rotations, and APPE. Students may need additional or different accommodation arrangements depending on the type of clinical experience. It is the student's responsibility to meet with DAS, the CCC, the CI, and the Dean of Nursing's designee at least eight weeks before the start of each semester to review the student's accommodation needs for clinical experiences.

## Social Networking Sites and Blogs

Social media posts about clinical experiences are never appropriate and students should never post anything about clinical experiences on social media sites. Students should be careful not to post or display (through images, pictures, or statements) any information that could be perceived as negative, incorrect, or damaging material to a blog or social networking sites, concerning GFU, CON, our clinical partners, clients, faculty, staff, or students.

Any student who posts negative, incorrect, or damaging material on a blog or social networking sites concerning GFU, the CON, our clinical affiliates, clients, faculty, staff, or students will be subject to administrative review and may be dismissed from the Nursing Program.

All students are encouraged to set their blog or social networking profiles to "private". Students need to remember that faculty and potential employers can periodically review public blogs and profiles.

The NCSBN has developed guidelines for nurses and nursing students for using social media responsibly. Key points of these guidelines are summarized, along with dramatization of potential scenarios of inappropriate social media use in this video clip: <https://www.ncsbn.org/video/social-media-guidelines-for-nurses>

## Student Review of Personal CON File

A student has the right to review the materials in his/her file. The CON requires students to first make an appointment with the student's academic advisor. The advisor will obtain the student file and will be present with the student when the file is reviewed. The CON must comply within five workdays of the student's request to review files.

## Student Contact Information

Students are required to maintain their current mailing address, telephone, and emergency contact information in ACEMAPP **at all times**. If a change is made, the student is required to communicate the change by emailing [nursing@georgefox.edu](mailto:nursing@georgefox.edu) immediately. GFU Update Personal information instructions: <https://www.georgefox.edu/offices/student-accounts/account.html>.

## Student Name Change

Students who legally change their name will need to submit appropriate documentation and complete a GFU Legal Name Change form to the GFU Registrar: <https://www.georgefox.edu/offices/registrar/student-resources/name-change.html>.

Students must also notify the CON when a name change has been processed through the Registrar's Office, by emailing [nursing@georgefox.edu](mailto:nursing@georgefox.edu). The student will receive an email with further instructions for updating their name across the various systems and applications used in the nursing program.

**Until the name change process is completed at the clinical site, the student must continue to sign using the student's former approved name. Clinical badge(s) must also be updated once the name change is approved.**

## CON Communication

Timely communication among faculty and students is critical for efficient and effective planning of classroom and clinical experiences, as well as for communication of matters of importance to students. Voicemail, email, and the LMS are the primary forms of communication used in the CON. It is expected that students and faculty use only their George Fox email for all email communication.

While faculty commit to the timely notification to students of any changes or important details, information may change at the last minute, especially regarding clinical activities. Faculty and students should communicate with each other at the beginning of each semester about preferences regarding communication during campus and clinical hours.

The LMS can be accessed via the web and includes such features as announcements, syllabi, lecture outlines, discussion groups, forums, and emails. The student is responsible for reading and downloading this information. GFU email addresses will be the enrolled email addresses within the LMS.

## Campus-Wide Emergency and School Closure Communication

Campus-wide emergency information will be shared using the following systems, <https://www.georgefox.edu/emergency-response-plan/index.html>. The following link provides information regarding emergency weather closures: <http://www.georgefox.edu/news/closures/index.html>.

Any changes in the student name, phone numbers, and email addresses should be shared with the CON and the university Registrar promptly to enable these systems to communicate properly.

## Licensure and Certifications

### **RN Licensure**

The GFU nursing program meets state educational requirements for professional licensure in all US states and jurisdictions. For specific state and/or jurisdiction requirements, please use the following link: <https://www.ncsbn.org/nursing-regulation/licensure/nurse-licensure-guidance.page>.

Students must meet criteria established by the OSBN to sit for the NCLEX-RN and be licensed as a registered nurse in Oregon. OSBN criteria include the assessment of the individual's past criminal record. History of specific criminal behaviors will preclude the individual from licensure in Oregon. Students with questions regarding their potential eligibility for licensure should contact the OSBN directly (971-673-0685) or check the OSBN website for details: <https://www.oregon.gov/osbn/pages/criminal-history.aspx>.





College of Nursing

Licensure fees vary by state and students should anticipate spending approximately \$450.00-\$500.00 for NCLEX testing and licensure. Students will receive instruction on how to apply for RN licensure and NCLEX-RN in the last semester of the nursing program. Approximate costs include but are not limited to:

- NCLEX-RN - \$450-\$500
- Oregon RN licensure - \$169 (\$160 application/\$9.00 processing fee)
- Fingerprinting - \$75

*NOTE: These fees are for Oregon. Other states may have a different fee structure. It is the responsibility of the student to research the fees if they plan to get licensed in a different state.*

Per OAR 851-031, the OSBN has limits on eligibility for licensure. Licensure may be denied to graduates with a criminal offense and those with a major physical or mental condition that could affect the individual's ability to practice nursing safely. OSBN will only evaluate each situation upon receiving an application for licensure (not prior).

### **CNA & CMA Certification**

The Oregon State Board of Nursing is the certifying agency for Certified Nursing Assistants (CNA) and Certified Medication Aides (CMA) certifications. The CON has no role in the CNA or CMA application and certification processes.

Students are eligible to apply for a CNA certification and/or a CMA certification after completing the second semester in the four-semester curricular plan. If a student plans to apply, they must do the following:

1. Create an account on the OSBN website and fill out the application:  
<https://osbn.boardsofnursing.org/orbn>.
2. Provide proof of enrollment in an approved U.S. Nursing Education program. The document accepted as proof of enrollment is an official transcript. Students will need to follow the instructions on the GFU [How to order your official transcript](#) website. The CON will not provide an enrollment verification letter.
3. Schedule and then take the written and skills exams through the OSBN.
4. Students are not allowed to use lab space and/or CON equipment to practice for the CNA or the CMA exams.

## **Nursing Student Life**

### **Serve Day**

All nursing students are expected to participate in Serve Day, this includes commuters as well as on campus residents. Students scheduled for a clinical experience on Serve Day (on- or off-campus) are **required** to attend the clinical experience and are excused from Serve Day.

### **Class Representatives**

Each nursing cohort will select one or two class representatives. Class representatives will be voted upon by their classmates. Class representatives are a liaison between their respective cohort and nursing program administrators and community practice partners. Class representatives may also represent the CON at community events.

Responsibilities of class representatives include:

1. Representing the CON at events such as Friday@Fox, Bruin Preview, Scholarship Summit, and Pinning. Recruiting and selecting additional classmates to represent the CON at events. When representing the CON, please wear business casual attire or the GFU approved clinical uniform.
2. Serve as a liaison between class and the CON administrative team.
3. Provide program suggestions.
4. Convey pertinent information to classmates.
5. Attend one department meeting per semester and provide a report on behalf of the class (TBD - schedule permitting).
6. Meet once a semester with the Program Director .





7. A single representative will attend the Advisory Committee meeting (schedule permitting) which is comprised of Nurse Managers from local clinical practice partners such as Providence, Legacy, Salem Health, etc. One representative will attend representing all cohorts. If unable to attend, the representatives will send a summary to the Program Director to share at the meeting. The summary should include the following:
  - a. What students are learning in class and clinical experiences.
  - b. Projects or major assignments and how these are contributing to professional practice.

Class representatives are not an intermediary for a student or students who have a complaint or concern about faculty, an exam, a grade, a course, or a clinical learning experience. Any student who has a personal concern about faculty, an exam, a grade, a course, or clinical experience must first speak with the faculty, the faculty of the course and/or the CI. See the CON Student Handbook information about chain of command that outlines professional communication expectations.

### **Nursing Ambassador Responsibilities**

Ambassadors are representatives of the nursing program. They often assist with recruiting activities, social events within the CON, and service activities. Responsibilities of ambassadors include:

- Participating in recruiting events (Friday@Fox, Bruin Preview, College Fairs)
- Keeping the nursing program's social media presence updated and relevant
- Reaching out to prospective students
- Engaging with current students through social and service events on campus
- Participating in Scholarship Summit

### **Student Organization: Nursing Clubs**

All nursing students are encouraged to join the Nursing Clubs. The purposes of these organization are:

- To provide our members with the opportunity to identify with the nursing profession and to foster intellectual, educational, spiritual, and social activities related to professional nursing.
- To reach out into our community as well as building fellowship within the CON.
- To aid the development and growth of the individual student by fostering good citizenship through professional and social unity.
- Offer peer mentoring support for nursing students within the program and prior to program admission.

There are two organizations:

- Nursing Club
- M.E.N. Club (Men Entering Nursing)

All students were welcome to participate in either or both clubs.

### **Pinning Ceremony**

Each graduating class culminates the completion of the nursing program by a Pinning Ceremony. The Pinning Ceremony is held on the last Thursday of the academic year. Each student will receive a GFU nursing pin and stole. A nursing pin is a type of badge that is worn by nurses to identify the nursing school from which they graduated. Pins are presented to the newly-graduated nurses by the faculty as a symbolic welcome into the nursing profession. Most pins have a symbolic meaning, often representing the history of the nursing program for that school.

Students will receive ten invitations and ten tickets for their guests to attend their Pinning Ceremony. These will be distributed in the Capstone class at the beginning of Semester 4 in the nursing program. Guests must present their ticket to enter the auditorium. If additional tickets are needed, students must seek these tickets from other students in their cohort. Specific details regarding this event will be communicated via email, Canvas announcements and a Google Calendar invitation. Students are expected to wear professional attire; slacks and a collared shirt for men; slacks and a blouse or skirt with a blouse or a dress for women. Skirts or dresses must be knee length or longer and women's heel height should be no higher than three inches.

## Parental Involvement

GFU follows all federal and state regulations on information sharing about students. FERPA (Family Educational Rights and Privacy Act) policy may be viewed at

<https://www.georgefox.edu/catalog/handbook/compliance/privacy.html>.

GFU also follows HIPAA policies (The Health Insurance Portability and Accountability Act) regarding the sharing of student health information.

Parent and Family Programs is committed to communicating with you about news and events at George Fox and to providing programs and services to help parents stay connected to their students all year. If your parent has any questions or needs additional information, please contact the Parent and Family Program at 503-554-2112, <https://www.georgefox.edu/parents/index.html>.

The Dean of Nursing, faculty, and staff are not allowed to consult with or provide information related to academic issues without permission from the student and a FERPA waiver submitted in the Registrar's Office.

## FERPA Release

### **Release of Non-Directory Information**

Students can release some non-directory information (e.g., grade reports, class schedule) to specific people (i.e. spouse, parents). To do so, each student must complete a [release of information form](#). This release will be held on file in the Registrar's Office until revoked in writing. The release of information according to FERPA regulations is specific to the application. Therefore, academic and financial information requires distinct approvals. The form for the release of Student Financial Services information is available [here](#).

### **Restricting Directory Information**

Students may elect to restrict the release of their directory information but must do so for all such information (it is not possible to restrict only a portion of the information) by submitting a signed form to the Registrar's Office annually by the second week of each academic year. The Request to Prevent Release of Directory Information form is available in the Registrar's Office.

### **Release Form for Academic Recommendations**

A student wanting any form of recommendation letter from any faculty or staff must submit a [FERPA Release for Letter of Recommendation](#) form. This must be submitted for EACH individual from whom the student is requesting a reference.

# Appendices

## Appendix A: ISBAR Form

<b>I</b>	<b>Introduce Yourself</b> Your Name: _____ Your Title: _____ Reasons for being there: _____
<b>S</b>	<b>SITUATION</b> <b>I am calling about</b> _____ <b>The patient's Code status is:</b> _____ <b>The problem I am calling about is:</b> _____ <small>(e.g. I AM CONCERNED THE PATIENT IS GOING TO ARREST)</small>
<b>B</b>	<b>BACKGROUND</b> <b>The patient's mental status is:</b> Alert and oriented to person, place, and time Confused and cooperative or non-cooperative Agitated or combative Lethargic but conversant and able to swallow Stuporous and not talking clearly and possibly not able to swallow Comatose Eyes closed Not responding to stimulation. <b>The skin is:</b> Warm and dry Pale Mottled Diaphoretic Extremities are cold Extremities are warm <b>The patient is not or is on oxygen.</b> The patient has been on _____ (l/min) or (%) oxygen for _____ minutes (hours) The oximeter is reading _____ % The oximeter does not detect a good pulse and is giving erratic readings.
<b>A</b>	<b>ASSESSMENT</b> <b>This is what I think the problem is:</b> _____ <small>“SAY WHAT YOU THINK IS THE PROBLEM”</small> <b>The problem seems to be</b> _____ <b>cardiac</b> <b>infection</b> <b>neurologic</b> <b>respiratory</b> <b>I am not sure what the problem is but the patient is deteriorating.</b> <b>The patient seems to be unstable and may get worse, we need to do something.</b>
<b>R</b>	<b>RECOMMENDATION</b> <b>To Provider/Physician</b> _____ _____ Transfer the patient to Critical Care Come to see the patient at this time Talk to the patient or family about Code status Ask a consultant to see the patient now. <b>Are any tests needed:</b> Do you need any tests like _____ CXR ABG EKG CBC BMP Others: _____ <b>If a change in treatment is ordered then ask:</b> How often do you want vital signs? How long do you expect this problem will last? If the patient does not get better when would you want us to call again?

Form 861-157 Issued: October 2005

## Appendix B: Four Semester Curriculum Plan

Nursing Curriculum						Update 12/13/24	
Freshman Fall	MATH 120 (3D) Intermediate Algebra	COMM 111 (3D) Communication in Society	PSYC 100 (3D) Personhood	THEO 101 (3D) The Bible	MUSI/THEA/ARTS 120 (3D) Arts & Global Culture	15 credits	
Freshman Spring	CHEM 150 (4D) General, Organic, and Biological Chemistry	PSYC 150 (3D) General Psychology	WRIT 111 (3D) Caring for Words	HIST 111 (3D) Modern & Postmodern World	THEO 102 (3D) Christianity	NURS 105 (1D) Success Strategies for Pre-Nursing	16-17 credits
Sophomore Fall	BIOL 221 (4D) Human Anatomy & Physiology	PSYC 240/MTH 240 (3D) Statistical Procedures	PSYC 310 (3D) Lifespan	LITR 111 (3D) Faith & Story	SSCI 100 (3D) Justice		16 credits
Sophomore Spring	BIOL 222 (4D) Human Anatomy & Physiology II	BIO 367 (4D) Microbiology	NURS 220 (3D) Nutrition Essentials	THEO 380 (3D) Ethics			14 credits
Semester #1	NURS 311 (3D) Pathophysiology	NURS 312 (3D) Pharmacology	NURS 320 (3D) Introduction to Professional Practice	NURS 330 (4D/2C) Essentials for Nursing Practice			15 credits
Semester #2	NURS 353 (6D/4C) Health Alterations I	NURS 360 (3D) Evidence Based Practice	Elective (3D) Cross-Cultural Experience- International				13-16 credits
Semester #3	NURS 400 (3D/2C) Care of Childbearing Family	NURS 410 (3D) Trends & Issues	NURS 440 (4D/3C) Health Alterations II	Elective (1D) General Education for Nursing			15-16 credits
Semester #4	NURS 430 (3D/3C) Population Health	NURS 442 (3D) Leadership Principles in Nursing	NURS 451 (1D) NCLEX Test Taking Strategies	NURS 490 (1D/4C) Nursing Capstone			15 credits
<div>NURSING COURSE</div> <div>GEN ED REQUIRED COURSES</div> <div>SCIENCE REQUIRED COURSES</div> <div>PROGRAM REQUIRED COURSES</div> <div>ELECTIVE COURSES</div> <div>D = Didactic C = Clinical</div>							120-124 total credits

## Appendix C: Four Semester HONORS Curriculum

Nursing Curriculum Honors						Updated 12/13/2024
Freshman Fall	MATH 120 (3D) Intermediate Algebra	PSYC 100 (3D) Personhood	SSCI 100 (3D) Justice	HONORS 150 (6D)		15 credits
Freshman Spring	CHEM 150 (4D) General, Organic, and Biological Chemistry	PSYC 150 (3D) General Psychology	HONORS 190 (6D)	NURS 105 (1D) Success Strategies for Pre-Nursing		13-14 credits
Sophomore Fall	BIOL 221 (4D) Human Anatomy & Physiology	PSYC 240/MTH 240 (3D) Statistical Procedures	PSYC 310 (3D) Lifespan	HONORS 250 (6D)		16 credits
Sophomore Spring	BIOL 222 (4D) Human Anatomy & Physiology II	BIO 367 (4D) Microbiology	NURS 220 (3D) Nutrition Essentials	HONORS 290 (6D)		17 credits
Semester #1	NURS 311 (3D) Pathophysiology	NURS 312 (3D) Pharmacology	NURS 320 (3D) Introduction to Professional Practice	NURS 330 (4D/2C) Essentials for Nursing Practice		15 credits
Semester #2	NURS 353 (6D/4C) Health Alterations I	NURS 360 (3D) Evidence Based Practice	Elective (3D) Cross-Cultural Experience- International			13-16 credits
Semester #3	NURS 400 (3D/2C) Care of Childbearing Family	NURS 410 (3D) Trends & Issues	NURS 440 (4D/3C) Health Alterations II	Elective (1D) General Education for Nursing		15-16 credits
Semester #4	NURS 430 (3D/3C) Population Health	NURS 442 (3D) Leadership Principles in Nursing	NURS 451 (1D) NCLEX Test Taking Strategies	NURS 490 (1D/4C) Nursing Capstone		15 credits
<div> <div>NURSING COURSES</div> <div>GEN ED REQUIRED COURSES</div> <div>SCIENCE REQUIRED COURSES</div> <div>PROGRAM REQUIRED COURSES</div> <div>ELECTIVE COURSES</div> <div>HONORS</div> <div>D = Didactic C = Clinical</div> </div>						120-125 total credits



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