



COLLEGE OF NURSING
UNIVERSITY OF SOUTH FLORIDA

Local Outreach—Global Impact

Preparing 21st-century nurses to promote health and wellness in our community and around the world.

MASTER OF SCIENCE IN NURSE ANESTHESIA PROGRAM
STUDENT HANDBOOK
OF COLLEGE POLICIES AND PROCEDURES

The announcements, information, policies, rules, regulations and procedures set forth in this Handbook are for information only and are subject to continual review and modification.

The University of South Florida is committed to the principles of equal education, equal access and equal employment opportunities without regard to race, color, marital status, sex, religion, national origin, disability, age, and veteran or disabled veteran status as provided by law and in accordance with the University's respect for personal dignity. These principles are applied in the conduct of University programs and activities of facilities and services.

USF College of Nursing Overview Statement

The College of Nursing Master of Science in Nurse Anesthesia Handbook is a written compilation of current university and College of Nursing (CON) policies and procedures. It is updated on an ongoing basis. It is the student's responsibility to know and comply with all college and university policies and procedures. USF and College of Nursing policies are subject to change and apply to all students regardless of their choice of catalog. The most recent version of the handbook will be posted on the USF College of Nursing website.



Table of Contents

Table of Contents.....	3
President’s Welcome.....	8
College of Nursing Dean’s Address.....	9
College of Nursing’s Mission and Vision.....	10

Overview of Master of Science in Nurse Anesthesia Program

A. Program History	11
B. Philosophy, Mission and Goals	11
C. Our Philosophy.....	11
D. Program Goals.....	11
E. Accreditation and Certification.....	12
F. Program Overview.....	12
G. Plan of Study.....	13
H. Simulation Procedures.....	13
I. Associated Textbooks.....	14
J. Tuition and Miscellaneous Expenses.....	14
K. Clinical Experience.....	15
L. Clinical Sites.....	15

MSNA Program Guidelines

A. Compliance.....	16
B. USF Health Email.....	16
C. Student Professional Conduct.....	17

D. Cell Phone Use.....	17
E. Narcotics Administration.....	18
F. Substance Abuse Philosophy & Guidelines.....	18
G. Technical Standards.....	19
a. Sensory.....	19
b. Motor.....	19
c. Cognitive.....	20
d. Behavioral.....	20
H. Individual Clinical Site Policies.....	20
I. Clinical Site Daily Assignments, Supervision and Responsibilities.....	21
J. Preoperative and Postoperative Visits.....	21
K. Program Dress Code.....	21
L. Clinical Experience Record Submission.....	22
M. Evaluations.....	22
a. Medatrax Case Tracking Tips.....	22
b. Medatrax Daily Evaluation Process	23
N. Care Plans.....	24
O. Care Plan Objectives.....	24
P. Clinical Midterm & Summative Performance Evaluations.....	25
Q. NBCRNA Self Evaluation Examination (SEE).....	25
R. Comprehensive Examination.....	25
S. Time Studies.....	26
T. Philosophy of Supervision/Requirements.....	26
U. Adverse Anesthetic Outcome Procedure.....	27
a. Blood-borne Pathogen Exposure	28
b. Airborne Infectious Exposure	28

V. Academic Calendar.....	29
W. Social Media Policy.....	29

Progression Policy & Evaluation Guidelines _____

A. Didactic Evaluation Guidelines.....	30
B. Grading.....	31
C. Withdrawal Policy.....	31
D. Incomplete Grades.....	31
E. Clinical Evaluations.....	32
F. Frequency of Evaluations.....	32
G. Clinical Discipline & Evaluation System.....	33
H. Didactic Faculty & Clinical Site Evaluations.....	33
I. Graduate & Employer Evaluation.....	33
J. Student Recognition Awards.....	33

Attendance & Vacation/Leave Procedures _____

A. Attendance.....	34
B. Tardiness & Sick Days.....	35
C. Extended Illness/Leave.....	36
D. Pregnancy.....	36
E. Vacation/Personal Days.....	36
F. Armed Forces Leave.....	37
G. Jury Duty.....	37
H. Funeral Time.....	37
I. Unauthorized Leave/Absence.....	37

J. On call/Off Hour Shifts.....	38
K. Weather Emergency Situations.....	38
a. Guidelines for Student Scheduled for On-Campus Classes in Existing or Evolving Emergency Situations	

Committee Meetings _____

A. Committee Meetings.....	39
----------------------------	----

General Considerations as a SRNA _____

A. Pre-Clinical Introduction Checklist for Clinical Residency I-IV.....	39
B. AANA Membership.....	40
C. Nursing License	40
D. ACLS / PALS / BLS	40
E. Pagers	41
F. ID Cards	41
G. Class Preparation	41
H. Academic Integrity	42
I. Work Guidelines	42
J. Remediation Policy	42
K. Clinical Probation	43
L. Due Process	43

Students with Disabilities _____

a. Students with Disabilities	43
-------------------------------------	----

Religious Observances _____

a. Religious Observances	44
--------------------------------	----

Classroom Policies

a. Class Attendance & Decorum	43
b. Evaluations	44
c. Preparation	44
d. Selected Academic Policies and Procedures for USF Graduate Students.....	45

Student Resources

a. Computer Resources/Accounts	45
b. The Writing Studio	45
c. Canvas.....	46
d. Registration.....	46
e. Technical and Online Support.....	46
f. USF Library.....	46
g. Health Science Library.....	46
h. Tutoring.....	46

USF Student & Professional Organizations

A. USF Student & Professional Organizations.....	47
B. Sigma Theta Tau International	47
C. International Health Service Collaborative (IHSC)	47
D. USF Health Services Corps	47

Nurse Anesthesia Contract

A. Nurse Anesthesia Contract.....	48
-----------------------------------	----

USF President Judy Genshaft

President's Welcome

Thank you for taking time to learn more about the University of South Florida System and the University of South Florida in Tampa, one of America's leading public research universities. The students, faculty and staff of USF in Tampa, **USF St. Petersburg** and **USF Sarasota-Manatee** are working hard every day to develop bold ideas and forge innovative solutions to the world's biggest problems. We are a community of scholars, scientists and innovators who value excellence in all we do and work collaboratively with our partners to create healthy, prosperous and sustainable communities.



I have been proud to serve as President of USF and CEO of the USF System since 2000. More than 48,000 students are served each year across the USF System. The USF System has an operating budget of approximately \$1.8 billion with more than \$440 million each year in new research grants and contracts. USF was founded in 1956 as the first public university planned and built in the 20th Century, and today the USF System has an annual economic impact of more than \$4.4 billion on the Tampa Bay region.

The institutions of the USF System are separately accredited by the Commission on Colleges of the Southern Association of Colleges and Schools, and have distinct missions and locally-developed strategic plans. Reporting directly to the Office of the President are all Vice Presidents; and the Regional Chancellor of USF St. Petersburg and the Regional Chancellor of USF Sarasota-Manatee. USF Vice Presidents with system-wide authority and responsibilities chair **USF System Advisory Councils** consisting of representatives from all USF institutions and regional campuses.

I invite you to explore our web site and discover the many ways the USF System community is working every day to make the future better for all, both here in the Tampa Bay Region and around the world.

Judy Genshaft, Ph.D.
President

Message from the Dean, College of Nursing

Welcome to the USF College of Nursing!

As a leading college of nursing, we feel privileged to educate, collaborate and practice with the best and brightest in the industry.

We believe in using local outreach to have a global impact, preparing 21st-century nurses to address the health care needs of diverse communities through excellence in research, education, and clinical care. Nursing is multidimensional and offers many career conduits of success, including clinical, advanced practice, research, education, and leadership.

Over the last few years, we have undergone a process of appreciative inquiry to develop our strategic plan. This plan will advance the college's global prominence in research, education and practice. We have ambitious goals of being a top 20 National Institutes of Health (NIH) research team and a top 25 U.S. News & World Report nursing program. The foundation has been set to meet these goals with exceptional faculty and staff, and a research team that is forging ahead with innovative research concepts. We know these goals would not become reality without the help of the entire team.



Our educational programs set the standards and enable students to work interprofessionally with colleges from [USF Health](#). USF Health's mission is to envision and implement the future of health. It is the partnership of the [USF Health Morsani College of Medicine and Heart Institute](#), the College of Nursing, the [College of Public Health](#), the [College of Pharmacy](#), the [School of Physical Therapy and Rehabilitation Sciences](#), the [Biomedical Sciences Graduate and Postdoctoral Programs](#), and USF's multispecialty physicians group. USF Health is an integral part of the University of South Florida, a high-impact, global research university dedicated to student success.

Our students, faculty, staff, alumni and clinical partners are all essential to what makes the USF College of Nursing an educational powerhouse. We are proud of our accomplishments and look forward to charting new territory with you. We wish you success in this exciting adventure of becoming a professional USF Bull Nurse!

Sincerely,

Victoria L. Rich, PhD, RN, FAAN
Senior Associate Vice President, USF Health
Dean, College of Nursing

College Of Nursing Mission and Vision

Mission:

USF College of Nursing provides innovation and leadership in preparing 21st-century nurses to demonstrate excellence in research, education, and clinical care while promoting health and wellness in our community and around the world.

Vision:

By educating students from diverse demographics, we ensure that our USF Bull nurses mirror the populations they serve.

MASTER OF SCIENCE IN NURSE ANESTHESIA PROGRAM

Welcome to the University of South Florida College of Nursing's (CON) Nurse Anesthesia Program. This handbook is designed for Nurse Anesthesia students, clinical coordinators, preceptors and faculty. The handbook provides program information, serves as a guide, and facilitates the implementation of the procedures and guidelines. The purpose of the handbook is to assist students in understanding student responsibilities and rights as well as familiarize the student with the program and their new environment. If the answers to any pertinent questions cannot be found in this handbook, the program administrator should be consulted. Find out more information at <http://health.usf.edu/nursing/academics/crna/>

A. Program History

The Nurse Anesthesia Program received initial accreditation from the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) on June 3, 2006 and accepted the first class of students August 26th 2006. In 2011, the USF Nurse Anesthesia Program received a maximum 10-year reaccreditation from the COA. The program was also incorporated into the Center for Advanced Medical Learning and Simulation (CAMLs) in March of 2012 becoming the first Nurse Anesthesia Program to be housed inside a state-of-the-art simulation center.

B. USF College of Nursing Nurse Anesthesia Philosophy and Mission and Goals

The **mission** of the Nurse Anesthesia Program is to foster the development of safe, clinically sound nurse anesthesia practitioners in a student centered environment; to incorporate the educational research and scientific discovery that reflects the standards of the American Association of Nurse Anesthetists; and to provide care embracing innovation and supporting student engagement according to the recognized principles of patient safety and respect.

C. Our philosophy focuses on promoting the nurse anesthetist role recognizing that it positively impacts the delivery of healthcare to all individuals equally. Specifically, each individual is entitled to safe anesthesia care and equal access without regard to race, gender, religion, national origin, disability, age, or sexual orientation.

D. Program Goals

1. To instill the desire and need to perform, analyze and disseminate quality advanced research, and evidence based-practice encouraging lifelong learning.
2. Encourage academic success to a diverse student population with honorable character and intellectual ability who have a desire to pursue an education in anesthesia and advanced nursing practice.
3. To provide a solid clinical and academic foundation necessary to produce competent professional practitioners in the field of anesthesia with a challenging curriculum that incorporates the academic and clinical experience essential for the practice of safe anesthesia and to compete in the global market.
4. Acquire advanced knowledge and competence in nurse anesthesia practice in various anesthesia delivery settings to diverse patient populations of all acuity levels, including the rural and underserved population.

E. Accreditation and Certification:

The baccalaureate, master's, and DNP programs at the USF College of Nursing are accredited by the Commission on Collegiate Nursing Education.

[Commission on Collegiate Nursing Education \(CCNE\)](#)

655 K Street, NW, Suite 750
Washington, DC 20001
(202) 887-6791

The Master of Science in Nurse Anesthesia Program is accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs until 2021.

[Council on Accreditation of Nurse Anesthesia Educational Programs \(COA\)](#)

222 S. Prospect Avenue
Park Ridge, Ill 60068-4001
Office: (847) 655-1160
Fax: (847) 692-7137
Email: Accreditation@coa.us.com

The USF College of Nursing has Florida Board of Nursing approval.

[Florida Board of Nursing](#)

4052 Bald Cypress Way, Bin #C02
Tallahassee, FL 32399-3257
(850) 488-0595

The University of South Florida is accredited by Commission on Colleges of the Southern Association of Colleges and Schools (SACS) to award degrees at the baccalaureate, master's, specialist, and doctoral levels.

[Commission on Colleges of the Southern Association of Colleges and Schools \(SACS\)](#)

1866 Southern Lane
Decatur, GA 30033
(404) 679-4500

The USF Health Simulation Consortium is one of three universities in Florida accredited by the Society for Simulation in Healthcare, however USF is the only fully accredited university in all areas of Assessment, Research, System Integration and Teaching/Education.

[Society for Simulation in Healthcare](#)

2021 L Street, NW, Suite 400
Washington, DC 20036
(866) 730-6127

Nurse Anesthesia Program Description

F. Overview

The purpose of the University of South Florida College of Nursing Master of Science in Nurse Anesthesia Program is to provide a solid clinical and academic foundation necessary to produce competent professional practitioners in the field of anesthesia. Applicants for this program must have an earned bachelor's degree from an accredited program, be a registered nurse and meet admission

requirements. The curriculum is consistent with the American Association of Colleges of Nursing (AACN) *Essentials of Master's Education for Advanced Practice*, *The National Task Force for Nurse Practitioner's Criteria for Evaluation of Nurse Practitioner Programs*, and The American Association of Nurse Anesthetists (AANA) *Scope and Standards for Nurse Anesthesia*. The Nurse Anesthesia Program at the USF College of Nursing was developed following the AANA, and the Florida Board of Nursing Scope of Practice in addition to the AANA Standards of Care. These standards may be viewed at www.aana.com.

The program consists of a challenging, **full-time** 28-month, and 72 credit-hour academic and intense clinical curriculum. The curriculum is delivered over seven continuous semesters, matriculating a new cohort in in August and concluding in December. The program's clinical curriculum progresses in a manner independent of the college calendar. This means that students will not follow the academic calendar. You can view the USF Nurse Anesthesia curriculum at <http://health.usf.edu/nursing/academics/crna/curriculum>

The faculty is comprised of Board Certified Registered Nurse Anesthetists (CRNAs), physicians to include anesthesiologists, doctorally prepared advanced registered nurse practitioners in a variety of specialties and scientists dedicated to produce nurse anesthetists who will provide safe, quality anesthetic care to our citizens. A complete listing of faculty and staff is available at: <http://health.usf.edu/nursing/academics/crna/team>

G. Plan of Study

The course of study was developed in accordance with the standards established by the Council on Accreditation of Nurse Anesthesia Programs (COA). The program is didactically frontloaded with integrated clinical exposure beginning in semester II. The first year didactic phase consists of coursework in Anatomy, Physiology, Pathophysiology, Advanced Health Assessment, Chemistry, Physics, Pharmacology, Advanced Physiology and Pathophysiology, Immersive High-Fidelity simulation lab, Foundations of Anesthesia Practice, CRNA Role Development, Statistics, Anesthesia Across the Lifespan, Advanced Principles of Nurse Anesthesia Practice, Research and Evidenced-Based Practice - A complete listing of course curriculum and progression is available at: <http://health.usf.edu/nursing/academics/crna/curriculum>

The program curriculum is designed to incorporate innovative technology, including human anesthesia simulation, to facilitate an integration of the knowledge, skills and aptitudes necessary for the production of a competent and proficient nurse anesthetist.

Students participate in high fidelity simulated experiences within the patient simulation center to help prepare them for entry into their clinical practice. Through these simulated clinical experiences, first year Student Registered Nurse Anesthetists (SRNA's) are introduced to the essentials of safe anesthesia practice, anesthesia equipment, the pre-anesthesia assessment of the patient, and specific anesthesia management and monitoring techniques. Students proceed to full-time clinical residency in semester IV, and when all pre-requisite coursework has been successfully completed. Advanced didactic courses, clinical correlation conferences, and senior seminar continues part-time through the end of the Nurse Anesthesia Program.

Due to the integrated and specific nature of the program students are not allowed to transfer academic credits into the program.

H. Simulation Procedures

Simulation is required as an integral part of the SRNA's education while enrolled in the Nurse Anesthesia Program at USF. Students will receive instruction on the theory of simulation education and be oriented to the simulation center prior to engaging in simulated learning experiences. All individuals involved in simulation/animal labs will be required to sign a confidentiality agreement and a video/photo release agreement.

Participation in Simulation Lab I-III using low/high-fidelity (e.g. 3G, 2G, task trainers, etc.) is mandatory. Animal or cadaveric labs may also be used as a supplement to the educational program. Students who feel they are unable to participate in animal or cadaveric labs will be reassigned to another task (per faculty discretion based on available alternatives).

Simulation may be used for student assessment, evaluation, remediation, and/or high stakes exams as well as Observed Structure Clinical Exam (OSCE) when appropriate to ensure competency in any particular topic/area of concern. Scheduled high stake exams will be conducted in semester IV and at any time during the training program at the discretion of the Program Director, Assistant Director, or Simulation Director.

The Simulation Coordinator must approve all absences. Students will be assigned a percentage of their clinical residency course objectives to participate as proctors in the simulation courses. This requirement is designed to demonstrate the senior student's ability to teach as required by the Council on Accreditation (COA). Students who are absent from simulation lab may be required to make up the missed lab during another week.

I. Associated Textbooks

A list of basic standard texts is distributed during orientation. Textbooks are also located at the Shimberg Health Sciences Library, and the bookstore: <http://health.usf.edu/shimberg-library/> Students are required to have, hard copy or electronic versions of ALL REQUIRED TEXTBOOKS throughout the program.

J. Tuition and Miscellaneous Expenses

The program offers a flat rate of \$800 per credit hour for tuition and associated fees. Students will incur additional expenses while enrolled in the program. An **estimated** cost of these additional expenses is listed below. Please note that these are estimated costs and other expenses may occur.

- a. Students are required to have continual health insurance coverage and must provide proof of such to the program. Students may seek coverage privately through a qualifying spouse or through the University.
- b. Professional Events: \$500.00 per year. Students are required to go to at least one professional meeting AND participate in one community service each year. The professional event could be either a state meeting (FANA) or a national meeting (AANA). Community service events may be selected by the SRNA, individually or in coordinated groups, and are at the Program Director's and Assistant Program Director's discretion. Community service events shall not include events where the student receives any tangible return (free conference registration for volunteering at the event).
- c. USF Lab coat. Estimate = \$80.
- d. USF Nurse Anesthesia professional polo shirt. Estimate = \$30.

- e. A board review computer program will be required for your Comprehensive Anesthesia Review course in your last semester. (NGR6491) = approximately \$300.
- f. A laptop computer with Wi-Fi capabilities, a camera and microphone, with high-speed internet connection capability is required. Proctorio software (provided at no additional charge) will also need to be added to the laptop. Estimate = \$500
- g. Self-Evaluation Exam (SEE Exam) - Students are required to take this exam at the end of the first and second years. The cost is approximately \$250 for each exam.
- h. ACLS/PALS/BLS Certification - Required for the program. Estimated cost = \$175.
- i. Medatrax subscription for case logs - Estimate cost = \$100/year. Subscription begins in Semester II.
- j. Textbooks - Estimate average - \$750 per year

K. Clinical Experience

The second year of study consists of a four clinical semester designed to prepare the student for a broad scope of practice in a variety of settings. The clinical practice component is 16 months long during which time students experience a full scope of practice at some of the more than 35 clinical sites, including four metropolitan Level I or II trauma centers, two large regional Veterans Administration centers, and a nationally recognized cancer institute. The staff at each facility is dedicated to assuring students receive a wide range of skills that will assure a full scope of practice experience. Clinical student registered nurse anesthetist (SRNA) residents provide anesthesia care to a diverse population of patients and are involved in an unrestrained range of clinical anesthesia experiences within multiple practice settings. Management of all patients, including pediatric, adolescent, obstetric, adult and gerontological clients with acute and chronic health problems is an important aspect of the experience. Therefore, recognition of the limits of practice and the need for collaboration with physicians and other health professionals within the surgical team and community is emphasized. The preceptorship and clinical practice component incorporate institutions that serve rural, underserved and culturally diverse populations. As the practicum advances, students take on an increasing responsibility for the planning and implementation of anesthesia care. As a result, the graduate will be prepared to function independently in collaboration with the surgical team, and in a fashion consistent with the scope of nurse anesthesia practice.

L. Clinical Sites

The following is a sample of current clinical sites. This list may be subject to change.

Bayfront Health - Brooksville
 Bayfront Health - Spring Hill
 Bayfront Health - St. Petersburg Medical Center
 Blake Medical Center
 C.W. Bill Young Bay Pines VA Medical Center
 Florida Hospital - North Pinellas

Florida Hospital - Tampa
Florida Hospital - Wesley Chapel
H. Lee Moffitt Cancer Center
Heart of FL Regional Medical Center
James A. Haley Tampa VA Medical Center
John's Hopkins All Children's Hospital Lake Wales Medical Center
Manatee Memorial Hospital
Mease Countryside Hospital
Mease Dunedin Hospital
Morsani Surgery Center
Morton Plant Hospital
North Florida Regional Medical Center
Northside Hospital St. Petersburg
Sarasota Memorial Hospital
Shriners Hospital for Children
St. Anthony's Hospital
St. Joseph's Hospital
Tampa Bay Surgery Center - Midtown
Tampa Bay Surgery Center - Uptown
Tampa General Hospital

Master of Science in Nurse Anesthesia Program Guidelines

A. Compliance

College of Nursing policy requires students to maintain continuous compliance with all Castle Branch credentials. Students who are found to be non-compliant, or who have fallen out of compliance, at any time, due to the expiration of one or more required items in Castle Branch, may be removed from clinical. The inability to report to clinical due to lapses in professional credentials may jeopardize a student's ability to progress in the Nurse Anesthesia Program.

Students are expected to begin their credentialing process for their next clinical site at least six to eight weeks prior to their next rotation, and to complete and submit any necessary paperwork. The contact list and credentialing process is subject to change; students should check the clinical site modules on the Canvas CRNA Advising site: <https://usflearn.instructure.com/courses/931796> for the latest credentialing requirements and processes that must be followed and completed prior to a rotation at the assigned clinical site. Students should also use the email contact information listed in the clinical site modules on the Canvas CRNA Advising site to contact the respective Clinical Coordinator two weeks prior to their rotation. Students should contact the clinical residency course instructor for any concerns. Due to limitations at certain clinical sites not all students will rotate to all clinical sites.

Background checks and drug screenings are required according to the College of Nursing's Academic Policies and Procedures and to comply with individual clinical site contractual language and facility credentialing requirements.

Please refer to the Graduate Handbook for Clinical Programs (Section 6) regarding background check and drug testing requirements.

The cost of all health screenings will be the sole responsibility of the student. Information and instructions can be found at: <https://www.castlebranch.com/>

For Castlebranch.com questions, please contact the Castle Branch Service Desk at 888.723.4263 x7196

B. USF Health Email

It is the student's responsibility to access My USF Health email account and read all program related email **at least daily**. The student is strongly encouraged to set up their mobile devices to receive Nurse Anesthesia program emails and to provide alerts to incoming Nurse Anesthesia Program email.

C. Student Professional Conduct

Program insists that SNRAs conduct themselves as professionals at all times. Students must adhere to the code of ethics for Nurse Anesthetists, [https://www.aana.com/docs/default-source/practice-aana-com-web-documents-\(all\)/code-of-ethics-for-the-crna.pdf?sfvrsn=d70049b1_2](https://www.aana.com/docs/default-source/practice-aana-com-web-documents-(all)/code-of-ethics-for-the-crna.pdf?sfvrsn=d70049b1_2) Professionalism includes, but is not necessarily limited to the following. The Student Registered Nurse Anesthetist (SRNA) demonstrates:

- Courtesy: Displays mutual respect in working with others
- Honesty: Is honest and fair in his/her actions
- Punctuality
- Accountability: Behaves in an ethical, responsible and dependable manner
- Motivation: Demonstrates incentive for independent learning
- Appropriate use of language
- Positive attitude: Demonstrates initiative and enthusiasm
- Personal cleanliness/grooming
- Willingness to receive instruction and professional criticism
- Vigilance
- Integrity: Adheres to moral and ethical codes of conduct
- Humanistic/Altruistic concern for the welfare of patients and colleagues

Failure to meet "Student Professional Conduct" criteria may result in a verbal warning, written counseling statement, academic jeopardy or recommendation for dismissal from the program.

D. Cell Phone Use

Cell phones shall be turned off and stored away from the desk/table during class time. Students are NOT allowed to use cell phones in the operating room suite. The student may use cell phones on breaks if necessary. In the clinical setting cell phone use should be limited to direct communication, specifically related to nurse anesthesia practice and training with clinical preceptors. Faculty will address repeated or objectionable disruptions.

E. Narcotics Administration

As registered nurses in the state of Florida, you are bound by the Board of Nursing's (BON) Nurse Practice Act and its regulations regarding the handling and administration of narcotics and other controlled substances. Please review the BON regulations if you are not clear about your responsibilities regarding the safe and professional handling of narcotics and other controlled substances.

The Nurse Anesthesia Program have developed guidelines designed to provide guidance in addition to the BON directives. These guidelines do not replace or modify those provided by the BON. Failure to follow these Guidelines may result in dismissal from the program.

1. Students who have access to controlled substances or have controlled substances issued to them in the course of their practice will accept narcotics or controlled substances only for their patient(s).
2. Students will not "waste" or "witness" waste for another provider. Waste is defined as the difference in the amount removed from pharmacy supplies and that which is reported as administered to the patient.
3. Students will not "trade" medications, which have been drawn into syringes for unopened ampoules or vials.
4. Students must appropriately label all medications they prepare and should not accept medications or administer medications, which are not properly labeled.
5. Students must adhere to all policies and procedures of the clinical site when securing or administering controlled substances.
6. Students should report instances of non-compliance of which they have personal knowledge to their on-site clinical coordinator.

All clinical sites will be informed of these guidelines; we welcome their input for further development.

F. Substance Abuse Philosophy & Guidelines

In accordance with state and federal laws, the USF Nurse Anesthesia Program prohibits the unlawful or unauthorized manufacture, distribution, dispensation, or possession or use of alcohol or illicit drugs by employees or students.

The Nurse Anesthesia Program at the University of South Florida acknowledges the high rate of substance abuse in the anesthesia profession. As such, if you have a history of substance abuse, are in or completed a recovery or treatment program, we strongly urge you to consider the serious risks to yourself by entering into the anesthesia profession. We suggest you consult your counselor, therapist, or other health care professional for guidance and strongly urge you to consider an alternative, professional pathway within the nursing profession.

Students who enter into the nurse anesthesia profession with a documented history of substance abuse may be subject to monitoring which may exceed that which is customarily performed. The goal of this monitoring is to ensure patient safety as well as the individual's compliance with their treatment program. Application of the guidelines for the monitoring or supervision of students with a history of substance abuse may vary on an individual basis.

Students may be required to undergo drug testing before attending some clinical facilities.

Students are responsible for the cost of drug screening if the clinical site requires this testing. The program retains the right to randomly test students for illicit substances to ensure patient safety. Should a student be considered high risk or concerns expressed by clinical faculty over possible illicit substance use or inappropriate use of alcohol, the program reserves the right to immediately test students to ensure patient safety. All testing costs will be the responsibility of the student.

Students actively engaged in a recovery program must make their program administrator aware that they are seeking entry into an anesthesia program. They may be asked to provide contact information to the program's administrator. The program administrator may then be contacted by the Nurse Anesthesia Program Director to ensure compliance by the student with their program. These students may also be required to disclose their history to each clinical site. As a result of this disclosure, the clinical site may refuse to allow the student to perform clinical activities at their institution. Acceptance into the Nurse Anesthesia Program does not guarantee placement in a clinical site, as each agency has its own specific prerequisites and background screening requirements. In the event the student cannot be placed at any clinical site for any reason, the student may be unable to complete the program requirements and thus, would not be able to graduate.

G. Technical Standards

The nurse anesthesia practice is physically, mentally, and emotionally challenging. The provision of safe, competent anesthesia services requires that practitioners demonstrate cognitive, technical, observational, and behavioral skills. Students need to have the physical and emotional endurance to adapt to a demanding graduate program. Successful progression through the Nurse Anesthesia Program requires the following abilities:

Sensory

- Discriminate variations in human responses to disease using visual, auditory, tactile and other sensory cues.
- Discriminate changes in monitoring devices and alarms using visual and auditory senses.
- Communicate clearly and effectively in English through oral and written methods in order to communicate with other health care providers and patients of all ages.
- Comprehend written and verbal communications in English.

Motor

- Coordinate gross and fine motor movements and the senses of touch and vision to insert intravascular access, administer regional anesthetic techniques, and perform airway management.
- Demonstrate sufficient physical strength to perform airway management, move and position patients and equipment, including the ability to lift > 35 lbs. and perform adequate chest compressions associated with administering CPR.
- Sufficient stamina to stand or sit for prolonged periods of time.
- Safely maneuver in the operating room and other anesthetizing locations.
- Respond appropriately to alarms and changes in patient conditions that require physical interventions.

Cognitive

- Use reason, analysis, calculations, problem solving, critical thinking, self-evaluation and other learning skills to acquire knowledge, comprehend and synthesize complex concepts.
- Interpret information derived from auditory, written and other visual data to determine appropriate anesthetic management plans.
- Apply theoretical knowledge to practice to provide safe anesthetic care.

Behavioral

- Demonstrate personal and professional self-control as well as tactfulness, sensitivity, compassion, honesty, integrity, empathy, and respect.
- Work flexibly and effectively in stressful and rapidly changing situations.
- Cooperate with other members of the health care team to provide a therapeutic environment and safe patient care.

H. Individual Clinical Site Policies

In addition to USF, CON and program policies and procedures, students are responsible to review and adhere to all individual specific hospital and anesthesia departmental policies and guidelines set forth by the clinical sites. All students must be eligible to rotate to all COA approved clinical sites, and understand that they may be assigned to any USF Nurse Anesthesia Program COA approved clinical site during the course of their program.

Students are responsible for providing their own transportation to their assigned clinical site. Depending on place of residence, some students may have to travel more than 60 miles to their assigned clinical site. However, there are some clinical sites (not the Program) that **currently** provide housing to the students rotating at that site free of charge. We believe that all of our clinical sites provide a unique and valuable experience. Students should expect to rotate to multiple clinical sites throughout their clinical residencies. Requests in writing to attend or to be excluded from a specific clinical site will be considered prior to clinical scheduling.

Clinical Site Coordinators, Associate Coordinators, and/or Education Department Coordinators will orient students to the facility either prior to or on the first day of clinical rotation. Orientation should include the physical site, operating room, staff and personal, and all equipment and work areas. Expectations should be reviewed at this time to include expected report times, call shifts, beeper call, off shifts and weekend time. Students are responsible for all information presented during the orientation. **Students should not be placed into the operating room suite until proper orientation has been completed.**

I. Clinical Site Daily Assignments, Supervision, and Responsibilities

Students are assigned to surgical cases each day by the Clinical Site coordinator (or their designee). Opportunities for advanced clinical experiences or increased autonomy are contingent upon student performance, demonstrated capabilities, and knowledge base as agreed upon by the Program Director, clinical coordinator, and attending anesthesiologists. A clinical preceptor (CRNA or Anesthesiologist) will directly supervise the student. The clinical preceptor must be immediately available at all times in the anesthetizing area (OR suite or non-OR location) when the student is managing the anesthetic. An anesthesia resident or graduate registered nurse anesthetist may not be responsible for the direct supervision of a student. *(In accordance with AANA COA Standards and Guidelines).*

Every attempt will be made to complete assignment schedules on the afternoon prior to the clinical experience day in order for students to prepare adequately for the experience.

Responsibilities in preparing for clinical experiences are specific to the clinical institution and its policies and will be discussed during the orientation. However, in general, students are responsible for:

- Preparing in advance for all patients to whom they are assigned to administer anesthesia
- Obtaining their patient assignment prior to the clinical day
- Performing a preoperative patient interview/assessment on all available cases
- Preparing a comprehensive, individualized anesthetic management plan for every clinical case with a written plan due for two cases/day unless otherwise directed by program faculty
- Discussing the plan of care with both the supervising CRNA and Anesthesiologist
- Implementing an appropriate plan of care
- Performing a postoperative patient evaluation on all cases as appropriate
- Documenting all case information, time logs, and required evaluations in the Medatrax Nurse Anesthesia Student Tracking system

Students are required to follow the infectious disease and OSHA blood-borne pathogen standards as well as AANA practice standards in all clinical areas. Failure to comply with hospital, University or AANA policies or standards may result in automatic dismissal from the program.

J. Preoperative and Postoperative Visits

Students are expected to perform preoperative visits and post-operative patient assessments of all patients for whom they are assigned to administer an anesthetic at all clinical sites, unless the patient has been discharged home.

Preoperative visits can include a full assessment in the holding area. Postoperative visits also include PACU checks after the transfer of care.

Students should wear appropriate professional attire or scrubs when visiting patients. Students are responsible for complying with the guidelines of clinical sites requiring providers enter quality assurance information; more specific information should be discussed during the clinical site orientation. An unsatisfactory grade for clinical practicum may result from failure to comply with this directive.

K. Program Dress Code

The program requires that clean, casual business attire be worn in the classroom. Attire at the clinical sites is to be professional at all times. Scrub attire is NOT allowed in the classroom setting. Students should change into scrub attire for simulation activities. Students should review the clinical site modules on the CRNA advising page in Canvas for any additional dress code instructions specific to each clinical site.

In the clinical setting, acceptable jewelry includes stud earrings - one per ear lobe. No dangle earrings are permitted. Acceptable rings include wedding band sets and or smooth band rings. Ornate rings should be avoided as they carry an increase in infection rate. Visible body jewelry must be removed, including tongue piercing or any facial piercings. Tattoos cannot be visible. Hair must be neatly groomed, and clean. Nails are to be clean and short and follow the CDC recommendations (less than

¼ inch length, no acrylic/synthetic nail tips). Students should review the clinical site modules on the CRNA advising page in Canvas for any additional instructions specific to each clinical site with regard to appearance, attire, nail polish, etc. When visiting patients the student should be wearing scrubs, with a lab coat or be dressed in business casual clothing. USF Identification is to be worn at all times. Each facility may also require a name identification badge. Failure to adhere to the dress code is grounds for clinical warning, probation or additional action. Students must adhere to the dress code policy of individual clinical sites or academic campuses as indicated.

L. Clinical Experience Record Submission

Students are required by the AANA Council on Accreditation of Nurse Anesthesia Programs and the National Board of Certification and re-certification for Nurse Anesthetists (NBCRNA), to maintain a record of clinical experiences. Clinical experiences should be counted according to the COA Guidelines for Counting Clinical Experiences (October 2015), which is available in the modules on the CRNA advising page in Canvas. Students are required to complete clinical case count records and daily/weekly time logs in Medatrax. All clinical case records and time log information are to be submitted within 7 days. Failure to submit clinical case count and time log information in a timely and accurate manner may result in an unsatisfactory grade for the clinical practicum. A software license for PDA remote case data entry (windows or OS) is recommended. Students are also required to subscribe to the Medatrax system at their own expense. Students will be oriented to this system during the first semester. Falsification of student case records and experiences is grounds for disciplinary action including dismissal from the program.

M. Evaluations

Throughout the program students are evaluated formally in the following seven areas:

- Preparation
- Pre-anesthesia assessment
- Induction / Maintenance
- Emergence / Post-anesthesia management
- Anesthesia skills
- Professional attributes

Students must demonstrate the integration of the theoretical knowledge into the clinical area in order to progress through the curriculum. The purpose of daily evaluation is to aid the SRNA in designing an appropriate anesthesia care plan and to provide the supervising MD/CRNA a means of evaluating the student's performance. Semester grades, and midterm and summative evaluations will be drawn from these daily evaluation tools. It is the student's responsibility to take the initiative to ask their supervisor about their performance and feedback and to solicit evaluations on a daily basis. It is imperative that students submit the required evaluative documentation as proof of safe practice and progression in the program. Daily clinical evaluation forms must be completed in Medatrax and USF Clinical Residency Daily Evaluation Signature Log Forms are to be submitted in Canvas to the respective clinical residency course. Failure to submit documentation will reflect negatively on the student and may result in failure for the Clinical Residency.

Medatrax Case Tracking Tips

- 1) Document your cases ASAP after they are completed.

- 2) Mask management is when you mask the ENTIRE case not just prior to intubation. Primarily will be pediatric cases and ECTs.
- 3) Analgesia for labor includes: administration of medication through an epidural or IV; making recommendations to nursing staff for labor pain management. Each time that the epidural is dosed counts in the requirement.
- 4) Definition of TIVA: a general anesthetic with the use of only IV agents throughout the operative period. NO inhalation agents are used.
- 5) In order to count the case, you must have been present and involved in critical portions of the case and you have been entered into the anesthetic record.
- 6) Remember the ambulatory/outpatient category. This is for any patient who will be discharged rather than admitted to the facility.
- 7) Emergency cases are any case that cannot be put off or scheduled at a later time due to increased risk to the patient. Usually these are cases that are not on the schedule at the beginning of the clinical day but must be completed in that clinical day. Other hints are: the patient has a full stomach but needs surgery before the ideal NPO window has been achieved, something is infected, gangrene, ruptured, at risk of rupturing, or is bleeding, etc.
- 8) If you are collecting data on your smart phone, make sure you push the sync button so that the data is transferred to the network.
- 9) Avoid using the “other” categories without asking the clinical residency course instructor for advice on where a case should really be counted. “Other” should need to be used only very rarely.

Medatrax daily evaluation access

** Your AANA number is your user name and your initial password.*

- 1) Log into Medatrax.com with your user name and password.
- 2) Select the daily evaluation - it should show that you have pending evaluations for you to complete.
- 3) The next page will show a calendar, select the date for the evaluation
- 4) The form will open up. Enter your student user name and password AND the clinical site user name and password.
- 5) You must select a clinical site and input a preceptor name or you will not be able to submit the form. Forms submitted without a preceptor name typed at the top will not be counted.
- 6) Enter the case demographic data.
- 7) Have the CRNA complete the form.
- 8) At the bottom of the form, enter your user name/password and the clinical site user name/password. 9) Select Submit.
- 10) You should get a message that the form has been submitted.

**Completion of Daily Evaluations is the responsibility of the students. Preceptor names must be entered on the Daily Evaluation or it will NOT be counted. Please note that forgery of a digital signature for daily evaluations is considered academic dishonesty and reason for dismissal of the student from the program. **

All USF SRNAs in full-time residency courses or in Introduction to Clinical Residency will be required to obtain the signature of the evaluating preceptor, using the USF Clinical Residency Daily Evaluation Signature Log Form, as an attestation that they have in fact personally submitted the SRNA Daily Clinical Evaluation via Medatrax using their electronic signature/password. At no time is an SRNA

ever permitted to submit their own Daily Clinical Evaluation, *EVEN IF THE PRECEPTOR TELLS YOU TO DO SO*. **A breach of this policy by any SRNA will be grounds for immediate dismissal from the USF Nurse Anesthesia Program.** An audit of your Daily Clinical Evaluations must demonstrate a preceptor signature for each Daily Clinical Evaluation submitted through Medatrax. Any Daily Clinical Evaluation without an accompanying signature will not be counted or considered as part of your clinical residency course.

N. Care Plans

Care plans are invaluable tools created to reinforce didactic knowledge in physiology, pathophysiology, and pharmacology as well as clinical knowledge for procedures, surgeries and potential complications. Students should plan the anesthetic for the proposed case with care plans; therefore, they should be specific for each patient taking into consideration all patient co-morbidities. It is important for students to experience a wide variety of all types of anesthetic techniques and agents while in the student role. Preceptors should remain open to new techniques that students may propose for the anesthetic plan within the preceptor's comfort level.

O. Care Plan Objectives

- Apply the information in the preoperative assessment to formulate an anesthetic management plan.
- Prioritize patient existing physiologic and psychological problems and their impact on the anesthetic plan.
- Discuss the pathophysiology of the patient's existing co-morbidities
- Discuss the implications of the patients existing medication regime and the potential impact on the anesthetic plan.
- Formulate a complete anesthetic plan for preoperative, induction, maintenance, emergence and postoperative. Have an alternate plan for anticipated failures or complications with original plan.
- Discuss the rationale for anesthetic agents chosen for each anesthetic agent.
- Outline the surgical procedure, expected and acceptable blood loss, duration, position and potential intraoperative complications
- Discuss the postoperative anesthesia plan of care

Care plans develop sound anesthesia planning and judgment. They are to be written in advance and submitted to the supervising staff prior to the case. It is the clinical preceptor's responsibility to review the care plans and provide student feedback; students will benefit from experienced practitioner's feedback. It is the SRNA's responsibility to discuss the plan of care with the supervising CRNA and MD prior to administering the anesthetic. At no time should a student administer any anesthetic without first discussing it with the assigned preceptor for the day.

Students will not be able to develop the co-morbidity and medication part of the care plan during situations where the students have not had the opportunity to see the patient or know the co-morbidities prior to surgery. This portion of the care plan will be fulfilled at the end of the day and returned to the clinical coordinator or preceptor for their review. While this is not the ideal situation it is unacceptable for students to omit this portion of the care plan.

Students must learn to be flexible and develop strategies to adapt to change. There will be occasions when you will have developed a care plan for a patient but with changing assignments you will end up

providing anesthesia for an unexpected case. This is a common occurrence in all clinical sites and we understand the frustration this causes, particularly for the beginning student. Students are expected to develop complete care plans each clinical day; these will be evaluated by the preceptor of the day and returned to student to facilitate clinical learning. They will be part of the student's final term assessments. Written care plans are to be completed in all Clinical Residencies I-IV; as the student progresses through the clinical residency courses, written care plans will reflect more complex cases and higher acuity of patient population.

Students must submit all care plans via Medatrax; the care plan template is located on the Medatrax site located at www.medatrax.com. Your semester grade will reflect the quality and the number of daily clinical evaluations and care plans the clinical coordinator and the program administration has received.

P. Clinical Midterm & Summative Performance Evaluations

Clinical summative evaluations are conducted at the end of each semester respectively for each student. Mid semester evaluations are only required to be completed by the clinical site coordinator for students who are not meeting the expectations of the Clinical Residency so that the appropriate action can immediately take place. The summative evaluations are primarily based on evaluations and input from the clinical coordinator, daily clinical preceptors, Clinical Residency Faculty of Record, and/or the Program Director or assistant director. It is critically important that students take the initiative to improve their performance based on the feedback received from daily evaluations by clinical instructors. Students must obtain a satisfactory grade (S) on the summative evaluation in order to successfully progress through the program.

Students will be counseled on their areas of weakness and may be required to undergo weekly assessments updates with the Assistant Program Director and/or Program Director. Students on probationary status may be required to complete extensive remediation in areas of weakness including but not limited to simulation testing, additional reports or papers and additional testing of didactic knowledge. Students who do not improve by the subsequent evaluation of the probationary semester will be in jeopardy of an unsatisfactory of the Clinical Residency or academic dismissal. Deficiency in, or violations of, clinical or professional standards may be sufficient to support immediate academic failure or dismissal notwithstanding success in other areas of the academic record.

Q. NBCRNA Self Evaluation Examination (SEE)

All students are required to take the SEE twice during the program. The exam fees are not covered by the College of Nursing and students should be prepared to incur this expense. The Program Director/Administrator will submit the student Roster to the NBCRNA, and the student will pay student fees directly to the NBCRNA. Timelines for taking the exam and submitting results to the Program Director will be communicated to the students. Students who fall below the national average in any category for the SEE exam will be assisted to develop a remediation plan to strengthen identified weaknesses.

R. Comprehensive Examination

Students are required to pass a comprehensive exam during the last semester to meet USF Master's Program completion requirements. Students who do not successfully pass the first attempt will be required to complete a remediation and allowed two additional attempts. There is a cost associated

with each attempt. After a failed third attempt the student will be required to enroll for the subsequent semester and allowed to re-test in the following semester.

S. Time Studies

Weekly time logs will be required every semester beginning in Semester IV with the full-time clinical phase. The purpose of the time logs is to evaluate the number of hours students are committing to the program and to ensure accountability. Students are to use the following guidelines to calculate hours. Class hours are to be recorded on a per credit basis. A 3 credit hour course will be calculated as 3 hours per week, study time is calculated as 3 hours of study time per week for every one credit hour of coursework taken. As an example a 3-credit course would have 9 hours of study time allotted. Students' clinical hours will vary with each site; students should be prepared for a variety of shifts including days, evenings, nights and weekends. Clinical hours documented on the Medatrax log are only hours in which SRNAs are in the facility for the purpose of anesthesia delivery or who are taking *in-house call*. Students are not allowed to report Clinical Time or Anesthesia Time for excess time they elect to take for their own convenience, only 30 minutes for setup time is allowed. Falsifying Medatrax logs is in violation of the USF Academic Integrity policy.

Research hours are any hours in which students are actively involved in research including preliminary searches, data collection and writing.

Miscellaneous hours include professional meetings, anesthesia departmental meetings, grand rounds or any other anesthesia-related learning task.

It is necessary for the program to ensure that students spend a reasonable amount of time at clinical and didactic phases. This time study tool will be used for program assessment and improvement as well as clinical site assessment and improvement.

T. Philosophy of Supervision/Requirements

The Nurse Anesthesia program believes the highest quality Nurse anesthetists will be best promoted by a 1:1 mentored program in the Junior year with appropriate progression to a 1:2 mentorship in the Senior year. The goal of the program is for students to progress to the highest complexity of cases with mentored education. It is expected that towards the completion of the program the students will develop into practitioners with the most advanced skills and of highest level of competency. An initial 1:1 mentored program takes exceptional dedication from our clinical sites and we acknowledge this sacrifice. It is our expectation that this sacrifice along with an appropriate 1:2 mentorship in the senior year will produce CRNAs that will be able to manage the most complex cases the first day of employment.

Clinical residency course faculty will provide course objectives for each rotation, as a way of informing clinical coordinators of students' level in terms of knowledge development, and learning expectations. CRNAs, or anesthesiologists will supervise students at the clinical sites in all areas including non-anesthetizing areas.

Anesthesia shall be administered only by institutionally credentialed CRNAs or Anesthesiologists supervising the SRNA in an approved clinical site at a facility-approved anesthetizing location.

While in the Clinical Residency I course as juniors, students are directly supervised at all times and they are instructed, and counseled by CRNAs or anesthesiologists on a 1:1 ratio. A 1:1 supervisory ratio is maintained during the Clinical Residency I to ensure immediate hands on response by the clinical preceptor at any time necessary. In Clinical Residency II-IV students are considered "Seniors." Seniors are still supervised on one-to-one ratio, however they are given more autonomy in delivery of anesthesia; on occasion students may be supervised in a ratio of two to one. This means one anesthesiologist may cover two students. Decisions for this supervision will depend on the student's knowledge and ability, the physical status of the patient, the complexity of the anesthetic and or the surgical procedure, and the experience of the clinical preceptor. It is the clinical coordinator's responsibility to ensure appropriate use of this procedure.

The program is designed to be a mentored program in which active constant teaching is promoted during the Clinical Residency. At no time in Clinical Residency I should a preceptor be assigned another student or commit to any other task while supervising a student. Preceptors are to always maintain direct supervision being able to be physically present for immediate assistance when students are managing the case alone. Direct supervision is defined as the supervisor being in the anesthetizing and operating area dressed in operating room attire, available immediately and is not committed to any other assignment.

A student's clinical experiences will be developmental and progressive in nature, increasing in complexity as the student demonstrates capability. Students will be oriented to the assigned clinical site anesthesia department, operating suites, anesthesia equipment, and narcotic/medication administration policies by the site clinical coordinator or their designee.

Operating rooms are unpredictable; the clinical schedules will often change many times during the course of the day; cases may be canceled, or room assignments may change and sometimes emergencies will be added. An emergency case is never planned; surgery often goes longer than predicted; we ask that students make the most of their time on non-class days to optimize their clinical learning experience. This may include staying late to provide a continuum of care through emergence and post anesthesia care unit deposition. Anesthesia departments will release you from the operating room in a timely manner for university functions (classes or seminar), which is a priority.

It is expected that all clinical sites, anesthesiologists and CRNAs at affiliated clinical sites adhere to all ASA and AANA guidelines and to the standards and clinical privileges outlined by each facility for the safe delivery of anesthesia to patients. Periodic site visits will be made by CRNA Program faculty to ensure smooth clinical experiences for all parties.

U. Adverse Anesthetic Outcome Procedure

Any student that is involved in an adverse outcome or untoward anesthetic event must notify the clinical coordinator of the site immediately as well as the Assistant Program Director and Program Director at the earliest possible time, but no later than 24 hours following the event. This type of incident includes but is not limited to dental injury, nerve injury, medication error, unrecognized esophageal intubation, anaphylactic shock reaction, wrong side anesthetic or surgical procedure, cardiopulmonary arrest, patient death, or student exposure to blood borne pathogens (needle exposure or splash to the eye, etc.), or airborne pathogens (i.e. tuberculosis). The student must complete a university incident report (available in the modules on the CRNA advising page in Canvas), which must be submitted to the Assistant Program Director AND Program Director with 24 hours of the incident. Upon review of the report for completion, clarity, and detail, the program will

then forward the form to the appropriate College of Nursing Operational Officer (as is indicated on the form) on behalf of the student.

Blood-borne Pathogen Exposure

1. Wash wound with soap and water.
2. If a splash, rinse with water, irrigate eyes with water unless the facility has an eye wash station, then use that.
3. Notify your CRNA Clinical Coordinator or Medical Director/Anesthesiologist.
4. The student must immediately contact the Medical Health Administration Office in the College of Medicine: 813-974-3163 or page the Occupational Health Nurse at 813-216-0153.
5. If during normal business hours, the student should contact Employee Health at their clinical facility so they can help facilitate testing of the patient/source. Outside of normal business hours the student should contact the Nursing Supervisor at the clinical site. If directed to go to the emergency room, the student may be responsible for the ER bill.
6. The student must also immediately contact the Nurse Anesthesia Program Director and/or Assistant Director. Prompt reporting is for the protection of the patient, student, college, and university. Failure to notify the appropriate individuals or report an incident will be cause for immediate dismissal from the program.
7. The student must access their Hepatitis B Immunity Status results from Castle Branch and email that to the Medical Health Administration Office in the College of Medicine at MHA@health.usf.edu
8. The student must complete a university incident report form (located in the modules on the CRNA advising page in Canvas) that must be completed and submitted back to the Assistant Program Director AND Program Director within 24 hours of the incident. Upon our review of the report for completion, clarity and detail, the program will then forward the form to Associate Dean of Finance, Administration and HR (as indicated on the form) on behalf of the student. (Again, the student should send the form to the Assistant Program Director AND Program Director, and not directly to the Associate Dean).

Airborne Infectious Exposure

www.usfmha-idexposure.com

1. Exposure Definition: Shared breathing space with someone with suspected or known infectious airborne condition (TB, Varicella, etc.) when the infectious person is not wearing a N95 Respirator.
2. Action: The student must immediately contact the Medical Health Administration Office in the College of Medicine: 813-974-3163 or page the Occupational Health Nurse at 813-216-0153.
3. Action: If during normal business hours, the student should contact Employee Health at their clinical facility. Outside of normal business hours the student should contact the Nursing Supervisor at the clinical site.
4. To Prevent Exposure: Wear Fit-Tested Approved N-95 Respirator during contact with suspect or known airborne infectious patients.

Prompt reporting is for the protection of the patient, student, college, and university. Failure to notify the appropriate individuals or report an incident will be cause for immediate dismissal from the program.

In the event a student is implicated in an event or contacted by a lawyer regarding an incident, they are not to discuss the case until they have consulted the Program Director; the appropriate course of

action will be delineated at that time. Students are covered under the University of South Florida Certificate of Liability Protection; all possible events will be handled through this entity.

Students will also be held responsible for reporting and completing the adverse anesthetic outcome procedure/incident/occurrence report as required by the clinical site. This may include initiation of an incident report and or participation in root cause analysis process. Reporting the adverse event to the University of South Florida does not substitute or replace the proper reporting policies for clinical sites. Students must adhere to both the University and the Clinical Site Policies and Procedures on adverse events.

V. Academic Calendar

The USF Nurse Anesthesia Program operates on an alternate calendar independent of the USF academic calendar. Students will follow the course schedules as outlined in the respective syllabi, as well as the clinical calendar/schedule as designated by the Nurse Anesthesia Program faculty and clinical sites. Changes to the course and clinical schedules may be made as necessary, and students will be notified either in person or by email as soon as possible. Please see the USF website for the USF academic calendar: <http://www.usf.edu/registrar/calendars/> and the USF CON for the College of Nursing calendar of events: <http://health.usf.edu/nursing/>. Students may be required to attend clinical site orientations which may be scheduled outside of class or clinical schedules. Students are strongly advised to check with the Program before purchasing flights or scheduling extended trips away from the program to ensure that there are no conflicts with scheduled clinical site orientations, exams, or other program scheduled events.

W. Social Media Policy

Please reference the 2018 Graduate Handbook for Clinical Programs, p.19.

1. Students must not transmit or place online individually identifiable patient information; this includes photographs of any kind.
2. Students must observe ethically prescribed professional patient-nurse boundaries.
3. Students should understand that patients, colleagues, institutions, and employers may view postings.
4. Students should take advantage of privacy settings and should seek to separate personal and professional information online.
5. Students should bring content that could harm a patient's privacy, rights, or welfare to the attention of appropriate authorities.
6. Standards of professionalism are the same online as in any other circumstance. This includes postings regarding the University, the College of Nursing, faculty, staff, and peers.
7. Do not share or post information or photos gained through the nurse-patient relationship.
8. Maintain professional boundaries in the use of electronic media. Online contact with patients blurs this boundary.
9. Do not make disparaging remarks about patients, employers, or co-workers, even if they are not identified.
10. Do not take photos or videos of patients or any clinical setting on personal devices, including cell phones.
11. Promptly report a breach of confidentiality or privacy.

Consequences for Violation of any of the above policy or standards:

Violations of any policy or standard will be reviewed by the Program Director and Associate Dean of Graduate Nursing and may result in a grade penalty, course failure or dismissal from program.

Progression Policy & Evaluation Guidelines

A. Didactic Evaluation Guidelines

According to the College of Nursing Progression Policy listed in the USF Graduate Catalog:

http://www.grad.usf.edu/inc/linked-files/Catalog%20and%20Policies/2017-2018/Section_21_CON.pdf

Graduate students must earn the grade of 'B' or higher in each required course in their respective nursing program. An unsatisfactory ('U') or any grade below a 'B' is not acceptable.

Graduate students must also maintain an overall grade point average of 3.00 in order to be considered in academic "good standing". Students also must meet any special conditions of their admissions. All grades will be counted in computing the overall grade point average. Students must have an overall GPA of 3.00 at the completion of their respective program, or they will not be awarded a degree from the University of South Florida.

If a student earns a grade below a 'B' or receives a 'U' in a required course, she/he must repeat the course. The course must be taken in the next semester that it is offered and the student must earn a 'B' or higher. Any student, who earns below a 'B' (or 'U') in two or more required courses or earns below a 'B' (or 'U') in a required course twice, will be dismissed from the College. Unsuccessful course attempts, including situations where a student participates through the Withdrawal deadline and does not pay for the courses (aka: Cancelled for Financial Reasons), will count toward the progression policy. The Dean of the College of Nursing, or designee (Vice Dean of Academic Affairs), will notify students who are dismissed, in writing. Students may petition for readmission pending approval of their respective Director of their concentration/program. A petition must be submitted to the Vice Dean of Academic Affairs and the Chairperson of the appropriate Committee.

Nurse Anesthesia students that earn a grade below a B may effectively be delayed by one year in their program of study. Nurse Anesthesia coursework will only be offered once per year. The student may also have to audit any other anesthesia coursework, or register for a self-study course with a requirement to pass the course exam even if previously successfully passed, at the discretion of the Program Director and the Vice Dean of Academic Affairs. The student will be billed according to USF policy for the required course credit. This is to ensure that students have recent and current anesthesia knowledge upon entry into the clinical residency phase. It is important for the student to be aware of federal student aid guidelines, which currently do not provide student aid for audited coursework and may not provide student aid for self-study coursework.

Students must have current anesthesia didactic knowledge prior to entry into the clinical residency phase.

B. Grading

USF Graduate Catalog: http://www.grad.usf.edu/inc/linked-files/Catalog%20and%20Policies/2017-2018/Section_21_CON.pdf

98-100= A+	84-86= B	70-73= C-
94-97= A	80-83= B-	67-69= D+
90-93= A-	77-79= C+	64-66= D
87-89= B+	74-76= C	60-63= D-
Below 60= F		

C. Withdrawal Policy

USF Graduate Catalog: http://www.grad.usf.edu/inc/linked-files/Catalog%20and%20Policies/2017-2018/Section_21_CON.pdf

Withdrawals are limited to 1 per course, with a limit of 2 per undergraduate or graduate program. Withdrawals are defined as officially withdrawing from any class after the Drop/Add period, and before the final Withdrawal date as outlined in the Academic Calendar. Any student withdrawing in excess of stated policy may be dismissed from the College of Nursing unless the College of Nursing has pre-approved a documented medical and/or emergent situation.

Students in the Nurse Anesthesia Program will not be allowed to withdraw from any anesthesia course without setting their progress back a full year. If a student must withdraw, they will be subject to auditing or completing required self-study coursework for all anesthesia coursework.

D. Incomplete Grades

Students who are otherwise passing and have completed a majority of the work required but who have a legitimate reason for being unable to complete nursing course requirement may request an "I" grade. An "I" grade indicates incomplete coursework and may be awarded to graduate students at the discretion of the instructor.

No incompletes will be granted for anesthesia related didactic coursework; anesthesia coursework builds upon the preceding course. Incompletes related to clinical courses may be issued in rare circumstances, at the discretion of the clinical residency faculty and Program Director, will not be extended through the following clinical semester course, and must be satisfied prior to beginning the next clinical course. Each anesthesia course must be completed with a B or better, or Satisfactory, before proceeding to the next semester of coursework.

Please see the USF Graduate Catalog: Academic Policies regarding incomplete grades: http://www.grad.usf.edu/policies_Sect7_full.php#standards

E. Clinical Evaluations

Students who receive an unsatisfactory grade for their clinical performance may be dismissed from the program, regardless of academic standing in other classes. If at any time during the clinical rotation the student places the patient in an actual or potentially hazardous or unsafe situation or the faculty judges the student to be deficient in clinical competence for patient care responsibility, the student will fail the course regardless of previous clinical performance.

If a student or preceptor identifies areas of concern in the student's overall performance, it is an expectation of the preceptor to discuss this with the student as well as to notify the Clinical Site Coordinator and the Nurse Anesthesia Program. The notice should be in writing by the preceptor to the Clinical Coordinator hence the Coordinator is responsible for adding their written assessment of the student performance and sending it to the Nurse Anesthesia Program. All information, verbal or written, will be considered in determining clinical competence. If a student fails to improve or achieve clinical/didactic competencies for the course by midterm he/she will be placed on a probationary status. If by the end of the semester no improvement is noted he/she will receive an unsatisfactory grade for the clinical residency course.

It is imperative that Clinical Preceptors and Clinical Coordinators address student concerns or weakness as soon as possible to give students the best chance of improving and preventing a poor mid-term or summative evaluation. We ask that preceptors be honest and fair in their daily evaluations of students. Students will only become the excellent practitioners we expect with solid and honest feedback.

The purpose of student evaluations is to develop exceptional practitioners. The preferred method is for the clinical preceptor to conference with the student on a one-to-one basis in a semi private appropriate environment in which honest feedback may be given. Students should be given the opportunity to discuss the preceptor's assessment and comment on it. At no time should a student evaluation be submitted to the program without the opportunity for the student to see it.

Patient safety and welfare are the most critical criteria of student clinical rotation. If the College of Nursing or on-site personnel observes or becomes aware that a student has placed a patient in an actual or potentially hazardous or unsafe situation ("Clinical Deficiency"), the student may be removed from the course, assigned an Unsatisfactory (U) grade and/or recommended for dismissal from the College. The U grade may be assigned regardless of the previous clinical performance or other nursing courses. The clinical residency course instructor has the responsibility to determine what constitutes safe practice in the clinical setting at all times. The clinical residency course instructor must notify the student of the decision and within 10 school days from the notice of the instructor's decision.

F. Frequency of Evaluations

Clinical Residency Experience and Courses: Daily clinical evaluations are required of every student in all residency phases, including Introduction to Clinical Residency. Clinical coordinators will oversee clinical preceptors in the preparation of student evaluations. Students are responsible for requesting daily evaluations and submitting them through Medatrx. Summative Clinical Residency Evaluations will reflect quality and quantity of daily evaluations. Students that fail to submit 80% of evaluations may receive a grade of unsatisfactory for the clinical residency course.

The clinical residency instructor will conduct a summative evaluation which will be the basis of the satisfactory or unsatisfactory grade for the course. All feedback from the clinical site/s, verbal or written, will be considered in determining the course grade.

G. Clinical Discipline and Evaluation System

Patterns of withholding the opportunity for preceptors to complete evaluations will result in disciplinary action. If a student is experiencing problems at a clinical site, the assistant director and/or the Director may elect to place the student at another clinical site to be evaluated by another anesthesia group of

providers. If a student is determined to be a danger to patients, staff, or self, the student will be removed from clinical until further evaluation can be achieved. Any incident that is considered a sentinel event or places a patient's safety at risk is enough for a student to be dismissed from the Nurse Anesthesia Program. This includes any incident in which a student does not adhere to practice standards set forth by the American Association of Nurse Anesthetist. These standards may be found at <https://www.aana.com/>

If a student is removed from the Clinical Site for any reason, the student must surrender their clinical site issued ID badge no later than within 24 hours, or as soon as requested by the Clinical Site.

If the course instructor determines that the student has not completed or met the objectives for any Nurse Anesthesia Clinical Residency, the student will be required to repeat the Clinical Residency, which will effectively delay graduation. Should the student fail to meet objectives and learning outcomes in the repeated Clinical Residency they will be dismissed from the program.

H. Didactic Faculty and Clinical Site Evaluations

Students will evaluate all courses and all lead faculty of, courses, clinical sites, anesthesia departments, and individual preceptors at the end of each semester. Evaluations are anonymous and electronic. Professional and appropriate constructive comments are expected with the intent of improving the program, faculty, and improvement in the clinical experience. Evaluations are intended to aid in strengthening and improving the overall program. Students should keep in mind that their comments will be taken very seriously to promote the best educational experience for future students.

I. Graduate and Employer Evaluation

New USF Nurse anesthesia graduates will be required to complete a post graduate evaluation as part of the USF Nurse anesthesia ongoing program development. This evaluation will be sent to the graduate within one year after graduation; all data will be anonymous.

New graduates will also be required to submit employer information so that employers will have the opportunity to complete an employer evaluation of program graduates. This evaluation will be sent one year after graduation. Responses will be shared with the USF College of Nursing for ongoing program development; all data will be anonymous.

J.. Student Recognition Awards

Outstanding student awards can be awarded per university policy if a non-biased selection process is utilized. The Nurse Anesthesia Program recognizes outstanding students by selecting one of more students for the following awards: Academic Achievement, Program Director's Award and the Agatha Hodgins Award. One or more students may be selected in each category. The selection process is based on faculty recommendation, cumulative GPA, clinical coordinator/preceptor evaluations, and volunteerism.

Attendance & Vacation/Leave Procedures

A. Attendance

Attendance to classes is not optional. Students are required to attend all classes as well as any conferences, morbidity and mortality conferences, grand rounds, workshops, simulation sessions, lectures, meetings associated with student officer positions, scheduled clinical site orientations, and

other meetings as announced. The program recognizes the challenges that students face with regard to competing responsibilities of caring for their dependents/children, sick spouse, transportation issues, or other family emergencies that may arise. The student is strongly encouraged to discuss these scenarios with their family in advance and formulate a contingency plan for these types of occurrences. Any student who is absent from class without a physician's note will have one day deducted from his or her **16** personal days allotted for the program. Personal business (such as nonemergency physician appointments for students or dependents) must be handled on the student's own personal time off and should not conflict with didactic or clinical commitments.

Student must notify the program by sending one email to the CRNA administration office (aka Academic Services Administrator), course instructor and Program Director, if he/she is not attending class for any reason. This email must be sent to all three at the same time as soon as possible before the class.

During the clinical residency phase students must attend some required university or program functions; administrative time will be given for these functions. Administrative time is at the sole discretion of the Program Director. Approved administrative time will be documented on the final clinical schedule. Examples of approved administrative leave may include FANA meetings, AANA meetings, CRNA Lobby Day, SEE exam, NCE board review course, mission trips, SRNA organization duties, and community events. Administrative time for these events will be at the Nurse Anesthesia Director's discretion and may or may not be full days off. Proof of attendance is required and can either be a certificate of completion (CEU certificate) or a letter/email from a faculty member or another acceptable proof of attendance that can attest to your participation in the event. These should be submitted to the Nurse Anesthesia Program upon completion of the event.

Students who are granted administrative time off to attend professional events, community events, or other program events are expected to attend the entire event for which administrative time off was granted. Students who are unable to attend an event for any reason must notify the program director, clinical residency course instructor and clinical site coordinator as soon as possible so that it can be adjusted in the records. Notification should be in writing via email copying the program director, clinical residency course instructor, clinical site coordinator, and administrative program specialist documenting the change. The student's clinical time tracker will be adjusted and the student will be expected to attend clinical or class as per program requirements. Students who are on academic probation, delinquent in case counts, or other course work may not be granted time off.

A student must use one of their personal days to attend any employment interviews. Approved vacations will exempt the student from attendance to clinical requirements, and no call scheduled during said time. However, during vacations students will be held accountable for material covered in classroom and clinical setting. Student with a planned/approved vacation should discuss this planned absence with all instructors of record for classes from which the student will be absent. Whenever possible, material covering these topics will be made available on Canvas.

Examinations/quizzes may only be made up in the event of an emergency. Vacations should not be planned during the time exams are scheduled. Prior arrangements must be made with the course instructor for make-up work. Students who are absent from any didactic or clinical commitments without prior notification to the Program and/or Clinical Site may be dismissed from the Program. All violations will be documented and become a part of the student file. Individual instructors may issue additional policies as part of the course syllabus.

B. Tardiness & Sick Days

Tardiness includes reporting late for classes, clinical shifts; it also includes taking excessive time for lunch or breaks in the clinical area. Excessive tardiness will result in counseling by both the clinical site's coordinator, Clinical residency course Instructor, and/or the didactic course and may result in disciplinary action. All counseling sessions will be documented and become part of the student's file. If a student has prior knowledge that he/she may be late in arriving to class or clinical they must notify the appropriate instructor or clinical faculty, including the clinical coordinator and assigned preceptor, as well as the respective OR/Anesthesia desk, as soon as possible prior to the scheduled arrival time

When a student reports more than two hours late to Clinical, the student is to be considered absent. Students who report late for a class that is already in progress should wait until the next class break before entering the room. Students who miss more than half of the scheduled class will be considered absent and one personal day will be deducted from the personal days allotted during the program. Any pattern of tardiness will be addressed, documented, and may result in disciplinary action. Individual instructors may issue additional policies as part of the course syllabus.

Any call-outs from Clinical must be communicated as soon as possible prior to the scheduled clinical shift in the following order: A student sends one email to the Program/Clinical Residency faculty, the clinical coordinator and Academic Services Administrator. In addition, the student must also provide any additional notifications (email, text message, etc.) to the clinical preceptor, OR Desk and/or Clinical Coordinator as instructed by the clinical site.

Students missing class or clinical time due to illness may be required to provide the Program Director with proper documentation prior to returning. Any student who is absent from class without a physician's note will have one day deducted from his or her personal days allotted for the program. A student who calls in sick the day of an examination/quiz should contact the appropriate faculty person as well as the Program Director and documentation of illness will be required for the missed exam from a health care provider. At the discretion of the course director, a different exam may be given as an option for make-up. In the clinical area, there is no "sick time". Students should call the OR desk directly and call or text the clinical coordinator as soon as possible before the start of their missed shift. Any student who is too ill to attend clinical duties should also contact the clinical coordinator, Clinical Residency course instructor, and the Academic Services Administrator via copy on one email to document any missed shifts as soon as possible before the missed shift. Clinical time missed due to illness will be charged as a personal day. Students who do not have any remaining personal days will need to make up the missed clinical shift. Any failure to report absences, will be addressed, documented, and may result in dismissal from the program.

C. Extended Illness/ Leave

Any student who is absent due to an extended illness (greater than ten days) must schedule an appointment to discuss the matter with the Program Director. Special consideration may be granted when proper documentation is provided. Emergency leave may be granted upon request to the Program Director and clinical site coordinator. If leave is in excess of 2 weeks this will be considered a leave of absence from the program; the student may then be placed in the next class of students on a space-available basis, essentially delaying the student's graduation by at least twelve (12) months. Cases of extended leave due to illness or injury will be handled on a case-by-case basis and the program progression plan will be largely dependent on the coursework and/or residency course that is

incomplete. Students who take a leave of absence due to illness or injury will be required to provide documentation from a physician allowing them to return to the program.

D. Pregnancy

It is the student's responsibility to safeguard their health. Students are advised to notify the Nurse Anesthesia Director and Clinical Coordinator as soon as they are aware of their pregnancy. If a pregnant student is required to stop attending practicum, she will be required to accept a medical leave of absence from the program. The student may then be placed in the next class of students on a space-available basis, essentially delaying the student's graduation by at least twelve (12) months. If a student chooses to continue in the program while pregnant, she must be under the care and release of her obstetrical physician. The program requests the student submit a signed waiver releasing the school from any responsibility associated with the pregnancy and/or birth. There may be hazards to both mother/fetus related to exposure to the anesthetic agents and the operating room environment.

E. Vacation/Personal Days

The entire Nurse Anesthesia Program operates outside of the academic calendar. Students in full-time clinical residency are expected to be available for clinical scheduling 24 hours per day, 7 days per week, 365 days per year up to 48 hours per week. The only exception are class days, 10-hour rest periods prior to class time, administrative days, and days when a student is using one of their approved personal days.

Personal days will be for the student to use at their discretion and should be requested prior to publication of the clinical schedule. Time may be used in blocks no greater than five (5) days at a time. Additionally:

- a. Students are restricted to no more than 7 personal days per semester.
- b. No more than 5 personal days at any one clinical site.
- c. The last 4 weeks clinical training students will not be allowed to use this time in blocks of greater than 2 days.
- d. No time off will be allowed to students in specialty rotations.
- e. A clinical site may limit the number of students granted vacation time.

Exceptions to this rule may be addressed with the Nurse Anesthesia Director on an individual basis. No time off will be allowed if the student is in a specialty rotation (pediatrics, obstetrics, cardiothoracic, etc.).

Requests for days off must be submitted in writing via sign-up form to the clinical residency course instructor, as requested during the appropriate request period. Time off will be granted at the discretion of the clinical residency instructor, who will have final approval of all time off.

No time-off will be unilaterally approved either by the Program or the clinical site once the Clinical Schedule has been published. Likewise, students may not request special scheduling by the clinical site. All requests must be presented **to the program first** and upon the Program's approval, they must be presented to the Clinical Coordinator for approval. In order to present the request to the Clinical Coordinator, students must compose one email addressed to the Clinical Coordinator copying Program/Clinical Residency Faculty and Academic Services Administrator. To grant the leave

request, the clinical sites approval must be received from the Clinical Coordinator by the program via reply-all to that email. Any requests deemed excessive or unreasonable will be denied. A clinical site may limit the number of students granted vacation at any one time. Time off may not be scheduled on an orientation to a new clinical site, or during a specialty rotation (pediatrics, obstetrics, cardiothoracic, etc.). Students should not schedule vacations or time away from the program until all required personnel time has been approved by the Program. End of program terminal vacation is not permitted. Vacation days may be granted during the last four weeks of clinical residency and/or didactic program on a limited basis only. There will be no bargaining for vacation days by leveraging make up days elsewhere. Students who are on academic probation, delinquent in case counts, or other course work will not be granted time off.

F. Armed Forces Leave

In accordance with Federal mandate all reserve status soldiers will be granted a time to complete military duty. This includes one weekend per month and 2-weeks/ year for sustainment training. It is recommended that students defer their military training until after graduation of the program as allowed by all armed forces for soldiers in educational program. Should a student decide not to defer their military training while in the program the student is required to submit their yearly training schedule to the Program Director and each clinical site they attend. It will be student's responsibility to ensure the appropriate scheduled time off for completion of military duty with the clinical sites. Per Federal regulation each clinical site MUST release the student/soldier at a minimum of 9 hours prior to military duty hours to ensure adequate rest for training missions. Students are required to submit orders for the two-week training period. In the case of a student being called to active duty in support of a military mission the student will be placed on leave of absence from the program. Upon the students return they will resume the program. Depending on the period of time activated and their status in the program the student may be required to audit specific anesthesia coursework. Active duty orders must be presented to the Program Director prior to deployment.

G. Jury Duty

Students called for jury duty will be granted time off upon submission of proof to the Nurse Anesthesia Program Director. The student will have to submit copies of official notices from the county, state or federal court assigning the jury duty, as well as proof of attendance to court. Jury duty time, depending on time obligation, may have to be made up at the discretion of the Nurse Anesthesia Program Director.

H. Funeral Time

Students are granted three (3) bereavement days for the death of an immediate family member, one (1) day may be granted for the funeral of others. Students must notify the program director and the clinical site when funeral time is necessary. This will not be deducted from the personal days given to the student.

I. Unauthorized Leave/ Absence

Students absent from class or clinical beyond 72 hours without approved leave in writing will be considered to have resigned from the program. Students absent fewer than 72 hours without approval may resume their training only after written approval and consent by the Nurse Anesthesia Director and any missed time must be made-up prior to the end of the program.

J. On Call/ Off Hour Shifts

Students must receive experience in all phases of anesthesia including evenings, nights, weekends and holidays. Students are expected to perform off shift hours and/or on call hours either in house or from home. The on call or off shift rotations will be set by the clinical site as per the standards at that site. However, any time a student is called back to conduct anesthesia during the on call period it will be considered clinical time. If a student is called back and works excessive hours in a 24 hour period it is the responsibility of the Clinical Coordinator to ensure the student is given appropriate time off at the end of the call shift. No student will be expected to work the day after they have worked all night or a majority of the night. Excessive hours worked by students without appropriate time off for rest is a patient safety issue and will not be tolerated by the program.

K. Weather Emergency Situations

Guidance for Students Scheduled for Clinical Practice Experiences in Existing or Evolving Emergency Situations

The following guidance is provided for students who may be scheduled to participate in clinical practice experiences or other related school activities during hurricane watch and warning conditions or other similar emergency (or potential emergency) situations.

We do not want or expect students to place themselves in harm's way or in jeopardy. Students, like all citizens, should follow directives from public/emergency preparedness officials. These include no driving in areas where unsafe conditions exist or may develop. Students are expected to use best judgment and to always err on the side of safety.

Florida experiences a "hurricane season" from June 1st through November 30th each year. As such, healthcare facilities most often have a Hurricane Policy or other Emergency Weather Conditions Policy in place, to ensure adequate staffing during these events. Students should follow the policy of their assigned clinical site which may include traveling to the clinical site ahead of severe weather conditions and staying until it is safe to travel again. It is the student's responsibility to be aware of such policies and discuss the site's expectations with their Clinical Coordinator ahead of severe weather conditions.

If at any time a student feels travel is not safe, he/she should not travel. The student is expected to give notice as soon as possible and notify the preceptor, the site, and clinical faculty in situations where inclement weather or other circumstances preclude travel. The SRNA will need to make arrangements with their Clinical Coordinator to make up the clinical hours.

Guidelines for Students Scheduled for On-campus Classes in Existing or Evolving Emergency Situations

The University may cancel live classes and close USF campuses, during existing or evolving severe weather conditions or other emergencies. In these instances, CRNA Program faculty may provide an alternative web-based assignment or may re-schedule a make-up live class for an alternative date and time. It is the students' responsibility to monitor email and telephone communications for updates and further instructions during emergency conditions.

Official notifications are pushed out through the main USF Health website:
<http://health.usf.edu/> . Click on the USF Health Weather Watch icon.

Official notifications are also pushed out through the main USF web site:
<http://www.usf.edu/> .

All students are encouraged to subscribe to the MoBull Emergency notification system:
<http://www.usf.edu/administrative-services/emergency-management/programs/emergency-notification-system.aspx>

Committee Meetings

In order to assure necessary changes can occur in relation to the Nurse anesthesia educational program, there are a variety of committees in place that provide oversight, ensure continuous quality improvements, and program evaluation. These committees also function to insure students and clinical/didactic faculty have appropriate input into departmental procedure evaluation and development. These committees are composed of College of Nursing faculty members, clinical faculty, and communities of interest. Members are responsible to be active participants in committee discussion and decisions to ensure the Nurse Anesthesia Program meets program objectives. Please refer to the College of Nursing student resources for standing committees. Students are eligible to serve on all committees excluding the Nurse Anesthesia Faculty Committee. Student participation in these committees during clinical residency will be limited due to time conflicts.

All members are strongly encouraged to attend. If members are unable to attend, please send a representative. Agenda items should be submitted in writing to the Nurse Anesthesia Director in advance. The agenda, announcements, and minutes from the prior meeting will be distributed.

General Considerations as a SRNA

A. Pre-Clinical Introduction to Clinical Residency

Students are responsible for facilitating their credentialing at all scheduled clinical sites in accordance with the clinical site module for their assigned clinical site in the CRNA Advising Course in Canvas. Students must review this information in Canvas AT LEAST 8 WEEKS PRIOR TO THE FIRST DAY OF THEIR SCHEDULED ROTATION in order to comply with all the necessary steps/items and required timeline.

- Each clinical site is responsible for orienting the student to the clinical site.
- The student will submit any documentation that the site requires at least 8 weeks prior to the rotation, per the module of instructions for that clinical site.
- The student will participate in any on-site orientation required by clinical affiliate. The student may be required to attend on-site orientation ahead of the start of their clinical rotation, per clinical site policy and procedure. This orientation may be scheduled off the academic calendar, as necessary, and per clinical site procedure for scheduling new student orientations.

See individual Clinical Residencies for objectives and expectations.

B. AANA Membership

Students are required to hold an Associate Membership in the American Association of Nurse Anesthetists (AANA) commencing the first month of matriculation and lasting the duration of the program. The Associate Membership is currently paid by the Dean of the College of Nursing as a reflection of student support. Students should be aware that this may not always be the case and should be prepared to incur this cost, which is available at AANA.com.

Membership at the AANA associate level provides: an identification card, subscription to AANA publications, and an opportunity to attend AANA/FANA meetings and conferences as a nonvoting participant. American Association of Nurse Anesthetists (AANA) conventions are held annually at different sites across the nation. Requests for time off to attend professional organization meetings would be in a form of administrative time off. Student must be in good academic and clinical standing to attend. Students will be released from clinical assignment for the National meeting and will be given administrative leave. Proof of registration, and attendance these professional events must be submitted to the program. If a student abuses or violates any administrative leave at any time they will not be allowed to have this privilege henceforth and will be required to meet these requirements by using time from the personal time bank of personal days during the program; a student that fails to attend the required meetings will be subjected to disciplinary action.

Professional attire and behavior are mandatory; you not only represent yourself to potential employers at these meetings, but also the University of South Florida, College of Nursing. Students are expected to conduct themselves in a professional manner; this includes appropriate attire such as business casual, or business suit/dress and being respectful to all presenters. Tardiness, speaking during presentations, or attending in inappropriate attire are just a few instances that will not be tolerated as a USF student.

C. Nursing License

A valid and current unencumbered Florida nursing license must be on file at all times with the Nurse Anesthesia Program throughout the program. Students must report any complaints against their license to the Program Director immediately. Florida nursing license renewal is available on-line. If a student is found to have an expired or missing nursing license, they will be removed from the clinical area and vacation time deducted until a valid, current license is produced. Web verification of the nursing license, in place of the official license, may not be accepted by clinical sites and may delay students' ability to train at the clinical site. The official license must be submitted to the Program and clinical site promptly when received. Failure to maintain current licensure is grounds for removal from the program. All Castle Branch requirements must be kept current by the student at all times while in the Nurse Anesthesia Program. Students who are not in compliance with any Castle Branch requirement may be immediately removed from the clinical setting, placed on academic probation, and will be required to use personal days until the student has demonstrated compliance with all requirements. Non-compliance with Castle Branch requirements will jeopardize the student's ability to progress in the Nurse Anesthesia Program.

D. ACLS / PALS / BLS

All Nurse anesthesia students must maintain Basic Life Support Certification (BLS), Advanced Cardiac Life Support Certification (ACLS), and Pediatric Advanced Life Support Certification (PALS) throughout the program. All certifications and proper licensure must be shown and verified prior to entry into the clinical area. If at any time a student is noted to have an ACLS, PALS or BLS card, they will be removed from the clinical area and vacation time deducted until a current card is presented. The program currently holds a one-day recertification in BLS/ACLS/PALS during the first semester at the University. While students are not required to take this recertification course. **Students are all**

required to obtain recertification in December of the first semester. This is to ensure all certifications are current throughout the program. All costs incurred related to any license or certifications are the student's responsibility. Any time lost will need to be made up at the end of the residency period. All Castle Branch requirements must be kept current by the student at all times while in the Nurse Anesthesia Program. Students who are not in compliance with any Castle Branch requirement may be immediately removed from the clinical setting, placed on academic probation, and will be required to use personal days until the student has demonstrated compliance with all requirements. Non-compliance with Castle Branch requirements will jeopardize the student's ability to progress in the Nurse Anesthesia Program.

E. Pagers

Students will be assigned pagers at various clinical sites. It is the student's responsibility to maintain the pager and return it at the end of the rotation. If the pager is lost, the student will be billed for the cost of the replacement. Students are responsible for keeping the pager in working order and verifying that it functions. Pagers must be turned on when in the clinical site. These pagers are not for personal use.

F. ID Cards

Students are required to carry their USF Student ID at all times while in the clinical setting. Each clinical site may require a hospital ID in addition to the USF ID. If a clinical site requires a site ID badge it is the student's responsibility to obtain the ID card and turn it in at the end of the rotation. If the ID card is lost, the student is responsible for obtaining a replacement card.

G. Class Preparation

Students are responsible for all reading and written work assigned in class. All assignments must be completed by the due date unless other arrangements have been made in advance with the course faculty/instructor. Assigned readings are to be completed before the class to allow effective classroom discussion.

The first rows of the lecture seating area are deemed to be "electronic-free" zones. If you choose to use a laptop, tablet, iPad, or other electronic device for note-taking, or any other reason during class lectures, you will be asked to take a seat behind others who will not be using these devices. Hand-written note taking has been found to be of superior quality to electronic note taking, and the use of electronic devices during lecture has been associated with a significant reduction in academic performance and course grades. Electronic use also affects all students within eyesight of the screen, and those students are affected similarly with reductions in academic performance and course grades.

Nurse Anesthesia Program students have widely expressed dissatisfaction across all cohorts regarding classroom distractions related to other students' misuse of electronic devices in the classroom. Student should be mindful of the distraction that loud keyboard typing creates for other students. Students who utilize electronic devices such as laptops or tablets during class for non-class related activities or reading will be given a verbal warning and asked to close or turn off their devices. Students who repeatedly utilize electronic devices during class for non-class related activities or reading will be asked to leave the classroom. Personal days may be deducted for missed classes due to violation of this policy.

H. Academic Integrity

Student should reference USF Regulation 3.027. To read the entire Regulation, go to: <http://regulationspolicies.usf.edu/regulations/pdfs/regulation-usf3.027.pdf>

Failure to abide by the obligations of Academic Integrity will result in disciplinary action and/or dismissal from the University. Students are expected to follow all university policies and guidelines within this handbook, the Graduate Handbook for Clinical Programs and the USF Graduate Catalog.

I. Work Guidelines

Students are not permitted to work while enrolled in the anesthesia program. Students must commit their full attention and energy to their clinical and didactic responsibilities. Under no circumstances can a student seek employment as a nurse anesthetist by title or function until successful graduation from the program.

J. Remediation

Students identified anytime during the semester to have weaknesses in critical thinking, knowledge base, and/or technical skills that could potentially place the patient in undue harm shall be placed on Academic Jeopardy. The identification of known weaknesses can be revealed by preceptor.

Once a student is placed on academic jeopardy, the student will be overseen more closely by preceptors, and will be expected to turn in an evaluation for every day of clinical performed to ensure the student is meeting standards and delivering safe care. Should the student fail to turn in the evaluations, he/she will receive an F (failure) or (U) unsatisfactory for the clinical residency course.

It is imperative that the program has documentation that the student is performing safely and we rely on these evaluations as evidence of safe performance. The student may need to set up appointments in the Simulation Lab for remedial training in the weaknesses addressed. The student may also need to complete additional online quizzes/tests to include all areas of weakness identified.

If the student is performing at or exceeds the expected standard, the student may continue to rotate to the next rotation site. Nurse anesthesia faculty will evaluate Clinical and simulation lab evaluation, and online exams/quizzes. Feedback from all sources will be used to determine the student's progression in the program. It is recommended that the student make every effort to correct the identified deficiencies as the inability to do so may result in the following: failure to progress in the program; the need to repeat the clinical residency where the deficiency occurred; delayed graduation; or dismissal from the program. This policy serves to protect the public from unsafe practice, and to ensure competency prior to further advancement in the nurse anesthesia profession.

If a junior student does meet a score of 400 in all sections of the SEE exam, the student must complete a program directed remediation plan.

Nurse Anesthesia Conflict Resolution Communication Chain

**Students should contact the indicated course instructor of record, followed by the Assistant Program Director, followed by the Program Director for any unresolved questions or concerns.

K. Clinical Probation

A student may be placed on clinical probation at any time during the Clinical Residency for failure to achieve clinical objectives or any other reason deemed appropriate by the Program. The length of the probationary period is at the discretion of the program faculty, pending a full inquiry; however, this period may not exceed one semester. Students placed on probation will meet with the Clinical Residency course instructor, the Assistant Director and/or the Program Director to review the actions, which are the basis of the probation status. A plan will be formulated for the student to remediate and resolve any concerns regarding the probationary issues.

Written notification of the probationary status will be given to the student prior to the commencement of the probationary period; a probationary period is usually half of a semester. During this period the student will be required to meet additional expectations and/or clinical, didactic, or simulation work to address the causes for the probation and remediate. Students may be required to meet with the clinical residency course faculty or Assistant Director or Program Director on a weekly basis for evaluation. During these conferences, efforts shall be made to aid the student in correcting deficiencies and reevaluate the plan of action for remediation. At the end of the probationary period the student will either be reinstated in good standing, continue on probation, or be awarded an unsatisfactory (U) for the residency period.

Students placed on probation at the midterm evaluation without improvement by the end semester evaluation will receive an unsatisfactory (U) and have to repeat the clinical residency. Dismissal from clinical based on performance or for professional misconduct may be preceded by a probationary period, unless the gravity of the situation precludes this option. A student may be immediately dismissed if patient safety is compromised or unethical unprofessional behavior occurs.

L. Due Process

Any student who feels that he/she has been the object of unfair disciplinary action has the right to seek review and evaluation of the action and the process. Students have the right to appeal decisions related to the clinical component of the Program Policies and Procedures.

For Student Grievance Procedures refer to Academic Grievance Procedure for Students policy at:

<http://regulationspolicies.usf.edu/policies-and-procedures/pdfs/policy-10-002.pdf>

Students with Disabilities _____

For any questions related to disabilities, please refer to: [Students with Disabilities Services](#)
We highly encourage students to discuss and/or declare any disabilities with the Students with Disabilities Services department as soon as possible.

Religious Observances _____

Pursuant to Section 1006.53 Florida Statutes and Board of Governors Regulation 6.0115, the University of South Florida System (USF System) establishes the following Policy regarding religious observances.

<http://regulationspolicies.usf.edu/policies-and-procedures/pdfs/policy-10-045.pdf>

Classroom Policies

a. Class Attendance and Decorum

- 1. Mandatory Attendance/First Class Meeting:** It is University policy that students enrolled for courses offered by designated colleges or departments as published in the Schedule of Classes must attend the first meeting of these courses in order to ensure their enrollment. Students having extenuating circumstances beyond their control and who are unable to attend the first class meeting must notify the instructor prior to the first meeting to request waiver of attendance requirement.
- 2. Online Attendance:** USF System Policy 10-006L USF's distance learning students must log-in to their course(s) during the first five (5) weekdays from the calendar start date of their online course(s) and complete requirements specified in the course syllabus to be counted as having attended and to avoid being dropped from the course. Students who are unable to log-in to their course(s) due to circumstances beyond their control must notify the instructor via email using the University's course management system (i.e., Canvas) prior to the calendar start date of the course to request waiver of the first class attendance requirement.
- 3. Faculty Availability:** A number of learning opportunities are included for each course in order to assist students with the learning process. Faculty members are available for individual assistance during scheduled office hours each week. In order to ensure student privacy, students are required to check in for any appointments or walk-ins with one of the CRNA Academic Program Administrators. If nobody is available to check the student in, the students are instructed to send a text message to faculty and let them know they are in the waiting area outside of the faculty offices area. If a student does not have an appointment and needs to meet with faculty outside of office hours, they are instructed to text and/or call the faculty member to make an appointment.

b. Evaluation

As nursing professionals, students are expected to provide an evaluation of the course and faculty at the end of each semester and an in-depth evaluation of their learning experience upon completion of the program.

An additional evaluation/survey will be requested of our alumni one year after graduation. All College of Nursing evaluations are web-based and anonymous.

c. Preparation

1. Check your health email account and Canvas announcements for both your didactic and clinical courses at least DAILY. Students are strongly encouraged to set up their electronic devices to receive push notifications i.e. emails, course announcements from the Nurse Anesthesia Program and their course instructors. Students should also program their Canvas settings for push notifications to their mobile device and @ health.usf.edu email account.
2. For every 1 credit hour in which you enroll, you will spend approximately 2-3 hours outside of class studying.

d. Selected Academic Policies and Procedures for USF Graduate Students

Students should review the following academic policies and procedures relevant to USF Graduate Students: <http://www.grad.usf.edu/policies.php>

Student Resources

The following is a list of [student resources](#). These resources are hyperlinked.

a. [Computer Resources/Accounts](#)

- Learn About Campus Technology Resources
- Create your Health Account
- USF Health Required Online Training
- Learn about wireless and wired network options
- How to Install Email on My Mobile Device

b. [The Writing Studio](#)

The Writing Studio at the University of South Florida encourages students to engage in writing as a process through brainstorming, drafting, and discussing their work. The Writing Studio embraces the vision of writing as constantly developing and changing.

Through writing center practice and outreach, the Studio looks to understand the role of writing at USF and adapt to meet the diverse needs of students, faculty, and staff. Most importantly, the Writing Studio seeks to provide a safe and open space for the university community to strengthen their writing skills through experimentation, engaged discussion, and practice.

c. [Canvas](#)

d. [Registration](#)

e. [Technical and Online Support](#)

- f. [University of South Florida Library](#)
- g. [Health Sciences Library](#)
- h. [Tutoring](#)

Florida Nurses Association (FNA)

1. The **Florida Nurses Association** as a constituent of the American Nurses Association is the only nursing organization representing ALL of nursing regardless of specialty or practice area.
2. For further information, consult officers of the association (813.974.9309).

Additional Organizations

- **Sigma Theta Tau International**

The mission of the Honor Society of Nursing, Sigma Theta Tau International, is to support the learning, knowledge, and professional development of nurses committed to making a difference in health worldwide. Many USF faculty, graduates and current students are members of Sigma Theta Tau. USF is part of the local Delta Beta-at-Large Chapter with the University of Tampa.

[Delta Beta-at-Large Chapter page](#)

[Sigma Theta Tau International](#)

- **International Health Service Collaborative (IHSC)**

The International Health Service Collaborative is an interdisciplinary organization that includes students from the Colleges of Nursing, Medicine and Public Health. The mission of the organization states that the International Health Service Collaborative is a group of USF Health students, faculty, and professionals focused on:

- Promoting *sustainable* health projects in underserved communities within the U.S. and developing nations
- Creating a forum for interdisciplinary interaction within USF Health and throughout USF, which will result in more well-rounded health professionals

- **USF Health Service Corps**

The USF Health Service Corps is a USF Health-wide, interdisciplinary student group that enables USF Health students in Medicine, Nursing, Public Health and Physical Therapy to participate in health-related community service activities together. The USF Health Service Corps is sponsored by the USF Area Health Education Center and has its own Coordinator who assists the USF Health students in planning, implementing and evaluating service activities.

Nurse Anesthesia Program Student Contract

I have been made aware of the online location of the University of South Florida's College of Nursing Master of Science in Nurse Anesthesia Program Student Handbook. I have had an opportunity to review and discuss its contents and I agree, as a student enrolled in the Nurse Anesthesia Program, to abide and respect the policies, regulations, procedures, and standards set forth in this handbook. I understand that these policies, regulations, procedures, guidelines and standards are subject to change as deemed necessary by the University, College of Nursing, or the Program. Any changes to these may be sent via email with high priority notifications. By opening the email I verify that I have been notified of the change.

Likewise, during the clinical phase of the program, it is extremely important to the success of clinical rotations to access and read emails from the program and clinical sites, and complete all required credentialing paperwork. Failure to read high priority emails sent from the University, College of Nursing, Nurse Anesthesia Program, and/or clinical sites is considered negligent and grounds for disciplinary action. I understand it is my responsibility to access my USF Health email account daily and read all program-related email, as well as keep abreast of clinical credentialing requirements and any changes that occur while in the program.

Upon graduation, I agree to provide my employer information to the Program and I understand my employer will be sent an evaluation tool to evaluate my performance as a University of South Florida CRNA Graduate. I also agree as an alumnus to evaluate the Nurse Anesthesia Program and assist the program in future improvements. I understand the employer and alumni evaluations are confidential and will be used only for internal program evaluation and critique and to improve the program for future students.

I agree, upon graduation, to sit for the National Certification Examination (NCE) administered by the National Board of Certification & Recertification of Nurse Anesthetists (NBCRNA) within 6 months of the completion of the program.

Printed Name _____

Signature _____ Date _____

****NOTE: There are many affiliating agency contracts that are used for practicum experiences. ****