

**California State University, Fresno**

**College of Health and Human Services  
Department of Nursing**

**GRADUATE  
STUDENT  
HANDBOOK**

**2011-2012**

**MASTERS OF SCIENCE IN NURSING DEGREE  
Post-Master's Certificate**

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## **PART I**

### **INTRODUCTION**

This handbook is designed to familiarize the graduate nursing student with general information about the Graduate Program of the Department of Nursing. In addition, the student should be familiar with relevant sections of the university *General Catalog* which supersedes this handbook. Periodic contact with the nursing graduate coordinator is recommended for validation of specific relevant dates and deadlines, but students are ultimately responsible for meeting official deadlines and filing necessary documents with the university graduate department.

This handbook is subject to review and recommendation of the faculty of the Department of Nursing. These changes will be reflected in each updated edition. Your input is invited.

## **Department of Nursing**

### **Mission Statement**

The mission of the Department of Nursing at California State University, Fresno is to offer quality nursing education to undergraduate and graduate nursing students that prepares nurses with clinical decision-making skills based on theory and research. Additionally, the department seeks to establish an academic foundation for Advanced Practice Nursing and Doctoral preparation. As life-long learners, graduates are prepared for delivering quality health care to diverse populations across environments. Graduates will lead, supervise, delegate, manage, evaluate care outcomes, and demonstrate the ability to act as consumer advocates in promoting wellness and facilitating change.

Approved by Faculty Council: 4/05

### **Philosophy of Nursing**

California State University, Fresno offers comprehensive programs that lead to the bachelor's and master's degrees in a wide variety of fields of study. A strong general education component in the undergraduate programs fosters the importance of lifelong learning. The master's programs are designed to provide specialized study in selected advanced practice fields. The University's special commitment to the San Joaquin Valley is to prepare students for industries and professions serving the community. To achieve the mission, California State University, Fresno supports applied research and public service programs as a means to enhance faculty development and instruction, especially those which contribute to the intellectual, social, cultural, and economic vitality of the San Joaquin Valley and California.

The Department of Nursing philosophy, consistent with the mission of the University and College of Health and Human Services, is an expression of the commitment to excellence in professional education in meeting the health needs of the community. The Department of Nursing, therefore, offers a baccalaureate program for generalists, a School Nurse Credential Program, and a master's program for advanced practice in selected areas. In order to meet the rapidly changing needs of society and the requirements of the profession, the faculty continually evaluate existing programs for effectiveness, initiate new programs, and implement change when necessary. The faculty believe that the nursing profession is characterized by the four concepts of person, environment, health, and nursing.

The faculty further believe that a person is a unique being in constant interaction with environmental stressors: intrapersonal, interpersonal, and extrapersonal in nature. Response to these stressors is influenced by the interaction of the individual's physiological, psychological, sociocultural, and developmental variables. It is also believed that individuals have the right to make decisions that affect their lifestyle and well-being. The environment encompasses internal and external forces including societal, technological, cultural, and other multidimensional influences.

Health and illness are viewed as continuing processes along a wellness-illness continuum, in which the individual attempts to achieve a sustainable balance between needs and available resources. Nursing responds to the reciprocal interaction between the person and the environment to facilitate a state of dynamic equilibrium or change in the level of health at any point along the wellness-illness continuum. Nursing is directed toward reducing stress factors that influence or could influence the attainment of an optimum level of wellness by an individual, family, or community.

This goal is achieved through the nursing process, a systematic, problem-solving technique used for implementing independent, interdependent, and dependent nursing actions. This process consists of assessing the person's actual and/or potential health problems, constructing a diagnostic statement, formulating goals and objectives with expected outcomes, implementing therapeutic interventions, and evaluating the effectiveness of these interventions/preventions. The philosophy of the department is actualized through application of the Neuman Systems Model. Nursing is advancing into a new era of expanding roles, responsibilities and functions in primary, secondary, and tertiary preventions. Faculty are responsible for the preparation of professional nurses who can assume current nursing roles and adapt to future health needs and evolving health care requirements. Thus, professional nursing education requires a flexible curriculum that emphasizes a total person approach and is based on evolving nursing theory and knowledge from the sciences and other related disciplines.

The faculty believe that learning is a process that influences and promotes change in behavior. Learning is viewed as a life-long process involving the continuing development of personal, intellectual, and professional growth. Learning is facilitated by professional role modeling and an educational environment conducive to the exchange of ideas, critical thinking, decision-making, creativity, experimentation, and innovation.

Inherent in the teaching/learning process is the reciprocal responsibility of faculty and students in influencing the process of learning outcomes. In this relationship, faculty serve as role models and valuable resources in facilitating the advancement of nursing practice through leadership, research, and scientific inquiry. The faculty recognize the unique diversity of the residents of the central San Joaquin Valley, including their cultural and ethnic backgrounds, language, beliefs, values, learning styles, goals, and support systems. This diversity is viewed as an asset that is incorporated into curriculum development, implementation, and evaluation. The learner is expected to exhibit self-direction, and a sense of responsibility and accountability in mastery of knowledge and skills consistent with professional practice.

As scholars, nurses, and citizens, faculty accept the responsibility for the development of the profession and improvement of health care through continuing practice, study, and research. The faculty believe that well developed leadership abilities are essential in professional practice. Nurses need to seek improved ways of service to clients through research and effective dissemination of knowledge.

The faculty is committed to an educational process that prepares undergraduate nurses for entry level positions in nursing. Consistent with the concept of career mobility, opportunities are provided for returning RNs to articulate with the program at appropriate academic levels. The generalist education of the baccalaureate program serves as a foundation for graduate education in nursing.

The Master of Science in Nursing program prepares professionals in the functional roles of primary care nurse practitioner, clinical nurse specialist, and nursing educator. The second professional degree also provides foundation for doctoral study.

The graduate curriculum supports the functional areas and facilitates competence in the essential clinical domains which include: Management of client health/illness status; The nurse-client relationship; Teaching and outcome based evaluations; Professional role development; Health promotion and human diversity; Managing health care delivery systems; and Monitoring quality of health care practice.

Approved by Faculty Council, March 14, 1987. Revised Fall 1998; April 8, 2005; March 28, 2008

**California State University, Fresno**  
**Department of Nursing**

**Conceptual Framework**

The baccalaureate and graduate programs in nursing at California State University, Fresno utilize the Neuman Systems Model. The framework evolves from the philosophy and focuses on the domains of client, environment, health, and nursing.

**Client/Client System**

The client/client system (person) is viewed as a composite of variables (physiological, psychological, socio-cultural, developmental, and spiritual), each of which is a subpart of all parts, forms the whole of the client. The client as a system is composed of a core or basic structure of survival factors and surrounding protective concentric rings. The concentric rings are composed of similar factors, yet serve varied and different purposes in either retention, attainment, or maintenance of system stability and integrity or a combination of these.

**Environment**

The environment consists of both internal and external forces surrounding the client, influencing and being influenced by the client, at any point in time, as an open system. The created environment is an unconsciously developed protective environment that binds system energy and encompasses both the internal and external client environments.

**Health**

Health is a continuum of wellness to illness, dynamic in nature, and is constantly subject to change. The client is in a dynamic state of either wellness or illness, in varying degrees, at any given point in time.

**Nursing**

Nursing is a unique profession concerned with all variables affecting clients in their own environment. Nursing actions are initiated to best retain, attain, and maintain optimal client health or wellness using the three preventions (primary, secondary, tertiary) as interventions to keep the system stable.

All concepts identified in the curriculum are introduced in the first semester nursing course as the theoretical foundation for professional nursing. The central concepts of client, environment, health, and nursing are utilized in the curriculum as vertical strands and denote introduction, placement and study of specific content, and experience relevant to the concept in the curriculum.

Reviewed March 28, 2008

## **Purpose of the Master of Science in Nursing Program**

The purpose of the Master of Science in Nursing program is to prepare nurses for advanced practice in the functional roles of primary care nurse practitioner, clinical nurse specialist, and nurse educator. Each graduate of the master's in nursing program must demonstrate advanced knowledge and skill in physical diagnosis, psychosocial assessment, and management of health-illness needs in complex client and community systems. The program provides a foundation for doctoral study in nursing.

Approved by Faculty Council: 5/14/99; Revised 5/23/05

## **Objectives of the Master of Science Program**

Regardless of the area of specialization, the role of a nurse with a master's degree requires the ability to think critically, to apply complex concepts to practice, and to provide leadership in the areas of scientific inquiry and advanced practice. Faculty is committed to providing educational experiences which facilitate the development of these competencies.

The department mission statement, philosophy, and program purpose provide the conceptual framework for the program objectives listed below. Major strands associated with each objective are in parentheses.

1. Analyze nursing phenomena through the implementation of the research process and the application of conceptual models of nursing (systematic inquiry).
2. Demonstrate the application of advanced nursing practice concepts with individual, family, and community systems through implementation of Neuman's Health Care System Model (advanced practice).
3. Contribute to the advancement of nursing practice and research through analysis, synthesis, application, and extension of nursing conceptual models (systematic inquiry, advanced practice).
4. Advance professional role performance by implementing concepts of collaboration, consultancy, teaching, leadership, and research in advanced nursing practice (social organization).

## **Objectives for Role Specialization**

Objectives for the role specialization options of clinical specialist, nurse educator, and nurse practitioner define the specific competencies of each role and are congruent with the overall program objectives.

### **Clinical Nurse Specialist:**

- Demonstrate beginning level competency in roles of advanced clinician, educator, manager, researcher, consultant, and change agent.
- Apply health promoting interventions at primary, secondary, and tertiary levels of prevention with families, organizations, and communities.
- Demonstrate leadership behavior in actualizing the clinical nurse specialist role in a health care facility.

### **Nurse Educator:**

- Construct an instructional design for an educational program.
- Implement teaching methods within selected educational settings.
- Implement instructional activities in both classroom and clinical settings.



- Apply concepts of measurement, evaluation, and testing in education settings.

**Nurse Practitioner:**

- Completes an age-appropriate health maintenance evaluation incorporating skills of interview, physical assessment, management, education, anticipatory guidance, consultation, referral, quality assurance, and follow-up.
- Demonstrates the ability to interview, assess, manage, educate, consult, refer, and provide quality assurance for common acute problems and stable chronic illnesses.
- Collaborates with other health care professionals in the assessment, management, education, referral, and quality assurance for individuals and families experiencing acute or stable chronic illness.
- Actualizes the role of nurse practitioner with consideration of ethical and legal parameters of practice.

Adopted by Faculty Council: 11/20/98; Revised 5/23/05: Revised March 28, 2008

## Graduate Student Outcome Definitions

Below are the student outcome goals for the graduate program of the Department of Nursing. Upon completion of the graduate program of study in the Department of Nursing the student will be evaluated on the following four outcomes.

**COMMUNICATION:** Communication is defined as a complex, ongoing, interactive process of exchanging information and forms the basis for building relationships. Communication includes listening, verbal and non verbal behaviors, written skills, and the use of emerging technologies.

**CRITICAL THINKING:** Critical thinking is defined as a discriminating process that underlies decision making. Critical thinking includes questioning, analysis, synthesis, interpretation, inference, inductive and deductive reasoning, intuition, application, and creativity.

**CLINICAL JUDGMENT:** Clinical judgment is the interaction of knowledge, skills, and attitudes and underlies the nurse's ability to adapt care for diverse populations in varied health care environments. Clinical judgment involved critical reasoning, integration of evidence based practice, and the implementation of holistic, value based patient centered care.

**COLLABORATION:** Collaboration is defined as the active engagement in local, regional, and global health care and forms the basis for interdisciplinary practice. Collaboration supports a climate of diverse opinions and incorporates delegation, negotiation, coordination, and service learning.

Adopted by Faculty Council March 28, 2008

**DOMAINS AND COMPETENCIES OF  
NURSE PRACTITIONER PRACTICE**  
Adopted from the National Organization of Nurse Practitioner Faculties (NONPF)

**Nurse Practitioner Core Competencies**

**Scientific Foundation Competencies**

1. Critically analyzes data and evidence for improving advanced nursing practice.
2. Integrates knowledge from the humanities and sciences within the context of nursing science.
3. Translates research and other forms of knowledge to improve practice processes and outcomes.
4. Develops new practice approaches based on the integration of research, theory, and practice knowledge.

**Leadership Competencies**

1. Assumes complex and advanced leadership roles to initiate and guide change.
2. Provides leadership to foster collaboration with multiple stakeholders (e.g. patients, community, integrated health care teams, and policy makers) to improve health care..
3. Demonstrates leadership that uses critical and reflective thinking.
4. Advocates for improved access, quality and cost effective health care.
5. Advances practice through the development and implementation of innovations incorporating principles of change.
6. Communicates practice knowledge effectively both orally and in writing.

**Quality Competencies**

1. Uses best available evidence to continuously improve quality of clinical practice.
2. Evaluates the relationships among access, cost, quality, and safety and their influence on health care.
3. Evaluates how organizational structure, care processes, financing, marketing and policy decisions impact the quality of health care.
4. Applies skills in peer review to promote a culture of excellence.
5. Anticipates variations in practice and is proactive in implementing interventions to ensure quality.

**Practice Inquiry Competencies**

1. Provides leadership in the translation of new knowledge into practice.
2. Generates knowledge from clinical practice to improve practice and patient outcomes.
3. Applies clinical investigative skills to improve health outcomes.
4. Leads practice inquiry, individually or in partnership with others.
5. Disseminates evidence from inquiry to diverse audiences using multiple modalities.

**Technology and Information Literacy Competencies**

1. Integrates appropriate technologies for knowledge management to improve health care.
2. Translates technical and scientific health information appropriate for various users' needs.
  - 2a). Assesses the patient's and caregiver's educational needs to provide effective, personalized health care.

- 2b). Coaches the patient and caregiver for positive behavioral change.
- 3. Demonstrates information literacy skills in complex decision making.
- 4. Contributes to the design of clinical information systems that promote safe, quality and cost effective care.
- 5. Uses technology systems that capture data on variables for the evaluation of nursing care.

### **Policy Competencies**

- 1. Demonstrates an understanding of the interdependence of policy and practice.
- 2. Advocates for ethical policies that promote access, equity, quality, and cost.
- 3. Analyzes ethical, legal, and social factors influencing policy development.
- 4. Contributes in the development of health policy.
- 5. Analyzes the implications of health policy across disciplines.
- 6. Evaluates the impact of globalization on health care policy development.

### **Health Delivery System Competencies**

- 1. Applies knowledge of organizational practices and complex systems to improve health care delivery.
- 2. Effects health care change using broad based skills including negotiating, consensus-building, and partnering.
- 3. Minimizes risk to patients and providers at the individual and systems level.
- 4. Facilitates the development of health care systems that address the needs of culturally diverse populations, providers, and other stakeholders.
- 5. Evaluates the impact of health care delivery on patients, providers, other stakeholders, and the environment.
- 6. Analyzes organizational structure, functions and resources to improve the delivery of care.

### **Ethics Competencies**

- 1. Integrates ethical principles in decision making.
- 2. Evaluates the ethical consequences of decisions.
- 3. Applies ethically sound solutions to complex issues related to individuals, populations and systems of care.

### **Independent Practice Competencies**

- 1. Functions as a licensed independent practitioner.
- 2. Demonstrates the highest level of accountability for professional practice.
- 3. Practices independently managing previously diagnosed and undiagnosed patients.
  - 3a). Provides the full spectrum of health care services to include health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative, and end of life care.
  - 3b). Uses advanced health assessment skills to differentiate between normal, variations of normal and abnormal findings.
  - 3c). Employs screening and diagnostic strategies in the development of diagnoses.
  - 3d). Prescribes medications within scope of practice.
  - 3e). Manages the health/illness status of patients and families over time.
- 4. Provides patient-centered care recognizing cultural diversity and the patient or designee as a full partner in decision-making.
  - 4a). Works to establish a relationship with the patient characterized by mutual respect, empathy, and collaboration.
  - 4b). Creates a climate of patient-centered care to include confidentiality, privacy, comfort, emotional support, mutual trust, and respect.

- 4c). Incorporates the patient's cultural and spiritual preferences, values, and beliefs into health care.
- 4d). Preserves the patient's control over decision making by negotiating a mutually acceptable plan

Adapted from: American Association of Colleges of Nursing. (1996). *The essentials of master's education for advanced practice nursing*. Washington, DC: Author.  
National Organization of Nurse Practitioner Faculties. (2011). *2011 Nurse practitioner core competencies*. Available May 24, 2011 from <http://www.nonpf.com/associations/10789/files/IntegratedNPCoreCompsFINALApril2011.pdf>

## CORE COMPETENCIES OF NURSE EDUCATORS WITH TASK STATEMENTS

Adopted from the National League of Nursing (2005)

### **Competency 1 – *Facilitate Learning***

Nurse educators are responsible for creating an environment in classroom, laboratory, and clinical settings that facilitates student learning and the achievement of desired cognitive, affective, and psychomotor outcomes. To facilitate learning effectively, the nurse educator:

- Implements a variety of teaching strategies appropriate to learner needs, desired learner outcomes, content, and context
- Grounds teaching strategies in educational theory and evidence-based teaching practices
- Recognizes multicultural, gender, and experiential influences on teaching and learning
- Engages in self-reflection and continued learning to improve teaching practices that facilitate learning
- Uses information technologies skillfully to support the teaching-learning process
- Practices skilled oral, written, and electronic communication that reflects an awareness of self and others, along with an ability to convey ideas in a variety of contexts
- Models critical and reflective thinking
- Creates opportunities for learners to develop their critical thinking and critical reasoning skills
- Shows enthusiasm for teaching, learning, and nursing that inspires and motivates students
- Demonstrates interest in and respect for learners
- Uses personal attributes (e.g., caring, confidence, patience, integrity and flexibility) that facilitate learning
- Develops collegial working relationships with students, faculty, colleagues, and clinical agency personnel to promote positive learning environments
- Maintains the professional practice knowledge base needed to help learners prepare for contemporary nursing practice
- Serves as a role model of professional nursing

### **Competency 2 – *Facilitate Learner Development and Socialization***

Nurse educators recognize their responsibility for helping students develop as nurses and integrate the values and behaviors expected of those who fulfill that role. To facilitate learner development and socialization effectively, the nurse educator:

- Identifies individual learning styles and unique learning needs of international, adult, multicultural, educationally disadvantaged, physically challenged, at-risk, and second degree learners
- Provides resources to diverse learners that help meet their individual learning needs
- Engages in effective advisement and counseling strategies that help learners meet their professional goals
- Creates learning environments that are focused on socialization to the role of the nurse and facilitate learners' self-reflection and personal goal setting
- Fosters the cognitive, psychomotor, and affective development of learners
- Recognizes the influence of teaching styles and interpersonal interactions on learner outcomes
- Assists learners to develop the ability to engage in thoughtful and constructive self and peer evaluation
- Models professional behaviors for learners including, but not limited to, involvement in professional organizations, engagement in lifelong learning activities, dissemination of information through publications and presentation, and advocacy

### **Competency 3 – Use Assessment and Evaluation Strategies**

Nurse educators use a variety of strategies to assess and evaluate student learning in classroom, laboratory, and clinical settings, as well as in all domains of learning. To use assessment and evaluation strategies effectively, the nurse educator:

- Uses extant literature to develop evidence-based assessment and evaluation practices
- Uses a variety of strategies to assess and evaluate learning in the cognitive, psychomotor, and affective domains
- Implements evidence-based assessment and evaluation strategies that are appropriate to the learner and to learning goals
- Uses assessment and evaluation data to enhance the teaching-learning process
- Provides timely, constructive, and thoughtful feedback to learners
- Demonstrates skill in the design and use of tools for assessing clinical practice

### **Competency 4 – Participate in Curriculum Design and Evaluation of Program Outcomes**

Nurse educators are responsible for formulating program outcomes and designing curricula that reflect contemporary health care trends and prepare graduates to function effectively in the health care environment. To participate effectively in curriculum design and evaluation of program outcomes, the nurse educator:

- Ensures that the curriculum reflects institutional philosophy and mission, current nursing and health care trends, and community and societal needs so as to prepare graduates for practice in a complex, dynamic, multicultural health care environment
- Demonstrates knowledge of curriculum development including identifying program outcomes, developing competency statements, writing learning objectives, and selecting appropriate learning activities and evaluation strategies
- Bases curriculum design and implementation decisions on sound educational principles, theory, and research
- Revises the curriculum based on assessment of program outcomes, learner needs, and societal and health care trends
- Implements curricular revisions using appropriate change theories and strategies
- Creates and maintains community and clinical partnerships that support educational goals
- Collaborates with external constituencies throughout the process of curriculum revision
- Designs and implements program assessment models that promote continuous quality improvement of all aspects of the program

### **Competency 5 – Function as a Change Agent and Leader**

Nurse educators function as change agents and leaders to create a preferred future for nursing education and nursing practice. To function effectively as a change agent and leader, the nurse educator:

- Models cultural sensitivity when advocating for change
- Integrates a long-term, innovative, and creative perspective into the nurse educator role
- Participates in interdisciplinary efforts to address health care and educational needs locally, regionally, nationally, and internationally
- Evaluates organizational effectiveness in nursing education
- Implements strategies for organizational change
- Provides leadership in the parent institution as well as in the nursing program to enhance the visibility of nursing and its contributions to the academic community
- Promotes innovative practices in educational environments
- Develops leadership skills to shape and implement change

### **Competency 6 – Pursue Continuous Quality Improvements in the Nurse Educator Role**

Nurse educators recognize that their role is multidimensional and that an ongoing commitment to develop and maintain competence in the role is essential. To pursue continuous quality improvement in the nurse educator role, the individual:

- Demonstrates a commitment to life-long learning
- Recognizes that career enhancement needs and activities change as experience is gained in the role
- Participates in professional development opportunities that increase one's effectiveness in the role
- Balances the teaching, scholarship, and service demands inherent in the role of educator and member of an academic institution
- Uses feedback gained from self, peer, student, and administrative evaluation to improve role effectiveness
- Engages in activities that promote one's socialization to the role
- Uses knowledge of legal and ethical issues relevant to higher education and nursing education as a basis for influencing, designing, and implementing policies and procedures related to students, faculty, and the educational environment
- Mentors and supports faculty colleagues

### **Competency 7 – Engage in Scholarship**

Nurse educators acknowledge that scholarship is an integral component of the faculty role, and that teaching itself is a scholarly activity. To engage effectively in scholarship, the nurse educator:

- Draws on extant literature to design evidence-based teaching and evaluation practices
- Exhibits a spirit of inquiry about teaching and learning, student development, evaluation methods, and other aspects of the role
- Designs and implements scholarly activities in an established area of expertise
- Disseminates nursing and teaching knowledge to a variety of audiences through various means
- Demonstrates skill in proposal writing for initiatives that include, but are not limited to, research, resource acquisition, program development, and policy development
- Demonstrates qualities of a scholar: integrity, courage, perseverance, vitality, and creativity

### **Competency 8 – Function within the Educational Environment**

Nurse educators are knowledgeable about the educational environment within which they practice and recognize how political, institutional, social and economic forces impact their role. To function as a good "citizen of the academy," the nurse educator:

- Uses knowledge of history and current trends and issues in higher education as a basis for making recommendations and decisions on educational issues
- Identifies how social, economic, political, and institutional forces influence higher education in general and nursing education in particular
- Develops networks, collaborations, and partnerships to enhance nursing's influence within the academic community
- Determines own professional goals within the context of academic nursing and the mission of the parent institution and nursing program
- Integrates the values of respect, collegiality, professionalism, and caring to build an organizational climate that fosters the development of students and teachers
- Incorporates the goals of the nursing program and the mission of the parent institution when proposing change or managing issues
- Assumes a leadership role in various levels of institutional governance
- Advocates for nursing and nursing education in the political arena

Developed by the NLN's Task Group on Nurse Educator Competencies (2005)



## CORE COMPETENCIES OF CLINICAL NURSE SPECIALISTS

### Competency 1- *Direct Care*

Direct interaction with patients, families, and groups of patients to promote health or well-being and improve quality of life. Characterized by a holistic perspective in the advanced nursing management of health, illness, and disease states.

- Conducts comprehensive, holistic wellness and illness assessments using known or innovative evidence-based techniques, tools, and direct and indirect methods.
- Obtains data about context and etiologies (including both non-disease and disease-related factors) necessary to formulate differential diagnoses and plans of care, and to identify and evaluate of outcomes.
- Employs evidence-based clinical practice guidelines to guide screening and diagnosis.
- Assesses the effects of interactions among the individual, family, community, and social systems on health and illness.
- Identifies potential risks to patient safety, autonomy and quality of care based on assessments across the patient, nurse and system spheres of influence.
- Assesses the impact of environmental/system factors on care.
- Synthesizes assessment data, advanced knowledge, and experience, using critical thinking and clinical judgment to formulate differential diagnoses for clinical problems amendable to CNS intervention.
- Prioritizes differential diagnoses to reflect those conditions most relevant to signs, symptoms and patterns amenable to CNS interventions.
- Selects interventions that may include, but are not limited to:
  - Application of advanced nursing therapies
  - Initiation of interdisciplinary team meetings, consultations and other communications to benefit patient care
  - Management of patient medications, clinical procedures and other interventions
  - Psychosocial support including patient counseling and spiritual interventions
- Designs strategies, including advanced nursing therapies, to meet the multifaceted needs of complex patients and groups of patients.
- Develops evidence-based clinical interventions and systems to achieve defined patient and system outcomes.
- Uses advanced communication skills within therapeutic relationships to improve patient outcomes.
- Prescribes nursing therapeutics, pharmacologic and non-pharmacologic interventions, diagnostic measures, equipment, procedures, and treatments to meet the needs of patients, families and groups, in accordance with professional preparation, institutional privileges, state and federal laws and practice acts.
- Provides direct care to selected patients based on the needs of the patient and the CNS's specialty knowledge and skills
- Assists staff in the development of innovative, cost effective programs or protocols of care
- Evaluates nursing practice that considers Safety, Timeliness, Effectiveness, Efficiency, Efficacy and Patient-centered care
- Determines when evidence based guidelines, policies, procedures and plans of care need to be tailored to the individual
- Differentiates between outcomes that require care process modification at the individual patient level and those that require modification at the system level
- Leads development of evidence-based plans for meeting individual, family, community, and population needs

- Provides leadership for collaborative, evidence-based revision of diagnoses and plans of care, to improve patient outcomes

### **Competency 2- Consultation**

Patient, staff, or system-focused interaction between professionals in which the consultant is recognized as having specialized expertise and assists consul tee with problem solving.

- Provides consultation to staff nurses, medical staff and interdisciplinary colleagues
- Initiates consultation to obtain resources as necessary to facilitate progress toward achieving identified outcomes
- Communicates consultation findings to appropriate parties consistent with professional and institutional standards
- Analyzes data from consultations to implement practice improvements

### **Competency 3- Systems Leadership**

The ability to manage change and empower others to influence clinical practice and political processes both within and across systems.

- Facilitates the provision of clinically competent care by staff/team through education, role modeling, teambuilding, and quality monitoring.
- Performs system level assessments to identify variables that influence nursing practice and outcomes, including but not limited to:
  - Population variables (age distribution, health status, income distribution, culture)
  - Environment (schools, community support services, housing availability, employment opportunities)
  - System of health care delivery
  - Regulatory requirements
  - Internal and external political influences/stability
  - Health care financing
  - Recurring practices that enhance or compromise patient or system outcomes
- Determines nursing practice and system interventions that will promote patient, family and community safety
- Uses effective strategies for changing clinician and team behavior to encourage adoption of evidence-based practices and innovations in care delivery
- Provides leadership in maintaining a supportive and healthy work environment
- Provides leadership in promoting interdisciplinary collaboration to implement outcome-focused patient care programs meeting the clinical needs of patients, families, populations and communities
- Develops age-specific clinical standards, policies and procedures
- Uses leadership, team building, negotiation, and conflict resolution skills to build partnerships within and across systems, including communities.
- Coordinates the care of patients with use of system and community resources to assure successful health/illness/wellness transitions, enhance delivery of care, and achieve optimal patient outcomes
- Considers fiscal and budgetary implications in decision making regarding practice and system modifications
  - Evaluates use of products and services for appropriateness and cost/benefit in meeting care needs
  - Conducts cost/benefit analysis of new clinical technologies
  - Evaluates impact of introduction or withdrawal of products, services, and technologies
- Leads system change to improve health outcomes through evidence based practice:
  - Specifies expected clinical and system level outcomes

- Designs programs to improve clinical and system level processes and outcomes
- Facilitates the adoption of practice change
- Evaluates impact of CNS and other nursing practice on systems of care using nurse-sensitive outcomes
- Disseminates outcomes of system-level change internally and externally

#### **Competency 4- Collaboration**

Working jointly with others to optimize clinical outcomes. The CNS collaborates at an advanced level by committing to authentic engagement and constructive patient, family, system, and population-focused problem-solving.

- Assesses the quality and effectiveness of interdisciplinary, intra-agency, and inter-agency communication and collaboration
- Establishes collaborative relationships within and across departments that promote patient safety, culturally competent care, and clinical excellence
- Provides leadership for establishing, improving, and sustaining collaborative relationships to meet clinical needs
- Practices collegially with medical staff and other members of the healthcare team so that all providers' unique contributions to health outcomes will be enhanced
- Facilitates intra-agency and inter-agency communication

#### **Competency 5- Coaching**

Skillful guidance and teaching to advance the care of patients, families, groups of patients, and the profession of nursing.

- Coaches patients and families to help them navigate the healthcare system
- Designs health information and patient education appropriate to the patient's developmental level, health literacy level, learning needs, readiness to learn, and cultural values and beliefs
- Provides education to individuals, families, groups and communities to promote knowledge, understanding and optimal functioning across the wellness-illness continuum
- Participates in pre-professional, graduate and continuing education of nurses and other health care providers:
  - Completes a needs assessment as appropriate to guide interventions with staff;
  - Promotes professional development of staff nurses and continuing education activities;
  - Implements staff development and continuing education activities;
  - Mentors nurses to translate research into practice.
- Contributes to the advancement of the profession as a whole by disseminating outcomes of CNS practice through presentations and publications
- Mentors staff nurses, graduate students and others to acquire new knowledge and skills and develop their careers
- Mentors health professionals in applying the principles of evidence-based care
- Uses coaching and advanced communication skills to facilitate the development of effective clinical teams
- Provides leadership in conflict management and negotiation to address problems in the healthcare system

#### **Competency 6- Research**

The work of thorough and systematic inquiry. Includes the search for, interpretation, and use of evidence in clinical practice and quality improvement, as well as active participation in the conduct of research.

## **I. Interpretation, Translation and Use of Evidence**

- Analyzes research findings and other evidence for their potential application to clinical practice
- Integrates evidence into the health, illness, and wellness management of patients, families, communities and groups
- Applies principles of evidence-based practice and quality improvement to all patient care
- Assesses system barriers and facilitators to adoption of evidence-based practices
- Designs programs for effective implementation of research findings and other evidence in clinical practice
- Cultivates a climate of clinical inquiry across spheres of influence:
  - Evaluates the need for improvement or redesign of care delivery processes to improve safety, efficiency, reliability, and quality
  - Disseminates expert knowledge

## **II. Evaluation of Clinical Practice**

- Fosters an interdisciplinary approach to quality improvement, evidence-based practice, research, and translation of research into practice
- Participates in establishing quality improvement agenda for unit, department, program, system, or population
- Provides leadership in planning data collection and quality monitoring
- Uses quality monitoring data to assess the quality and effectiveness of clinical programs in meeting outcomes
- Develops quality improvement initiatives based on assessments
- Provides leadership in the design, implementation and evaluation of process improvement initiatives
- Provides leadership in the system-wide implementation of quality improvements and innovations

## **III. Conduct of Research**

- Participates in conduct of or implementation of research which may include one or more of the following:
  - Identification of questions for clinical inquiry
  - Conduct of literature reviews
  - Study design and implementation
  - Data collection
  - Data analysis
  - Dissemination of findings

### **Competency 7-Ethical decision making, moral agency and advocacy**

Identifying, articulating, and taking action on ethical concerns at the patient, family, health care provider, system, community, and public policy levels.

- Engages in a formal self-evaluation process, seeking feedback regarding own practice, from patients, peers, professional colleagues and others
- Fosters professional accountability in self or others
- Facilitates resolution of ethical conflicts:
  - Identifies ethical implications of complex care situations
  - Considers the impact of scientific advances, cost, clinical effectiveness, patient and family values and preferences, and other external influences
  - Applies ethical principles to resolving concerns across the three spheres of influence
- Promotes a practice climate conducive to providing ethical care

- Facilitates interdisciplinary teams to address ethical concerns, risks or considerations, benefits and outcomes of patient care
- Facilitates patient and family understanding of the risks, benefits, and outcomes of proposed healthcare regimen to promote informed decision making
- Advocates for equitable patient care by:
  - Participating in organizational, local, state, national, or international level of policy-making activities for issues related to their expertise
  - Evaluating the impact of legislative and regulatory policies as they apply to nursing practice and patient or population outcomes
- Promotes the role and scope of practice of the CNS to legislators, regulators, other health care providers, and the public:
  - Communicates information that promotes nursing, the role of the CNS and outcomes of nursing and CNS practice through the use of the media, advanced technologies, and community networks
  - Advocates for the CNS/APRN role and for positive legislative response to issues affecting nursing practice

National CNS Task Force. (2010.). *Clinical nurse specialist core competencies*. Available May 24, 2011 from <http://www.nacns.org/LinkClick.aspx?fileticket=s5bvR1QrNLw%3d&tabid=36>

## ADMISSION AND PROGRESSION OVERVIEW

(For information about University Admission, see *General Catalog*, Graduate Studies Section)

### GENERAL INFORMATION

The department offers a Commission on Collegiate Nursing Education (CCNE) accredited program which leads to the Master of Science degree in Nursing (MSN). The purpose of the program is to prepare nurses for advanced practice in the functional roles of primary care nurse practitioner and clinical nurse specialist/nurse educator. Each graduate of the master's in nursing program must demonstrate advanced knowledge and skill in physical diagnosis, psychological assessment, and management of health-illness needs in complex client and community systems. The program provides a foundation for doctoral study in nursing.

At California State University, Fresno, the post-master's nurse practitioner certificate is 34 units and the post-master's clinical nurse specialist/nurse educator certificate is 32 units. These certificates are issued by the California Board of Registered Nursing. Applicants may receive credit toward the certificates for graduate courses taken previously. Typically the main courses that are requested for credit are the advanced theories and advanced issues courses. In order to request a course substitution, the applicant must submit a copy of the course description, objectives, and assignments for review by the graduate coordinator. At that time, the course of study will be determined with input from the student and department graduate curriculum committee. Students seeking post-master's certificates are exempt from some coursework and have a shorter program.

### UNIVERSITY GRADUATE SCHOOL ADMISSION PROCESS

Application and progression at the University level.

1. Phase One:
  - a) File application for graduate admission with the designated fee to the University by **March 1**. You can apply online at [http://www.csumentor.edu/AdmissionApp/grad\\_apply.asp](http://www.csumentor.edu/AdmissionApp/grad_apply.asp)
  - b) File official transcripts from all post-secondary schools. Transcripts should be sent to the Graduate Admission's Office, Joyal Administration Building, 5150 N. Maple, M/S JA57, Fresno, CA 93740-8026, by calling (559) 278-4073. Graduate Admissions will verify cumulative GPA of 2.50 on last 60 units.
  - c) GRE scores are no longer required for admission to graduate programs in the Department of Nursing.
  - d) The Graduate Admissions Office will verify information and forward the file to the Department of Nursing. Note: The Department of Nursing will not process your application until you have applied to the University.
  - e) Students enrolled at California State University, Fresno as post-baccalaureate students must submit a Change of Major form to the Graduate Studies office in Thomas Administration before their applications can be processed by the Department of Nursing.
2. Phase Two: Admission to the Division of Graduate Studies with graduate standing:
  - a) Conditionally classified standing - student is admitted with deficiencies which can be remedied by additional preparation.
  - b) Classified standing - student fully meets all admission requirements.

## DEPARTMENT OF NURSING ADMISSION PROCESS

1. File Department of Nursing Graduate Program Application by **April 1** with copies of the following:
  - a. Official transcripts from all post-secondary schools. Transcripts must indicate:
    1. Baccalaureate Degree in Nursing from NLN or CCNE accredited school with cumulative GPA of 3.0.
    2. Completion of statistics, introductory nursing research and health assessment.
  - b. Registered Nurse Licensure in California.
  - c. Include three, signed, (3) letters of recommendation (see guidelines).
  - d. Department of Nursing's Graduate Program Written Essay.
2. Selection: Candidates selected for admission will be notified by mail by June 15.

## CONTINUING ENROLLMENT REQUIREMENTS

1. Current California Registered Nursing License must be maintained throughout enrollment in the program.
2. Current professional liability and malpractice insurance must be maintained through current enrollment throughout the program.
3. Current CPR certification must be maintained throughout enrollment in the program.
4. Health clearance from University Health Office indicating student meets the requirements of the Department of Nursing. These requirements are consistent with university and clinical agency requirements.

## CLASSIFIED STANDING CRITERIA: UNIVERSITY

Classified graduate standing gives a student permission to work toward qualifying for candidacy. A student should be classified by the semester in which a maximum of 10 units to be used toward the master's degree are completed. Typically, nursing graduate students will be admitted with Classified Standing as long as they have completed statistics, introductory nursing research and health assessment; but each student should check with the Graduate Coordinator for any specific conditions of admission.

## GRADUATE WRITING REQUIREMENT

All students must meet the University's graduate writing proficiency requirement prior to being advanced to candidacy for the master's degree. Students fulfill the writing requirement by passing the writing component of NURS 221 –Theories Foundations. The assigned course faculty will evaluate the proposal for demonstration of writing competence.

### **Appeal Process**

In the case of a failure to fulfill the graduate writing requirement, the student must resubmit the thesis/project to the course faculty for approval prior to progressing.

## PETITION FOR ADVANCEMENT TO CANDIDACY: UNIVERSITY

The approved degree program for the master's degree is a coherent pattern of (1) specific requirements and (2) additional courses selected to meet the student's particular needs.

1. Departmental recommendation for advancement to candidacy is made on a petition form available from the Division of Graduate Studies. On this petition form, the student lists courses which will constitute the degree program.
2. At least 28 units of the 40/38-unit program must be residence credit (courses taken through regular enrollment at CSU-Fresno).
3. No more than 9 units, (either transfer units or CSU, Fresno Extension units) may be included in the 40/38-unit program.

## PROGRAM ADJUSTMENTS

Students are responsible for completing the specific courses listed on the filed Petition for advancement to Candidacy form.

1. Once a program has been approved by the university Graduate Committee, it may be changed only on the written request of the student and the Graduate Coordinator with the approval of the Dean, Division of Graduate Studies.
2. Program adjustment forms are available in the Division of Graduate Studies.

## CULMINATING EXPERIENCE

A culminating experience is required for each master's degree. Acceptable culminating experiences include thesis (NURS 299), project (NURS 298), or comprehensive examination. Candidates are required to select one of these experiences to complete the degree.

1. Types:
  - a. Thesis  
A Thesis is the written product of the systematic study of a significant problem. It clearly identifies the problem, states the major assumptions, explains the significance of the undertaking, sets forth the sources for and methods of gathering information analyzes the data, and offers a conclusion or recommendation. The finished product must evidence originality, critical and independent thinking, appropriate organization and format, clarity of purpose, and accurate and thorough documentation. An oral defense of the thesis will be required.
  - b. Project  
A project is a significant undertaking of a pursuit appropriate to the fine and applied arts or to professional fields. It must evidence originality and independent thinking, appropriate form, and organization, and a rationale. It must be described and summarized in a written abstract that includes the project's significance, objectives, methodology, and a conclusion or recommendation. An oral defense of the project may be required, along with an approval signature from the Graduate Coordinator.



c. Comprehensive Examination

A comprehensive examination is an assessment of the student's ability to integrate the comprehensive knowledge of the area of master's degree study, show critical and independent thinking, and demonstrate mastery of the subject matter. A record of examination questions and responses is maintained.

2. Candidates follow all University and Departmental requirements for a culminating experience.
3. Whether a student is preparing a thesis, project, or comprehensive exam, it should be noted that quality of work accomplished is a major consideration in judging acceptability. The finished project must evidence originality, appropriate organization, clarity of purpose, critical analysis, and accuracy and completeness of documentation where needed. Critical and independent thinking should characterize every project. Mere description, cataloging, compilation, and other superficial procedures are not adequate. The quality of writing, format, and documentation must meet standards appropriate for publication in the scholarly journals of the fields, or be consistent with the dictates of an authorized stylebook.

The culminating experience is a required individual candidate experience. It is not a group experience and therefore, the product must be the candidate's scholarly work. For more information, consult the *California State University, Fresno General Catalog*.

#### **THESIS OR PROJECT RESEARCH INVOLVING HUMAN SUBJECTS**

Students conducting thesis/project research involving human subjects should not begin use of human subjects until written approval from the departmental Human Subjects Committee has been granted.

1. Research classified as at risk requires both Department and University Human Subjects Committee approval. Students should allow at least one month for Committee review.
2. Research classified as not at risk requires only Human Subjects Committee approval from the Nursing Department only.

#### **COMPREHENSIVE EXAMINATION**

A comprehensive examination is offered for students not electing to complete a thesis or project.

1. The comprehensive examination will be offered for zero (0) units at a designated time each academic year.
2. Students selecting this option are required to complete alternate approved coursework: three (3) graduate elective units.
3. Comprehensive examination approval is granted through the approval of the faculty advisor and graduate coordinator.
4. The comprehensive examination can only be taken during the final semester of the student's program of study.

#### **TIME LIMITATIONS AND VALIDATION**

1. Exclusive of prerequisite coursework, a period of five years is allowed for the completion of all requirements for the master's degree. Courses completed before the cut off date cannot be used to meet requirements for a degree, except through validation.
2. Validation of out-of-date coursework may be considered if such work has been previously approved on the Petition for Advancement to Candidacy. Currently, a maximum of one-third of required degree units may be validated by such means.

## APPEALS AND PETITIONS

1. Graduate students wishing to request substitutions or modifications in a department's degree requirements should initiate their request through the department's Graduate Committee.
2. Request for exceptions to established university policies governing graduate study may be addressed to the Dean, Division of Graduate Studies, and also to the University Graduate Committee.
3. Information concerning grade protest procedures is available in the Office of the Dean of Student Affairs.

## REQUEST THAT MASTER'S DEGREE BE GRANTED

1. Request that the master's degree be granted (which includes the graduation fee) must be filed within the first two weeks of the semester in which the work is to be completed.
2. Applicants must be enrolled (see Continuous Enrollment).
3. During the summer, the request should be filed before the end of the second week of the first summer session.
4. Prior to filing a request for the master's degree to be granted, the student should check with the graduate coordinator in order to ensure that all program requirements have been completed or will be by the end of the semester. A clearance signature of the Nursing Chairperson is required. Participation in graduation ceremonies is to be coordinated with program completion.
5. Once all requirements for the degree to be granted have been met, it is the student's responsibility to ensure that all necessary paperwork, including the Degree Clearance paperwork, is submitted to the Division of Graduate Studies by the published deadlines.
6. Failure to complete the requirements for the degree during the semester (or summer) of the application necessitates the filing of a new application, including a reapplication fee, for the semester of actual completion.

**NOTE: Both University and Department requirements must be met to receive a degree from California State University, Fresno.**

## PROGRAMS OF STUDY

### Master of Science Degree in Nursing Nurse Practitioner Options

PROGRAM OF STUDY     A minimum of 40 units is required for the MSN in Primary Care Nursing/Nurse Practitioner

#### CORE COURSES ~ 13 UNITS

| Course                                    | Units    |
|---|----------|
| NURS 211~Advanced Pharmacology            | 3        |
| NURS 212~Advanced Pathophysiology         | 2        |
| NURS 221~Theoretical Foundations (Online) | 2        |
| NURS 223~Advanced Research Methodology    | 3        |
| NURS 225~Advanced Nursing Issues (Online) | 3        |
|   | 13 units |

#### ROLE SPECIALIZATION ~ 24 UNITS

| Family Nurse Practitioner (FNP)                         |          | Pediatric Nurse Practitioner (PNP)                      |          |
|---|----------|---|----------|
| NURS 210~Health Assessment in Advanced Nursing Practice | 3        | NURS 210~Health Assessment in Advanced Nursing Practice | 3        |
| NURS 215~Obstetrics & Gynecology in Primary Care        | 3        | NURS 215~Obstetrics & Gynecology in Primary Care        | 3        |
| NURS 265~FNP Role in Primary Prevention                 | 2        | NURS 262~PNP Role in Primary Prevention                 | 2        |
| NURS 264~Primary Practicum FNP                          | 4        | NURS 263~Primary Practicum PNP                          | 4        |
| NURS 266~FNP Role in Secondary Prevention               | 2        | NURS 268~PNP Role in Secondary Prevention               | 2        |
| NURS 267~Practicum in Secondary Prevention, FNP         | 4        | NURS 269~Practicum in Secondary Prevention, PNP         | 4        |
| NURS 277~FNP Role in Tertiary Prevention                | 2        | NURS 279~PNP Role in Tertiary Prevention                | 2        |
| NURS 278~Practicum in Tertiary Prevention, FNP          | 4        | NURS 280~Practicum in Tertiary Prevention, PNP          | 4        |
|   | 24 Units |   | 24 Units |

#### THESIS, PROJECT, OR COMP EXAM ~ 3 UNITS

Students need to select one option:

|  |           |                   |
|--|-----------|-------------------|
| 1. NURS 299 Thesis   | 3         | Units             |
| <b>OR</b>  |           |                   |
| 2. NURS 298 Project  | 3         | Units             |
| <b>OR</b>  |           |                   |
| 3. Comprehensive Exam (0 units - 3 cognate units required) | 3         | Units of Cognates |
| <b>Total Program Units</b>                                 | <b>40</b> |                   |

**Master of Science Degree in Nursing  
Clinical Nurse Specialist/Nurse Educator Option**

PROGRAM OF STUDY    A minimum of 38 units is required for the MSN in Clinical Specialist/Nurse Educator.

**CORE COURSES ~ 13 UNITS**

| Course                                     | Units    |
|--|----------|
| NURS 211~Advanced Pharmacology             | 3        |
| NURS 212~Advanced Pathophysiology (Online) | 2        |
| NURS 221~Theoretical Foundations (Online)  | 2        |
| NURS 223~Advanced Research Methodology     | 3        |
| NURS 225~Advanced Nursing Issues (Online)  | 3        |
|  | 13 units |

**Clinical Nurse Specialist/Nurse Educator Role Specialization ~ 22 UNITS**

| Course  | Units    |
|---|----------|
| NURS 210 ~ Health Assessment in Advanced Nursing Practice                     | 3        |
| NURS 229 ~ Practicum in Advanced Clinical Nursing for the Clinical Specialist | 3        |
| NURS 230 ~ Seminar in Advanced Practice Nursing for the Clinical Specialist   | 2        |
| NURS 250 ~ Seminar in Clinical Specialization                                 | 2        |
| NURS 251 ~ Practicum in Clinical Specialization                               | 3        |
| NURS 240 ~ Curriculum Development in Nursing                                  | 3        |
| NURS 241 ~ Instructional Methods in Nursing Education                         | 3        |
| NURS 242 ~ Evaluations Methods in Nursing Education                           | 3        |
|   | 22 Units |

**THESIS, PROJECT, OR COMP EXAM ~ 3 UNITS**

Students need to select one option:

- |   |   |                   |
|---|---|-------------------|
| 1.    NURS 299 Thesis   | 3 | Units             |
| <b>OR</b>   |   |                   |
| 2.    NURS 298 Project  | 3 | Units             |
| <b>OR</b>   |   |                   |
| 3.    Comprehensive Exam (0 units - 3 cognate units required) | 3 | Units of Cognates |

Total Program Units

38

**FAMILY NURSE PRACTITIONER  
SAMPLE MSN PROGRAM  
Example: Full Time Schedule**

| YEAR 1        |  |       |                 |  |       |
|---------------|--|-------|-----------------|--|-------|
| FALL SEMESTER |  | UNITS | SPRING SEMESTER |  | UNITS |
| NURS 210      | Health Assessment in Advanced Nursing Practice               | 3     | NURS 211        | Advanced Pharmacology                    | 3     |
| NURS 212      | Advanced Pathophysiology                                     | 2     | NURS 223        | Advanced Research Methodology in Nursing | 3     |
| NURS 221      | Theories Foundations of Nursing Practice                     | 2     | NURS 264        | Primary Practicum FNP                    | 4     |
| NURS 225      | Advanced Nsg. Issues: Health Care Policy, Ethics & Role Dev. | 3     | NURS 265        | FNP Role in Primary Prevention           | 2     |
| TOTAL         |  | 10    | TOTAL           |  | 12    |

| YEAR 2        |   |          |                 |                                       |       |
|---------------|---|----------|-----------------|---------------------------------------|-------|
| FALL SEMESTER |   | UNITS    | SPRING SEMESTER |                                       | UNITS |
| NURS 266      | FNP Role in Secondary Prevention  | 2        | NURS 277        | FNP Role in Tertiary Prevention       | 2     |
| NURS 215      | OB & GYN in Primary Care  | 3        | NURS 278        | Practicum in Tertiary Prevention, FNP | 4     |
| NURS 267      | Practicum in Secondary Prevention FNP   | 4        | Comp Exam       | If not enrolled in Nurs 298 or 299    | 0     |
| NURS 298/N299 | Project/Thesis (exclude if taking Comp Exam) 3unit Cognate (if doing Comp exam) | 3<br>0-3 |                 |                                       |       |
| TOTAL         |   | 12       | TOTAL           |                                       | 6     |

**Example: Part Time Schedule**

| YEAR 1        |  |       |                 |  |       |
|---------------|--|-------|-----------------|--|-------|
| FALL SEMESTER |  | UNITS | SPRING SEMESTER |  | UNITS |
| NURS 221      | Theories Foundations of Nursing Practice                     | 2     | NURS 211        | Advanced Pharmacology                    | 3     |
| NURS 225      | Advanced Nsg. Issues: Health Care Policy, Ethics, & Role Dev | 3     | NURS 223        | Advanced Research Methodology in Nursing | 3     |
| Total         |  | 5     | Total           |  | 6     |

| YEAR 2        |  |       |                 |                                |       |
|---------------|--|-------|-----------------|--------------------------------|-------|
| FALL SEMESTER |  | UNITS | SPRING SEMESTER |                                | UNITS |
| NURS 210      | Health Assessment in Advanced Nursing Practice | 3     | NURS 264        | Primary Practicum FNP          | 4     |
| NURS 212      | Advanced Pathophysiology                       | 2     | NURS 265        | FNP Role in Primary Prevention | 2     |
| Total         |  | 5     | Total           |                                | 6     |

| YEAR 3        |                                  |       |                 |                                 |       |
|---------------|----------------------------------|-------|-----------------|---------------------------------|-------|
| FALL SEMESTER |                                  | UNITS | SPRING SEMESTER |                                 | UNITS |
| NURS 266      | FNP Role in Secondary Prevention | 2     | NURS 277        | FNP Role in Tertiary Prevention | 2     |
| NURS 267      | Practicum in Secondary           |       |                 |                                 |       |

|              |  |    |            |                                       |   |
|--------------|--|----|------------|---------------------------------------|---|
| NURS 298/299 | Prevention, FNP Project/Thesis/Cognate | 4  | NURS 278   | Practicum in Tertiary Prevention, FNP | 4 |
| NURS 215     | OB & GYN in Primary Care               | 3  | Comp Exam- | if not enrolled in NURS 298 or 299    | 0 |
|              | Total                                  | 12 |            | Total                                 | 6 |

**PEDIATRIC NURSE PRACTITIONER  
SAMPLE MSN PROGRAM  
Example: Full Time Schedule**

| YEAR 1        |  |    |          |  |    |  |
|---------------|--|----|----------|--|----|--|
| FALL SEMESTER |  |    | UNITS    | SPRING SEMESTER                                |    |  |
| NURS 210      | Health Assessment in Advanced Nursing Practice           | 3  | NURS 211 | Advanced Pharmacology                          | 3  |  |
| NURS 212      | Advanced Pathophysiology                                 | 2  | NURS 223 | Advanced Research Methodology in Nursing       | 3  |  |
| NURS 221      | Theories Foundations of Nursing Practice                 | 2  | NURS 262 | PNP Role in Primary Prevention                 | 2  |  |
| NURS 225      | Adv. Nsg. Issues: Health Care Policy, Ethics & Role Dev. | 3  | NURS 263 | Primary Practicum Pediatric Nurse Practitioner | 4  |  |
|               | Total  | 10 |          | Total  | 12 |  |

| YEAR 2         |   |     |           |  |   |  |
|----------------|---|-----|-----------|--|---|--|
| FALL SEMESTER  |   |     | UNITS     | SPRING SEMESTER  |   |  |
| NURS 268       | PNP Role in Secondary Prevention  | 2   | NURS 279  | PNP Role in Tertiary Prevention                                | 2 |  |
| NURS 269       | Practicum in Secondary Prevention, PNP  | 4   | NURS 280  | Practicum in Tertiary Prevention, Pediatric Nurse Practitioner | 4 |  |
| NURS 215       | OB & GYN in Primary Care  | 3   | Comp Exam | If not enrolled in NURS 298 or 299                             | 0 |  |
| NURS 298/299 - | Project/Thesis (exclude if taking Comp Exam 3 unit Cognate (if doing Comp exam) | 0-3 |           | Total  | 6 |  |
|                | Total   | 12  |           |  |   |  |

**Example: Part Time Schedule**

| YEAR 1        |   |   |          |  |   |  |
|---------------|---|---|----------|--|---|--|
| FALL SEMESTER |   |   | UNITS    | SPRING SEMESTER                          |   |  |
| NURS 221      | Theories Foundations of Nursing Practice                      | 2 | NURS 211 | Advanced Pharmacology                    | 3 |  |
| NURS 225      | Advanced Nsg. Issues: Health Care Policy, Ethics, & Role Dev. | 3 | NURS 223 | Advanced Research Methodology in Nursing | 3 |  |
|               | Total   | 5 |          | Total                                    | 6 |  |

| YEAR 2        |  |   |          |                                |   |  |
|---------------|--|---|----------|--------------------------------|---|--|
| FALL SEMESTER |  |   | UNITS    | SPRING SEMESTER                |   |  |
| NURS 210      | Health Assessment in Advanced Nursing Practice | 3 | NURS 262 | PNP Role in Primary Prevention | 2 |  |
| NURS 212      | Advanced Pathophysiology                       | 2 | NURS 263 | Primary Practicum PNP          | 4 |  |
|               | Total  | 5 |          | Total                          | 6 |  |

| YEAR 3          |  |              |           |                                       |              |
|-----------------|--|--------------|-----------|---------------------------------------|--------------|
|                 | <u>FALL SEMESTER</u>                   | <u>UNITS</u> |           | <u>SPRING SEMESTER</u>                | <u>UNITS</u> |
| NURS 268        | PNP Role in Secondary Prevention       | 2            | NURS 279  | PNP Role in Tertiary Prevention       | 2            |
| NURS 269        | Practicum in Secondary Prevention, PNP | 4            | NURS 280  | Practicum in Tertiary Prevention, PNP | 4            |
| NURS 215        | OB & GYN in Primary Care               | 3            | Comp Exam | if not enrolled in                    |              |
| NURS298/<br>299 | Project/Thesis/Cognate                 | 3            |           | NURS 298 or 299                       | 0            |
|                 | <b>Total</b>                           | <b>12</b>    |           | <b>Total</b>                          | <b>6</b>     |

**CLINICAL NURSE SPECIALIST/NURSE EDUCATOR  
SAMPLE MSN PROGRAM  
Example: Full Time Schedule**

| YEAR 1               |  |           |                      |  |           |
|----------------------|--|-----------|----------------------|--|-----------|
| FALL SEMESTER        |  | UNITS     | SPRING SEMESTER      |  | UNITS     |
| NURS 210             | Health Assessment in Advanced Nursing Practice                       | 3         | NURS 211<br>NURS 223 | Advanced Pharmacology<br>Advanced Research Methodology in Nursing  | 3<br>3    |
| NURS 212<br>NURS 221 | Advanced Pathophysiology<br>Theories Foundations of Nursing Practice | 2<br>2    | NURS 229             | Practicum in Advanced Clinical Nursing for the Clinical Specialist | 3         |
| NURS 225             | Advanced Nsg. Issues: Health Care Policy, Ethics & Role Dev.         | 3         | NURS 230             | Seminar in Advanced Practice Nursing for the Clinical Specialist   | 2         |
| NURS 240             | Curriculum Development in Nursing                                    | 3         | NURS 241             | Instructional Methods in Nursing Education                         | 3         |
| TOTAL                |  | <b>13</b> | TOTAL                |  | <b>14</b> |

| YEAR 2             |   |             |                  |  |          |
|--------------------|---|-------------|------------------|--|----------|
| FALL SEMESTER NURS |   | UNITS       | SPRING SEMESTER  |  | UNITS    |
| NURS 250           | Seminar in Clinical Specialization                                  | 2           | NURS 298<br>/299 | Project/Thesis (exclude if taking Comp Exam) | 3        |
| NURS 251           | Practicum in Clinical Specialization                                | 3           | TOTAL            |  | <b>3</b> |
| NURS 242           | Evaluation & Testing in Nursing Ed<br>Elective (if doing Comp Exam) | 3<br>3      |                  |  |          |
| TOTAL              |   | <b>8-11</b> |                  |  |          |

**Example: Part Time Schedule**

| YEAR 1        |  |          |                       |   |          |
|---------------|--|----------|-----------------------|---|----------|
| FALL SEMESTER |  | UNITS    | SPRING SEMESTER       |   | UNITS    |
| NURS 221      | Theories Foundations of Nursing Practice                               | 2        | NURS 211<br>NURS 223- | Advanced Pharmacology<br>Advanced Research Methodology in Nursing | 3<br>3   |
| NURS 225      | Advanced Nursing Issues: Health Care Policy, Ethics & Role Development | 3        | TOTAL                 |   | <b>6</b> |
| TOTAL         |  | <b>5</b> |                       |   |          |

| YEAR 2        |  |          |                 |  |          |
|---------------|--|----------|-----------------|--|----------|
| FALL SEMESTER |  | UNITS    | SPRING SEMESTER |  | UNITS    |
| NURS 210      | Health Assessment in Advanced Nursing Practice | 3        | NURS 229        | Practicum in Advanced Clinical Nursing for the Clinical Specialist | 3        |
| NURS 212      | Advanced Pathophysiology                       | 2        | NURS 230        | Seminar in Advanced Practice Nursing for the Clinical Specialist   | 2        |
| NURS 240-     | Curriculum Development in Nursing              | 3        | NURS 241        | Instructional Methods in Nursing Education                         | 3        |
| TOTAL         |  | <b>8</b> | TOTAL           |  | <b>8</b> |



| YEAR 3               |   |              |              |  |          |
|----------------------|---|--------------|--------------|--|----------|
| <u>FALL SEMESTER</u> |   | <u>UNITS</u> |              | <u>SPRING SEMESTER</u>                       |          |
| NURS 250             | Seminar in Clinical Specialization          | 2            | NURS 298/299 | Project/Thesis (exclude if taking Comp Exam) | <u>3</u> |
| NURS 251             | Practicum in Clinical Specialization        | 3            |              |  |          |
| NURS 242             | Evaluation and Testing in Nursing Education | <u>3</u>     |              | TOTAL  | <b>3</b> |
|                      | TOTAL                                       | <b>8</b>     |              |  |          |

### POST-MASTER'S FAMILY NURSE PRACTITIONER

| YEAR 1               |  |              |                      |  |          |
|----------------------|--|--------------|----------------------|--|----------|
| <u>FALL SEMESTER</u> |  | <u>UNITS</u> |                      | <u>SPRING SEMESTER</u>   |          |
| NURS 210             | Health Assessment in Advanced Nursing Practice | 3            | NURS 211<br>NURS 264 | Advanced Pharmacology<br>Primary Practicum Family Nurse Practitioner | 3<br>4   |
| NURS 212             | Advanced Pathophysiology                       | <u>2</u>     | NURS 265             | FNP Role in Primary Prevention                                       | <u>2</u> |
|                      | TOTAL  | <b>5</b>     |                      | TOTAL  | <b>9</b> |

| YEAR 2               |                                       |              |          |                                       |          |
|----------------------|---------------------------------------|--------------|----------|---------------------------------------|----------|
| <u>FALL SEMESTER</u> |                                       | <u>UNITS</u> |          | <u>SPRING SEMESTER</u>                |          |
| NURS 215             | OB & GYN in Primary Care              | 3            | NURS 277 | FNP Role in Tertiary Prevention       | 2        |
| NURS 266             | FNP Role in Secondary Prevention      | 2            | NURS 278 | Practicum in Tertiary Prevention, FNP | <u>4</u> |
| NURS 267             | Practicum in Secondary Prevention FNP | <u>4</u>     |          | TOTAL                                 | <b>6</b> |
|                      | TOTAL                                 | <b>9</b>     |          |                                       |          |

### POST-MASTER'S PEDIATRIC NURSE PRACTITIONER

| YEAR 1               |  |              |                      |   |          |
|----------------------|--|--------------|----------------------|---|----------|
| <u>FALL SEMESTER</u> |  | <u>UNITS</u> |                      | <u>SPRING SEMESTER</u>                                  |          |
| NURS 210             | Health Assessment in Advanced Nursing Practice | 3            | NURS 211<br>NURS 262 | Advanced Pharmacology<br>PNP Role in Primary Prevention | 3<br>2   |
| NURS 212             | Advanced Pathophysiology                       | <u>2</u>     | NURS 263             | Primary Practicum PNP                                   | <u>4</u> |
|                      | TOTAL  | <b>5</b>     |                      | TOTAL   | <b>9</b> |

| YEAR 2               |  |              |          |                                       |          |
|----------------------|--|--------------|----------|---------------------------------------|----------|
| <u>FALL SEMESTER</u> |  | <u>UNITS</u> |          | <u>SPRING SEMESTER</u>                |          |
| NURS 215             | OB & GYN in Primary Care               | 3            | NURS 279 | PNP Role in Tertiary Prevention       | 2        |
| NURS 268             | PNP Role in Secondary Prevention       | 2            | NURS 280 | Practicum in Tertiary Prevention, PNP | <u>4</u> |
| NURS 269             | Practicum in Secondary Prevention, PNP | <u>4</u>     |          | TOTAL                                 | <b>6</b> |
|                      | TOTAL                                  | <b>9</b>     |          |                                       |          |

**POST-MASTER'S CLINICAL NURSE SPECIALIST/NURSING EDUCATION**

| YEAR 1               |  |              |                        |   |              |
|----------------------|--|--------------|------------------------|---|--------------|
| <u>FALL SEMESTER</u> |  | <u>UNITS</u> | <u>SPRING SEMESTER</u> |   | <u>UNITS</u> |
| NURS 210             | Health Assessment in<br>Advanced Nursing<br>Practice | 3            | NURS 211<br>NURS 229   | Advanced Pharmacology<br>Practicum in Advanced<br>Clinical Nursing for the<br>Clinical Specialist | 3            |
| NURS 212             | Advanced<br>Pathophysiology                          | 2            | NURS 230               | Seminar in Advanced<br>Practice Nursing for the<br>Clinical Specialist                            | 2            |
| NURS 240             | Curriculum Development<br>in Nursing                 | <u>3</u>     | NURS 241               | Instructional Methods in<br>Nursing Education   | <u>3</u>     |
| TOTAL                |  | <b>8</b>     | TOTAL                  |   | <b>11</b>    |

| YEAR 2               |   | <u>UNITS</u> |
|----------------------|---|--------------|
| <u>FALL SEMESTER</u> |   |              |
| NURS 242             | Evaluation & Testing in<br>Nursing Ed   | 3            |
| NURS 250             | Seminar in Clinical<br>Specialization   | 2            |
| NURS 251             | Practicum in Clinical<br>Specialization | <u>3</u>     |
| TOTAL                |   | <b>8</b>     |

## PROGRAMS OF STUDY - SUMMARY

- 1. FAMILY NURSE PRACTITIONER (FNP): 40 UNITS**
  - a. Core (13 units): NURS 211, NURS 212, NURS 221, NURS 223, NURS 225
  - b. Role Specialization (24 units): NURS 210, NURS 215, NURS 264, NURS 265, NURS 266, NURS 267, NURS 277, NURS 278
  - c. Thesis, Project, or Comp Exam: NURS 298, NURS 299, or exam with 3 unit cognate
  
- 2. PEDIATRIC NURSE PRACTITIONER (PNP): 40 UNITS**
  - a. Core (13 units): NURS 211, NURS 212, NURS 221, NURS 223, NURS 225
  - b. Role Specialization (24 units): NURS 210, NURS 215, NURS 262, NURS 263, NURS 268, NURS 269, NURS 279, NURS 280
  - c. Thesis, Project, or Comp Exam: NURS 298, NURS 299, or exam with 3 unit cognate
  
- 3. CLINICAL NURSE SPECIALIST/NURSE EDUCATOR: 38 UNITS**
  - a. Core (13 units): NURS 211, NURS 212, NURS 221, NURS 223, NURS 225
  - b. Role Specialization (22 units): NURS 210, NURS 229, NURS 230, NURS 240, NURS 241, NURS 242, NURS 250, NURS 251
  - c. Thesis, Project, or Comp Exam: NURS 298, NURS 299, or exam with 3 unit cognate
  
- 4. POST- MASTER'S NURSE PRACTITIONER: 29 UNITS**
  - a. For FNP Track (29 units): NURS 210, NURS 211, NURS 212, NURS 215, NURS 264, NURS 265, NURS 266, NURS 267, NURS 277, NURS 278
  - b. For PNP Track (29 units): NURS 210, NURS 211, NURS 212, NURS 215, NURS 262, NURS 263, NURS 268, NURS 269, NURS 279, NURS 280
  
- 5. POST-MASTER'S CLINICAL NURSE SPECIALIST/NURSE EDUCATOR: 27 UNITS**

NURS 210, NURS 211, NURS 212, NURS 229, NURS 230, NURS 240,  
NURS 241, NURS 242, NURS 250, NURS 251

CALIFORNIA STATE UNIVERSITY, FRESNO  
Department of Nursing  
**Guidelines of Responsibilities for Practicum**

These guidelines outline the responsibilities of the California State University, Fresno, Department of Nursing, the placement facility, the preceptor, and the student, in order to meet the requirements of nursing practicum at the graduate level. Preceptor selection for clinical placement in both the CNS and nurse practitioner programs is the responsibility of the Department of Nursing. The Department will gather pertinent information to assist in preceptor identification during the first semester of the program. All preceptors must meet standards for educational and clinical experience as established by the California Board of Registered Nursing and appropriate accrediting bodies. Preceptors must be either a physician or a masters-prepared nurse practitioner.

**1. The Preceptor shall:**

- a. Be a Physician or Nurse Practitioner in Primary Care.
- b. Become informed as to the goals of the course and the student's learning objectives. These will be presented at the beginning of the course and are to be reviewed with the student.
- c. Determine with the student the clinical experiences that will help the student meet these learning objectives.
- d. Be available at the same time each week, unless prior arrangements are made for an equally qualified health professional to assume responsibility for consultation.
- e. Review with the student, on a regular basis, his/her progress in achieving the learning objectives. Identify and work on solving any problems, plan for special learning experiences, and keep communication open.
- f. Orient the student to the clinical facility – personnel, policies, procedures, and physical plant.
- g. Participate in the site visits made by the nursing instructor.
- h. Maintain communication with faculty regarding student's progress in meeting his/her objectives.
- i. Provide CSUF with a written resume of preceptor's work and educational accomplishments. (A form is provided in the syllabus if a resume is not available.)

**2. The Placement Facility shall**

- a. Provide each student with the clinical or leadership experience necessary to meet his/her learning objectives.

- b. Designate an appropriate staff member as the preceptor who will supervise the student and who is prepared at the master's degree level or beyond.
- c. Provide the human and physical resources needed for a desirable learning climate.
- d. Provide faculty access to the facility and staff.
- e. Orient faculty and student to the purposes, policies, and procedures of the placement facility.
- f. Not financially compensate any student receiving academic credit according to these guidelines.
- g. Have the right, after consultation with the faculty for the graduate practicum, to refuse to accept or continue any student who, in the facility's judgment, is not participating satisfactorily in this program.
- h. Notify the faculty member immediately of any problem involving the participating student.
- i. Maintain standards accepted by appropriate accrediting bodies as applicable.
- j. Participate in written evaluations of the student's performance.

**3. The Participating Student shall:**

- a. Prepare both comprehensive and specific learning objectives, submit them to his/her practicum faculty and provide a copy of the final draft to the preceptor for consideration.
- b. Negotiate with the preceptor prior to placement for achievable objectives.
- c. Work and plan closely with the preceptor to achieve these objectives.
- d. Abide by the agency policies.
- e. Keep the preceptor and instructor informed as to current address and telephone number.
- f. Inform the preceptor and instructor of any problems that arise during placement.
- g. Notify preceptor if there are any changes in scheduled clinical time.
- h. Maintain own professional malpractice insurance.
- i. Maintain current CPR certificate and California Registered Nursing licenses.
- j. Maintain own health and accident insurance – be responsible for any cost incurred for illness.
- k. Maintain automobile insurance, if driving during this clinical experience. The amount required may depend upon agency policy.
- l. Be responsible for all costs of participating in the clinical practicum: housing, food, travel, and personal expenses.

- m. Participate in seminars scheduled by the faculty.
- 4. The CSUF Department of Nursing Graduate Coordinator shall:**
- a. Identify health facilities and qualified preceptors who can provide positive learning experiences for students.
  - b. Approve where students will be placed.
  - c. Plan with placement facility personnel in advance of student's arrival, if needed.
  - d. Provide the student with information about the community, placement facility, preceptor, and academic and personal responsibility prior to placement.
  - e. Approve the behaviorally stated learning objectives developed by the student.
  - f. Be available for consultation with students, faculty, preceptors, and placement facility administrators.
  - g. Document that each student has a valid California Registered Nursing license, current CPR certification, a valid driver's license, and is covered by professional malpractice insurance, health and accident insurance, and the required amount of automobile insurance, where driving is a part of the clinical experience.
  - h. Conduct student seminars with participating students and make evaluative and requested visits to placement facilities where students are assigned.
  - i. Orient the involved persons to the objectives of the course and the roles and the responsibilities of those participating in the program.
  - j. Review student's journals and provide feedback based on content guidelines for journal and student's objectives.
  - k. Facilitate communication between all involved persons.
  - l. Evaluate each student's participation in this clinical experience according to the course objectives developed by faculty and individual objectives developed by the student in consultation with the faculty.
  - m. Give the grade and arrange for proper university credit.
  - n. Provide an evaluation form for the student and preceptor to complete at the conclusion of the student's experience.
  - o. Determine any additional activities to fulfill the course requirements.
- 5. The CSUF Department of Nursing shall:**
- a. Prepare a contract between the agency and the University.
  - b. Approve the enrollment of student in clinical practicum.
  - c. Provide for a nursing faculty member to collaborate with the placement facility and preceptor; and to provide appropriate instruction and guidance to assigned students.

- d. Determine the number of clinical hours required and the units of academic credit to be granted the student for completion of this course.

MASTER'S DEGREE PROGRAM

**PRECEPTOR/AGENCY INFORMATION SHEET**

**To be completed by student**

1. Agency Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_
2. Administrator or Director: \_\_\_\_\_
3. Director of Nursing: \_\_\_\_\_
4. Agency Staff (types and number of positions): \_\_\_\_\_
5. Size of Facility (number of beds, number of rooms, number of staff): \_\_\_\_\_
6. Accreditation: \_\_\_\_\_
7. Agency Owner: \_\_\_\_\_
8. Source of Financial Support: \_\_\_\_\_
9. Describe Surrounding Community: \_\_\_\_\_
10. Please list and describe services and programs provided: \_\_\_\_\_
11. Average census or number of client visits: \_\_\_\_\_
12. Hours of operation: \_\_\_\_\_
13. As a preceptor, what experiences do you feel the student needs to participate in to understand your role and that of your agency?

ADDITIONAL COMMENTS:

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Semester/Year \_\_\_\_\_ Student Name \_\_\_\_\_ Date \_\_\_\_\_



CALIFORNIA STATE UNIVERSITY, FRESNO  
Department of Nursing

MASTER'S DEGREE PROGRAM

**PRECEPTOR CURRICULUM VITAE FORM**

Complete this form if you do not have a resume prepared to copy

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ License Number: \_\_\_\_\_

Preceptor for (name of CSUF graduate student): \_\_\_\_\_

Former preceptor experience: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Educational Preparation: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Professional Experience: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Professional and Community Organizations: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Publications and Research: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CALIFORNIA STATE UNIVERSITY, FRESNO  
Department of Nursing

**POSITION STATEMENT REGARDING UNIVERSAL PRECAUTIONS**  
CALIFORNIA STATE UNIVERSITY, FRESNO  
Department of Nursing

The faculty of the Department of Nursing recognize the need for faculty and students to adhere to current Universal Precaution practices at all times. The following position statement summarizes the guidelines of such precautions believed essential for professional nursing practice and the rationale for their use by the nursing community at California State University, Fresno. These precautions are not only to protect students and faculty, but to protect patients and families as well. Changes in precautionary measures will be closely monitored by the Department of Nursing on an ongoing basis. See:  
<http://www.cdc.gov/hicpac/2007IP/2007isolationPrecautions.html>

Universal Precautions: Defined

The Center for Disease Control, Atlanta, GA, recommends that blood and body fluid precautions be consistently used for all patients regardless of their blood-borne infections status. This extension of blood and body fluid precautions to all patients is referred to as "Universal Blood and Body Fluid Precautions" or "Universal Precautions". Under universal precautions, blood and body fluids of all patients are considered potentially infectious for human immunodeficiency virus (HIV), Hepatitis B virus (HBV), and other blood borne pathogens.

CDC Standard Precaution

The CDC recommends **Standard Precautions** for the care of all patients, regardless of their diagnosis or presumed infection status.

- **Standard Precautions** apply to 1) blood; 2) all body fluids, secretions, and excretions, *except sweat*, regardless of whether or not they contain visible blood; 3) non-intact skin; and 4) mucous membranes. Standard precautions are designed to reduce the risk of transmission of microorganisms from both recognized and unrecognized sources of infection in hospitals.
  - Standard precautions includes the use of: hand washing, appropriate personal protective equipment such as gloves, gowns, masks, whenever touching or exposure to patients' body fluids is anticipated.

Universal precautions are intended to prevent parenteral, mucous membrane, and non-intact skin exposures of health care workers to blood borne pathogens.

Universal precautions apply to blood, wound drainage, semen, vaginal secretions, tissues, cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, and amniotic fluid. Any body fluid is a warning that universal precautions are a must.

Questionable Situations

Some blood and body fluids are considered at lower risk. Included are feces, nasal secretions, sputum, sweat, tears, urine, vomitus, saliva, and breast milk. When blood is absent, the risk of transmission of HIV and HBV from these fluids is extremely low. However, blood is not always visible and universal precautions must be used anyway. In addition, some of these fluids and

excretions represent a potential source of nosocomial and community acquired infections with other pathogens and the Department of Nursing recommends that gloves be used in all situations.

Workers need to minimize the need for emergency mouth to mouth resuscitation. Mouth pieces, resuscitation bags, or other ventilation devices should be available for use in situations where the need of resuscitation is predictable. In cases where resuscitation is not predictable, it is important to have knowledge of emergency policies of the agency or institutions.

Gloves should be worn when feeding patients and when wiping saliva from skin. Special precautions are recommended for dentistry.

### Use of Protective Barriers

All health care workers must routinely use appropriate barrier precautions to prevent skin and mucous membrane exposure when in contact with blood or other body fluids of any patient is anticipated.

Examples of protective barriers include gloves, gowns, masks, and protective eye wear. Universal precautions are intended to supplement rather than replace recommendations for routine infection control, such as hand washing and use of gloves to prevent gross microbial contamination of hands. Judgment must be used in assessing the specific clinical situation.

Risks can be minimized if health care workers use the following general guidelines:

1. Take care to prevent injuries when using needles, scalpels, and other sharp instruments after procedures; when cleaning used instruments; and when disposing of used needles. DO NOT recap contaminated needles; do not remove contaminated needles from disposable syringes; and do not bend, break, or otherwise manipulate contaminated needles. Place used disposable syringes and needles, scalpel blades, and other sharp items in puncture-resistant containers as close to the use area as is practical.
2. Use protective barriers to prevent exposure to blood, body fluids containing visible blood, and other fluids to which universal precautions apply. The type of protective barrier(s) should be appropriate for the procedure being performed and the type of exposure anticipated.
3. Immediately and thoroughly wash hands and other skin surfaces that are contaminated with blood, body fluids containing visible blood, or other body fluids to which universal precautions apply.
4. Wearing heavy utility gloves, clean up contaminated surfaces immediately. Clean spills of blood and body fluids with commercial chemical germicide or 1:10 bleach solution (one part liquid bleach to nine parts water; make fresh solution each time.)

The following guidelines regarding glove use should be followed:

Gloves should always be available for health care worker's use in any questionable situation.. Gloves should be worn for touching blood and body fluids, mucous membranes, or non-intact skin of all patients, for handling items or surfaces soiled with blood or body fluids, and for performing venipuncture and other vascular access procedures. Double glove if there is danger of tearing during procedure. Use gloves for finger or heel sticks on adults, infants, and children.

Gloves should always be worn when health care workers have cuts, scratches, or other breaks in his/her skin. Hands should be washed immediately after gloves are removed.

Additional guidelines include:

1. Use of sterile gloves for procedures involving contact with normally sterile areas of the body.
2. Use examination gloves for procedures involving contact with mucous membranes, unless otherwise indicated, and for other patient care or diagnostic procedures that do not require the use of sterile gloves.
3. Change gloves between patient contacts.
4. Do not wash or disinfect surgical or examination gloves for reuse. Washing with surfactants may cause “wicking”, i.e., the enhanced penetration of liquids through undetected holes in the glove. Disinfecting agents may cause deterioration.
5. Use general purpose utility gloves (e.g., rubber household gloves) for housekeeping chores involving potential blood contact and for instrument cleaning and decontamination procedures. Utility gloves may be decontaminated and reused but should be discarded if they are peeling, cracked, or discolored, or if they have punctures, tears, or other evidence of deterioration.

There are no reported differences in barrier effectiveness between intact latex and intact vinyl used to manufacture gloves. The type of gloves chosen should be appropriate for the task performed.

The following general guidelines are recommended:

1. Masks and protective eyewear or face shields should be worn during procedures that are likely to generate droplets of blood or other body fluids to prevent exposure of mucous membranes of the mouth, nose, and eyes.
2. Gowns or aprons should be worn during procedures that are likely to generate splashes of blood or other body fluids.
3. Health care workers who have exudative lesions, weeping dermatitis, or broken skin on hands should refrain from all direct patient care and from handling patient care equipment without gloved protection.
4. Pregnant health care workers are not known to be at greater risk of contracting HIV infection than health care workers who are not pregnant; however, if a health care worker develops HIV infection during pregnancy, the infant is at risk of infection resulting from perinatal transmission. Because of this risk, pregnant health care workers should be especially familiar with and strictly adhere to precautions to minimize the risk of HIV transmission.
5. Health workers with powder allergies or glove sensitivities may request powder-free gloves or latex vs. vinyl.

### Need for Waste Management

Policies for defining, collecting, storing, decontaminating, and disposing of infective waste are generally determined by institutions and/or agencies in accordance with state and local regulations.

It is important for nursing faculty and students to have knowledge of the policies and procedures of the clinical agencies in which they have practical experience. Arrangements are also necessary for handling of small potentially contaminated items in the home situation.

Implementation of universal precautions does not eliminate the need for other category or disease specific isolation precautions, such as enteric precautions for infectious diarrhea or isolation for active pulmonary disease.

## Implementation of Recommended Precautions

Employers of health care workers and educational institutions responsible for the training of such programs should ensure that policies exist for:

1. Initial orientation and annual continuing education and training of all health care workers—including faculty, students, and trainees—on the epidemiology, modes of transmission, and prevention of HIV and other blood-borne infections and the need for routine use of universal blood and body fluid precautions for all patients.
2. Provision of equipment and supplies necessary to minimize the risk of infection with HIV and other blood-borne pathogens.
3. Monitoring adherence to recommended protective measures. When monitoring reveals a failure to follow recommended precautions, then counseling, education, and/or retraining should be provided, and if necessary, appropriate disciplinary action should be considered.

Professional associations and labor organizations, through continuing education efforts, should emphasize the need for health care workers to follow recommended precautions.

**<http://www.cdc.gov/hicpac/2007IP/2007isolationPrecautions.html>**

## **Health and Immunization Requirements for Undergraduate, School Nurse Credential, and Graduate Nursing Students**

All health and immunization requirements must be completed prior to attending any clinical experience. Students will not be permitted in the clinical facility without a physical examination and required immunization and skin tests. Evidence of compliance must be presented to the clinical instructor at the beginning of each semester. These requirements are also those of the clinical facilities of which the student may be assigned, therefore, failure to meet the requirements may result in exclusion from clinical practice.

### **PHYSICAL EXAMINATION**

Prior to entering the nursing major, all nursing students are required to have a physical examination. Physical examinations for graduate and school nurse credential students are optional.

Students may have the examination performed at the University Student Health Center or may be examined by their own physician or nurse practitioner. You are required to submit a copy of your **Physical Exam** results and **Immunization Records** to the Department of Nursing. If you elect to have your physical at the University Student Health Center, please call (559) 278-2734 for an appointment.

### **IMMUNIZATION AND SKIN TESTS**

Measles, Mumps, and Rubella: Proof of immunity or immunizations -

Rubella: Positive titer **or** 1 documented dose

Rubeola: Positive titer **or** 2 documented doses

Mumps: Positive titer **or** 1 documented dose

Pertussis (Tdap): A pertussis booster in the form of the **Tdap** is required for all Fresno State nursing students. This can be given at any time regardless of the last Td. (see [www.immunize.org](http://www.immunize.org))

Polio: History of primary polio series in childhood.

Tuberculin Skin Test: a Two-Step PPD is required for the baseline Tuberculin Skin Test (TST). CDC recommendation for Two-Step PPD: If 1st TST is negative, give 2nd TST 1–3 weeks later. (see [www.cdc.gov/tb/](http://www.cdc.gov/tb/))

The PPD is required every 6 months after the baseline. For a positive PPD a chest x-ray is required.

Hepatitis B: Documentation of either three doses of Hepatitis B vaccine (or 3 Hep AB) or documented seropositivity (e.g., presence of Hep B Surf Ab / anti-HBs) is required.

Hepatitis A: Documentation of two doses of Hepatitis A vaccine (or 3 Hep AB) is required.

Varicella: All students are required to demonstrate immunity to varicella via a positive titer or 2 documented varicella vaccine doses.

The above immunizations and skin tests may be obtained at the University Student Health Center. Please use the attached Nursing Student Immunization Record. Revised 7/10/09

The above immunizations and skin tests may be obtained at the University Student Health Center. If you wish to have the tests done elsewhere, please use the Nursing Student Immunization Form.

# Nursing Student Immunization Record

California State University Fresno

|               |
|---------------|
| Name          |
| Date of birth |

Provide copies of original records and document new immunizations below.

| Vaccine  | Date Given        | Office or Clinic given | Next dose due                                 |
|--|-------------------|------------------------|---|
| <b>1 Hepatitis A</b>   | 1                 |                        |   |
| two doses 6-12 mos apart   | 2                 |                        |   |
| <b>2 Hepatitis B</b>   | 1                 |                        |   |
| 2nd dose at least 1 month after 1st  | 2                 | <i>Results:</i>        |   |
| 3rd dose 3-5 months after the 2nd  | 3                 |                        |   |
| HepBSAb titer  | <i>date drawn</i> |                        |   |
| 2 months after 3rd dose (+titer only needs to be done once to determine non-responder) |                   |                        |   |
| <b>3 Hepatitis A/B (if combination used)</b>   | 1                 |                        |   |
| 2nd dose 1 month after 1st   | 2                 |                        |   |
| 3rd dose 5 month after 2nd   | 3                 |                        |   |
| <b>4 Measles/Mumps/Rubella ( MMR)</b>  | 1                 |                        | <i>Results :</i>                              |
|  | 2                 |                        |   |
| <i>MMR titers</i>  | <i>date drawn</i> |                        |   |
| <b>5 Pertussis: Tdap required x 1</b>  |                   | Tdap                   |   |
| Tdap can be given at any time after Td   |                   |                        |   |
| <b>6 Varicella (VZV)</b>   | 1                 |                        | <i>Results :</i>                              |
| 2nd dose 4-8 weeks after 1st   | 2                 |                        | <i>Results:</i>                               |
| <i>VZV titer</i>   | <i>date drawn</i> |                        |   |
| Post vaccine VZV titer   | <i>date drawn</i> |                        | Optional for Graduate & School Nurse Students |
| <b>7 Polio- verbal history</b>   |                   |                        |   |
|  |                   |                        |   |
| <b>8 Entrance Physical Exam</b>  | <i>date</i>       |                        |   |

**Tuberculin Skin Test (TST)**

Two-Step Tuberculin Skin Test (TST) required to begin program. CDC: Two-Step PPD: If 1st PPD is negative, give 2nd PPD 1–3 weeks later.

PPD required every 6 months for undergraduate nursing students and every year for graduate nursing students

|            | date given | time | given by | lot # | exp date | NDC # | date read | time | Read by | mm | Impression |
|------------|------------|------|----------|-------|----------|-------|-----------|------|---------|----|------------|
| <b>PPD</b> |            |      |          |       |          |       |           |      |         |    |            |
| <b>PPD</b> |            |      |          |       |          |       |           |      |         |    |            |
| <b>PPD</b> |            |      |          |       |          |       |           |      |         |    |            |
| <b>PPD</b> |            |      |          |       |          |       |           |      |         |    |            |
| <b>PPD</b> |            |      |          |       |          |       |           |      |         |    |            |
| <b>PPD</b> |            |      |          |       |          |       |           |      |         |    |            |
| <b>PPD</b> |            |      |          |       |          |       |           |      |         |    |            |
| <b>PPD</b> |            |      |          |       |          |       |           |      |         |    |            |

**Chest X-ray**

If positive PPD student needs a chest X-ray

|                     |         |           |
|---------------------|---------|-----------|
| Date of chest X-ray | Results | Signature |
|                     |         |           |

|                                    |      |
|------------------------------------|------|
| INH Completed - <i>if required</i> | Date |
|------------------------------------|------|

\_\_\_\_\_  
Health Care Provider Signature                      Date

Revised 7/13/09



## NURSING RESOURCE CENTER POLICIES

**Mission:** To provide a relaxed, safe, professional environment to learn, practice and demonstrate nursing procedures. Committed to relevant and realistic simulated experiences to promote and provide quality nursing care.

**NRC Hours:** Monday-Friday 8:00 a.m. – 4:00 p.m., unless posted otherwise.

**Check Out Policy:** Designated equipment/thesis/projects will be available for check out from the NRC. All items for check out require a picture ID or driver's license. Certain items, i.e. assessment kits, models, and AV equipment are to be kept at the NRC until return of the item. Fifty cents (\$0.50) will be assessed for late returns. Due to the demand for limited items, check out time may vary from 1-14 days. The due date for return may be extended once if there is no waiting list. Additional extensions for Thesis/Projects will be contingent upon a waiting list. Extensions may be arranged by phone.

Items for check out:

Check out:

Assessment Kit: oto/ophthalmoscope, tuning fork, reflex hammer      NURS 210 Faculty

DDST Kit: manual, worksheet, testing bag/DDST specific supplies      NURS 210 Faculty

Thesis/Project

Equipment – as available, to be arranged with the NRC coordinator.

### NOTE:

No videos, computer discs/programs will be checked out. Exceptions may be made for faculty classroom use of videos.

Graduate students with outstanding equipment or fines will be denied graduation clearance until deficiencies remedied.

## **ACADEMIC HONESTY/DISHONESTY INFORMATION**

### **Cheating and Plagiarism**

1. Definitions from University Catalog:
  - a. Cheating is the practice of fraudulent or deceptive acts for the purpose of improving a grade or obtaining course credit.
  - b. Plagiarism is a specific form of cheating which consists of the misuse of the published and/or unpublished works of another by representing the material so used, as one's own work.

**\*Note:** Some students feel that any changing of wording or paraphrasing of an author's material negates any responsibility to give that author credit for his material. This is an erroneous belief and if acted upon, could result in the charge of plagiarism.

2. Penalties for Student Guilty of Cheating or Plagiarism

The penalties for cheating and plagiarism include suspension or dismissal from the University. (University Catalog, Policies and Regulations, Article 1.1, Title V, Section 41301).

3. Course Assignments

Written assignments for one nursing course may not be used to fulfill the requirements of another nursing course.

## **ADMINISTRATIVE ACADEMIC PROBATION POLICY FOR GRADUATE STUDENTS**

Students enrolled in Master's programs are required to maintain a minimum 3.0 post baccalaureate cumulative grade point average (GPA) prior to advancement to candidacy. Once students have advanced to candidacy, they must maintain a minimum 3.0 program GPA, which includes only coursework listed on the Petition of Advancement to Candidacy.

Students who do not meet the above criteria will be placed on Administrative Academic Probation (AAP). Students who are on AAP will be disqualified if they do not raise their respective GPA to 3.0 by the completion of the second regular semester following the semester that their GPA fell below the 3.0 minimum. **In addition, students will be disqualified if their semester GPA falls below 3.0 in any two terms.**

**CALIFORNIA STATE UNIVERSITY, FRESNO**  
**Department of Nursing**

**STUDENT APPEALS PROCEDURE: GRADUATE LEVEL**

1. Students have the right to appeal by way of the Appeals Procedure Policy of the Graduate Program in Nursing.
  - A. Resolution on Informal Basis Between Student/Teacher

Resolution of any student/faculty related problem should be attempted on an informal basis at the student/instructor level.

    1. The term “any” refers mainly to areas of student conduct, class attendance, scheduling, assignments, and violations of professional behavior and confidentiality.
    2. Minor differences in grading practices should also be resolved on an informal basis.
    3. If satisfactory resolution is not achieved, the following steps are to be followed.
  - B. Process of Appeal to the Graduate Committee

In the event the problem is not resolved on an informal basis between the student and faculty member, the facts must be put in writing by both parties to the grievance and be presented to the Graduate Coordinator within five (5) instructional days. The Graduate Committee (excluding the faculty member involved) and the Department Chairperson will review the problem and make its recommendation within five (5) instructional days following the filing of the problem.
  - C. Appeal to the Student Affairs Committee of the Department of Nursing

In the event the problem remains unresolved, the faculty member and the student are to present the facts in writing to the Department Chair within ten (10) instructional days following the action of the Graduate Committee. Upon receipt of the appeal, in writing, the Department Chair shall appoint a panel of three (3) members (Nursing Department Chair, Graduate Faculty Member from another department within the School of Health and Human Services, and an undergraduate nursing faculty member), plus one student member unconnected with the grievance. This panel is to meet within ten (10) instructional days of its selection. Both parties are to be present at the hearing. The student grievant may request that no other student be present at the hearing. The recommendation of the panel will be stated at the time of the hearing and copies mailed to the student, faculty member, and the Department of Nursing Chairperson. A copy of the recommendation is to be placed in the student’s departmental folder.
2. Right to Fair Treatment in the Resolution of a Grievance

Any student has the right to appeal at any time to the Academic Petitions Committee (in case related to grades or academic requirements) or the Student Grievance Board (all other matters) of the University.



## NURS 298 - GRADUATE PROJECT WRITING GUIDE

Fall 2010 Revised 8.27.10

The Graduate Curriculum Committee established the NURS 298 - Project Writing Guide to direct the development, writing, implementation, and printing of the graduate project for the Department of Nursing.

The Guide provides an outline of required content and format for the initial project proposal as well as the final printed copy of the project. The Guide is formatted to demonstrate type font, page format, levels of headings, section order, and writing style. The Guide reflects the Department of Nursing's application of the APA (6th ed.).

### DIRECTIONS:

1. Use the Guide to write each section of the project proposal.
2. Copy the font size, page format, section order, and heading style exactly for each section.
3. The page numbers start on the first page of Chapter 1.
4. Margins for the initial proposal are 1" on all sides. The final copy should be 1 1/2 " on the left margin to allow for binding.
5. Order of Manuscript
  1. Title Page
  2. Signature Page
  3. Permission to Copy
  4. Acknowledgements
  5. Abstract
  6. Table of Contents
  7. Text
  8. References
  9. Appendixes
7. Headings: Suggested heading format for Project/Comp Exam. Use the following levels:

**Level 1 - Centered, Boldface, Uppercase and Lowercase Heading**

**Level 2 - Flush Left, Boldface, Uppercase and Lowercase Heading**

**Level 3 - Indented, boldface, lowercase paragraph heading ending with a period.**

**Level 4 - Indented, boldface, italicized, lowercase paragraph heading ending with period.**

*Level 5 - Indented, italicized, lowercase paragraph heading ending with a period.*

**Chapter One - Introduction (Level 1)**

**Purpose (Level 1)**

**Theoretical Framework (Level 1)**

**Knowles' adult learner. (Level 3)**

Following a Level 3 heading, the text continues on next line with regular paragraph indentation. If further subheadings are needed then go to a Level 4 as demonstrated on the line below.

***Experiential learning patterns. (Level 4)*** Use period. The text continues on the same line immediately after the heading and will constitute a new paragraph.

*Summary of Theoretical Framework. (Level 5)* Following the Level 5 heading, the text continues on the same line immediately after the heading.

**NURS 298 - SAMPLE PROJECT FORMAT**

**Title of Paper:  
(Level 1)**

John D. Smith

A project submitted in partial  
fulfillment of the requirements for the degree of  
Master of Science in Nursing  
in the College of Health and Human Services  
California State University, Fresno  
May 21, 2012

**Approved  
(Level 1)**

---

Dr. Firstname Lastname, Chair

Nursing

For the Department of Nursing:

---

Graduate Coordinator

**Authorization for Reproduction of Master's Project  
(Level 1)**

\_\_\_\_\_ I grant permission for the reproduction of this project in part or in its entirety without further authorization from me, on the condition that the person or agency requesting reproduction absorbs the cost and provides acknowledgement of authorship.

\_\_\_\_\_ Permission to reproduce this project in part or in its entirety must be obtained from me.

\_\_\_\_\_ Student's Name, R.N.



## **Acknowledgements**

### **(Level 1)**

I would like to thank ..... for..... I would also like to express my appreciation for.....

Finally, I would like to thank my family for.....

## **Abstract (Level 1)**

The abstract is 150 words or less and double spaced. The abstract is a concise, informative summary of the significant content of the project. It is the abstract that conveys the necessary information needed for the reader to determine the academic worth of the study. Usually, it is presented as a single non-indented paragraph of approximately 150 words that conveys the content of the project so succinctly that literally every word counts. The abstract is self-contained and stands alone, independent of the project. It is an objective presentation of the project which enables the reader to determine its content as economically and factually as possible. An abstract can be written in as few as half a dozen concise sentences and follows the same construction as a well-written research paper: The abstract should address the purpose, methodology, outcome, and recommendations. For example, this abstract was constructed to demonstrate 150 words exactly.

**Table of Contents (Level 1)**  
**Include all Level 1 and Level 2 headings**

**Chapter One – Introduction (Level 1)**

|                                |   |
|--------------------------------|---|
| Purpose <b>(Level 2)</b> ..... | 3 |
| Definitions .....              | 5 |
| Theoretical Framework .....    | 8 |

**Chapter Two – Review Of Literature (Level 1)**

|   |    |
|---|----|
| Historical Perspective <b>(Level 2)</b> ..... | 12 |
| Pathophysiology .....                         | 16 |

**Chapter Three – Methodology (Level 1)**

|  |    |
|--|----|
| Procedure <b>(Level 2)</b> .....         | 29 |
| Review of Resources .....                | 30 |
| Development of Classroom Materials ..... | 32 |
| Evaluation of Lecture .....              | 33 |

**Chapter Four – Discussion (Level 1)**

|                                |    |
|--------------------------------|----|
| Summary <b>(Level 1)</b> ..... | 35 |
| Recommendations .....          | 38 |

|                  |    |
|------------------|----|
| References ..... | 40 |
|------------------|----|

|                  |    |
|------------------|----|
| Appendices ..... | 46 |
|------------------|----|

## **Chapter One-Introduction (Level-1)**

You can begin your introduction here using #12 font, try New Times Roman, double spaced with 1 inch margin left and 1 inch margin right, and not justified. The major section headings are Level 1 and will be reflected in the Table of Contents. This section examines the importance of the topic. Use 3 - 5 of the most important topics, ideas, or issues in your introduction. Make each idea/topic a paragraph(s) and cite experts in this section to convince the reader of the importance. The experts will support your ideas and you will not sound like you are just making up the significance of the problem.

You should be able to clearly see the logical progression. A sample sequence of paragraphs for the Introduction section might include, the prevalence of a disease, impact of disease, the cost, a definition, and key nursing or healthcare interventions. End this section with a clear statement of the problem.

### **Purpose (Level 2)**

In the Purpose section, try to use the listing format. It helps avoid use of personal pronouns and enhances the clarity of your plans and tasks. The listing format is used below with the past tense style in place. The past tense format reflects completion of the project.

The purpose of this project was to develop an educational module for graduate students on the use of antibiotics in a primary care setting. In order to complete this educational module, the following tasks were accomplished:

1. Collaboration with graduate faculty, clinical preceptor, and agency pharmacists to establish protocols.
2. An extensive literature review on protocols for antibiotic use was conducted.
3. A teaching outline and comprehensive module was developed based on the literature review.
4. The initial module was submitted to the project chair, a pharmacist, and a primary care provider to obtain feedback on the content and presentation style.

5. The revised Power Point presentation was delivered to nurse practitioner students enrolled in the primary prevention course. Student evaluations on the lecture presentation were conducted.

6. The project findings were presented at the Spring 2010 Sigma Theta Tau Research conference.

### **Definition (Level 2)**

Use the Definition section to identify important concepts, terms, relevant pathophysiology, or treatment approaches. The Definition section would be most useful for any teaching projects. The first heading or topic will be divided as shown below.

**Common Pathogens. (Level 3)**

***Gram negative bacteria.* (Level 4)**

**Antibiotic Therapies. (Level 3)**

***Broad spectrum antimicrobials.* (Level 4)**

### **Theoretical Framework (Level 1)**

The Theoretical Framework will reflect the major theories utilized and can be briefly introduced. Remember to avoid one sentence paragraphs! The first heading or topic will be divided as shown below:

**Knowles' Adult Learner. (Level 3)**

***Experiential learning patterns.* (Level 4)**

**Neuman Systems Model. (Level 3)**

***Primary prevention strategies.* (Level 4)**

---

New Section - Page Break  
**Chapter Two - Review of Literature (Level 1)**

The Review of Literature will reflect the major topics in your subject and can be introduced briefly at the beginning in the first paragraph. The first section or topic will be at Level 1 and will show on the table of contents.

## **Historical Perspective (Level 1)**

Continue with text, further divisions of sections would be done on Level 3 then Level 4.

### **Ancient Treatments. (Level 3)**

#### ***Herbal remedies.* (Level 4)**

---

Page Break - New Section

### **Chapter Three - Methodology (Level 1)**

Begin the Methodology section by repeating the purpose of the project. The purpose should repeat the title and then examine the steps listed earlier in Chapter 1. The sections would be at Level 2:

#### **Procedure (Level 2)**

#### **Review of Resources (Level 2)**

#### **Development of Classroom Materials (Level 2)**

#### **Evaluation of Lecture (Level 2)**

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Page Break - New Section

### **Chapter Four - Discussion (Level 1)**

#### **Summary (Level 2)**

#### **Recommendations (Level 2)**

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Page Break - New Section

### **References (Level 1)**

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Page Break - New Section

### **Appendices (Level 1)**

## **NURS 298 - PROJECT TIMELINES**

The following timelines are suggested to assist with structuring your project proposal and writing the final project for graduation by the spring semester.

### **FALL SEMESTER**

#### **Week 2**

Meet with Project Chair  
Complete Project Committee Assignment form, have faculty sign, turn into Nursing office  
Register for NURS 298  
Develop Project Title  
Develop initial methodology/plan

#### **Week 4**

Begin collecting articles, copy & develop files  
Establish major literature review categories  
Write brief reviews of articles  
Carry out initial plans as appropriate

#### **Week 6**

Write Chapter 1  
    Introduction  
    Significance  
    Purpose  
    Definitions  
    Theoretical Framework  
Continue to find and review articles

#### **Week 8**

Write Chapter 2 - Literature Review  
Write Chapter 3 - Methodology  
Type all three chapters of proposal with correct APA format  
Turn into Chair for editing

#### **Week 12**

Continue Activities  
Complete Literature Review  
Continue Project Activities

### **SPRING SEMESTER**

#### **Week 4**

Complete Project activities  
Complete Chapter 4 - Discussion - Change text to past tense  
Turn in to Chair  
Sign up for College of Health and Human Services' Spring Research Symposium

#### **Week 8**

Make corrections  
Copy with laser printer  
Have binding and printing done for final copies.

#### **Weeks 12 – 14**

Develop podium/poster presentation for Spring Research Symposium.  
Present project at College of Health and Human Services' Spring Research Symposium.

**CALIFORNIA STATE UNIVERSITY, FRESNO**  
**Division of Graduate Studies**  
**MASTER'S THESIS (NURS 299) COMMITTEE ASSIGNMENT**

Candidate \_\_\_\_\_ Date \_\_\_\_\_  
Local Phone Number (\_\_\_\_\_) \_\_\_\_\_ ID # \_\_\_\_\_  
E-mail address \_\_\_\_\_ Estimated graduation date \_\_\_\_\_  
Semester/Term Year

The above student has been officially **ADVANCED TO CANDIDACY**, is in good graduate standing, and is recommended for Thesis assignment.

Student and thesis committee members have read the attached Thesis Committee Guidelines and approve the following proposed Thesis topic:

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Human Subjects Clearance has been obtained: Yes  No  Not Applicable   
Animal Subjects Clearance has been obtained: Yes  No  Not Applicable

**Thesis Committee:**

| Typed/Printed Name | Department | Signature of Approval |
|--------------------|------------|-----------------------|
| _____              | _____      | _____                 |
| Chair              |            |                       |
| _____              | _____      | _____                 |
| Member             |            |                       |
| _____              | _____      | _____                 |
| Member             |            |                       |

**Review and Approval of Assignment and Planned Thesis Topic:**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Graduate Program Coordinator/Director or Dept. Chair

Signature \_\_\_\_\_ Date \_\_\_\_\_  
College Dean (for Agricultural Sci. & Tech.; Arts & Humanities;  
Science and Mathematics)

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Thesis Consultant (for Dean, Division of Graduate Studies)

**Note: Changes in committee membership or topic require submitting a CHANGE IN MASTER'S THESIS COMMITTEE AND/OR TOPIC form.**

Final Thesis Clearance \_\_\_\_\_ Date \_\_\_\_\_  
Thesis Consultant

Attachment  
09/03

DGS/rev.



**Thesis/Dissertation Committee Policy and Guidelines**  
**Division of Graduate Studies**  
**California State University, Fresno**

It is the purpose of this document to set forth policies for the functioning of thesis and dissertation committees appointed at California State University, Fresno, in order to maintain high standards of quality in the conduct of graduate student research and writing and to provide guidelines for the orderly transfer of members' responsibilities if this should become necessary.

Insofar as it is judged the academic obligation and expectation of all graduate faculty to serve on graduate thesis and dissertation committees, this work in turn is recognized by the Division of Graduate Studies and the university in support of tenure and promotion, and individual faculty mentorship is publicized through listings and published records of the abstracts and theses/dissertations at a national level.

Where joint doctoral or master's degree programs are offered, policies and procedures of participating campuses may also apply. Additionally, joint requirements for approval of committee assignment and completion of the final document may add to or supersede this policy. The following policy and guidelines have been established for faculty members at California State University, Fresno who direct theses and dissertations.

**Thesis/Dissertation Committees**

Thesis/dissertation committees have an established place in the academic world and play a vital role in the guidance and direction of graduate student research. One member of the committee, the chairperson, has a more formal administrative relationship with the student because of the way the university recognizes the chairperson's responsibilities. On occasion, the roles of the chairperson and the committee members require clarification.

**1.0 Thesis/Dissertation Committee Structure**

**1.1 Number of Members**

1.11 Each master's thesis and doctoral dissertation committee shall be composed of a minimum of three members.

1.12. Under extenuating circumstances (e.g., member's death or sudden leave), to be noted by the graduate program coordinator in a letter to the graduate dean, an individual student in the final stages of the thesis/dissertation may request to have fewer than three members on the committee.

1.13 A fourth and/or fifth member may be added to the committee when deemed appropriate/necessary to provide required expertise.

**1.2 Committee Membership**

1.21 Two of the three required committee members, including the chair, shall be members of the *Master's Graduate Faculty Group* of the student's degree program. Only members of this group are allowed to chair a thesis. In order for a member to chair a thesis, he/she must have previously served as a second or third member of a thesis committee (per APM 226-2, III. *Criteria for Membership in a Master's Graduate Faculty Group*, par. 3).

The Graduate Group in the program, with the approval of the department, may invite their Faculty Early Retirement Program (FERP) faculty members to participate on

thesis/ dissertation committees as second or third readers, with the stipulation that they demonstrate a personal commitment to function in this capacity and that they have been appointed as members of the consultative body. Graduate faculty members whose status has been terminated due to retirement or who are in FERP status may complete outstanding examining committee, thesis committee, and advising assignments as chair if they wish to do so, but they may not accept new assignments to chair such committees (see APM 226-3, III. *Criteria for Membership in a Master's Graduate Faculty Group*, par. 8). Note: In order for the thesis/dissertation committee to function as required, the program must appoint FERP faculty serving on these committees as adjunct faculty during each of the academic terms in which they have inactive status.

- 1.22 An individual who possesses requisite expertise, but who is not a member of the department faculty in the student's program, may serve as a third reader on a thesis or dissertation committee with the approval of the department chair. This may include part-time and adjunct faculty, retired program faculty, faculty from other programs or universities, and community professionals. In such cases, a curriculum vita of the individual concerned must accompany the submitted Master's Thesis (299) Committee Assignment form.
- 1.23 Each graduate program committee may establish additional procedures for the appointment of thesis committee members. It is recommended that these procedures be published and be made available to incoming graduate students and new faculty members.
- 1.24 The committee chair shall be a faculty member of the graduate faculty from the student's program. A faculty member from another department may assume the role of committee chair only if eligible for and appropriately appointed as program graduate faculty (see APM 226) in the student's degree program.
- 1.25 For the doctorate degree, the committee chair must be a member of the *Doctoral Graduate Faculty Group* and possess requisite knowledge and experience in discipline-based research theory and methodologies at the doctoral level, knowledge of the requirements for doctoral dissertations in the discipline, and a demonstrated ability to successfully direct others in research activities. The first time an individual is being considered as a chair of a doctoral dissertation committee, supporting documentation must accompany the recommendation through all levels of review (per APM 227-2, III. *Criteria for Membership in a Doctoral Graduate Faculty Group*, par. 6c).
- 1.26 Each graduate program's graduate group should establish a reasonable maximum for the number of theses an individual faculty member may supervise.
- 1.27 The department chair should ensure that work of the thesis or dissertation committee chair is calculated as part of the faculty's required regular workload.

## **2.0 Thesis Committee Responsibilities**

### **2.1 The Committee as a Whole**

- 2.11 The initial responsibility of the committee is to meet and determine the feasibility of the topic and the thesis/dissertation plan or proposal, and to permit the student to proceed only after such determination has been made. The committee shall sign off on the student's plan or proposal and a copy should be kept in the student's file in

- the department. The signing of this document signifies that the student has permission to proceed with the study as outlined in the plan.
- 2.12 The committee is responsible for assuring that the student is familiar with and has received copies of appropriate university policies concerning the handling of dangerous materials, laboratory and fieldwork safety, and maintenance of standards of quality, ethics, and professional performance. The committee (chair) should inform the student regarding proprietary interests and ownership of data or research product as appropriate, and reach agreement about these issues. Formal written agreements may be desirable or even mandatory when patent-related issues may arise. This needs to be done as early in the process as possible, preferably at the time the proposal is accepted.
  - 2.13 The committee shall determine whether the student's research is subject to the university policy on research on human or animal subjects and advise the student accordingly.
  - 2.14 The committee shall determine the adequacy of the bibliography.
  - 2.15 The committee shall review and approve the methodology and any instrument or questionnaire used in data collection.
  - 2.16 Committee members are responsible for reviewing thesis and dissertation drafts, and providing feedback in a timely manner. Depending on circumstances, there should be no more than a four-week turnaround review time for each of the committee members to review the manuscript for a thesis or dissertation.
  - 2.17 The responsibility of the committee as a whole is to examine the student's work and to meet and make a final determination of the acceptability of the thesis/dissertation, and to arrange for any oral defense of the thesis in accordance with written department policies.
  - 2.18 It is the policy of this university to make all theses available to the public through the library and through established academic abstracting services. On rare occasions, committee members shall assist the graduate dean in determining the need for and recommending the withholding of material for publication for a specified period of time, not to exceed one calendar year.
  - 2.19 It shall be the responsibility of the student to observe graduate deadlines for the submission of final and publication copies of the thesis/dissertation. A reasonable amount of time (not more than four weeks) should be allowed for each of the committee members to review the manuscript.

## **2.2 The Chairperson**

- 2.21 The student and the committee chairperson, insofar as it is possible, should arrive at an agreement on an approximate time schedule, including meetings of the committee, for the accomplishment of thesis/dissertation-related work for each semester or term that the student is engaged in such work.
- 2.22 The chair shall have primary responsibility for the supervision of the student's work, setting deadlines, and guiding the student's progress.

- 2.23 The chair shall assume the role of "principal investigator" when the student's research involves human or animal subjects, and shall ensure that university policies in this area are carefully observed (The Policy and Procedures for Research and Human Subjects at California State University, Fresno, available from the Office of the Vice President for Administration; Policy and Procedures for Handling all Warm-Blooded Animals Used for Teaching, Experimentation, or Research at California State University, Fresno, *Academic Policy Manual*).
- 2.24 The chair shall inform the student of university regulations regarding the need to maintain continuous enrollment while working on the thesis/dissertation, and the zero-unit policy requiring enrollment in Graduate Studies (GS) Continuation through Continuing and Global Education (Extension) or in GS 299 (Regular University Enrollment).
- 2.25 The chair shall inform the student of the university's *Guidelines for Thesis Preparation* and shall encourage attendance at a thesis workshop as early as possible in the student's thesis process. The Guidelines for Thesis Preparation are available at the Kennel Bookstore and from the Thesis Office website.
- 2.26 In consultation with the other members of the committee, the chair shall determine the final grade on the thesis/dissertation and see that it is properly reported on the Graduate Degree Clearance form.
- 2.27 The chair is responsible for evaluating the student's progress before assigning an "SP" grade for thesis/dissertation units. (The "SP" grade is automatically assigned unless a student is not making significant progress, in which case an "I" grade may be assigned.)
- 2.28 The chair shall inform the student of the style manual or journal style required by the department for formatting the reference list or bibliography.

### **3.0 Vacancies and Replacements**

- 3.1 If any committee member anticipates an extended but temporary absence during the time the student is working on the thesis/dissertation, he or she should arrange for means of communicating during this leave, or designate an appropriate temporary/permanent substitute.
- 3.2 The determination to make a change in committee chair or membership must be reported on a Change in Master's Thesis (299) Committee and/or Topic form, submitted to the Graduate Division, and must be approved by the graduate program coordinator and department chair. A change in the committee chair requires a letter of justification from the department chair at the time the Change in Master's Thesis (299) Committee form is submitted, as stated on the form. Faculty members who are replaced must be so informed by the department chair.
- 3.3 If the chairperson is unexpectedly absent or absent due to planned sabbatical/retirement at the time the student completes the thesis/dissertation, the department chair may act for the thesis chair, in consultation with the absent chair or other committee members.

### **4.0 Disputes**

- 4.1 In the event that a dispute or disagreement arises between a student and a member of the committee or between members of the committee, the committee chairperson shall call a meeting of the committee and the student for the purpose of resolving the problem.

- 4.2** If the dispute cannot be resolved through this process, or if the proposed solution is unacceptable to the student or one of the committee members, the disagreeing party or the department chairperson may request that the graduate committee of the student's department/program review the problem and recommend a solution.
- 4.3** If the problem cannot be resolved at the department level, the dispute should be appealed to the college or school dean. This will be the final level of appeal.

### **5.0 Termination of the Committee**

- 5.1** The committee shall have discharged its obligations when the final manuscript has been approved by the Graduate Dean, each member has signed the approval page for the publication copy of the thesis/dissertation, and the thesis/dissertation grade is recorded on the clearance sheet.
- 5.2** In the event a student does not register for thesis/dissertation or fails to maintain an active status within one semester or term after official acceptance by a thesis committee, the committee chairperson has the option of dissolving the committee, in which case a new committee must be secured and approved before registration can be authorized.
- 5.3** If a student must suspend work on the thesis/dissertation for educational reasons acceptable to the committee chairperson, the student should obtain a planned educational leave of absence. These leaves may be approved for two to four semesters. If the leave is approved, the committee shall continue its existence until the student returns.

\* The terms Program coordinator and Program director are interchangeable in this document.

*Thesis Committee Policy and Guidelines*

Revised April, 2002

Approved by the University Graduate Committee May 14, 2002

Pending approval by Academic Senate for inclusion in the Academic Policy Manual

## PROCEDURES FOR HANDLING POTENTIAL THESIS PROBLEMS

It is anticipated that only occasional errors may be found in final drafts of these submitted to the Graduate Office. Minor problems in spelling, punctuation, grammar, usage, and referencing format are usually of a nature that can be addressed directly by the student, and are noted in the text and on the checklist of the thesis which is returned to the student for correction and resubmission as final publication copy. Conferences with the Thesis Consultant are available for assistance, if requested.

On rare occasions, more serious problems may be identified by the Thesis Consultant requiring that the thesis be handled in a slightly different manner, with the student and the committee working together to correct the deficiencies. With the thesis committee's approval and recommendation, after the necessary modifications have been made, the student may resubmit the final draft of the thesis. In cases of disagreements, final appeal rests with the Graduate Committee of the Academic Senate.

Some examples of more serious problems follow.

### **PROBLEM TYPE I**

Extensive spelling, punctuation, grammatical, referencing problems, as noted above.

Needed clarification or amplification of text (adding hypotheses, introductory statement, transitions; deleting extraneous or unconnected material; demonstrating relevance of topic to the discipline; etc.).

### **PROCEDURE**

The thesis is returned to the student. Contact is made with the committee chair; conferences are arranged with the student and any additional measures (editing and/or statistical support, etc.) are recommended as needed.

### **PROBLEM TYPE II**

Confused/confusing organization; unclear language usage; a lack of clear purpose and/or critical thinking throughout.

Insufficient documentation which either fails to or inadequately support statements of reference, fact, or inference.

Lack of scholarly orientation which clearly demonstrates inadequate mastery of the subject, methodology, and/or ability to draw defensible conclusions.

Internal contradictions within the text (hypotheses and conclusions not matched; methodology which fails to provide reasonable assessment of the hypothesis).

## PROCEDURE

Such problems may require extensive revision of the thesis prior to its resubmission as a final draft. The graduate dean is informed of the status of the thesis; the thesis is returned to the student; and a letter is sent to the committee chair, with copies to the department chair, committee members, and the student. Conferences are arranged with the student and any additional measures (editing and/or statistical support, etc.) are recommended as needed.

### **PROBLEM TYPE III**

Plagiarism.

## PROCEDURE

The Thesis Office makes and retains a copy of the original thesis. The final draft is then returned to the thesis committee chair to be handled in accordance with university policy on plagiarism. A letter is sent to the committee chair, with copies to the department chair, the committee members, the student, and the graduate dean.

In order to ensure that each thesis meets the standards appropriate to an academic publication, the Thesis Consultant checks the following items:

1. General format: Title page, approval page, authorization sheet, table of contents; chapter; section, and heading divisions; pagination; margins; tables and figures; photograph mounting; layout of appendices.
2. Overall organization.
3. Grammar; syntax; spelling; consistency in level of usage, verbiage tense, pronoun agreement, treatment of numbers, etc.
4. Quotations: Justification, effectiveness, accuracy.
5. Documentation techniques.
6. Plagiarism.
7. Reference format.
8. Necessity for permission to include copyrighted materials.
9. Other requirements and standards as described by Title VC and the CSUF *General Catalog*.

Approved 12-13-96  
Graduate Committee

## **DEPARTMENT OF NURSING HUMAN SUBJECTS GUIDELINES**

The Sub-committee on the protection of human subjects has developed the following outline to provide guidance on the submission of materials to the subcommittee by faculty and/or students interested in performing research involving human subjects.

### Essential Information:

1. Dates for Submission of Thesis/Project Proposal to Human Subjects Sub-Committee
  - These dates will also be posted outside the Department of Nursing

### Guidelines for Submission of Thesis/Project Proposal to the Human Subjects Sub-Committee

- Includes specific information regarding the procedures that must be followed in order to have your proposal successfully approved by the sub-committee

### Rights of Human Subjects

Important information to include in the research proposal:

- This form need not be included in the proposal submission unless it would help clarify the content of the proposal or if you have additional questions/concerns that you would like the committee to address.
  - Please note that the proposal may be submitted in draft form as long as the issues addressed on this information sheet have been fully covered.
4. The Human Subject forms are color coded and can be obtained from the Department of Nursing:
    - These forms are two-sided and both sides must be included when submitted.
    - The copies in this book are for your information only and should not be submitted with the proposal.
  5. Sub-Committee on Human Subjects Application Form for Review (pink) – top half completed only and submitted with proposal.
  6. Reviewer Comments Form (gold) – top half completed only and submitted with proposal
  7. Application Form for Unfunded Research (green) – complete and submit as applicable
  8. Application Form for Funded Research (blue) – complete and submit as applicable



**CALIFORNIA STATE UNIVERSITY, FRESNO  
DEPARTMENT OF NURSING**

Protocol for Outline of Research Study to Human Subjects Subcommittee

Directions: Submit 3 copies of a Research Study Outline which is organized according to the following categories. Use the same headings and numbers system that appear below. It should be limited to 5-6 typewritten pages.

A. Abstract: Attach a one paragraph summary of the proposal. Include purpose, problem statement, setting, subject population, and general design.

B. Protocol:

1. Purpose and Background

- a. Brief statement of the problem and justification for the study including relevance to nursing.
- b. Brief summary of current research to indicate the state of knowledge pertaining to the study.
- c. Specific aims of the research.  
Hypotheses or questions.  
Data to be given.

2. Characteristics of Subjects

- a. Number
- b. Source of subjects and sampling procedures
- c. Inclusion and exclusion criteria
- d. Rationale for inclusion of special groups, particularly if they are limited in capacity to give informed consent.

3. Methods

- a. Location of study
- b. Recruitment methods which ensure voluntary participation. If deception is to be used, explain in detail why it is necessary and provisions for subsequent disclosure.
- c. Investigational or experimental, procedures involving subjects (i.e., tests, interviews, examinations)
- d. Special procedures (any intrusive or discomforting procedures)
- e. Frequency and duration of each procedure
- f. Projected statistical analysis

4. Potential Benefits to:

- a. Individual subjects
- b. Population from which subjects are drawn
- c. Science, society, humanity

**GUIDELINES FOR SUBMISSION OF THESIS/PROJECT  
PROPOSAL TO THE HUMAN SUBJECTS SUB-COMMITTEE  
DEPARTMENT OF NURSING**

**WHY:**

In order to protect human subjects who are part of a research project. Remember the following groups are considered vulnerable and need “special” protection.

“Special Classes of Human Subjects”

Research involving pregnant women and in utero or ex utero fetuses, including nonviable fetuses, must comply with the provisions of section 46.207ff of the federal regulations. (See appendix 5.12 of the CSUF Policy and Procedures for Research with Human Subjects.)

Research involving prisoners must comply with subpart C section 46.301ff of the federal regulations. (See appendix 5.12 of the CSUF Policy and Procedures for Research with Human Subjects.)

Research involving children must comply with subpart D section 46.401ff of the federal regulations. (See appendix 5.12 of the CSUF Policy and Procedures for Research with Human Subjects.)

These guidelines are viewed by the Department of Nursing to include the following categories of individuals in addition to those noted above.

- Mentally ill/retarded
- Aged who are not mentally competent
- Special populations (students, military)
- Poor who are dependent upon certain facilities involved in research for their medical care
- Dying, sedated or unconscious patients
- People with AIDS

**WHEN:**

The thesis proposal should be submitted for approval to the Human Subjects Sub-Committee after your thesis chair and two committee members have reviewed and approved the proposal as your final draft. The Human Subjects Sub-Committee assumes that approval by this committee is the final step before you begin data collection. Your chances for approval the first time the proposal is submitted are greater if you follow this recommendation. For those developing a project proposal, the need for approval by the Human Subjects Sub-Committee will be determined by the project chair. Any project that involves human subjects must be submitted.

**WHO:**

Submit the Thesis Proposal to the chair of the Human Subjects Sub-Committee. For the current committee membership, contact the Graduate Coordinator.

### **WHERE:**

The Human Subjects Committee meets once a month on the 1<sup>st</sup> or 2<sup>nd</sup> Wednesday of the month beginning in September and continues throughout the academic year. In order for the committee to have adequate time to review your proposal before the meeting, you are requested to place

**3 COPIES OF YOUR THESIS PROPOSAL ACCOMPANIED BY THE SUB-COMMITTEE ON HUMAN SUBJECTS APPLICATION FORM AND A COPY OF THE COMMITTEE SIGNATURES FORM FOR NURS 299 (if thesis) OR NURS 298 (if project) BY 5 PM ON THE APPROPRIATE DATE.** If the deadline for submission of proposal copies is missed, the proposal will be considered at the meeting the following month.

### **HOW:**

Before submission of your proposal, all sub-committee members must have signed the Sub-Committee on Human Subjects Application form (available in Department of Nursing office), submitted with 3 copies of your proposal. Please include a phone number and email address where you can be reached to receive the sub-committee's decision.

In the proposal, clearly identify how all rights of human subjects will be protected (see accompanying sheet used by the Human Subjects Sub-Committee to judge your proposal). A copy of your informed consent must be included in the proposal and placed in the Appendix.

Following the sub-committee meeting, the Chair will contact your Thesis/Project Committee Chair with the sub-committee's decision as well as follow up with a letter for your files.

If you have any questions about the procedure please contact the Human Subjects Sub-Committee.

**CALIFORNIA STATE UNIVERSITY, FRESNO  
DEPARTMENT OF NURSING**

**HUMAN SUBJECTS SUB-COMMITTEE CHECK LIST**

Please ensure that the following rights of human subjects have been protected in the thesis proposal. If you have any concerns, please note them in the space provided.

1. Protection from harm (assess risk / benefit ratio)
  
2. Recognition of right of self determinism (voluntary consent free from coercion)
  
3. Right to privacy (thoughts, records, etc.)
  
4. Right to confidentiality or anonymity
  
5. Right to maintain self-respect and dignity
  
6. Right to refuse to participate or withdraw at any time
  
7. Right to services/treatment if involved in research study

**OTHER ISSUES:**

1. Procedures for obtaining informed consent.
  
2. Information regarding how the researcher can be contacted/right of subjects to request research findings
  
3. Sound methodology supports research question.

The final recommendation includes the following 3 options:

1. Approve as submitted
2. Approve with suggested changes
3. Reject

**CALIFORNIA STATE UNIVERSITY, FRESNO  
DEPARTMENT OF NURSING**

**Sub-Committee on Human Subjects  
Application Form for Review**

| Names   | All Signatures Required | Phone |
|---|-------------------------|-------|
| (Thesis Comm. Chair)<br>Principal Investigator: _____ | _____                   | _____ |
| Collaborator/Student: _____                           | _____                   | _____ |
| Other Comm. Members: _____                            | _____                   | _____ |
| *All Names<br>Must Be Listed: _____                   | _____                   | _____ |

Is this a Graduate Thesis? \_\_\_\_\_ Is this research being submitted to a funding source? \_\_\_\_\_

If yes, give name of agency:  
\_\_\_\_\_

Date of Submission \_\_\_\_\_ Date you intended to begin data collection \_\_\_\_\_

Indicate your judgment as principle Investigator as to the risk category of the study.

Exempt \_\_\_\_\_ Minimal risk \_\_\_\_\_ At Risk \_\_\_\_\_

**To be completed by Chair of Human Subject Sub-Committee**

Judgment as to risk category:

Exempt \_\_\_\_\_ Minimal risk \_\_\_\_\_ At Risk \_\_\_\_\_

Approval Status: Approve: \_\_\_\_\_ Disapprove: \_\_\_\_\_

Forward to the University Human Subjects Sub-Committee with a recommendation to:

Approve: \_\_\_\_\_ Disapprove: \_\_\_\_\_

**RATIONALE:**

\_\_\_\_\_  
\_\_\_\_\_

**MODIFICATION REQUESTED:**

\_\_\_\_\_

| Name                                  | Signature | Date  |
|---------------------------------------|-----------|-------|
| Human Subject<br>Sub-Committee: _____ | _____     | _____ |
| _____                                 | _____     | _____ |
| _____                                 | _____     | _____ |

**Application Form for Unfunded Research**

**CALIFORNIA STATE UNIVERSITY, FRESNO  
COMMITTEE ON THE PROTECTION OF HUMAN SUBJECTS**

*Please type*

PRINCIPAL  
INVESTIGATOR

|                  |                        |           |
|------------------|------------------------|-----------|
| Name             | Department (unit)      | Mail Stop |
| Telephone Number | Dept. Telephone Number |           |

Student's name or collaborator(s)  
(if applicable) (if a graduate school thesis, so indicate) (affiliation if collaborative research)

|                  |                  |
|------------------|------------------|
| Telephone Number | Telephone Number |
|------------------|------------------|

**TITLE**

The Principal Investigator is responsible for fully understanding the **Policy and Procedures** of the CPHS. Below indicate your judgment as Principal Investigator as to the RISK category of the present study. (See definitions on the reverse of this sheet.) (If exempt see 3.52)

Minimal Risk

**PROCEDURES**

1. Attach your protocol and submit to your department chair for review by your human subjects committee.
2. Your departmental committee will review the protocol status and if it agrees with the determination of "minimal risk" status (see Appendix 5.3), then
3. Your department chair will keep the forms for 5 years.
4. Your responsibilities have been satisfied.

HOWEVER,

(If the departmental review changes the determination to "At Risk," follow the procedure to the right of this page.)

At Risk

**PROCEDURES**

1. Attach your protocol and submit to your department chair for review by your human subjects committee. (A sample informed consent must be included.)
2. Submit the department review form(s) with this form to the CPHS.
3. Transmit all reviews and two (2) copies of the protocol to the CPHS for review. Send one additional copy to the Dean.
4. Allow two weeks during the school year for your response from the CPHS.

**Application Form for Funded Research**

**CALIFORNIA STATE UNIVERSITY, FRESNO  
COMMITTEE ON THE PROTECTION OF HUMAN SUBJECTS**

*Please type*

PRINCIPAL INVESTIGATOR

|                  |                        |           |
|------------------|------------------------|-----------|
| Name             | Department (unit)      | Mail Stop |
| Telephone Number | Dept. Telephone Number |           |

Student's name or collaborator(s)  
(if applicable) (if a graduate school thesis, so indicate) (affiliation if collaborative research)

|                  |                  |
|------------------|------------------|
| Telephone Number | Telephone Number |
|------------------|------------------|

**FUNDING SOURCE**

Is the California State University, Fresno Grants Office forwarding the request for funding?      No  Yes

**TITLE**

The Principal Investigator is responsible for fully understanding the **Policy and Procedures** of the CPHS. Below indicate your judgment as Principal Investigator as to the RISK category of the present study. (See definitions on the reverse of this sheet.) (If exempt see 3.52)

Minimal Risk

**PROCEDURES**

1. Attach your protocol and submit to your department chair for review by your human subjects committee.
2. Your departmental committee concurs with the Principal Investigator that the study is "minimal risk" (see Appendix 5.3), then
3. The department chair should forward the packet of materials with this form and the departmental review forms to the University CPHS, Thomas Administration, Room 130, M/S TA54, for expeditious review and "certification to the funding source."
4. The researcher will receive notice of "certification" usually within 72 hours.

HOWEVER,

(If the departmental review changes the determination to "At Risk," follow the procedure to the right of this page.)

At Risk

**PROCEDURES**

5. Attach your protocol and submit to your department chair for review by your human subjects committee. (A sample informed consent must be included.)
6. Submit the department review form(s) with this form to the CPHS.
7. Transmit all reviews and two (2) copies of the protocol to the CPHS for review. Send one additional copy to the Dean.
8. Allow two weeks during the school year for your response from the CPHS.

**DEPARTMENTAL (UNIT) REVIEW FORM  
COMMITTEE ON THE PROTECTION OF HUMAN SUBJECTS  
CALIFORNIA STATE UNIVERSITY, FRESNO**

**Please type**  
PRINCIPAL  
INVESTIGATOR

---

Name Department Mail Stop

---

Telephone Number Dept. Telephone Number

If student or collaborative  
research

---

Name Affiliation

---

Telephone Number Telephone Number

**TITLE OF STUDY**

If funding is sought, from what agency?

How did the Principal Investigator designate the research? Minimal risk  At risk

REVIEWER

1

Name

At risk  Minimal Risk

COMMENTS:

Place your signature in the  
category of your judgment

APPROVED

---

DISAPPROVED

REVIEWER

2

Name

At risk  Minimal Risk

COMMENTS:

Place your signature in the  
category of your judgment

APPROVED

---

DISAPPROVED

REVIEWER

3

Name

At risk  Minimal Risk

COMMENTS:

Place your signature in the  
category of your judgment

APPROVED

---

DISAPPROVED

The department may wish to route this form to the 3 reviewers or send each reviewer a form. If the review is done on three separate forms, the Chair ought to give each reviewer the comments of the other reviewers as well as the Principal Investigator. If all three reviewers judge the proposal as "minimal risk," the Department Chair notifies the Principal Investigator and keeps the form(s) for 5 years. If funding is sought for this study or it is "at risk," two (2) copies of the protocol and this form are forwarded to the university CPHS, Thomas Administration, Room 130, M/S TA 54, with one additional copy to the dean's office. (See sections 3.7 or 3.8.)



SAMPLE A

**THESIS CONSENT FORM**

I, \_\_\_\_\_, hereby willingly consent to the participation of my child, \_\_\_\_\_, in a study comparing impedance test results, under the supervision of \_\_\_\_\_ of California State University, Fresno.

I understand that my participation will be limited to the following procedures: pure tone audiometric evaluation and impedance testing.

I understand that I may withdraw my child from this study at any time without penalty. I understand that coercion was not used by anyone to insure my participation in this study. I also understand that this study may be published and my child's anonymity will be protected. Under no condition will my child's name be disclosed.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

-----  
SAMPLE B

**PHYSICIAN CONSENT FORM**

I, \_\_\_\_\_, give my permission to \_\_\_\_\_, to approach the family members of my patient \_\_\_\_\_ to obtain their permission to participate in the research project:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

SAMPLE C

**INFORMED CONSENT FORM**

I, \_\_\_\_\_, hereby willingly consent to the participate in the research project:\_\_\_\_\_

I am aware of all the following conditions:

All information is to remain confidential.

I will remain anonymous.

After the information is compiled, the original interview will be destroyed.

I have the right to withdraw from this study at any time without prejudice or penalty.

Saint Agnes Medical Center has given permission for this study to be conducted.

Permission has been obtained from the patient's physician for his patient's relatives to participate in the study.

The procedures for this research have been approved by the Human Subject's Subcommittee, College of Health and Human Services at California State University, Fresno.

Date:\_\_\_\_\_

Signature:\_\_\_\_\_

## THE THESIS PROCESS: QUESTIONS AND ANSWERS

### \* WHEN BEGINNING THE THESIS \*

*What forms must I have filed with the Graduate Office and/or my department?*

- An **approved Advancement to Candidacy** form, with the program indication of Thesis 299 for the Culminating Experience. Note: Your thesis time limit will be the program time limit date located on the upper right corner of the Advancement to Candidacy form.
- A Thesis Committee Assignment Form, with your general topic and signatures of your chosen committee members and your program adviser. Normally, this form is forwarded to the Graduate Office via the college dean's office.

*What paperwork must I file while doing my thesis work?*

- **Registration form(s).** You must be enrolled at the university during all fall and spring semesters when you are working on your thesis; if you plan to graduate during the summer, you must also be enrolled that particular term.
  - a. When first registering for 2-6 thesis units, go to your department graduate adviser to verify your eligibility and obtain the thesis schedule number prior to the first day of registration.
  - b. Once you have received an RP (formerly SP) on your thesis grade, have finished all your other coursework, and are working only on your thesis, you will need to sign up for 0 units Thesis Continuation, either through regular university enrollment, Graduate Studies (GS) 299, or through the Division of Extended Education, GS Continuation. For regular enrollment, GS 299, visit the Division of Graduate Studies to obtain the schedule number prior to the first day of registration; for enrollment through extension, GS Continuation, contact or go to the Graduate Office, Thomas Administration Building, TA 132, for verification of status and procedures.
  - c. **Don't forget! Be sure you're registered during the semester/term when you are applying for graduation! (Summer applicants, please note!)**

*What additional paperwork must I file when I have reached the semester when I expect to turn in my thesis and what to graduate?*

- **Application for Degree to be Granted.** This form **must** be filed during the first two weeks of the semester (three weeks, summer term) when you intend to graduate. No exceptions will be made.

*What material do I need in order to format my thesis?*

- Guidelines for **Thesis Preparation**, prepared by the Division of Graduate Studies, available for purchase in the Kennel Bookstore Copy Center or at no cost from the Thesis Office Web site ([www.csufresno.edu/gradstudies/thesis](http://www.csufresno.edu/gradstudies/thesis)).
- **Style manual or style sheet** chosen by your department (e.g., APA, Turabian, MLA, CBE, J. of Anal. Chem. – consult Appendix D in the Guidelines).
- Formatting instructions (including disk template, if needed) from the Graduate Office and/or Typist list, from the Thesis Office, for formatting/typing assistance. The Word processing programs supported by the thesis templates are discipline-specific and support MS Word for either Macintosh or IBM-compatible PCs.

**\* WHEN SUBMITTING YOUR THESIS TO GRADUATE \***

*How should my first submission be submitted, and in what form?*

- Submit your final thesis draft **loose-leafed**, in a **plain manila folder**. Be certain that the approval page has been signed by all members of your thesis committee, and that the thesis is paginated, has an abstract of no more than 1 page, has a table of contents and complete reference list, and is as close as possible to the final format. Run a spell check on your document. Ink-jet copy is acceptable for this draft. Tables and figures may be in draft form.
- Turn in a **digital copy** of your thesis on diskette, CD, or ZIP disk, via USB flash drive, or email attachment as appropriate.

*When is my final publication copy due?*

- **Dates are assigned when the first submission is returned.** Unless you are otherwise informed, your publication copy will continue being processed along its own assigned timeline until the end of the semester. You will be asked to meet the final deadline for submission of all copies, fees, and required paperwork as posted by the thesis office. Thesis clearances granted after this date move you into the next semester.

*What general Graduate Office forms must I turn in to the Graduate Office by the end of the semester, in order to graduate?*

- **Master's Degree Clearance.** This form should be given to your thesis committee chair, who will report the committee's grade for your thesis work. The form then goes on to your graduate adviser, who reviews your complete file for compliance with degree requirements, signs off on the form, and (where required) forwards this to the college dean for signature. This form may be filed whenever your committee feels it is ready to award a grade; the process is **not** contingent upon Graduate Office review of the thesis, which is handled separately.

What thesis paperwork must be submitted to the Thesis Office before I can graduate?

- **Laser printed publication copy.** Tables, figures, and graph must be in final form. Appendix material must fit inside margins and be reproduced legibly.

**Note: Your thesis committee members will need to sign the publication copy approval page (see Guidelines example), preferably in black ink. The Graduate Dean will sign this page as soon as the thesis has met publication standards.**

- Copyright permission forms. Submit all forms granting you permission to publish material you have reproduced in your thesis that is taken from copyrighted sources.
- University Microfilms Int'l. (UMI)/ProQuest form. Usually, this form is filled out when you turn in the final draft of your thesis. If you are copyrighting your thesis, you will need to fill out and sign the copyright authorization portion of the UMI form and pay the additional \$65 copyright fee when making your thesis fee payment (see last item below).
- **After** final thesis reader review and approval, make a **minimum of two additional copies** (for library and the department) at the Kennel Print and Copy Center. The original may be sent to UMI for microfilming and not returned to you, or be bound for your personal use.
- **Fee slip.** Pay for your copying at the Kennel Bookstore Copy Center. Next, go to the university cashier to pay for bindings, microfilming, and the UMI fee (plus optional mailing and UMI copyrighting fees). Finally, bring your "Thesis Fees" form, imprinted by the university cashier, to the Graduate Office. Your thesis clearance will then be given to the evaluator.

## THESIS 299 PROCESS CHECKLIST

- 1. File a Petition of Advancement to Candidacy form with the Graduate Division.
- 2. Select a thesis topic and write a proposal, if demanded by your program. Select a chairperson and two committee members for your thesis committee (the chair and one other committee member must be graduate faculty from your degree program).
- 3. Determine (check with your chair) whether or not you need to file a Human or Animal Subjects clearance for your thesis, and start the process as soon as possible.
- 4. Complete the top half of the Thesis (299) Committee Assignment sheet form, including your topic and committee members; get the required signatures; and files this form with the Graduate Division. *Complete this form before you sign up for thesis units in your department.*
- 5. Enroll in your department for your thesis units (Thesis 299). (For summer enrollment, you will need to pick up your enrollment form from the Division of Graduate Studies office.)
- 6. Establish a timeline and meeting schedule with your chair and your committee. Include goals for each stage of thesis development and establish member responsibilities.
- 7. Purchase and/or download from the Thesis Office Web site the university's *Guidelines for Thesis Preparation* and obtain a copy of the style manual/journal style sheet used in your program. *Check with your thesis chair if you are not sure of the correct choice of manual/journal style sheet.*
- 8. Organize your work, do your research, and write your study, staying in close touch with your committee. Get the Thesis Template from the Thesis Office Web site, if using MS Word.
- 9. Maintain university enrollment throughout each semester of your thesis work, either through regular university enrollment (required of all international students) or (for those domestic students who have completed all their coursework) through 0 units GS Continuation. Students intending to graduate in summer must register for the summer term.
- 10. At the beginning of the semester (first two weeks) or summer term (three weeks) when you intend to graduate, apply for graduation. Be sure you are also registered (see #9 above).
- 11. Note the posted deadline for Final Draft submission to the Graduate Division. When you have finished your thesis and have obtained approval of all members of your thesis committee, **collect your committee signatures on the Final Draft approval page**, and submit your signed Final draft to the Graduate Division for review.
- 12. When you receive a call from the Thesis Consultant, pick up the thesis, and make the recommended corrections. Laser print this corrected Publication Copy of your thesis, **collect your committee signatures on the Publication Copy approval page**, and resubmit this copy, along with the Final Draft, to the Graduate Division for its final review and approval for binding. The Thesis Consultant will obtain the Dean's signature for you.

- ❑ 13. When given the final Thesis Office approval, take your publication copy to the Kennel Bookstore Print and Copy Center for copying onto acid-free 20-pound bond paper, pay your processing, copying, and binding fees at the university cashier, and bring the payment form to the Graduate Division for final thesis clearance.
- ❑ 14. Check with your department to assure that they have submitted your Master's Degree Clearance form (which includes your thesis grade) to the Graduate Division **by the posted clearance deadline.**

## THESIS SUBMISSION AND REVIEW PROCEDURES

### Final Draft Review

The final draft of the thesis being submitted to the Graduate Division should be (1) typed in approved format, (2) edited and proofread, and (3) signed by all committee members. See separate *Requirements for Final Thesis Drafts* sheet and the *Guidelines for Thesis Preparation* for specific requirements. **Thesis drafts that have not been proofread or are in need of editing will be returned to the student for reworking. This could prevent completion of the degree on the expected date.**

For guaranteed reading for Fall graduation, your final draft must be submitted to the Graduate Office in October of that year. For guaranteed reading for Spring graduation, your final draft must be submitted to the Graduate Office in March of that year. The exact deadlines can be found at [www.csufresno.edu/gradstudies](http://www.csufresno.edu/gradstudies).

Theses submitted by these dates are assured of review and processing in time for clearing the thesis portion of their degree clearance, barring any major difficulties. Normally, drafts are reviewed in the order received (see the *Thesis Listing* in the front reception area). They are returned to the student with an indication of any required corrections. Students who miss the deadline are still encouraged to submit their completed drafts. While late submissions cannot be assured of completion in time for this summer's graduation, we will make every effort to process all theses.

### Publication Copy Review

Each student will be notified of his or her separate deadline for submitting the revised publication copy. Usually, this date is set for **two weeks from the date when the final draft is returned** to the student. Publication copies must be laser printed and will need final signatures of all committee members on the official approval page.

After review and approval by the Thesis Consultant, take the thesis to the Print and Copy Center at the Kennel Bookstore, pay the copying and binding fees, and bring the receipt to the Graduate Office for final thesis clearance.

**Please feel free to call the Thesis Consultant's office if you need help on formatting or procedural questions. We have many different resources available to assist you in the completion of this part of your degree requirements.**

Charles Radke,  
Thesis Consultant  
[cradke@csufresno.edu](mailto:cradke@csufresno.edu)  
phone: 599-278-2418



## REQUIREMENTS FOR FINAL THESIS DRAFTS

***The following are minimal requirements. However, please note that if you intend to type your own final publication copy, it is especially important that you submit your best effort for this first draft, in order that we may indicate all necessary format changes. This will greatly expedite your publication copy approval and your thesis clearance.***

***Note: If the formatting review reveals more than a minimal number of computer formatting problems, we will refer you to a professional formatter for assistance in preparing the publication copy.***

1. All thesis committee members must have signed the thesis approval page ("Approved for Final Draft Submission").
2. Submit a digital copy of the thesis along with the hard copy. This can be on a CD, Zip disk, via email, or from a USB flash drive.
3. All critical elements of the thesis must be present. Students must not still be engaged in writing parts of the thesis. The thesis must have an abstract and all required preliminary pages (see the *Guidelines for Thesis Preparation*: title page, approval page, authorization sheet, table of contents, and, as needed, list of tables and list of figures), as well as a completed Reference list or Bibliography. The abstract must fit on one page.
4. The thesis must be paginated.
5. The References or Bibliography must be complete and follow the format of a selected style sheet (indicate your choice to the thesis office; include a recent sample if you have chosen a special journal format).
6. All content additions or corrections made by your committee members must be incorporated into the draft that is reviewed by the Thesis Office.
7. The thesis must be typed and the text must be spaced at exactly 24 points, per *Guidelines* specifications.
8. Paper quality is not important: the thesis may be submitted on standard printer paper.
9. Where multiple figures and/or tables are involved, these may be included in draft form. A sample of each table or figure must be included, however, for layout and clarity of presentation review.
10. The use of color is acceptable, providing all critical elements also are equally clear in black and white (the required microfilm medium).
11. Always keep a back-up copy of your thesis on disk or your hard drive!

## THESIS TEMPLATE

Thesis templates have been created for students who are typing their thesis in MS Word for the IBM-compatible PC and the Macintosh. These templates contain the skeleton formatting for all theses according to the California State University, Fresno *Guidelines for Thesis Preparation*. The templates area available online from the Division of Graduate Studies Web site.

**Note: Improved versions of the templates were uploaded July 18, 2008.** No major changes were made. Older versions of the template are fine, but if you have an older version of the template and have not used it, please download a new template using the links below.

[On line tutorials are now available to assist you in using these templates.](#)

- The thesis templates are MS Word files in the prescribed university thesis format. Margins, line spacing, and heading styles are all set up for you.
- Download the template with either chapter or section title format (depending upon your degree--see lists below), and the font you wish to use.
- Download and read the instruction file before using a template.
- The size of a template file is approximately 60k. The instruction files are about 80k.
- If the Word document file doesn't automatically download, or the download window doesn't appear when you click on the link, right-click on the link (or hold down the mouse button if you only have one button), and choose "download link to disk" (for Internet Explorer)/"save link target as..." (for Netscape).

For any specific questions regarding the template or other formatting matters, or for a list of professional formatters, please call 559-278-2418.

**Department of Nursing**  
**COMPREHENSIVE EXAMINATION GUIDELINES**

**Introduction**

The purpose of the examination is to fulfill the culminating experience requirement for the Master of Science Degree in Nursing. It will consist of a paper that will reflect the student's comprehension, integration, and application of advanced clinical, theoretical, and research knowledge acquired during the course of study. The comprehension examination utilizes a student developed topic and students are encouraged to identify a potential subject early in the graduate program.

**Guidelines**

**Eligibility**

The examination will take place in the semester that the student will fulfill the requirements of the master's degree. Students expecting to graduate in the summer session with only clinical course work to complete are eligible for the spring examination. There will be no exceptions to this requirement. The student must be in good standing with the University, and all fees paid prior to the examination.

**Unit Requirements**

The comprehensive examination has no units assigned to it; therefore, students must take three units of elective to fulfill the Department of Nursing's 37 or 38-unit requirement for graduation. The elective courses are approved by the Graduate Coordinator.

**Administrative Process**

The student will obtain the examination packet and an identification number from the Nursing Department secretary on or after the assigned date. All examinations will be identified by a confidential identification number. There is no fee for the examination packet. The entire examination will be completed during the posted date. The dates for each examination will be posted well in advance. The typical examination period is 14 days. Results will be available by identification number approximately two weeks after the end of the examination period.

**Review of the Examination**

The department chair will distribute the examination to the assigned faculty member during the 14 day period immediately following the posted turn in date. All grades will be Pass/Fail. The reader will return their scores and written comments to the department chair. In the event of a conflict in grading, a second faculty member will read the examination.

## Written Expectations

The examination paper will be communicated in a clear, concise writing style in accordance with APA (6th Ed.) regulations. It will consist of a minimum of 15 pages and a maximum of 25 pages (not including face sheet, reference list, and appendixes). A font similar to the one used in this handbook (#12 Times New Roman) is suggested. Type should be clear, dark, and legible without erasures or errors. Margins will be 1" minimum, top and all sides. Examination papers longer than 25 pages or those not meeting technical expectations (i.e., APA format, grammar, spelling, typing) will not be read and will be returned for rewrite during the following year.

The title should reflect the focus of the paper's content. A running head, containing a few key words of the title and the examination identification number, is to be placed in the top right of each page. The text of the exam should be paginated.

The original and two copies of the examination will be submitted to the Nursing Department secretary with the Student Identification Sheet by 5:00 p.m. on the posted due date. The Student Identification Sheet must be signed. Late submissions will not be accepted. The original and the copies should be stapled separately. The students should keep an additional hard copy for their own files.

Evidence of plagiarism will constitute failure of the Comprehensive Examination and may become grounds for dismissal from the Department of Nursing. Plagiarism is defined in accordance with the catalog as:

"Plagiarism is specific form of cheating that consists of the misuse of the published and/or unpublished works of another by representing the material so used as one's own work."

## **Guidelines for the Completion of the Advancement to Candidacy Petition**

This information is provided to assist you in the completion of the *Petition of Advancement to Candidacy* form. It will be necessary for you to make an appointment with your graduate adviser, and, if needed, obtain a copy of your California State University, Fresno transcript to refer to when filling out the advancement petition. Complete all sections on the petition. Return the petition to the Division of Graduate Studies office, Thomas Administration Building, room 132. You will receive a written response of approval or denial from the Division of Graduate Studies within six to eight weeks after submission of the petition.

### **Filing Deadline**

Advancement to candidacy gives you permission to proceed in qualifying for the master's degree and should be accomplished as soon as you are eligible. Your *Petition of Advancement to Candidacy* form must be received in the Division of Graduate Studies no later than the sixth week of the semester *prior* to the semester in which you register for project (298) or thesis (299) units, take the comprehensive examination, or apply for the master's degree to be granted. Check the *Academic Calendar* in the current *California State University, Fresno General Catalog* for exact deadlines.

### **Eligibility**

In order to be eligible for advancement to candidacy you must have accomplished the following: attained classified standing; completed at least 9 units at Fresno State toward your proposed program; achieved a minimum grade point average of 3.0 in all coursework listed on the *Petition of Advancement to Candidacy* form; fulfilled the Graduate Writing Skills Requirement; passed the Subject GRE (if required); passed the Department Qualifying Examination (if required); and completed the foreign language requirement (if required).

### **Classified Graduate Standing**

If you were admitted to your program with *conditionally classified* graduate standing, you will need to attain *classified* graduate standing prior to advancing to candidacy. Upon fulfillment of your admission conditions you should contact your graduate coordinator/director and request the submission of the *Classified Graduate Standing Request* form to the Division of Graduate Studies. Please note that no more than 10 units (including transfer and postbaccalaureate credit) completed before achieving classified graduate standing may be listed on the *Petition of Advancement to Candidacy* form.

### **Degree Title**

Your official degree title and designated option (if applicable) will be listed on the front of the advancement petition.

### **Graduate Writing Skills Requirement**

In keeping with the university's graduate-level writing proficiency requirement, all graduate students must demonstrate their competence in written English prior to advancement to candidacy. Each graduate program has a different method for fulfillment of this requirement. The writing requirement for your program is noted on the first page of the advancement petition. Indicate the date this requirement was met in the appropriate section on the petition.

### **Subject GRE**

The Subject GRE is required prior to advancement to candidacy only for the MS in Physics. List the exact date the Subject GRE was passed on the advancement petition. Please note that the Subject GRE is *not* the same as the General GRE that is required prior to admission into a graduate program.

### **Departmental Qualifying Examination (DQE)**

The DQE is required prior to advancement to candidacy by the following programs: Art, Civil Engineering, Kinesiology, Linguistics, Mathematics, Plant Science, Spanish, and Viticulture and Enology. List the exact date the DQE was passed on the advancement petition.

### **Foreign Language Examination**

The Foreign Language Exam is required prior to advancement to candidacy by the following programs: Creative Writing, English, History, and Music (only if completing the Performance option with an emphasis in Vocal Performance or Choral Conducting). List the exact date the foreign language requirement was met on the advancement petition.

### **Substitutions**

If your proposed program of study departs from the department's master's degree program description in the current *California State University, Fresno General Catalog*, your graduate coordinator/director must note all substitutions of required coursework on the front of the advancement petition under the *Approved Substitutions for Required Courses* section.

### **Catalog Year**

Usually students are advanced to candidacy under the departmental requirements listed in the current *California State University, Fresno General Catalog*. If your graduate adviser has recommended that you be permitted to follow the requirements from a previous year, you will need to complete the advancement petition designed for that year. If filling out a blank petition, be sure to indicate the appropriate catalog year used in the space designated "University Catalog Year used" on the second page of the advancement petition.

### **Time Limit**

A maximum time limit of five years is allowed for completion of master's degree requirements. The five years begins with the earliest course listed on the advancement petition. Courses older than five years may *not* be listed on your advancement petition. Your time limit will be noted by an evaluator in the space provided on the petition upon approval of your advancement.

### **Course Listings**

Make sure all courses required for your degree are listed (typed or printed in ink) on the advancement petition. It is important to note all course prefixes, numbers, titles, institutions, terms and years when taken, unit values, and grades for those courses completed. All of this information, with the exception of grades, should also be listed for courses you plan to take at a later date.

### **Transfer Work**

Transfer work includes courses taken from other accredited institutions and/or coursework taken through Continuing and Global Education (Extension and/or Open University) at Fresno State. If you have included coursework from another institution on the advancement petition, you must attach xerographic copies from the other institution's catalog of the following: course description; master's degree program description to demonstrate that the course could have been used toward the master's degree at the other institution; the course numbering and grading systems; and information clarifying whether the institution used the semester or quarter system. Official transcripts of transfer work must be on file in the Office of Admissions and Records at Fresno State.

Please note that the amount of transfer work listed on the advancement petition may not exceed 9 units on a 30-unit program, or 18 units on a 60-unit program.

### **Grade Point Average**

Graduate students must maintain a minimum program grade point average of 3.0 to be eligible for advancement to candidacy. The program GPA includes only those courses listed on the *Petition of Advancement to Candidacy*.

### **Signatures**

Check with your graduate coordinator/director to determine which departmental signatures are required on your advancement petition. Your signature is also required before submitting the petition to the Division of Graduate Studies. Faculty and student signatures indicate an agreement that approved requirements will be completed within the five-year program time limit.

### **Questions**

Many questions regarding advancement to candidacy may be answered by consulting the *California State University, Fresno General Catalog*, and by accessing our Web site, [www.csufresno.edu/gradstudies/](http://www.csufresno.edu/gradstudies/). For an interpretation of requirements for advancement to candidacy, see your graduate coordinator/director.

**NOTE:** *If you need to make changes to the attached advancement petition after it has been approved by the dean of the Division of Graduate Studies, you must file an approved Program Adjustment Request form in the Division of Graduate Studies.*

DGS/4-08

**Please refer to the Division of Graduate Studies Web site**

**([www.csufresno.edu/gradstudies/forms](http://www.csufresno.edu/gradstudies/forms)) for the latest versions of the forms for graduate students.**

## Course Limitations for Graduate Programs

A graduate program is designed to reflect advanced-level coursework, and must adhere to established standards. The official and complete source of information concerning courses and requirements applicable to a graduate degree is the *California State University, Fresno General Catalog*, including sections in "Advancement to Candidacy," "Independent Study," "Graduate Studies," "Course Numbering System," "CAPSTONE," etc.

### The following types of courses may not be used toward a graduate degree:

- 1-99  
Lower-division courses
- 100-199  
Courses designed to meet the undergraduate CAPSTONE requirement  
  
Courses taken as part of a unique Saturday School offering (this does not include regularly scheduled courses that meet on Saturdays).
- 190-290  
Independent study units in excess of 6 units for a 30-unit program
- 298 or 299  
May not substitute one culminating experience for another once a student has registered for the course and completed one semester.
- 300-399  
Course designed to meet professional needs

### Transfer Credit Limitations:

- Transfer credit that would not be used toward a master's degree at the institution where taken
- Regular extension coursework
- Transfer (including Open University) credit in excess of 9 units
- 

### Other Limitations:

- Course taken Credit by Examination (CBE)
- Student teaching credit
- Courses used toward another degree
- CR-graded courses, if not offered CR/NC only; a maximum of 6 units may apply, unless otherwise defined for the program
- Out-dated courses (older than 5 years)
- Coursework, including transfer credit, not listed as post-baccalaureate/graduate credit on a student's records



## GLOSSARY OF TERMS

NOTE: This section is arranged in order of completion in program rather than alphabetically.

### Orientation:

A required graduate student orientation for students enrolled in the Master's Program in Nursing is held each Fall semester. This orientation is required for ALL student's (new, continuing, returning, school nurse) each Fall semester. If you have not received orientation materials by August 1, contact the Nursing Office at 559-278-2041 and request information.

### Conditionally Classified Standing:

Admission status of a student who has met all University admission requirements and been accepted in to the University at post-baccalaureate standing, BUT has not met all admission requirements for the Master's Program in Nursing.

Applicants who do not meet all the specified criteria for admission to the Master's Degree Program with full classified standing may be recommended for **CONDITIONALLY** classified standing by the Graduate Coordinator of the Nursing program. Such a recommendation is accompanied by a statement listing the additional requirements, which must be met before full-classified standing is granted. This statement will be sent to the student from the Division of Graduate Studies and Research. It is the student's responsibility to request a change in classification status as soon as the specified conditions have been met. Forms for this purpose may be obtained in the Office of the Division of Graduate Studies and Research.

Students who have been granted conditional admission to a graduate program are required to complete all conditions for achieving classified standing (full admission) to the program by the semester in which a minimum of 2-10 program units to be used toward the master's degree is completed. Failure to attain classified standing in a timely manner as outlined above may result in the loss of units to be applied toward the degree since excess units may not be listed on the Petition for Advancement to Candidacy.

### Classified Standing:

Admission status of student who has met all University admission requirements, has been accepted into the university at post-baccalaureate standing, AND has met all admission requirements for the Master's Program in Nursing. In addition, the student had requested and completed the Request for Change in Classification form and submitted to the Nursing Office for approval.

Classified standing must be attained no later than the semester in which a student completes 10 program units, including transfer and post-baccalaureate credit, to be used toward the master's degree. A student is expected to attain classified standing either at admission or during the first semester of required course work.

## **GLOSSARY OF TERMS, continued**

### **Advancement to Candidacy:**

Progression status of a graduate student who achieves classified standing, has passed the departmental qualifying exam, meet the university writing requirement, and submitted a completed Advancement to Candidacy petition to the Department of Nursing and Division of Graduate Studies. A student must be advanced to candidacy before he/she is allowed to apply for thesis or project.

The student must submit to the Office of the Dean, Division of Graduate Studies and Research, the properly signed petition for advancement to candidacy. This petition lists all course work that has been completed and will be completing in order to achieve master's degree. Advancement to candidacy must attain no later than the semester (or summer) preceding the semester (or summer) in which the student applies for, and is granted, the master's degree. The student is responsible for adhering to deadlines established by the Graduate Division for the submission of advancement forms. Approximate deadlines are: October 1 (Fall), March 1 (Spring), and July 1 (Summer). Students may not expect to be advanced to candidacy and to graduate in the same semester.

### **Master Thesis/Project Committee Assignment Form:**

This completed form with thesis committee signatures must be submitted to the Nursing Office for approval prior to registering for thesis. No exception to this rule is made. This form is required for both THESIS and PROJECT.

### **Thesis (NURS 299):**

A written research work which can be the culminating experience for the Master's Program in Nursing. Obtain a copy of the Department of Nursing Thesis Guidelines, the Division of Graduate Studies and Research Thesis Guidelines and the APA Manual.

### **Project (NURS 298):**

A systemic development of a plan for, or a critical evaluation of a significant undertaking or creative work in nursing. The project is required to be a scholarly quality that would make an impact on some area of nursing, nursing practice, education, or service delivery. There is no academic distinction between project and thesis. A project can be the culminating experience for the Master's Program in Nursing. Obtain a current copy of the Department of Nursing's Project Guidelines and the APA Manual.

### **Comprehensive Exam:**

A comprehensive examination is an assessment of the student's ability to integrate the knowledge of the area, show critical and independent thinking, and demonstrate mastery of the subject matter. A record of examination questions and responses is maintained.

## **GLOSSARY OF TERMS, continued**

### **Application for Master's Degree to be Granted:**

A request that the master's degree be granted (which includes the graduation fee payable in the Business Office) must be filed in the two weeks of the semester in which all coursework is to be completed. In addition, the student MUST be enrolled in either N299, N298 or the Comprehensive Exam (exam offered Spring Semester only). During the summer, the request should be filed before the end of the first week of the first session. Application forms are available in the Student Records and Evaluation Office.

### **Oral Defense of Thesis or Project:**

An oral defense of thesis or project is required. An oral defense is to be scheduled by the student after submission of the semi-final draft of the thesis to consultant or the final project to the Graduate Coordinator. Oral defense is held prior to graduation or completion of the master's program.

### **Definition of Full-Time Student**

Depending on the use of the term, there are several definitions of full-time. *For the purpose of reporting enrollments*, graduate students taking 9 or more units are considered full-time and students taking less than 9 units are considered part time.

For the purpose of financial aid (loans, veteran's assistance, etc.) a full-time student takes 12 "equivalent units" wherein each graduate unit (200-level or below) attempted by a graduate student is considered as 1.5 units and each undergraduate unit (100-level or below) counts at face value. For example, a student enrolled for eight 200-level units would be considered a full-time student. Three-quarter time and half-time are defined to be 9 to 11 ½ "equivalent units," respectively.

## **GRADUATE WRITING REQUIREMENT**

**GOALS:** In order to command scholarly and professional credibility, graduate students should:

- a. Develop writing skills commensurate with society's expectations of persons who hold advanced degrees.
- b. Develop the ability to write in formats and styles appropriate to their disciplines.

**POLICY:**

In accordance with requirements of the State of California, students must demonstrate competence in written English before they apply for advancement to candidacy. For pedagogical reasons, they should demonstrate such competence as early in their programs as possible.

**OBJECTIVES:**

The student's writing should demonstrate:

- (a) Comprehensibility;
- (b) Clear organization and presentation of ideas;
- (c) An ability to arrange ideas logically so as to establish a sound scholarly argument;
- (d) Thoroughness and competence in documentation;
- (e) An ability to express in writing a critical analysis of existing scholarly/professional literature in the student's area of interest; and
- (f) An ability to model the discipline's overall style as reflected in representative journals.

**STANDARDS:**

Writing competency should be measured against specific standards (e.g., representative journals in the field), which are stated in the program's catalog entry, in the department's graduate student handbook, and in similar material.

**IMPLEMENTATION:**

1. At the time of the student's advancement to candidacy, the program must specify the means (See 2a-d below) by which the writing requirement is met.
2. The writing requirement may be fulfilled by any of the following items:
  - (a) A course of courses specified by the program, provided these courses meet the requirements stated in "Objectives", above. Should the student pass all components other than writing, the student would receive credit for the course but would have to demonstrate writing competence in some other way, specified by the program's writing policy.
  - (b) A survey of literature of proposal for thesis or project, if this task precedes advancement to candidacy.
  - (c) A qualifying exam with a substantial essay component, if the exam is completed prior to advancement to candidacy.
  - (d) A development process that spans several semesters, but is completed prior to advancement to candidacy. In this case, portfolio assessment of similar evaluative methods are appropriate. Departments that choose this approach must describe in writing the developmental process and specify faculty member(s) who will monitor it.
3. Neither a passing score on the CSU Upper Divisions Writing Examination nor scores on the verbal portion of the Graduate Record Examination may be used to fulfill the graduate writing requirement.
2. Each graduate program's writing policy is subject to review of and approval by the University Graduate Committee. Approved Academic Senate, April 26, 1999

## Signature Page

I have read and understand the contents of the 2011-2012 Graduate Handbook of the Department of Nursing.

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Signature

Date

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Print Name

Signed and return this page to Nursing Office MCL-190 by second week in September each Fall.