The Student Handbook is designed to familiarize the undergraduate nursing student with general information about the Baccalaureate Nursing Program at California State University, Fresno. In addition the student should be familiar with relevant sections of the Fresno State General Catalog which supersedes this handbook. Periodic contact with a nursing advisor is recommended for validation of specific relevant dates and deadlines, but students are ultimately responsible for meeting official deadlines and submitting necessary documents with university and departmental offices.

This handbook is subject to review and recommendation of the faculty of the School of Nursing. Changes will be reflected in each updated edition.

Contact information and location
Mailing Address:
California State University, Fresno
School of Nursing
2345 E. San Ramon, M/S MH25
Fresno, CA 93740-8031
Phone:
(559) 278-2041
Fax:
(559) 278-6360
Office Hours:
Spring and Fall Semesters
8:00am to 5:00pm
Closed for Lunch from 12:00pm to 1:00pm
Summer Hours:
7:00am to 3:30pm
Closed for Lunch from 12:00pm to 12:30pm
Location:
Our office is located in McLane Hall, Room 190
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INTRODUCTION

Welcome to the School of Nursing, California State University, Fresno. The School offers four programs: Baccalaureate - for basic and RN students, School Nurse credential, Masters in Nursing, and Doctor of Nursing Practice program.

The Baccalaureate Student Handbook provides information on the official policies and procedures of the School of Nursing related to students enrolled in the baccalaureate program. Pre-nursing students should consult the School of Nursing for current information regarding admission to the major.

The School of Nursing began in 1957, and the first class graduated in 1962. Nursing is one of the six departments in the College of Health and Human Services.

The School of Nursing office is located in McLane Hall, Room 190; phone number (559) 278-2041. Information regarding programs offered by the school is available from the office. Office hours during the academic year are 8:00 A.M. to Noon and 1:00 to 5:00 P.M., Monday through Friday. Consult the school concerning summer hours.

Information of interest to students is posted on two bulletin boards near the office.

The student bulletin board, outside of the office, contains information about class schedules and changes, co-curricular activities, scholarships, and grants.

The CNSA (California Nursing Students Association) bulletin board contains information about the organization activities and allows students to leave messages for one another.

Admitted nursing students are assigned an undergraduate academic advisor and are encouraged to seek faculty advice during posted office hours and/or by appointment. Faculty office hours may be obtained from the faculty member, the school office, and the student bulletin board.
PART I - OVERVIEW OF THE SCHOOL OF NURSING

Mission Statement

The mission of the School of Nursing at Fresno State 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 school 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

Fresno State 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, Fresno State 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 School 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 School 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; along with a Doctor of Nursing Practice program. In order to meet the rapidly changing needs of society and the requirements of the profession, the faculty 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 school 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 Central Valley including cultural and ethnic backgrounds, language, beliefs, values, learning styles, 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.
The Doctor of Nursing Practice program prepares the graduate for advanced nursing practice, defined by AACN (2004) as any form of nursing intervention that influences healthcare outcomes for individuals or populations, including the direct care of individual patients, management of care for individuals and populations, administration of nursing and healthcare organizations, and the development and implementation of health policy.

Approved by Faculty Council, March 14, 1987
Revised Fall 1998; April 8, 2005: March 28, 2008: April 20, 2015
California State University, Fresno
School of Nursing

Conceptual Framework

The baccalaureate and graduate programs in nursing at Fresno State 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

A unique profession concerned with all variables affecting clients in their 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 Bachelor of Science in Nursing Program

The purpose of the baccalaureate program is to prepare the graduate as a generalist for any entry level position in professional nursing. The program also enables the graduate to meet the requirements for state certification as a public health nurse. Additionally, the program provides the foundation for advanced study in nursing.

Baccalaureate Program Student Learning Outcomes

The culminating student learning outcomes are based on four primary indicators; Communication, Critical Thinking, Clinical Judgment, and Collaboration. These four primary outcomes were derived from the American Association of Colleges of Nursing’s The Essentials of Baccalaureate Education for Professional Nursing Practice (2008). Thus the nine overarching Essentials are embedded in the core outcomes of the BSN program and are threaded throughout coursework.

At the completion of the baccalaureate program, the graduate will be prepared to function in a variety of health care settings and be able to validate the following student learning 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 nonverbal 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.

The School of Nursing has patterned their culmination student learning outcomes after The American Association of Colleges of Nursing’s nine Essentials of Baccalaureate Education. Below are brief
 statements, taken directly from the 2008 policy statement, then a table is provided to visualize the articulation between the programs culminating student learning outcomes (communication, critical thinking, clinical judgment, and collaboration) and the nine essentials.

**Essential I:  Liberal Education for Baccalaureate Generalist Nursing Practice:** A solid base in liberal education provides the cornerstone for the practice and education of nurses.

**Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety:** Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care.

**Essential III: Scholarship for Evidence Based Practice:** Professional nursing practice is grounded in the translation of current evidence into one’s practice.

**Essential IV: Information Management and Application of Patient Care Technology:** Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care.

**Essential V: Health Care Policy, Finance, and Regulatory Environments:** Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nursing practice.

**Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes:** Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.

**Essential VII: Clinical Prevention and Population Health:** Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice.

**Essential VIII: Professionalism and Professional Values:** Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.

**Essential IX: Baccalaureate Generalist Nursing Practice:** The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. The baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.

American Association of Colleges of Nursing’s The Essentials of Baccalaureate Education for Professional Nursing Practice (2008).
Table 1
Articulation of the School of Nursing primary outcomes and the AACN’s Essentials

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Essential</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication</td>
<td>I, IV, VI, VIII, IX</td>
</tr>
<tr>
<td>Critical Thinking</td>
<td>I, II, III, VII, VII, IX</td>
</tr>
<tr>
<td>Clinical Judgment</td>
<td>I, II, III, VII, VIII, IX</td>
</tr>
<tr>
<td>Collaboration</td>
<td>I, V, VIII, IX</td>
</tr>
</tbody>
</table>

In addition to the School of Nursing primary outcomes; Communication, Critical Thinking, Clinical Judgment, and Collaboration; that are based on the AACN’s nine Essentials of Baccalaureate Education, the school incorporates the American Nurses Association (ANA) Code of Ethics for Nurses into their curriculum. The most current textbooks associated with the codes are required reading.

PART II

NURSING PROGRAM AND CURRICULUM
ADMISSION OF STUDENTS IN THE NURSING PROGRAM

Basic Students with no transferable nursing credits:

The program is often on an impacted status and admission into the major is competitive. Applicant selection is based on GPA in prerequisite courses.

Consult the departmental office for current information and procedures.
Link: http://www.csufresno.edu/nursing/programs.htm

Eligibility to Apply to the Program

TEAS

Students must have an overall GPA of 3.0. Prior to applying to the Nursing Program, students must pass the ATI Test of Essential Academic Skills (TEAS) with a score of 75%. Students receiving a score of less than 75% will be allowed to retake the exam twice, but this must be done prior to their application. For TEAS information, see www.atitesting.com.

The following eight prerequisite courses must be completed prior to entry into the nursing program.

G.E. Area A1 (COMM 3, 7, or 8) (3 units)
G.E. Area A2 (ENGL 5B or ENGL 10) (3 units)
G.E. Area A3* (3 units)
G.E. Area B4* (3 units)
Anatomy (BIOL 64) (3 units)
Physiology (BIOL 65) (5 units)
Chemistry (CHEM 3A) (4 units)
Microbiology (BIOL 20) (4 units)
Total (28 units)
Link: http://www.csufresno.edu/catoffice/current/nursingdgr.html - anchor951096

TRANSFER STUDENTS

Students must have completed at least two semesters or 12 semester units of nursing courses in an accredited school of nursing to be eligible for direct transfer into the major. Students must submit a transfer form, all transcripts, and course descriptions to facilitate evaluation and placement in the major.

Students must meet all California State University, Fresno criteria for admission and continuation in the major to be eligible for transfer.

Students are admitted and placed in the major at the discretion of the school chairperson in consultation with the appropriate faculty.

Transfer students who are accepted into the program enter the major on a space-available basis.
ATI’s Assessment-Driven Review

NCLEX Preparation

The School of Nursing has adopted the standardized assessment program known as Assessment Technologies Institute

Please find below initially an introduction to ATI; on subsequent pages the specific ATI policy for Fresno State Nursing is provided.

All nursing students are required to take a variety of assessments that work to aid in review, remediation, and testing success.

You will purchase ATI’s testing package either at the Welcome Brunch or the Kennel Bookstore special orders desk (downstairs).

Review Modules: The review modules are unit-based, study guides covering topics determined important for NCLEX-RN preparation. All review modules are available on the ATI website.

Non-Proctored Assessments: Students can assess their overall understanding by self-administering the non-proctored tests. These tests will provide an immediate rationale for responses.

Proctored Assessments: At the end of each semester (except semester one), the proctored assessments will access your study skills.

Comprehensive Predictor- NCLEX Performance: During your last semester you will take ATI’s Comprehensive Predictor assessment. This 180-item assessment is designed to reflect the content areas of the current NCLEX (RN licensing examination) blueprint. This tool provides information of the student’s probability of NCLEX success, and provides guideline for NCLEX preparatory study.

ATI Assessment-Driven Review (ADR) program

ATI offers a revolutionary Assessment-Driven Review (ADR) program designed to increase student pass rates on the nursing licensing exam and lower program attrition. Used as a comprehensive program, the tools can help students prepare more efficiently, as well as increase confidence and familiarity with content. This complete package of student assessment and review materials is offered at a significant savings over the individual component price.

Entrance/Orientation

This part of the program includes four components, which are typically offered at the beginning of the student’s course of study in nursing:
Test of Essential Academic Skills (TEAS)
The TEAS is designed to predict the academic readiness of applicants prior to admission into a program of study in nursing. The four subtests are math, science, English, and reading. The TEAS may be used as one criterion to aid screening or selection of students for nursing programs, but it is not to be used as the sole criterion for selection.

Self-Assessment
ATI’s Self-Assessment Inventory identifies unique learning style characteristics, quantifies critical thinking components, and serves as a communication tool to improve the understanding of each student’s professional and work values. Questions on the Self-Assessment Inventory use a five-point Likert scale to provide educators with data about the thinking process, learning style, professionalism, and work values of each student.

Critical Thinking Entrance/Exit Exams
These non-nursing exams are usually administered at entrance and exit from a nursing program to assess the student's ability to use the phases of the critical thinking process.

Quest for Academic Success
This tool provides students with an introduction to the concepts of the critical thinking process. Study and testing skills are enhanced by highlighting key points for note-taking, textbook annotation, and content application through case study.

Content Mastery and Review
The heart of ATI’s Assessment Driven and Review program is the Content Mastery Series. This program aids students in the review and remediation process for the state licensing exam in nursing. Each module combines thorough content mastery assessment with review questions based on case studies. Review modules are followed by a non-proctored student exam to assess the effectiveness of remediation. Assessment and review are designed in accordance with the NCLEX test plan and cover the following nursing specialty areas:
Review modules include:
Medical-Surgical
Nursing Care of Children
Pharmacology
Maternal-Newborn
Fundamentals of Nursing Practice
Mental Health
Community Health Nursing Practice
Leadership and Management for Nursing Practice

Content Mastery Exam
A proctored, standardized exam is administered at the end of each nursing content area. This diagnostic tool provides scores for mastery of nursing content areas, nursing process, critical thinking phases, and cognitive levels. The NCLEX test plan correlation for each item can be used as a resource for directed study.
Content Area Review Module
Review modules for the major nursing specialty areas are available for streamlined remediation. Based on summary information of the content, the modules strengthen the student's review with content application in the form of case study.

Non-proctored Exams
For each content area, the Assessment-Driven Review program provides a non-proctored, Internet-based exam reflecting the NCLEX test plan. These exams identify any remaining areas of content weakness for directed study. The interactive style provides the student with immediate feedback on all response options. A performance report summarizes the student's knowledge of content areas and use of the critical thinking phases, nursing process, and cognitive levels.

Licensing Exam Preparation
The final phase of Assessment-Driven Review provides two-stage preparation for the NCLEX.

Comprehensive Predictor
The proctored RN Comprehensive Predictor and the PN Comprehensive Predictor assessment tools are 96% predictive for outcomes of the NCLEX. Scores are included for content, nursing process, critical thinking, and knowledge level. The exam report includes NCLEX correlation and a study guide.

Preparing for the NCLEX
RN and Preparing for the NCLEX- PN
This preparatory guide features strategies for improving performance on the NCLEX.

See: http://www.atitesting.com/Home.aspx
PROCTORED ATI ASSESSMENTS
At the beginning of each semester each lead faculty that has a proctored assessment in their course and the Baccalaureate coordinator will establish dates for the proctored ATI assessments. Currently we are using 2013 Proctored Assessments. There are two proctored ATI assessments per topic; the initial and a “Retake” version. Each proctored assessment has approximately 95 items of regular and alternative format questions.

The following is the schedule for Proctored ATI Assessments:
* Nutrition End of 1st
* Fundamentals End of 2nd
* Pharmacology, Mental Health, Adult Medical/Surgical End of 3rd
* Maternal/Newborn & Care of Children End of 4th
* Adult Medical/Surgical & Pharmacology End of 5th
* RN comprehensive Beginning of 6th & end of 6th
* Leadership End of 6th

NONPROCTORED ATI ASSESSMENT
The Nonproctored ATI Assessments include:
- Online Practice Assessments – two versions with rationales
  o RN Comprehensive
  o RN Nutrition
  o RN Leadership
  o Pharmacology
  o Community Health
  o Mental Health
  o Maternal Newborn
  o Nursing Care of Children
  o RN Fundamentals
- Online targeted medical-surgical Practice Assessments – one version per system with rationales
  o Cardiovascular
  o Gastrointestinal
  o Perioperative
  o Endocrine
  o Immune
  o Renal and Urinary
  o Fluid, Electrolyte and Acid-Base
  o Neurosensory and Musculoskeletal
  o Respiratory
- **Online Tutorials**
  - **Nurse Logic**
    - Knowledge and Clinical Judgment
    - Nursing Concepts
    - Priority Setting Frameworks
    - Testing and Remediation
  - **Skills Modules**
    - Infection Control
    - Physical Assessment – Adult
    - Physical Assessment - Child
    - Surgical Asepsis
    - Vital Signs
    - Blood Administration
    - Medication Administration 1-4
    - HIPAA
    - Nasogastric Intubation
    - Personal Hygiene
    - Urinary Catheter Care
    - Ambulation, Transferring, and ROM
    - Pain Management
    - IV Therapy
    - Enteral Tube Feeding
    - Oxygen Therapy
    - Nutrition, Feeding, and Eating
    - Airway Management
    - Closed-chest Drainage
    - Maternal-Newborn Care
    - Health Care Fraud, Waste, and Abuse Prevention
    - Enemas
    - Wound Care
    - Diabetes Management
    - Specimen Collection
    - Central Venous Access Devices
    - Ostomy Care
  - **Learning Systems RN practice assessments:** Targeted Medical-Surgical
    - one version per body system with integrated critical thinking tools and rationales:
      - Neurosensory
      - Cardiovascular and Hematology
      - Renal and Urinary
- Endocrine
- Oncology
- Respiratory
- Gastrointestinal
- Musculoskeletal
- Immune and infections
- Dermatological

  o **Learning Systems RN practice assessments:**
    - Communication
    - Community Health
    - Fundamentals 1
    - Fundamentals 2
    - Leadership
    - Maternal Newborn 1
    - Maternal Newborn 2
    - Nursing Care of Children 1
    - Nursing Care of Children 2
    - Gerontology
    - Pharmacology
    - Mental Health 1
    - Mental Health 2

  o **Learning Systems RN Final practice assessments:**
    - Fundamentals Final
    - Leadership Final
    - Maternal Newborn Final
    - Nursing Care of Children Final
    - Community Health Final
    - Communication Final
    - Gerontology Final
    - Pharmacology Final
    - Medical-Surgical Final
    - Mental Health Final
    - NCLEX Final
IMPLEMENTATION OF ATI INTO BACCALAUREATE CURRICULUM

Implementation of ATI into your course is required. Even if you do not have an ATI Content Mastery Series (CMS) Proctored Assessment associated with the end of your course, your course material is represented in one or more of the Proctored Assessments. All courses will have a Nonproctored Assessment associated with its curriculum. The courses where the Proctored Assessments, Practice Assessments, and Tutorials are to be incorporated into the Baccalaureate Curriculum have been delineated and listed below in Table 1

Table 1
ATI & Baccalaureate Curriculum

<table>
<thead>
<tr>
<th>COURSES</th>
<th>PROCOTORED ASSESSMENT</th>
<th>PRACTICE ASSESSMENT</th>
<th>TUTORIAL ASSESSMENT</th>
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<tbody>
<tr>
<td>NURS 10</td>
<td>● RN Fundamentals</td>
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<td>● All Nurse Logic</td>
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<td></td>
<td></td>
<td>● Learning Systems RN Communication (practice and final)</td>
</tr>
<tr>
<td>NURS 10A</td>
<td>● RN Fundamentals</td>
<td></td>
<td>● Skills Modules</td>
</tr>
<tr>
<td>NURS 111</td>
<td>● Nutrition</td>
<td>● Nutrition (2 versions)</td>
<td></td>
</tr>
<tr>
<td>NURS 110</td>
<td>● RN Fundamentals</td>
<td>● RN Fundamentals (2 versions)</td>
<td>● Learning Systems RN Fundamentals - Final</td>
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<td>● Targeted M/S Gastrointestinal</td>
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<td>● Targeted M/S Perioperative</td>
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<td>● Targeted M/S Fluid, Electrolyte and Acid-Base</td>
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<td>● Targeted M/S Neurosensory and Musculoskeletal</td>
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<td>● Targeted M/S Respiratory</td>
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<td>PRACTICE ASSESSMENT</td>
<td>TUTORIAL ASSESSMENT</td>
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<tr>
<td>NURS110A</td>
<td>• RN Fundamentals</td>
<td></td>
<td>• Learning Systems RN Fundamentals – Practice (2 versions)</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>• Skills Modules</td>
</tr>
<tr>
<td>NURS124</td>
<td>• Pharmacology</td>
<td></td>
<td>• Learning Systems RN-Pharmacology practice &amp; final</td>
</tr>
<tr>
<td>NURS121</td>
<td>• Mental Health</td>
<td>• Mental Health (2 versions)</td>
<td>• Learning Systems RN-Mental Health practice (2 versions) &amp; final</td>
</tr>
<tr>
<td>NURS123</td>
<td>• Adult Medical/Surgical</td>
<td>• Targeted M/S Cardiovascular</td>
<td>• Learning Systems RN Gerontology (practice and final)</td>
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<td></td>
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<td>• Targeted M/S Endocrine</td>
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<td>• Targeted M/S Immune</td>
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<td></td>
<td>• Targeted M/S Renal/Urinary</td>
<td></td>
</tr>
<tr>
<td>NURS 131</td>
<td>• Care of Children</td>
<td>• Care of Children (2 versions)</td>
<td>• Learning Systems RN-Care of Children Practice (2 versions) &amp; Final</td>
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<tr>
<td>NURS 132</td>
<td>• Maternal/Newborn</td>
<td>• Maternal/Newborn (2 versions)</td>
<td>• Learning Systems RN-Maternal/Newborn Practice (2 versions) &amp; Final</td>
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<td>NURS 140</td>
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<td>• Pharmacology (2 versions)</td>
<td>• Learning Systems RN – all targeted M/S Practice assessments</td>
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<td></td>
<td>• Learning Systems RN Adult M/S Final</td>
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<td>NURS 141</td>
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<td>• Community Health (2 versions)</td>
<td>• Learning Systems RN Community Health (Practice and Final Assessment)</td>
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<td>NURS 150</td>
<td>• RN comprehensive</td>
<td>• RN Comprehensive (2 versions)</td>
<td>• Learning Systems RN NCLEX – Final</td>
</tr>
<tr>
<td></td>
<td>• Leadership</td>
<td>• RN Leadership (2 versions)</td>
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</tbody>
</table>
ATI TESTING POLICY: CALIFORNIA STATE UNIVERSITY, FRESNO
School of Nursing

Each standardized ATI proctored exam has approximately 60-90 questions. Each exam offers an assessment of the students’ basic/intermediate/mastery comprehension of the topic area. Each exam has a specific area it evaluates; please find within your ATI textbooks/e-versions the specific topics to be evaluated within each exam. Your individual raw score is tabulated, however the adjusted individual total score for each exam is the number you should be familiar with. The adjusted individual total score is a function of the number of questions answered correctly divided by the number of scored questions on the assessment. This percentage-correct score is then adjusted to account for differences in the difficulty of the form taken, producing the adjusted individual total score. Your score will be known shortly after the exam completion.

Each exam has a 4 criterion-referenced ATI Proficiency level. The RN comprehensive Predictor has a different set of criteria.

**ATI Proficiency levels answers the question: HOW MUCH PROFICIENCY HAS THE STUDENT ATTAINED IN THIS CONTENT AREA**

**Proficiency Level 3**
Scores meeting this Proficiency level may be considered to **exceed** most expectations for performance in this content.

**Proficiency Level 2**
Scores meeting this Proficiency level may be considered to meet **minimum** expectations for performance in this content.

**Proficiency Level 1**
Scores meeting this Proficiency level may be considered to meet **absolute minimum** expectations for performance in this content.

**Proficiency below Level 1**
Scores meeting this Proficiency level may be considered to be **below minimum** expectations for performance in this content.

You will be scheduled to take the computerized proctored exam following a specific sequence and except for the first Pharmacology, the first Medical/Surgical examination & the RN Comprehensive Predictor a Proficiency level of 2 is required

<table>
<thead>
<tr>
<th>RN CMS 2013 Proctored</th>
<th>Level 1</th>
<th>Level 2</th>
<th>Level 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Medical Surgical (90 items)</td>
<td>56.7%–76.7%</td>
<td>68.9%–80.0%</td>
<td>81.1%–100.0%</td>
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<tr>
<td>Fundamentals (60 items)</td>
<td>51.7%–61.7%</td>
<td>63.3%–76.7%</td>
<td>78.3%–100.0%</td>
</tr>
<tr>
<td>Leadership (60 items)</td>
<td>61.7%–75.0%</td>
<td>76.7%–86.7%</td>
<td>88.3%–100.0%</td>
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<tr>
<td>Maternal Newborn (60 items)</td>
<td>55.0%–65.0%</td>
<td>66.7%–78.3%</td>
<td>80.0%–100.0%</td>
</tr>
<tr>
<td>Mental Health (60 items)</td>
<td>56.7%–65.0%</td>
<td>66.7%–83.3%</td>
<td>85.0%–100.0%</td>
</tr>
<tr>
<td>Nursing Care of Children (60 items)</td>
<td>53.3%–61.7%</td>
<td>63.3%–76.7%</td>
<td>78.3%–100.0%</td>
</tr>
<tr>
<td>Nutrition (60 items)</td>
<td>46.7%–65.0%</td>
<td>66.7%–80.0%</td>
<td>81.7%–100.0%</td>
</tr>
<tr>
<td>Pharmacology (60 items)</td>
<td>56.7%–70.0%</td>
<td>71.7%–83.3%</td>
<td>85.0%–100.0%</td>
</tr>
</tbody>
</table>
Steps to be taken if receive below the stated Proficiency Level

<table>
<thead>
<tr>
<th>ATI EXAM</th>
<th>SEQUENCE OF EXAM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition (must obtain a level 2)</td>
<td>Completion of 1&lt;sup&gt;st&lt;/sup&gt; semester</td>
</tr>
<tr>
<td>Fundamentals (must obtain a level 2)</td>
<td>Completion of 2&lt;sup&gt;nd&lt;/sup&gt; semester</td>
</tr>
<tr>
<td>Pharmacology (must obtain a level 1)</td>
<td>Completion of 3&lt;sup&gt;rd&lt;/sup&gt; semester</td>
</tr>
<tr>
<td>Pharmacology (must obtain a level 2)</td>
<td>Completion of 5&lt;sup&gt;th&lt;/sup&gt; semester</td>
</tr>
<tr>
<td>Mental Health (must obtain a level 2)</td>
<td>Completion of 3&lt;sup&gt;rd&lt;/sup&gt; semester</td>
</tr>
<tr>
<td>Maternal Newborn (must obtain a level 2)</td>
<td>Completion of 4&lt;sup&gt;th&lt;/sup&gt; semester</td>
</tr>
<tr>
<td>Nursing Care of the Children (must obtain a level 2)</td>
<td>Completion of 4&lt;sup&gt;th&lt;/sup&gt; semester</td>
</tr>
<tr>
<td>Adult Medical/Surgical (must obtain a level 1)</td>
<td>Completion of 3&lt;sup&gt;rd&lt;/sup&gt; semester</td>
</tr>
<tr>
<td>Adult Medical/Surgical (must obtain a level 2)</td>
<td>Completion of 5&lt;sup&gt;th&lt;/sup&gt; semester</td>
</tr>
<tr>
<td>Leadership (must obtain a level 2)</td>
<td>During 6&lt;sup&gt;th&lt;/sup&gt; semester</td>
</tr>
<tr>
<td>RN Comprehensive Predictor</td>
<td>Beginning of 6&lt;sup&gt;th&lt;/sup&gt; semester</td>
</tr>
<tr>
<td></td>
<td>Repeat exam…</td>
</tr>
<tr>
<td></td>
<td>End of 6&lt;sup&gt;th&lt;/sup&gt; semester</td>
</tr>
</tbody>
</table>

**Step 1** Log-on to ATI
- Go to Proctored Assessments
- Go to My Results (you will see a list of all your Proctored Assessments)
- Select the Assessment you want to need to review (Pharmacology, Fundamentals…)
- Click on Assessment Report
- Print out your Report for that proctored exam – it will be called “Individual Performance Profile”

**Step 2** Each semester dates will be set for Remediation Requirements to be completed. You will be advised of dates/times in an email shortly after your Proctored Assessment has been taken. However, you will know immediately if you have to remediate or not; so starting the process is appropriate.

**Step 3** By the stated due date for Remediation Requirement (usually due approximately one month following the start of the next semester you will turn in proof to the Baccalaureate Coordinator your Remediation Requirement fulfilment.

**Steps to be taken to remediate the RN Comprehensive Predictor are as follows:**

**Step 1** Following the first Proctored RN Comprehensive Assessment, Log-on to ATI website and access your “Focused Review” for that assessment. Print it out highlight the content areas that you got incorrect.

**Step 2** By a pre-established due date (before second Proctored Comprehensive Assessment) complete a Remediation Requirement.

**Step 3** Faculty for NURS 150 will provide specific Remediation Requirements.

**Remediation Requirement**
Once you have printed out your report; look for all the content areas that you received less than a 70% on - High-light them. Find the corresponding content in both your textbook(s) and ATI textbooks. Review this content and show proof of review by creating a Remediation Log.

**Remediation Log**

Document review of content you scored less-than 70% on by:

- Creating notes, or use ATI remediation templates (found on website) to substantiate your review. Keep notes/templates brief. Two-three sentences to show proof of review will be sufficient. Combine content area reviewed where appropriate. Site page numbers where content was found and which textbook.

- Tutorial Assessments - substantiate your review. Go to ATI webpage and then to the **Tutorial section**. Go to Learning Systems RN. You will find Practice Assessments and Final Assessments. Complete **all** Assessments (related to the ATI exam you are remediating). You must achieve at least a 100% on all of these assessments – complete till achieved. Print out results. This one page proof of completion of the assessment/s needs to be included with your Remediation Log.

- Practice Assessments – substantiate your review. Go to ATI webpage and then to the **Practice Assessment** section. Complete **all** Assessments (related to the ATI exam you are remediating). You must achieve at least a 100% on all of these assessments – complete till achieved. Print out results – the one page proof of completion of assessments is to be included in your Remediation Log. Please note there are several focused medical-surgical sections within these practice assessments.

The final responsibility is for you to submit to the Baccalaureate Coordinator (Currently Dr. Rindahl) your “Remediation Log”. Staple all your pages together and submit as one packet.

**Remediation Log Packet**

1. Copy of your Individual Report from ATI-highlighted for areas of need (<70%).
2. Written documentation of sections reviewed in ATI and nursing textbooks and how you remediated (or copies of Remediation Templates used).
3. Print out proof of completion (100%) of Tutorial/Practice Assessments.
## RN Comprehensive Predictor® 2013
Probability of Passing Expectancy Table

<table>
<thead>
<tr>
<th>RN Comprehensive Predictor 2013 Individual Score</th>
<th>Predicted Probability of Passing the NCLEX-RN®</th>
<th>RN Comprehensive Predictor 2013 Individual Score</th>
<th>Predicted Probability of Passing the NCLEX-RN®</th>
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</table>

*You may begin.*
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Progression in the Nursing Major

The nursing curriculum consists of a year of prerequisite courses and three years of nursing courses. Nursing courses must be taken in sequence. RN students take GE and transition nursing courses and then articulate at the senior year. Transfer students are individually placed based on their previous course work.

Consistent with university policy, nursing majors must maintain an overall grade point average of 2.0 to remain in attendance at Fresno State. The GPA is based on all units attempted at Fresno State.

Criteria for retention, progression, and graduation from the program include a minimum grade of “C” in each required course - nursing and other requirements. If a student earns less than a “C” in a nursing course, the Course Committee recommends to the Nursing School Chairperson whether to permit the student to repeat the course or not. The Chairperson will notify students of the decision.

Required courses may be repeated only once to achieve a “C” or better grade.

Students who earn less than a “C” in two nursing courses will not be allowed to repeat the second course and will be dropped from the major.

Credit/No Credit grades are not accepted for Core 8 prerequisite and or corequisite courses.

An incomplete in a nursing course must be made up before progressing to the next nursing course.

The School follows the established University policy for dropping courses. http://www.csufresno.edu/aps/forms_policies/apm/documents/231.pdf
LEAVE OF ABSENCE (LOA) FROM THE NURSING PROGRAM

Request for Leave of Absence (LOA)

A. Students must request a leave of absence in writing from the school chair. Students who do not request a leave of absence may not be readmitted into the major.
B. Leaves will be granted only for students who have completed at least one semester in the program and are in good standing.

Request to Return from Leave of Absence

A. To be reinstated in the program students must submit a written request specifying:
   1. Date of leave of absence
   2. Reason for leave of absence
   3. Disposition of circumstances requiring the leave of absence
   4. Activities (e.g., working in hospital, or illness) engaged in during leave of absence.
B. Students will receive written notification of requirements for returning to the program, denial, or reinstatement.
C. Requirements for return may include any or all of the following, based on the discretion of the School Chair:
   1. Letters of recommendation from individuals such as counselors or physicians
   2. Enrolling in no more than 5 units of Independent Study to update theoretical and/or clinical skills
D. Students who receive written notice of reinstated in the major return on a space-available basis and must receive permission from the school to enroll in classes.

http://www.csufresno.edu/catoffice/current/nursingdgr.html
NURS 50 - COOPERATIVE EDUCATION IN NURSING

NURS 50 is an elective course which provides students enrolled in the nursing major an opportunity to obtain structured work-study experiences under the supervision of registered nurses in participating health care agencies. Students practice previously learned skills. The course requires a minimum of 45 hours of paid work experience per unit of credit. The course does not fulfill requirements in the major for graduation.

FAQ NURS 50 Work Study

What are the prerequisites for the course?
You need to finish 2nd semester.

Is NURS 50 required in conjunction with nurse externship?
Yes, to be employed in the agencies as a nurse intern you need to be enrolled in NURS 50.

Does the class meet or is it simply a work-study course?
The class will only meet once at the beginning of the semester for orientation. You will do all of your hours at the agency.

What is required for the course? i.e. Proof of employment? Documentation of hours?
You will need your skills checklist, proof of employment, a mentor, brief objectives, and a final evaluation. All of the documentation is available on Blackboard and I will review these requirements during the initial orientation meeting. You will document your hours with a one page log-sheet. The entire syllabus will be available online as well.

There are 3 sections of the course which range from 1-3 units credit (this is a credit-no credit class). How many hrs/week are required for each of these sections?
Each section can have a variety of hours to achieve the Credit grade. If you do not need the units for any reason, I suggest taking the one (1) unit section. The total hours can be adjusted to meet your work and school needs. Often students do 1 – 4 shifts per month, and the agency will help set the hours you work. You do not need to decide right now and can adjust your units if needed in the spring.

When do I need to arrange the work-study?
You should be making arrangements prior to the start of the semester! Check with your agencies to arrange employment. We may need to get a contract developed ASAP so it is vital to start the paperwork now. Most places have had NURS 50 students, but you can check with the agency and the Nursing School if you are in a brand new site.

Can I start my NURS 50 now?
Third semester students must wait until the semester begins before they can start in their work-study jobs. Please do not start before that date as you are not covered by workman’s comp or the California State University, Fresno contract.

Do I need any documents for the clinical experience?
You must have your Skills Checklist with you while in the clinical setting. Your mentor needs to be familiar with your completed activities and can sign you off on skills that you complete under their guidance.

LICENSURE EXAMINATION
Basic nursing students may apply to the Board of Registered Nursing in Sacramento for licensure as a Registered Nurse upon satisfactory completion of the pre-licensure content. Applications are distributed to eligible students in the final nursing course. See: http://www.rn.ca.gov/applicants/lic-exam.shtml

Laws governing nursing practice and licensure are available from the Board of Registered Nursing at www.rn.ca.gov.

**PUBLIC HEALTH CERTIFICATE**

All graduates should apply for the Public Health Certificate. Forms are available in the School of Nursing or at the CA BRN website: See: http://www.rn.ca.gov/pdfs/applicants/phn-app.pdf

**HONORS AT GRADUATION**

Honors at the time of graduation from the university are awarded to undergraduate students based on the following criteria:

1. Students must have an overall minimum grade point average of 3.5 on all work attempted.
2. Students must have a minimum grade point average of 3.5 on all work taken at the university.
3. Students must have completed 45 units in residence at California State University, Fresno.

The grade point average earned at California State University, Fresno determines which honors the student receives:

- Summa Cum Laude (highest honors) 3.90 to 4.00
- Magna Cum Laude (high honors) 3.70 to 3.89
- Cum Laude (honors) 3.50 to 3.69

Since the requirement for honors could change, students are requested to check the current General Catalog for the criteria in effect at the time of graduation.
PART III
STUDENT RESPONSIBILITIES AND POLICIES

FIRST SEMESTER STUDENT CHECKLIST

The School of Nursing office is in McLane Hall (McL) Room 190. The Nursing Resource Center (NRC) McL Room 180 is where students can practice technical skills and refine their techniques. This room also contains books, materials, and equipment that can be utilized. Just ask the staff.

Prior to the First Day of Class

The nursing program has many requirements, which can leave a majority of the students feeling frustrated and overwhelmed. Here are few things you need to accomplish prior to first week of school.

___ 1. Ensure CPR certificate is updated (Prepare way in advance because of the multiple nursing programs in the area).

___ 2. Obtain a physical from the Student Health Center and bring immunization records with proper documentation. The Immunizations records are recorded by the Health Center.

___ 3. Name badges are provided in the NRC.

___ 4. California State University, Fresno Nursing Student Patch (Sold in the Kennel Bookstore & required for navy blue top & lab coat).

___ 5. Uniforms can be purchased in the Kennel Bookstore.

___ 6. Stethoscope, blood pressure cuff (5th semester), and a watch with second hand are required.

___ 7. Malpractice insurance is done as a blanket policy through Fresno State. Fees for insurance are collected automatically through clinical lab fees.

___ 8. The School of Nursing requires each student to carry private health insurance continuously throughout enrollment. Proof of health insurance will be requested by the School of Nursing at the time of enrollment and periodically throughout your course of study.

___ 9. Students must have and use a Fresno State email account. Students are responsible to Check their campus email regularly for communication. This is the method the Coordinator and the Instructors will disperse all information.
STUDENT RESOURCES

Financial Aid Office

Recommend using website verses telephone.
(559) 278-2182, Joyal Administration, Room 296

http://www.csufresno.edu/studentaffairs/programs/financialaid/studentpages/scholarshipinfo.shtml

Offers resources on multiple scholarships with a variety of qualifying data.
(559) 278-6572, Joyal Administration, Room 274

http://www.csufresno.edu/scholarships/

Scholarship Resources in the Nursing Office

Disadvantaged Nursing Scholarship
Deloras Jones RN Scholarship Program
Kaiser Permanente Scholarships

Other Scholarship-Based Websites

Health Professions Education Foundation
http://www.oshpd.ca.gov/HPEF/

California State University, Fresno Nursing ROTC
Military Science Army ROTC
(559) 278-2887/4810, North Gym, Room 211
http://www.csufresno.edu/rotc/

Air Force ROTC
Det 35
5305 N. Campus Dr. MS NG40
Fresno, CA 93740
Air Force ROTC Det 35
5305 N. Campus Dr. MS NG40
Fresno, CA 93740
559-278-2593
http://www.csufresno.edu/afrotc/
ATTENDANCE
It is expected that the student be present in the didactic and clinical areas. If illness is the cause of absence, a clearance from a physician or the Student Health Center may be requested by the instructor before the student is permitted to return to the areas. In any case of absence, prior notification of the faculty is required.

CPR CERTIFICATION
Students must maintain current CPR certification. Initial certification and renewal classes are offered periodically through the school and various health care agencies in the community.

INSURANCE
Students must have current malpractice insurance. This is purchased through a blanket policy from California State University, Fresno. The fees are automatically collected from clinical fees. Car insurance is required for any course in which students must use their car during clinical activities such as in Community Health Nursing. Health insurance is recommended for all students. The School of Nursing requires each student to carry private health insurance continuously throughout enrollment. Proof of health insurance will be requested by the School of Nursing at the time of enrollment and periodically throughout your course of study.

SAFETY AND SAFE PRACTICE
Students are responsible for reviewing policies and procedures related to universal precautions at least annually. Adherence to this will be monitored with a signed statement in the student’s academic file.

Students who make an error involving patient safety are responsible for filing the appropriate incident report and following the departmental procedure.

Students who may be at increased risk related to injury or exposure to communicable disease should consult their health care provider and notify the faculty of their condition.

Students who are injured or exposed to a communicable disease during a clinical experience will report to the clinical instructor and follow agency procedures. The student is responsible for filling out the Worker’s Compensation forms if needed.

STUDENT CRIMINAL BACKGROUND CHECK/DRUG SCREENING
Prior to attending clinical in the first semester, students are required to complete a criminal background check and drug screen via CertifiedBackground.com.
See: http://www.certifiedbackground.com/

The students purchase their own background check on-line and are referred to a local lab for the drug screening. The results of the background check and drug screening are posted to the CertifiedBackground.com website in a secure, tamper-proof environment, where the student, as well as the organizations can view the background check. Once your order is submitted, you will receive a password to view the results of your background check. The results will be available in approximately 48-72 hours.
POSITION STATEMENT REGARDING UNIVERSAL PRECAUTIONS
Fresno State
School of Nursing

The faculty of the School 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 Fresno State. 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 School of Nursing on an ongoing basis. See: http://www.cdc.gov/hicpac/2007IP/2007isolationPrecautions.html

Universal Precautions: Defined
The Centers for Disease Control and Prevention (CDC), 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 School 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.
6. 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.
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 School 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)

- **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/)

  The PPD may be (depending on agency) 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
DRUG ABUSE, ALCOHOL, AND MENTAL ILLNESS

California Board of Registered Nurses (BRN) GUIDELINES

In the matter of nursing students impaired by alcoholism, drug abuse, and emotional illness, the California Board of Registered Nursing recognizes:

a. that these are diseases and should be treated as such;

b. that personal and health problems involving these diseases can affect one’s academic and clinical performance and that the impaired nursing student is a danger to self and a grave danger to the patients in his or her care;

c. that nursing students who develop these diseases can be helped to recover;

d. that it is the responsibility of the nursing student to voluntarily seek diagnosis and treatment for any suspected illness;

e. that confidential handling of the diagnoses and treatment of these diseases is essential.

Therefore, the Board of Registered Nursing expects schools of nursing, with students impaired by these diseases, to offer appropriate assistance, either directly or by referral.

Furthermore, the Board expects that schools of nursing will ensure that instructors have the responsibility and authority to take immediate corrective action with regard to the student’s conduct and performance in the clinical setting.

It is outside of the Board’s scope of function to endorse or recommend a particular course of therapy; however, it does wish to inform nursing students of the importance of seeking voluntary aid for conditions that could, if left unattended, lead to disciplinary action and may prevent them from being licensed to practice nursing in the State of California.

As a preventative measure, schools of nursing are asked to provide factual material to incoming students regarding school policy on drug or alcohol abuse and mental illness among nursing students.

See: http://www.rn.ca.gov/enforcement/enf-faqs.shtml
2762. Drug-related transgressions

In addition to other acts constituting unprofessional conduct within the meaning of this chapter it is unprofessional conduct for a person licensed under this chapter to do any of the following:

(a) Obtain or possess in violation of law, or prescribe, or except as directed by a licensed physician and surgeon, dentist, or podiatrist administer to himself or herself, or furnish or administer to another, any controlled substance as defined in Division 10 (commencing with Section 11000) of the Health and Safety Code or any dangerous drug or dangerous device as defined in Section 4022.

(b) Use any controlled substance as defined in Division 10 (commencing with Section 11000) of the Health and Safety Code, or any dangerous drug or dangerous device as defined in Section 4022, or alcoholic beverages, to an extent or in a manner dangerous or injurious to himself or herself, any other person, or the public or to the extent that such use impairs his or her ability to conduct with safety to the public the practice authorized by his or her license.

(c) Be convicted of a criminal offense involving the prescription, consumption, or self-administration of any of the substances described in subdivisions (a) and (b) of this section, or the possession of, or falsification of a record pertaining to, the substances described in subdivision (a) of this section, in which event the record of the conviction is conclusive evidence thereof.

(d) Be committed or confined by a court of competent jurisdiction for intemperate use of or addiction to the use of any of the substances described in subdivisions (a) and (b) of this section, in which event the court order of commitment or confinement is prima facie evidence of such commitment or confinement.

(e) Falsify, or make grossly incorrect, grossly inconsistent, or unintelligible entries in any hospital, patient, or other record pertaining to the substances described in subdivision (a) of this section.

(Added Stats 1953 ch 1053 § 2. Amended Stats 1957 ch 923 § 1; Stats 1961 ch 378 § 1; Stats 1978 ch 1161 § 178; Stats 1984 ch 1635 § 4. Amended Stats 1998 ch 970 § 12 (AB 2802.).)

SCHOOL OF NURSING
POLICY ON DRUGS, ALCOHOL ABUSE, AND MENTAL ILLNESS

See California State University’s guidelines:

1. Class Attendance
Any student whose behavior clearly indicates impairment due to the use of drugs, alcohol, or mental illness will be excused and accompanied to the office of the Chair or to the Student Health Center if warranted. The Chair will counsel the student to make an appointment with the Student Counseling Center or with a therapist.

2. Clinical Attendance
   A. Any student whose behavior clearly indicates impairment due to the use of drugs, alcohol, or mental illness will be immediately excused and accompanied to the office of the Chair or to the Student Health Center if warranted.

   B. The student will not be able to return to the clinical area until seen by a therapist and until a letter to the Chair is received from the therapist stating that the student is able to return to the clinical area and perform safely. The absence will be considered an excused absence.

   C. If the student requires extended therapy which prevents completing necessary course work for the semester, the student will need to withdraw from the nursing program. The student will be allowed to reapply for readmission with documentation from a therapist that the student is able to perform safe care.

PHYSICAL AND MENTAL HEALTH POLICY

All students applying for the nursing program must be in satisfactory physical and mental health, and be able to carry out all duties in the clinical area. Students should be free of any physical disabilities or emotional problems which would interfere with normal progression in learning and in accepting the usual duties and responsibilities of a nursing student which are necessary for meeting program requirements.

Mental and Physical Qualifications for Admission to Fresno State Nursing Program

The following mental and physical qualifications for applicants and continuing students are a requirement of California State University, Fresno Nursing Programs. Following a nondiscrimination policy, the School of Nursing will evaluate a written request for specific cases.

1. Ability to interpret and communicate in verbal and written forms in order to interpret client responses, to communicate nursing actions and health interventions, and to understand, document, and teach nursing activities. This includes using appropriate grammar, vocabulary, and word usage.
2. Ability to appropriately interact with individuals, families, and groups from a variety of social, emotional, cultural, and intellectual backgrounds.

3. Ability to think critically, in order to make clinical decisions, identify relationships between clinical data, and develop nursing care plans.

4. Ability to calculate mathematical figures necessary for medication administration.

5. Ability to demonstrate endurance and motor skills sufficient to provide safe and effective nursing care. Some examples may be demonstrated by the following: working in a standing position, lifting and transferring patients, and applying pressure for bleeding sites.

6. Ability to hear well enough to monitor and assess client’s health needs. This includes hearing cries for help, emergency signals and alarms, breath and heart sounds and various overhead codes.

7. Ability to see well enough to observe and assess client’s health status and changes in condition. This includes seeing facial expression, movement, changes in skin color, and other observed client changes or responses.

8. Ability to have tactile capabilities sufficient for physical assessment. This includes performing palpation, noting temperature changes in skin and other changes in client condition.

**STUDENTS WITH PHYSICAL OR MENTAL DISABILITIES OR LIMITATIONS**

If a student has a physical or mental disability that limits his/her ability to perform per the criteria dealing with clinical assignments, it is the student’s responsibility to bring this information to the attention of the clinical faculty before they begin the clinical courses.

If any condition changes, the student is required to notify the clinical instructor and provide documentation of the limitations to the instructor prior to the clinical assignment.

If the student does not meet the requirements for physical and mental health, he/she will be required to submit physician’s documentation that the student is able to meet these criteria.

Link: [http://www.csufresno.edu/studentaffairs/](http://www.csufresno.edu/studentaffairs/)
UNIFORM REGULATIONS

Nursing students function in a professional setting. Therefore, attire appropriate for a professional is required. The following are basic guidelines.

**Uniform** - Consists of a Fresno State adopted blue top and pants with white shoes with closed toes and backs. A white lab coat is recommended for visiting health care agencies related to courses but outside of official class hours. Uniforms and lab coats must have a Fresno State patch. Uniforms are available at uniform shops (check with the Nursing Department). Head cover should be blue or white.

Students visiting the hospital for purposes of information retrieval and/or preparation for clinical experience must present themselves in appropriate attire.

Each clinical facility may state its requirements, such as laboratory coats, uniforms, or business casual attire. Students must wear identification name pins at all times in the clinical area.

**NOTE:** Community Health and Psychiatric Units do not usually require students to wear uniforms. Check with faculty regarding agency policy.

**Hair Grooming/Facial Hair** - Male students must be clean shaven – no p.m. shadow, or “too early to shave syndrome”. Those students with medical or religious reason for facial hair must keep hair clean and well groomed. Student must have documentation of reason on file with the Dept. of Nursing for not shaving or having long hair. Students with long hair must have it pulled back and up off their collar. The agency has the right to dismiss the student from clinical if they do not follow agency dress code policy. This action will affect the student’s grade.

**Tattoos/Piercings** – Student will adhere to the agency policy. Tattoos need to be covered and 1 earring (stud) may be worn in each ear for clinical.

**Jewelry & Nail Polish** - No nail polish and no artificial nails. Nails are to be no longer than the end of fingertips. Students should consider at all times patient’s safety and be consistent with professional attire.

**Patch** - All uniforms/lab coats must bear the Fresno State student nurse patch. The top of the patch should be attached on the left sleeve 2 inches below the shoulder seam. Patch is to be removed when not functioning as a student nurse. Patches are available at the Kennel Bookstore.

**Name Badges** – Photo name badges are created in the Nursing Resource Center. Agencies may require an agency specific photo ID badge to be worn in addition to the Fresno state name badge whenever the student is in the facility. These are obtained at the agencies according to their policies and instructions.

**Other**
• A stethoscope is required and may be available through a group purchase in the first semester.
• A watch with a second hand is required.
• A pen light, safety goggles, blood pressure cuff, and scissors may be required for specific nursing courses.

**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 and Friday 8:00 a.m. - 4:00 p.m., Friday 8:00 to 12:00. Tuesday and Thursday closes; unless posted otherwise.
STUDENT PROGRESS REPORT

If a student has not passed a course they need to submit a report using the form. The faculty will also submit a report of progress to the Dept. of Nursing.

Undergraduate Student Statement of Course Progress

This information is to be submitted to faculty member, Chair of Dept. and Student Affairs Chair in one week. Due date:_______________

<table>
<thead>
<tr>
<th>Faculty Name:</th>
<th>Student Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course Number:</td>
<td>Student ID #:</td>
</tr>
</tbody>
</table>

1. Describe the factors that impacted your success in this class.

2. Please provide a personal statement that includes the following information.
   a. Based on feedback from course faculty, how are you going to be successful in the course? (include study strategies)
   b. How often will you be communicating with faculty member?
   c. Hours worked per week.
   d. Financial support for finishing course and program
      i. Grant and scholarship receiving
      ii.

3. Submit 3 copies to Dept. of Nursing.
   a. Original document to Chair
   b. Copy to Nursing Dept. Student Affairs Committee
   c. Student records

Student Signature:  
Date: 

Original document to Chair
Copy to Nursing Dept. Student Affairs Committee for Review
File in student records
Approved: 12/20/13

STUDENT APPEALS PROCEDURE

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 Baccalaureate Coordinator

Faculty will consult with the course-lead teacher*/* regarding potential student appeal situations.

If at the end of five (5) instructional days from the time of the incident, the problem is not resolved on an informal basis between the student, faculty and the lead teacher of the course, the formal phase of the grievance procedure and the filing period will begin.

The facts must be submitted in writing by both parties to the grievance, and presented to the Baccalaureate Coordinator*** within (5) instructional days.

The Baccalaureate Coordinator will review the problem and make a recommendation within five (5) instructional days following the filing of the problem.

C. Appeal to the Chairperson of the School of Nursing
In the event the problem remains unresolved, the Baccalaureate Coordinator will forward the file with comments to the School Chair within ten (10) instructional days.

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 School of Nursing Chairperson. A copy of the recommendation is to be placed in the student’s departmental folder.

* The name of the current course-lead teacher is available in the School of Nursing office.
** In the event the course-lead teacher is involved, the School Chairperson will appoint a designee. Should the entire course be involved, the student should proceed directly to step C.
*** In the event the Baccalaureate Coordinator is involved, the School Chairperson will review the problem.

II. Formal Grievance Procedure

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

III. Grade Grievance

A. Resolution of any problem concerning grades should be attempted on an informal basis between the student and the faculty concerned.
B. Formal grievance of grades follows the procedure outlined in the university catalog.
INCIDENT REPORT POLICY AND PROCEDURE

POLICY

1. A client incident is defined as any accident, injury, loss, contamination, medication error, or a situation involving a client which might result in an accident, injury, loss, or contamination to the client. Incidents are happenings which are not consistent with routine activities.

2. Any health or safety incident which occurs as a part of a nursing student’s clinical learning experience shall be reported to the clinical agency and the Nursing School Chairperson. A Supervisors Report of Work Injury /Illness Report will have to be submitted within 24 hours. Here is the link to that form.

   http://www.fresnostate.edu/adminserv/hr/workerscomp/empinf/index.html

3. Timely and accurate documentation is necessary:
   a. To inform the school administrators about situations which may result in risk or liability to the school.
   b. To identify patterns of accident prone behavior.
   c. To assure that the health or safety incident is explored as a learning experience.
   d. To demonstrate expected professional behavior.

PROCEDURE

1. Students shall report in person to the clinical instructor any health or safety incident which involves a client and complete the necessary clinical agency documentation.

2. The School of Nursing Report for Client Incident at Clinical must be completed by the student and submitted to the Nursing Office in a confidential manner when clinical incidents occur. Forms are available from the Nursing Office. This form should be completed and returned to the Nursing Office as soon as possible.

3. If the clinical agency allows a copy of their incident form to be made, that copy shall be attached to the school form.

4. Incident reports will be reviewed by the Nursing Chairperson and the instructor.

5. Students shall report in person to the Nursing Chairperson to discuss client incident.

PART IV
SCHOOL OF NURSING POLICIES

ACADEMIC HONESTY/DISHONESTY

Cheating and Plagiarism


   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 5, Section 41301)

3. Course Assignments

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

Ethical Behavior

Falsification of Documents

Cheating or fraudulent or deceptive acts of falsifying patient care paperwork or agency documentation is a direct reflection on the student’s character and a direct disregard for the ANA Code of Ethics. Students who create or document fraudulently in the student role may have the potential to do so in the health care setting as a practicing Registered Nurse. This fraudulent behavior can have a direct or indirect poor outcome in the patient care and safety.
Student Work

1.) Includes copying another student’s work that includes patient care information and using it as their own experience, indicating they have cared for or had contact with patients they did not provide care. This includes all electronic documentation.

2.) Falsely documenting in course clinical paperwork such as journals, reflective assignments, care plans, or worksheets that care or visits were provided.
   a.) Visits that were not made to clients or agencies for clinical experience and documented as being completed for school paperwork.
   b.) Care/instruction was not provided to clients/patients and documented as completed in school paperwork.

3.) Disciplinary process and action
   a.) Faculty will review and forward to lead faculty for further investigation.
   b.) A hearing will be conducted with Student Affairs Committee, Nursing Dept., including the offender.
   c.) A penalty will be imposed if appropriate
      i.) First offense will be a letter of reprimand and possible adjustment of letter grade.
      ii.) Second offense will be grounds for dismissal from the Nursing Program.

Agency Documentation

Falsely documenting in agency documents that care or visits were provided for a patient/client when they had not been provided is a very serious offense as this act may disrupt the relationship between the agency and the School of Nursing.

Students who falsify agency documents in client chart or Electronic Medical Record in the community, inpatient, outpatient or observational agencies will be dismissed from the program.

Social Media

1. School of Nursing will follow the University Policy.

COURSE MATERIALS

Syllabi prepared by faculty include the following information:
   Prerequisites for the course.
   Course description and objectives.
   Course calendar with dates, deadlines, topics, readings, projects, exams, etc...
   Course requirements and basis for final grade.
   Textbook, equipment, supplies, clinical sites, etc...

Appendices are available for many courses and may include:
   Supplemental materials
   Forms used in the course
   Assignments

Syllabi and appendices are available on Blackboard and at the Kennel Bookstore.
CEREMONIES AND ASSEMBLIES

A. Ceremonies sponsored by student organizations must have the approval of the School of Nursing.

B. The Chairperson of the School of Nursing shall call such assemblies as needed to discuss changes in the laws affecting nursing, changes in the curriculum, and other matters directly affecting the students.

PARTICIPATION IN FACULTY COMMITTEES/FACULTY COUNCIL

Students are encouraged to participate in Faculty Council meetings and committees of the School of Nursing as indicated below:

Faculty Council: A monthly meeting of all faculty members for the purposes of (1) disseminating information; (2) decision-making; and (3) professional faculty development. Student representatives are responsible for bringing student concerns to the faculty and informing the student body of deliberations/content of Faculty Council meetings.

Research: Focuses on facilitating research within the department, school, and with agencies in the community. The undergraduate student representative should have completed Nursing 145.

Student Affairs: Responsible for recommendations about student related matters such as scholarships, awards, and policies affecting students.

Baccalaureate Curriculum: Focuses on undergraduate curriculum issues, development, and revision.

Nursing Resource Center Committee: Deals with policies concerning use of the learning resources and equipment.

Course Committee: Deal with specific courses/course clusters including design and delivery of the courses.

In any situation involving discussion of a particular student, the committee will move into executive session and student members will be excused.
EVALUATION OF FACULTY/COURSES

Students are offered two methods to evaluate their experience in each course they take:

- Courses: Focus is on content and format of course
- Teaching effectiveness: Focus is on faculty effectiveness in teaching the course to meet outcomes

Both evaluations take place during the last four weeks of each semester and are conducted via an on-line format or in-seat format during class. Both evaluations are anonymous. Students may also provide written comments of teaching effectiveness of a faculty being considered for retention, tenure, or post-tenure review. The opportunities and procedures are posted on the Student Bulletin Board.

SCHOLARSHIPS, AWARDS, AND HONORS

I. Scholarships

A. Students interested in applying for any scholarships or financial aid should submit the appropriate application form to Financial Aid Office, Joyal Administration Building, Room 296. Generally applications for standing scholarships must be in by February 1 of each year to be considered for the following year. See: [http://www.csufresno.edu/studentaffairs/programs/financialaid/](http://www.csufresno.edu/studentaffairs/programs/financialaid/)

B. The School of Nursing will screen eligible applicants for nursing scholarships based on information provided by the Financial Aid Office. If additional information is required, students will be informed that they are being considered for the scholarship and requested to supply any needed additional information.

C. Students will be informed of their selection for scholarships by an “Awards Letter” from the Financial Aids Office or in special instances by the grantor. The Financial Aids Office will also inform those who were not selected. Students should know of their selection by Fall semester at the latest.

D. Any scholarships requiring a different application process will be posted on the student bulletin board and/or announced in appropriate classes.

II. Awards and Honors

In addition to awards and honors available to all students, there are several awards unique to nursing. The following list includes awards and honors typically available to nursing students:

Dean’s Medalist - available to one graduating student in the School of Health and Human Services. It is based on academic excellence and community service. Faculty nominate one student annually.

Sigma Theta Tau - membership in the International Nursing Honor Society is based on academic excellence. Students are invited by the Honor Society to apply for membership in the fifth or sixth semester.
Excellence in Nursing Award - based on academic achievement and commitment to the profession. Students apply to Sigma Theta Tau which screens applicants and makes the award.

Heritage in Nursing Award - based on commitment to the profession as demonstrated through involvement in organizations related to the profession. Faculty nominate students for these awards. The alumnae association selects the recipients and gives the awards at the pinning ceremony.

Armed Services Awards - recipients are selected by the graduating class in accord with criteria established by each branch of the armed services.

University and Community Service Awards - available to three students in each graduating class. Faculty in senior nursing courses nominate students.

Other awards and honors will be posted on the students’ bulletin board and/or announced in appropriate classes.
PART V

BOARD OF REGISTERED NURSING POLICIES

Link: http://www.rn.ca.gov/

STATEMENT ON DELIVERY OF HEALTH CARE

The Board of Registered Nursing supports the right of all consumers to receive dignified and competent health care consistent with the law and prevailing standards of care, including the right to participate in and make decisions regarding their health care. The Board also supports the right of the nurse to know the patient’s diagnosis/suspected diagnosis in a timely fashion in order to make an appropriate nursing care plan.

The implementation of infection control procedures known as standard precautions is basic in all health care. Standard precautions are regarded by the Board as a common standard of nursing practice necessary to protect both patients and health care workers from disease transmission. Knowledge of the patient’s diagnosis(ses) by the registered nurse is essential so that the registered nurse may initiate any additional precautions necessary to minimize the risk of contracting or spreading disease.

Although the nurse is not expected to take life-threatening risks in caring for clients, it is not acceptable to abandon any patient, nor is it acceptable to refuse to treat any person on the basis of age, religion, sex, national origin, sexual orientation, or disability. Decisions regarding the degree of risk involved in patient care should be based on current scientific knowledge.

Information on issues related to communicable disease is available from the U.S. Centers for Disease Control and from agencies in the State School of Health Services and County and City Health Agencies.

STANDARDS OF COMPETENT PERFORMANCE

Excerpt from California Code of Regulations
Title 16 - Chapter 14

1443.5. STANDARDS OF COMPETENT PERFORMANCE
A registered nurse shall be considered to be competent when he/she consistently demonstrates the ability to transfer scientific knowledge from social, biological and physical sciences in applying the nursing process, as follows: http://www.rn.ca.gov/pdfs/regulations/npr-b-53.pdf

(1) Formulates a nursing diagnosis through observation of the client’s physical condition and behavior, and through interpretation of information obtained from the client and others, including the health team.

(2) Formulates a care plan, in collaboration with the client, which ensures that direct and indirect nursing care services provide for the client’s safety, comfort, hygiene, and protection, and for disease prevention and restorative measures.
(3) Performs skills essential to the kind of nursing action to be taken, explains the health treatment to the client and family and teaches the client and family how to care for the client’s health needs.

(4) Delegates tasks to subordinates based on the legal scopes of practice of the subordinates and on the preparation and capability needed in the tasks to be delegated, and effectively supervises nursing care being given by subordinates.

(5) Evaluates the effectiveness of the care plan through observation of the client’s physical condition and behavior, signs and symptoms of illness, and reactions to treatment and through communication with the client and the health team members, and modifies the plan as needed.

(6) Acts as the client’s advocate, as circumstances require by initiating action to improve health care or to change decisions or activities which are against the interest or wishes of the client, and by giving the client the opportunity to make informed decisions about health care before it is provided.

Authority Cited: Business and Professions Code, Section 2715. Reference: Business and Professions Code, Section 2725 and 2761.

GUIDE FOR SCHOOLS OF PROFESSIONAL NURSING ON ETHICAL PRACTICES

The following statements are to be used by schools of professional nursing as a guide in establishing and following educationally ethical practices:

1. In recruitment activities, objectivity and accuracy of presentation should be the goal. The school is directly responsible for all individuals involved in the recruitment and admissions process, and these individuals shall be careful to present information concerning their own institution which is unambiguous. They shall avoid giving questionable or derogatory information about competing schools or about other types of nursing education programs.

2. The school bulletin or catalog shall provide accurate information about admission requirements, cost of the program and curriculum.

3. The school bulletin or catalog shall contain information regarding the refund policies of the school and shall provide for refund of a substantial portion of tuition payments to students who withdraw within a reasonable period of time following admission to the program.

4. The provisions of the Civil Rights Act shall be adhered to.

5. All instructional and clerical personnel with access to confidential information shall respect the confidential nature of such information.

6. The bulletin or catalog of the school shall contain policies regarding promotion and graduation, and there shall be, in writing, policies regarding grounds for dismissal of a student from a school. Students shall be informed of dismissal, promotion, and graduation
policies. All students facing dismissal, and the parent or guardians of students who are minors, shall be given the opportunity to discuss reasons for this action with faculty representatives and the school administrative officers, according to the school’s due process procedure for student grievances.

7. No student shall be prohibited from graduating and making application for the licensing examination, providing that the student has met all of the requirements of the school and all qualifications specified in Section 2736, Nursing Practice Act, State of California.

8. The faculty of the school of nursing shall endorse and teach ethical practices in keeping with the American Nurses’ Association CODE FOR NURSES.

9. If research is undertaken on human subjects by faculty and/or students enrolled in the nursing program, appropriate measures shall be used to insure the protection of the rights and safety of each individual involved as a subject in the research. Whenever tests of any kind are administered, written consent shall be secured, or the written consent of parents or guardians, when appropriate.

10. The counseling program shall incorporate provisions for tutorial and remedial services for students who will benefit from these services in order to achieve career goals. Opportunities to obtain credit for other acquired knowledge by the use of challenge examinations or other methods of evaluation should be provided foreign or out-of-state graduates of registered nursing programs who lack certain educational courses to meet licensure requirements in the State of California.

REGISTERED NURSE TO BACCALAREATE REGISTERED NURSE
The RN to BSN student is held accountable for all information pertinent to the RN to BSN student found in the pre-licensure Student Handbook

Overview
The RN to BSN Program is designed to provide associate degree nurses having a registered nursing license an expedient way to complete upper division nursing coursework that fulfills the BSN degree without repeating lower division nursing courses. It builds upon the knowledge and skills acquired with the associate in nursing degree without duplication. Based upon the AACN Baccalaureate Essentials, upper division nursing coursework expands upon leadership and management principles, and introduces research and evidence-based practice methodologies, while introducing population-focused community health nursing theory and practice. Graduates of the program are prepared for entry into new areas of nursing practice (e.g., public health nursing, management, home health) and advanced degree education (e.g., MSN, School Nurse Credential). See Part I.

Curriculum
The program consists of 8 prerequisite courses, 3 co-requisite courses, and 6 RN to BSN courses. Three upper division GE courses must also be completed, as well as other graduation requirements (see catalog).

Course of Study

<table>
<thead>
<tr>
<th>Required Prerequisite Courses</th>
<th>28 units</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prerequisites</td>
<td>Fresno State Courses (partial listing)</td>
</tr>
<tr>
<td>Oral Communication*</td>
<td>COMM 3 or 7 or 8</td>
</tr>
<tr>
<td>English Composition*</td>
<td>ENGL 5B or 10</td>
</tr>
<tr>
<td>Critical Thinking*</td>
<td>Any Area A3 (SOC 3 recommended)</td>
</tr>
<tr>
<td>Statistics*</td>
<td>MATH 11 or PH 92</td>
</tr>
<tr>
<td>Anatomy with Lab</td>
<td>BIOL 64</td>
</tr>
<tr>
<td>Physiology with Lab</td>
<td>BIOL 65</td>
</tr>
<tr>
<td>Chemistry with Lab**</td>
<td>CHEM 3A</td>
</tr>
<tr>
<td>Microbiology with Lab</td>
<td>BIOL 20</td>
</tr>
</tbody>
</table>

*These 4 courses meet CSU GE Foundation requirements

**May substitute online chemistry without lab, if chemistry was not part of your ADA curriculum

<table>
<thead>
<tr>
<th>Required Co-requisite Courses</th>
<th>9 units</th>
</tr>
</thead>
<tbody>
<tr>
<td>Co-requisites</td>
<td>Fresno State Courses (partial listing)</td>
</tr>
<tr>
<td>Ethics</td>
<td>PHIL 20 or 120</td>
</tr>
<tr>
<td>Social Sciences</td>
<td>SOC 1, 2, or ANTHRO 2</td>
</tr>
<tr>
<td>Psychology</td>
<td>PSYCH 10</td>
</tr>
</tbody>
</table>
## Required Nursing Courses ............................ 21 units

<table>
<thead>
<tr>
<th>RN-BSN Courses</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 138</td>
<td>5 units</td>
</tr>
<tr>
<td>Bridge to Professional Concepts &amp; Issues</td>
<td></td>
</tr>
<tr>
<td>NURS 145</td>
<td>3 units</td>
</tr>
<tr>
<td>Nursing Theories &amp; Research</td>
<td></td>
</tr>
<tr>
<td>NURS 141</td>
<td>3 units</td>
</tr>
<tr>
<td>Concepts of Community Health Nursing</td>
<td></td>
</tr>
<tr>
<td>NURS 141LS</td>
<td>2 units</td>
</tr>
<tr>
<td>Practicum: Concepts of CHN</td>
<td></td>
</tr>
<tr>
<td>NURS 152</td>
<td>3 units</td>
</tr>
<tr>
<td>Advanced Leadership, Management, &amp;</td>
<td></td>
</tr>
<tr>
<td>Healthcare Systems</td>
<td></td>
</tr>
<tr>
<td>NURS 154</td>
<td>5 units</td>
</tr>
<tr>
<td>Applying Professional Nursing Principles</td>
<td></td>
</tr>
</tbody>
</table>

Per Executive Order 1084, 20 units of credit will be applied toward the RN-BSN degree after successful completion of NURS 138.

Total Units in the Major = 41 (21 units coursework, 20 units credit)

### RN to BSN Program Plan (Fall Admission)

<table>
<thead>
<tr>
<th>Fall One</th>
<th>Spring One</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS138 Bridge to Professional (5)*</td>
<td>NURS141 CHN Lecture (3)</td>
</tr>
<tr>
<td>NURS145 Theories/Research (3)</td>
<td>NURS141LS CHN Practicum (2)</td>
</tr>
<tr>
<td>Upper Division GE (3)</td>
<td>Upper Division GE (3)</td>
</tr>
<tr>
<td><strong>11 units</strong></td>
<td><strong>8 Units</strong></td>
</tr>
</tbody>
</table>

*NCELEX External Exam Credits (20 units) awarded after NURS138

**Fall Two**

| NURS152 Leadership (3)                        |
| NURS154 Applying Professional (5)             |
| Upper Division GE (3)                         |
| **11 units**                                  |

Transfer maximum of 70 units from community college; take 50 units from Fresno State (21 RN-BSN courses, 20 NCLEX external exam credits, 9 unit’s upper division GE) for RN-BSN degree total of 120 units.

**NOTE:** Associate Degree RN graduates with a bachelor’s degree in another area may enter as second-degree students. In order to meet minimum degree requirements, an additional 9 units must be taken at Fresno State to complete the total needed (e.g., co-requisites).

### Online Program

All but one RN to BSN nursing course is offered online. Each student must have access to the Internet and a computer capable of running MS software (Word, PowerPoint, etc.). The student bears the cost of the hardware and software.

Consistent participation and self-direction are required in order to be successful with online learning. Discussion boards are often used and participation is determined by the quantity and quality of student postings.
Most assignments in the RN to BSN Program are written papers, not multiple-choice tests, and require preplanning and careful attention to assignment descriptions and requirements. Students are strongly encouraged to seek guidance and assistance from the campus Writing Center and the Library in researching and writing papers. The American Psychological Association (APA) style manual is required for all written papers.

**One Clinical Course --- 90 hours required**

Students must have transportation to assigned clinical sites (e.g., Fresno, Madera, Tulare, Kings counties) and to other assigned activities. A current, valid driver’s license and auto insurance are required. Students must arrange work schedules to accommodate the clinical assignment.

**Retention and Progression**

(See Part II) RN to BSN students are admitted as a cohort and should progress through the curriculum as outlined. If a student in good standing stops out or takes a leave of absence, their position in the cohort is forfeited. Students may resume coursework only with approval and on a space-available basis.

**Grading Scale**

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>90-100</td>
<td>A</td>
</tr>
<tr>
<td>80-89</td>
<td>B</td>
</tr>
<tr>
<td>70-79</td>
<td>C</td>
</tr>
<tr>
<td>60-69</td>
<td>D</td>
</tr>
<tr>
<td>59 or below</td>
<td>F</td>
</tr>
</tbody>
</table>

No rounding up or grade adjustment permitted.

**Admission**

(See Part II) The RN to BSN program is on impacted status and admission is competitive. Minimum requirements and additional criteria apply. Refer to the RN to BSN website for further details: [http://www.fresnostate.edu/chhs/nursing/degrees-programs/rn-bsn.html](http://www.fresnostate.edu/chhs/nursing/degrees-programs/rn-bsn.html)

**Student Responsibilities & Policies**

(See Parts III, IV, & V)

**Confidentiality**

In online courses, discussions often link course content to a student’s nursing practice and work experiences. No names are used, but patients, patient care, and work situations may be discussed. Every student has the obligation to keep such information confidential, within the confines of each course, and not disclose it outside of that online setting.
**Email & Contact Information**

Students must have and use a Fresno State email account. Students are responsible to check their campus email regularly for communication from the coordinator and instructors. This is the method of communication most often used to relay information. It is the student’s responsibility to update their contact information with the coordinator and the nursing office, as well as on *MyFresnoState*.

**Health Requirements**

(See p. 38) RN to BSN students must meet all health and immunization requirements and have a current TB skin test (two-step not required) before entering NURS 141LS practicum. Students must have and maintain health insurance during NURS 141LS.

**Graduation**

At the beginning of the final semester of all required coursework, students must apply for graduation. Before doing this, each student should meet with an Advisor from the College of Health & Human Services Student Service Center to determine if all GE and graduation requirements have been met.