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I. Letter from the Dean

Dear College of Technology Student,

Congratulations on your decision to pursue your education at the Idaho State University College of Technology. On behalf of all faculty, staff, and administration, I want to take this opportunity to personally extend a warm welcome. The College of Technology is one of seven colleges on the ISU campus designed to meet the needs of students – like you.

I am pleased to see that you made the decision to join the largest, most comprehensive postsecondary technical institution in the state of Idaho. You now belong to a college that boasts an alumni base of more than 25,000. For more than 100 years, students have graduated from Idaho State University with the technical skills necessary to successfully enter the workforce. I am confident that you will also be will prepared by our faculty to pursue your passion and have an enjoyable lifetime career.

Amid the excitement of enrolling at ISU, you probably have many questions. This student handbook has been prepared for your use and contains the answers to many of your questions. If you would like additional information, please contact your faculty or Student Services directly. We are all here to help you succeed in your studies and stand prepared to assist with your concerns.

Once again, welcome to the College of Technology.

Go Bengals!

R. Scott Rasmussen
Dean
II. Program Introduction

This handbook is designed to provide information and serve as a resource for most questions and school situations you may encounter as a student in the Practical Nursing program. The information provided in this handbook is meant to supplement that provided in the Idaho State University Bulletin and Official Student Code of Conduct.

All students are directly responsible to the instructors first. Details regarding program procedures will be covered and questions answered during orientation at the beginning of the program or as the need arises. Problems of any nature will be brought to the attention of the instructors and program coordinator. They will seek assistance for a student problem. If a student feels a need for conference with someone other than an instructor or the program coordinator, a meeting may be arranged with an advisor from the College of Technology Student Services at (208) 282-2622.

Program Administration

The Practical Nursing program is operated by the College of Technology, Idaho State University. The program works in cooperation with the Idaho State Board for Professional Technical Education and is approved by the State Board of Education.
Welcome from the Practical Nursing Faculty & Staff

Welcome to the Practical Nurse program (PNUR) at the College of Technology, Idaho State University. The faculty, staff, and administration wish you the best success as you undertake this exciting and challenging step in your education as a nurse.

Important Partnerships

The Practical Nursing program operated by the College of Technology at Idaho State University is in partnership with the following:

- Bannock County Jail
- Bear Lake Memorial Hospital and Skilled Nursing Facility
- Nell J Redfield Memorial Hospital, Skilled Nursing Facility, and affiliated clinics.
- Bingham Memorial Hospital, Skilled Nursing and Rehab Center, and affiliated clinics
- Caribou Memorial Hospital and Living Center and affiliated clinics
- Good Samaritan Village
- Power County Hospital District Long Term Care
Program Description

The Practical Nursing program is designed to prepare graduates with the skills and knowledge to establish a career as a Licensed Practical Nurse and/or articulate to the Associate Degree Registered Nurse course sequence. The Practical Nursing program provides classroom, laboratory, and student nurse practicum instruction that prepares graduates for entry into practical nursing. Upon successful completion of the practical nursing coursework, students will be awarded an Intermediate Technical Certificate in Practical Nursing and may sit for the National Council Licensure Examination for Practical Nurses (NCLEX-PN).

Graduates are prepared to render competent nursing care in a variety of health care settings including hospitals, nursing homes, clinics, physicians’ offices, home health agencies, and health centers.

Practical Nursing Program Mission Statement

The practical nursing program provides safe, effective and qualified practical nursing education services to a culturally diverse population of students. It is committed to maintaining a strong practical nursing program as a vital component for articulation into other healthcare disciplines, by assuring safe practice in nursing through established evidenced-based nursing standards, criteria and curriculum requirements. Which prepares students for the practice of nursing; thereby enhancing the knowledge and skills of those in practice as defined by the Idaho State Board of Nursing Practice Act, in response to the needs of students and industry. It is dedicated to excellence in teaching, life-long learning and evidence-based practice. It provides a range of academic and support services to aide in the student’s success. It promotes public service as an integral part of its mission and works in collaboration with Idaho Board of Nursing, State
Nursing Program Philosophy

The philosophy for the Idaho State University College of Technology Nursing Programs is based on an eclectic approach combining the four domains of nursing, the nursing process, and the Dreyfuss Model of Skill Acquisition and Development as implemented in Patricia Benner’s “From Novice to Expert” (Benner, 1984). This approach uses the four domains as a philosophical base.

Person: The nursing faculty believes the person can be an individual, a family, a community, or a culture. Holistic in nature, the person is unique in his/her/their own experiences, value system, and inherited characteristics. Persons have self-worth and the right to self-determination with a potential for growth, development and change. This development of person throughout the lifecycle is dynamic and interactive because people, as social beings, both affect and are affected by an internal and external environment.

Environment: The nursing faculty believes the environment is a summation of all internal and external factors affecting the health of a person. People maintain or attain health by adapting to environmental and developmental changes across the lifespan. We believe the environment is utilized by the nurse to enhance the patient’s health and well-being. The nurse interacts simultaneously with many patients from diverse cultural backgrounds and across a variety of environments.

Health is characterized by the ability of a person to meet his/her/their needs within the five dimensions that make up the wholeness of the human experience: physiological, psychological, socio-cultural, developmental, and spiritual. A characteristic of health is the ability of a person to meet his/her/their needs, which include: a need for a safe effective care environment, health maintenance, psychosocial integrity and physiological integrity. When necessary, nursing assists persons to meet these needs through the processes of collaboration and through healing interventions.

Nursing is an art and science that incorporates a set of core nursing values. These values include adherence to standards of professional practice, accountability, functioning within legal, ethical and regulatory structures, caring/helping, valuing the profession of nursing and active participation in life-long learning.

Nursing includes the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and
treatment of human response, and advocacy for individuals, families, communities, and populations (American Nurses Association, 2010).

Fundamental to the practice of nursing is the nursing process, which is an organizing framework that uses scientific reasoning and problem solving. The nursing process includes assessment as data collection and holistic nursing assessment of the patient using the Gordon's Functional Health Patterns. The nursing diagnosis utilizes assessment data to formulate problems and etiologies and identify related symptoms in a prioritized manner. Planning incorporates a multidisciplinary approach to identify measurable patient outcomes and nursing interventions to achieve wellness. Implementation includes performing individualized care to the patient. Evaluation is a continuous process designed to measure and refine planning and interventions to optimize patient outcome.

Nursing uses reasoning to integrate knowledge derived from previous education and experience to achieve deliberative and competent decision-making that is grounded in evidence based practice to achieve best practice outcomes. At the novice level, the nurse practices as the beginner using rules and guidelines. As the nurse progresses in the profession, the nurse approaches each task with inquiry, intuition, and wisdom.

Nursing faculty strongly believes that nursing education is a multifaceted, dynamic, and lifelong process involving the acquisition of knowledge, skills, and attitude. The process requires degrees of independent judgment, problem-solving, and intellectual activity that is supported by liberal arts general education, biological, physical, and social sciences; nursing education cultivates decision making abilities, technical capabilities, and strategies based on standards of care.

Nursing faculty believes that teaching and learning requires a partnership between the student and educator, where the educator serves as the facilitator and mentor. Although the ultimate responsibility for learning remains with the student, student learning is a collaborative effort where students learn from their patients, the community, and all other healthcare disciplines.

Nursing faculty also believe that learning is facilitated when learners become increasingly goal-directed and actively involved in the education process. As a result of this belief, faculty designs experiences to help learners develop more autonomy in seeking learning opportunities as they progress through the educational experience.

The nursing program faculty supports the mission of the college and the university to provide quality educational opportunities for all students, regardless of location. To this end, distance learning is utilized to provide learning opportunities to students.
Conceptual Framework of the Nursing Program

The organizing framework flows from the philosophy of the nursing program. The NLN Associate Degree Core Competencies, the American Nurses Association Code of Ethics, the National Patient Safety Standards, and QSEN Competencies are used as professional guiding documents for the curriculum. The program integrates the following concepts throughout:

• Caring Interventions
• Clinical Decision Making
• Communication and Collaboration
• Cultural Diversity and Lifespan
• Evidence-Based Practice
• Nursing Process
• Professional Behavior
• Quality and Safety
• Teaching and Learning

The professional guiding documents and the integrating concepts provide the organizing framework of the nursing program which is reflected in program and course student learning outcomes, and clinical evaluation tools.

CONCEPTS

Caring Interventions: Demonstrating empathy and client advocacy. Demonstrating appropriate genuineness, respect and demeanor toward patients, families, and communities. Patients are recognized as being individuals and members of families and groups. People must be understood in the contexts of their lives, and consequently, nurses strive to assist patients achieve balance and a sense of well-being within their physical, cultural, personal, and social contexts. Demonstrating non-judgmental attitude and promotes clients’ rights to self-determination.

Clinical Decision Making: Choosing and implementing nursing interventions. Observing, interpreting, responding, and reflecting situations within, and emerging from, the nurse’s knowledge and perspective. Prioritizing and delegating appropriate interventions and tasks.

Communication and Collaboration: Fostering therapeutic communication, mutual respect, and shared decision-making to achieve quality patient care. Ensures proper implementation of written, verbal, and non-verbal direction. Demonstrating caring, compassion, and cultural awareness. Promoting positive outcomes. Functioning effectively within nursing and inter-professional teams.
Cultural Diversity & Lifespan: The program participant appropriately applies nursing principles of growth and development through the lifespan for patients and families from diverse backgrounds with cultural competence.

Evidence Based Practice: Examines and questions the evidence that underlines nursing care. Integrating best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.

Nursing Process: Utilizing the five steps to the nursing process to deliver patient care. Obtaining a holistic view of the patient’s structural variables and basic needs. Promoting patient-centered outcomes. Assisting patients towards meeting health needs. Evaluating interventions to meet changing needs and adapting plans of care as required.

Professional/Ethical/Legal: The program participant practices within the scope of their practice in an ethical manner. Contributes to the assessment of health status by collecting, reporting and recording objective and subjective data. Participates in the development and modification of the plan of care. Maintains safe and effective nursing care. Participates in the evaluation of responses to interventions. Fulfills charge nurse responsibilities in health care facilities as allowed by state and federal law. Delegates to others as allowed by the application of the decision making model. Accepts delegated assignments only as allowed by application of the decision-making model. The program participant is personally accountable and responsible for all actions taken in carrying out nursing activities and adheres to the decision-making model.

Quality/Safety: Uses data to monitor the outcomes of care processes and uses improvement methods to design and test changes to promote the quality and safety of health care systems. Minimizes risk of harm to patients and providers through both system effectiveness and individual performance. Follows national and facility safety standards and procedures.

Teaching/Learning: Encompasses the provision of health education to promote and facilitate informed decision making. Achieves positive outcomes and supports self-care activities.

Practical Nursing Program Student Learning Objectives

1. Be eligible to sit for the BCLEX exam.
2. Integrate knowledge from derived from sciences, humanities, and nursing to make competent nursing decisions to achieve best practice outcomes.
3. Communicate and document accurate information about patients in a concise and clear manner.
4. Utilize therapeutic communication skills when interacting with patients and their families.
5. Collaborate with patients, families and health care personnel to achieve positive patient outcomes.
6. Integrate evidence-based data that guides or leads to best practice and quality improvement.
7. Apply the steps of the nursing process in a competent and caring manner to safely meet the holistic needs of patients across the lifespan in a variety of health care settings;
8. Provide care that reflects the professional practice standards including ethical and legal parameters.
9. Demonstrate cultural awareness and respect for persons when working with all populations in the healthcare environment.
10. Provide and manage care through the safe and efficient use of human, physical, financial and technical resources to meet patient outcomes.
11. Demonstrate professional accountability through identification of learning needs and ongoing professional development.
12. Apply principles of teaching and learning to advocate for and empower patients and families to effectively participate in healthcare decisions and health maintenance.
13. Demonstrate patient-centered prioritization of nursing actions and delegates tasks to appropriate members of the health care team.

American Nurse’s Associate Code of Ethics

Provision 1: Respect for Others
• The nurse practices with compassion and respect for the inherent dignity worth and unique attributes of every person.

Provision 2: Commitment to the Patient
• The nurse’s primary commitment is to the patient, whether an individual, family, groups, community, or the population.

Provision 3: Advocacy for the Patient
• The nurse promotes, advocates for, and strives to protect the health, safety, and rights of the patient.

Provision 4: Accountability and Responsibility for Practice
• The nurse has authority, responsibility, and accountability for the individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse’s obligation to promote health and provide optimum patient care.

Provision 5: Duty to Self and Duty to Others
The nurse owes the same duty to self as others, including the responsibility to promote health and safety, preserve the wholeness of character and integrity, maintain competence, and to continue personal and professional growth.

**Provision 6: Contributions to Healthcare Environments**
- The nurse either individually or collectively, establishes, maintains, and improves the ethical environment of the work settings and conditions of employment that are conducive to safe, quality health care.

**Provision 7: Advancement of the Nursing Profession**
- The nurse, in all roles and settings advances the scholarly inquiry, professional standards development and the generation of both nursing and health policy.

**Provision 8: Promotion of Community and World Health**
- The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.

**Provision 9: Promotion of the Nursing Profession**
- The profession of nursing, collectively through its professional organizations, must articulate nursing clues, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

**International Council of Nurses’ Pledge**

In 1899, the International Council of Nurses was founded in Geneva, Switzerland. Their pledge affirms the common goals of all nurses around the world.

In the full knowledge of the task I am undertaking, I promise to take care of the sick with all the skill and understanding I possess, without regard to race, creed, color, politics, or social status, sparing no effort to conserve life, to alleviate suffering, and promote health.

I will respect at all times the dignity and religious beliefs of the patients entrusted in my care, holding in confidence all personal information entrusted to me and refraining from any action which might endanger life or health.

I will endeavor to keep my professional knowledge and skill at the highest level and give loyal support and cooperation to all members of the health team.

**Statement on Professionalism**

Professionalism is defined as those behaviors that demonstrate the ability to make independent and sound judgments. These judgments are congruent with current standards of practice. The student is responsible to participate as a member of the health care team within the limits and responsibilities of the functions and scope of
practice of the Registered Nurse as defined in Section 54-1408 Idaho Code Nursing Practice Act.

Professionalism also encompasses those traits that project an image. This includes attitude, ethics, honesty, integrity, loyalty, mannerisms, appropriate communication skills (verbal, non-verbal, written, electronic), appearance, personal hygiene, and the ability to remain effective under stress.

Students are accountable and responsible for their own nursing actions and decisions. Students interact within legal aspects of professionalism in terms of documentation, confidentiality, honesty and integrity, medication administration and treatments as prescribed by those healthcare providers authorized to prescribe medications, and maintaining safe and effective nursing care rendered directly or indirectly.

Students are accountable and responsible for maintaining a level of physical and mental health that allows them to function safely and competently in the health care arena. This is a board of nursing, as well as a program requirement.
III. Fall 2020 Health & Wellness Plan

Idaho State University will resume full campus operations for the Fall 2020 semester, which will include in-person instruction, an adjustment to the fall academic calendar, and implementation of public health guidelines. Currently, the University is following State of Idaho guidelines to rebound to normal operations. Detailed information is available online and regularly updated at: isu.edu/coronavirus/

Fall 2020 Schedule

The University will adjust the Fall 2020 academic calendar to ensure that all face-to-face instruction has be completed by Tuesday, November 24, two days before Thanksgiving. The University will shorten the Thanksgiving Break to three days (Wednesday through Friday), and classes will meet on the Monday and Tuesday of Thanksgiving Week. Following Thanksgiving, the University will have one week of online final exams (November 30 – December 4). The start date for the fall semester will remain on Monday, August 17.

This adjustment to the calendar will allow the University to complete all face-to-face instruction before late fall, when projections in our neighboring states suggest greater prevalence of general illness and perhaps an increased threat from COVID-19. The change also supports student academic progress and ensures the University meets all federal and accreditation requirements.

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
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<tbody>
<tr>
<td>August 17</td>
<td>Fall Classes Begin</td>
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<tr>
<td>October 5 - 9</td>
<td>Mid-Term Week</td>
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<tr>
<td>November 24</td>
<td>Face-to-Face Instruction Concludes</td>
</tr>
<tr>
<td>November 25 - 27</td>
<td>Thanksgiving Break</td>
</tr>
<tr>
<td>November 30 - Dec 4</td>
<td>Online Final Exams</td>
</tr>
<tr>
<td>December 15</td>
<td>Semester Grades Due</td>
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**Note: Any deviations from this schedule will be given in advance by the instructors.**
Health and Safety

Adjustments have been made on campus to ensure health and safety. University officials are working with state and local public health officials to implement a number of recommendations from the Centers for Disease Controls. Classes are being moved into larger meeting places for increased social distancing, some class times have been changed to accommodate classroom availability, and some instruction will make use of hybrid in-person and online models.

For the Fall 2020 semester, all individuals should continue to:

• Engage in physical distancing of at least six feet.
• Wear face coverings in public places – including interactions within six feet or when indoors in common areas or classrooms.
• Stay home if sick or if someone in your household is sick.
• Practice good hand hygiene – wash hands regularly with soap and water.
• Do not shake hands, high-five, hug, etc.
• Cover coughs and sneezes.
• Disinfect surfaces and high-touch objects regularly.

Cloth Face Coverings

All members of our Bengal community have a shared responsibility in doing their part to protect one another, our families, and those who are medically vulnerable. All faculty, staff, students, and visitors are required and expected to wear face coverings for the Fall 2020 semester.

The CDC recommends that everyone wear cloth face coverings when leaving their homes, regardless of whether they have fever symptoms of COVID-19. This is because of evidence that people with COVID-19 can spread the disease, even when they don’t have any symptoms.

Cloth face coverings may prevent the person wearing the mask from spreading respiratory droplets when talking, sneezing, or coughing. Since people may spread the virus before symptoms start, or even if people never have symptoms, wearing a cloth face covering may protect others around you.

When using a cloth face covering, make sure:

• The mouth and nose are fully covered.
• The covering fits snugly against the sides of the face so there are no gaps.
• You do not have any difficulty breathing while wearing the cloth face covering.
• The cloth face covering can be tied or otherwise secured to prevent slipping.
• Wash your cloth face covering after each use in the washing machine or by hand using a bleach solution. Allow it to completely dry.
IV. Program Policies

Admission Requirements

Applications for admission are accepted October 15 through February 1. Admission to the LPN program is determined during Spring semester for the cohort beginning Fall semester of the same year. Student meeting the minimum qualifications will be invited to take the TEAS entrance exam within 30 days after the application deadline. Admission is competitive and criteria is based on: GPA, TEAS score, and years of experience working as a CAN. Further information regarding the application process can be obtained through the ISU College of Technology Student Services Office at (208) 282-2622.

Curriculum

Students in the Practical Nursing program receive classroom, laboratory, and clinical practicum instruction that provide eligibility for them, as graduates, to write the NCLEX-PN licensure examination. Graduation from this program and the passing of the NCLEX-PN examination does NOT guarantee licensure in Idaho or any other state or territory. Successfully passing this examination, however, enables the graduate to be licensed to practice as an LPN in Idaho and other states as allowed by law. Graduates are prepared to render competent practical nursing care in a variety of structured health care settings including hospitals, nursing homes, clinics, physicians’ offices, home health agencies, and other structured settings.

Statement on the Practical Nursing Program Policies & Procedures

The nursing student has two areas of learning: classroom/lab and clinical experience. Both of these require a commitment to certain rules as well as conduct expectations. Because the student is about to enter a career that requires special conduct and behavior while in the performance of specified duties, the student needs to adhere to the ethics and conduct listed under the regulations, policies, and procedures of each healthcare facility while representing the program and functioning as a nurse student-learning in that facility.
Attendance

Personal appointments need to avoid conflicts with a student’s class and/or clinical schedule.

Classroom: The Practical Nurse program will use a combination of “regular” classroom, virtual and distance learning classrooms. The following discussion pertains to all forms of classroom instruction. If you are absent, you are responsible to arrange for a classmate to take notes, write down announcements, and/or obtain handouts. Scheduled post conferences, nursing skills labs, clinical meetings, or clinical performance checks will be set up by lab and/or clinical instructors and these are mandatory. Mandatory means that attendance is required or consequences may be imposed. Special arrangements may be made for emergencies on a case-by-case basis as determined by faculty.

There are periodic teaching/learning sessions and workshops during the year, which may have different hours. Students will be notified in advance of required workshops so that they may make the necessary arrangements for attendance, which is mandatory. The student may incur additional costs related to these workshops.

Clinical Rotation Expectations: Students are expected to attend all assigned clinical shifts. The shift hours will depend on the facility. Students are expected to arrive on time and be at the clinical unit prior to the start of the shift report. This time may vary depending on the unit and the facility. Students are required to check in with their clinical instructor prior to reporting to their assigned unit.

Clinical Absences: For a clinical absence, students are responsible to notify their assigned facility member AND clinical nurse at least 1 hour prior to the assigned shift. The student is advised to ascertain who is receiving this call-off notice.

1. It is recognized that there may be a RARE need to be absent from clinical
2. Failure to notify the facility AND the clinical instructor (No Call and No Show) results in an unexcused absence and a full grade reduction from the final total clinical score. This unexcused absence cannot be made up and further grade reductions are possible if performance requirements cannot be met. Students unable to meet course objectives will not receive a passing grade for that course.
3. If the student is unavoidably delayed and calls the facility and clinical instructor within two (2) hours after the shift has started, he or she will be considered tardy.

Extenuating circumstances will be dealt with on a case-by-case basis and the decision is based on the clinical faculty recommendation after consulting with the Nursing Director. Examples of extenuating circumstances include: the death of an immediate family member, giving birth, or receiving a donated organ. Verification of these extenuating circumstances will be dealt with on a case-by-case basis and the decision is based on the clinical faculty recommendation after consulting with the Nursing Director.
circumstances will be REQUIRED. Notification of absence is always the expected behavior.

**Note:** In the event of an absence it will be the responsibility of the student to coordinate with the clinical faculty to discuss clinical hours. Regardless of your clinical grade, clinical objectives and clinical hour requirements must be met in order to pass the course and progress in the Practical Nursing program.

**Program Health Requirements**

It is the responsibility of the student to maintain current health and physical requirement documentation. All students in the program must be current in their immunizations. Program requirements include:

- TB assessment must be yearly (every 11 months) and current
- MMR – if a student was born after 1957, he or she will need documentation of two MMRs or a titer for Rubella and Rubeola; The titers should indicate immunity
- Current (within the last ten years) tetanus immunization (prefer after five)
- Hepatitis B: Three shots are required followed by a titer; titer must indicate sero-conversion. Titers are usually done one month after the third shot. The titer is very important! Sometimes Hep B doesn’t “take” until a fourth or fifth booster is given. Boosters are administered and required until the titer is positive, or until the sixth shot has been given. Thus, students need three shots AND a titer, at the **very minimum**. If after two sets of three shots, the student has not yet sero-coverted, that student is considered a “non-responder.” If a non-responder is exposed to Hep B, he/she must receive HBIG as prophalaxis. The ADRN program must maintain documentation of the two sets of three Hep B series in addition to the Hep B titer results following the sixth Hep B immunization.
- Varicella titer: students must have proof of a positive Varicella titer or Varicella immunization.
- Verified good mental and physical health status is required.

Failure to maintain these records and provide documentation to the Practical Nursing program may result in the inability to attend scheduled clinical experiences. The inability to attend clinical experiences may result in the inability to complete course requirements, resulting in failure of the course, disciplinary action and/or non-progression in the program.
Safety Rules

All students are required to practice safely, competently, and effectively. This requirement includes classroom, lab, testing, and clinical sites. Compromised ability may involve impairment from personal/job/school related stress, sleep deprivation, pregnancy/delivery, medications, health conditions/events, etc.

Students are responsible for self-assessing the competence and safety of their practice. In addition, faculty hold ultimate authority in assuring student and patient safety. Thus, with physical or mental health-related issues, the program will require a full health attestation and medical release, prior to the resumption of clinical or lab requirements.

Children are not allowed in the classroom, nursing skills/SIM labs, or clinical facilities.

LAB RULES

- The student is responsible for arranging for and arriving at practice and check offs at the pre-identified times and must be able to demonstrate the check off with a satisfactory grade.
- Students who perform ANY of the invasive skills learned in learning lab outside of the lab or student clinical setting is practicing outside of the student practical nurse scope of practice. Besides placing a life at risk, continued placement in the Practical Nursing program and future nursing license is at risk.
- Students are restricted from performing any learning lab skill in clinical practicum until the student has successfully check off this skill in the learning lab.
- A licensed nurse must be in the lab area if sharps are being used.
- No sharps or medical devices are to leave the lab setting.

Unsafe practice includes performing a skill in the clinical area prior to being satisfactorily checked off in lab. The student is responsible and accountable for keeping track of the skills check offs which have been satisfactorily completed. The student is also responsible for taking any corrective action that is needed.

CLINICAL PRACTICUM

Unsafe practice in the clinical area is defined as any act by the practical nursing student that is harmful or potentially detrimental to the student, patient, patient’s family, healthcare workers including faculty, community, or facility.

A student whose pattern of behavior is found to be unsafe at any time during the course may not continue in clinical practicum for reasons of “unsafe practice” and will receive a grade of “F” for the course. Indicators to be used as guidelines for evaluating safe practice in clinical settings are:
1. **Regulatory:** The student practices within the regulatory boundaries and regulatory guidelines of the Idaho State Nurse Practice Act, the guidelines and objectives of the Practical Nursing program/ISU, and follows the policies, procedures, rules, and regulations of the health care agency/facility. Examples of unsafe practice include, but are not limited to, the following:
   a. Failure to notify the agency/facility and clinical instructor/preceptor of clinical absence.
   b. Presenting for clinical practicum while impaired (chemicals, fatigue, illness, etc.).
   c. Habitual tardiness to clinical assignments.
   d. Failure to adhere to the dress code of the facility/agency and/or program.
   e. Arriving to clinical poorly prepared.

2. **Ethical:** The student practices within the ethical boundaries and regulatory guidelines according to the Idaho Board of Nursing, Nursing Practice Act. Examples of unsafe practice include, but are not limited to, the following:
   a. Refuses clinical assignment based on patient’s race, gender, age, culture, sexual orientation, or religious preference.
   b. Inappropriate/unprofessional practice or communication in any assigned activity related to nursing practice.
   c. Ignoring illegal or unethical behaviors of health care persons in the clinical setting(s), which affects patient welfare.
   d. Dishonest practices, including but not limited to, fabrication of information used in documentation (verbal/written/electronic), assessments, interventions, and care plans.

3. **Bio-psycho-social-cultural Realms:** The student’s practice meets the holistic needs of the human person from a bio-psycho-social-cultural standpoint. Examples of unsafe practice include but are not limited to the following:
   a. Failure to display stable mental, physical, or emotional behaviors and attitudes, which may affect others’ well-being.
   b. Inability to follow oral and/or written instructions.
   c. Failure to follow through on suggested referrals or interventions to correct deficit areas, which may result in harm to others.
   d. Acts of omission or commission in the care of persons/groups of persons, such as but not limited to: Physical abuse, placing in hazardous positions, conditions or circumstances; mental or emotional abuse, and medication errors.
   e. Interpersonal relationships with agency staff, coworkers, peers, preceptors, and faculty resulting in miscommunication, disruption of patient care and/or unit functioning.
   f. Lack of physical coordination necessary for carrying out practical nursing procedures.
g. Lack of application in classroom theory to clinical practice.

h. Lack of demonstration of nursing care at level of education.

4. **Accountability:** The student’s practice consistently demonstrates the responsible preparation, documentation, and promotion of continuity in the care of persons and/or groups of persons. Examples of unsafe practice include but are not limited to the following:
   a. Failure to provide concise, inclusive, written and verbal communication.
   b. Failure to accurately record and report comprehensive patient behaviors or problems.
   c. Failure to report questionable nursing practices.
   d. Attempting activities or procedures without adequate orientation or theoretical preparation or appropriate assistance and supervision.
   e. Inability to determine capabilities and limitations.
   f. Dishonesty.
   g. Failure to adequately prepare for clinical experiences.
   h. Behavior that is harmful or potentially harmful to the patient, facility, program, and/or profession.

5. **Human Rights:** The student’s conduct shows respect for the patient, health team members, classmates, faculty, and self. This includes, but is not limited to legal, ethical, and cultural realms. Examples of unsafe practice include but are not limited to the following:
   a. Failure to maintain confidentiality of interactions and records.
   b. Dishonesty in professional relationships.
   c. Failure to individualize patient assessments and plans of care.
   d. Failure to recognize and promote patients’ rights.

**UNSAFE PRACTICE**

Students, whose pattern of behavior endangers the safety or well-being of patients (example – medication error), classmates, staff members, preceptors, and/or clinical instructors, may receive one or more of the following penalties:

1. A verbal and written educational warning (documented and signed by the student acknowledging the occurrence, recognizing personal responsibility, and agreeing to identified remediation).
2. If it is determined that the student’s pattern of behavior continues to be unsafe, the student will be dismissed from the clinical practicum and will receive an “F” for the course.
3. Course or program dismissal. The student may be dismissed from assigned experiences, the course, or the program for the incidences listed. This is not an all-inclusive list and there may be other situations that warrant the student’s dismissal.
At the discretion of the primary clinical faculty member/preceptor and the Nursing Director, the student may be reassigned to a different clinical instructor/clinical area/preceptor for further evaluation.

**Injuries During Clinical**

While performing as a Practical Nursing student, Practical Nursing students are not covered under Workmen’s Compensation at clinical facilities. If a student has an “injury” connected with his or her hours of patient care, he or she must complete the appropriate forms with the facility. Students are not eligible for health insurance at the clinical facilities; however, health insurance is available to all ISU students as part of the registration fee. The student should seek appropriate medical care at ISU Student Health Center or other appropriate facilities.

In the event of a needle-stick or exposure to blood or body fluids, the student will immediately report the incident to the clinical faculty member AND preceptor, complete the necessary paperwork, and report to ISU Student Health Center as soon as possible.

**Background Checks and Drug Screenings**

The Practical Nursing program complies with the requirements of the clinical sites in which students receive clinical experience. Many/most of these clinical sites require background checks and drug screenings. Therefore, all practical nursing students are required to complete these assessments and any costs incurred will be the responsibility of the student. The Practical Nursing program may deny admission to the program if the applicant has a criminal history or is involved in a felony or other crime. Random drug screens may also be required. Costs of these drug screens are the student’s responsibility. Students who are found to test positive for illicit substances may be refused admission or dismissed from the program.

**Electronic Devices**

During face-to-face classroom instruction cellular phones must be on turned off. Cell phones interrupt certain medical technology, and all hospitals where clinical are performed have strict policies on cell phone use for their employees, as well as ISU students. **Students cannot carry cell phones on their person while in clinical practice.** Cell
phones may be left with the student’s belongings in areas designated by the facility or the instructor. Students may make necessary phone calls during breaks only and when not in a patient care area (i.e. in the cafeteria or outside the facility). In the event of an emergency, the student should give prospective callers the instructor’s cell phone number and the instructor will be used as a point-of-contact. Students who are found to be in possession of cell phones on the nursing units and/or during non-break times may be sent home from clinical for the day.

Dress Code

1. Facility policy will be adhered to.
2. Idaho State University photo name badges must be worn and clearly visible at all times, during all clinical experiences.
3. Uniform
   a. Uniforms must be the designated official practical nurse uniform. Only plain white or black t-shirts or plain white or black long sleeve shirts are allowed to be worn under uniforms. Lab coats are solid black. Hoodies are not considered appropriate attire. Uniforms must be free of ornamentation and must fit appropriately. Hems do not drag on the ground.
   b. Shoes are white or black duty shoes or all white or all black athletic shoes. No exposed foot or open-toed shoes are to be worn in clinical areas.
   c. Socks must be white. Hose may be white or beige.
   d. The school patch must be worn on the left sleeve of all uniforms and lab coats. The patch will be secured on all edges and will appear on the outer clothing. That is, during clinical experiences, the patch will be visible at all times.
   e. Required accessories include a watch with a sweep second hand, bandage scissors, and a pen with black ink. Additional equipment, such as a stethoscope and forceps, may be needed based on clinical area requirements. Some clinical sites such as mental health areas have special requirements.
4. Personal appearance
   a. Minimum of cosmetics may be worn.
   b. Hair is clean, neat, and preferably of natural color. Long hair is contained. Hair must be off the face, pulled back, and secured. Facial hair must be contained.
   c. Nails are short and maintained. No artificial nails.
d. No visible body jewelry other than a watch, plain wedding bands, and plain post earrings (earrings may not be allowed in certain clinical areas such as with psychiatric or pediatric patients). This includes body piercings.

 e. Body odor is unacceptable (includes perfumes, aftershaves, tobacco, etc.).

 f. No visible body adornments such as tattoos are allowed.

Other Clinical Requirements

While receiving clinical experience in any health care facility or clinical site, the student works under the immediate direction of the nursing staff with supervision by the clinical instructor. The staff nurse retains the ultimate responsibility for the patient’s care. Therefore, close communication among the student, staff nurse, faculty, and other healthcare personnel is essential.

1. Specific expectations regarding patient selection and preparation for clinical experiences can be found in each clinical course syllabus.

2. The student will be responsible for current assignments, which include patient plans of care, patient case studies, medication reviews, workbook/journal entries, and reports which may require additional outside reading and research time.

3. Clinical tardiness is not acceptable. Lunch, breaks, and departure times are to be determined by patient and facility needs, and directions from clinical faculty. It is the student’s responsibility to request, communicate, and use break times appropriately. If assigned to an area which requires a special change of clothing, the extra time this requires needs to be considered with regards to arrival and departure times.

4. Students need to be familiar with their facility’s policy and procedure manuals and thereby practice in accordance with these policies and procedures.

5. In addition to the written documentation, students must make a verbal and/or taped report of patient information as needed to the staff and/or charge nurse.

6. Prior to leaving the unit for the day, students must report off duty to the nurse in charge of each of their patients, as well as to their clinical instructor.

7. If a student is practicing at a clinical facility outside of clinical hours without the instructor’s express permission or knowledge, the student will be immediately dismissed from the Practical Nursing program.

8. If a student has been ill, had a baby, had surgery, etc. he or she cannot return to the clinical practice area until a signed written release has been received by the Nursing Director. The release must indicate clearly that the student is healthy and capable of full participation as a Practical Nursing student in a variety of clinical areas.
9. **CAN Practice**: Nursing students performing in the clinical area or performing other course/program experiences are NEVER allowed to practice as CNA’s. This requirement includes paid as well as unpaid service.

**Evaluation Process for Clinical Areas**

**Clinical Performance Criteria**

The nursing student will observe the clinical objectives outlined by the Nursing Programs at Idaho State University College of Technology. These clinical objectives and the nursing student’s ability to meet the clinical objectives create the basis for the student final clinical evaluation/grade that will be conducted at the end of each clinical course. The faculty-generated clinical performance evaluation form used to determine how the student is functioning within the given objectives and curricular threads is included in this handbook as is the clinical nurse preceptor behavior identification and supervision form.

**Malpractice Insurance**

The Practical Nursing student can be legally and financially liable if another person is injured as a result of error, omission, commission, or negligence on the student’s part. Whether a mistake is deemed professional or personal in nature, the student can be held liable and may be sued individually or along with other healthcare providers or the school. ISU’s Practical Nursing program requires each nursing student to carry malpractice insurance. Student malpractice insurance is obtained at the time of payment of registration fees. **Coverage is only for the period a student is attending scheduled clinical hours.**

**Nursing Competency Policy**

As a condition of progression and completion of the Practical Nursing program, nursing competency will be assessed each term. Students will be required to take nationally normed examinations throughout the curriculum and make a satisfactory score on such examinations. In the last term of the curriculum, students will be required to take a nationally normed comprehensive exam and make a satisfactory score on such exam prior to graduation.
CPR Certification

All students in the ADRN program must be current in CPR Certification (BCLS, healthcare professional).

Certified Nursing Aide/Assistant

All students in the Practical Nursing program must show current certification as Certified Nursing Assistant/Nurses Aid and this certification must be unencumbered/in good standing for the duration of the program.

Academic Integrity

Dishonest conduct is unacceptable. In cases of academic dishonesty, such as cheating or plagiarism, students will be dismissed from class, given failing grades or otherwise disciplined by the instructor.

Cheating is defined as the act of using or attempting to use in examinations or other academic work, material, information, or study aids that are not permitted by the instructor.

Examples of cheating include but are not limited to:

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

Plagiarism is defined as representing another person’s words, ideas, data, or work as one’s own. Plagiarism includes but is not limited to the exact duplication of another’s work and the incorporation of a substantial or essential portion thereof. Other examples
of plagiarism are the acts of appropriating the artistic or musical composition of another or portions thereof and presenting them as one's own.

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

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

**Communication**

Nursing faculty have authority and responsibility for their classes as well as for all student grading and evaluation. To clarify, any questions or concerns, all queries regarding syllabi, policies of the classroom or Web-class, clinical policies, schedules, requirements, etc. should immediately be addressed by the student to the instructor for that class, as soon as possible. Students should NOT wait until the end of the course to question class policies, due dates, procedures, testing, etc.

Details regarding program procedures are discussed and questions answered during orientation or as the need arises. Asynchronous electronic connections with faculty are available on a 24/7 basis; phone connections and discussion appointments are available as requested. Posed office hours will be available as needed, to address concerns, answer questions, and/or review course requirements.

Students are expected to communicate in an honest, respectful, professional, and positive manner. Assertive communication is the primary mode of communication within which all nurses are expected to function. Passive-aggressive gossiping, backbiting, whining, complaining, rationalizing, projecting, and blaming are not acceptable modes of communication and produce unhealthy, unwanted outcomes.
Conduct Policies

No one is permitted to disrupt the learning environment for any persons involved in the teaching/learning process (peers, faculty, staff, etc.). This includes an expected adherence to the nursing programs, ISU, and professional codes of conduct.

The classroom is a center for study and understanding of the subject matter for which the instructor has professional responsibility and institutional accountability. Control of the order and direction of a class, as well as the scope and treatment of the subject matter, rests with the individual instructor, free from distraction or disruption by students or others who may be in disagreement. Disruption of the classroom is forbidden. Each student has the obligation to respect the rights of others in the maintenance of classroom order and in the observance of courtesy. The instructor has the right to remove a student from the course or give a reduced grade in cases of disruptive classroom behavior.

Chain-of-Command

Students who express problems and concerns are expected to participate in developing solutions. The following procedure should be followed:

**Step 1A:** If a student has a problem with his or her fellow classmate/peer, the student will first approach the peer involved and attempt to resolve the concern.

**Step 2A:** If step 1A does not result in resolution, the student may meet with the course faculty.

**Step 1B:** If the student has a concern with a preceptor/faculty member, the student is expected to first approach the preceptor/faculty member involved and attempt to resolve the concern.

**Step 2B:** If step 1B does not result in resolution, the student and faculty member/preceptor will meet with the facility liaison and/or the Nursing Director.

*Clinical site preceptors and supervising clinical faculty MUST be consulted immediately, should a personal or professional problem occur during clinical experiences.*

During any of the above meetings, a student may request that a counselor be present. If satisfactory resolution does not occur after Step 2B, the student may bring his/her complaint to the Health Occupation’s Department Chair, who will seek appropriate complaint resolution among all parties. The Department Chair’s decision and/or compliant resolution may be appealed to the College of Technology Dean.
Educational Warning and Documentation Record

When students perform below expectation (or concerns surface) in any area relevant to the Practical Nursing program, they may receive a faculty-generated Educational Warning. This warning, as well as criteria needed for improvement and remedial processes, is designed to outline student and faculty responsibilities regarding the problem or issue.

Withdrawal & Readmission

There are circumstances (example: medical) that may necessitate student withdrawal from the Practical Nursing program. If the student has courses successfully completed and wishes to reenter the program at a later date, he or she must petition for readmission.

Readmission is always based on a space available basis for the courses and semesters where nursing specific courses are needed, giving priority to in-sequence students. If a student withdraws and does not have on record any course grades, the student may reapply and retake the pre-entrance examinations for ranking purposes. Admission is contingent on ranking within the applicant pool of the upcoming class.

Dismissal from the Practical Nursing Program

A. Probation, Remediation, and Dismissal

• Probation is a process initiated by the faculty member as a result of serious or repeated violation of policy by the student. When a student is placed on probation the faculty member will identify, in writing, specific actions exemplifying violation of a policy by the student, remediation measures required, and consequences to the student if remediation does not occur. When a student action is identified as being unsafe and/or in violation of program policies, the following steps may be initiated:

1. Student’s problem is identified by the faculty member and discussed with the student (documented and signed by the student acknowledging the occurrence).

2. If the problem persists, the faculty member discusses the situation with the Nursing Director and, if deemed necessary, the Department Chair. The faculty will then confer with the student and identify in
writing, via a probationary contract, remediation measures and time frame for completion, which will be signed by the student and the instructor. The original of said "contract" will be placed in the student’s file and a copy will be given to the student.

3. If remediation is not satisfactory, the student will be dismissed from the program.

4. The student is notified of the decision for dismissal and given opportunity to meet with the instructor, Nursing Director, and/or Department Chair.

5. A student dissatisfied with the decision of the instructor, Nursing Director, and/or Department Chair may appeal.

B. **Dismissal – Immediate**

- A student may be immediately dismissed from the program for any of the following reasons:
  1. Grade below “C” (73%) in any of the required courses.
  2. Unsafe practice in the clinical area; any act that is harmful or potentially detrimental to the patient, patient family, facility, faculty, or community. This includes but not limited to:
      a. Inability to apply classroom theory to clinical practice.
      b. Inability to determine self-capabilities or limitations.
      c. Inability to demonstrate nursing care at level of education.
  3. Consistently coming to “class” of clinical poorly prepared, such as, but not limited to:
      a. Illness
      b. Fatigue from lack of sleep
      c. Impaired reflexes and/or judgment
      d. Substance use or abuse
  4. Exhibiting false and fraudulent behavior. (Integrity, honesty, dependability, and trustworthiness are the most important characteristics of a nurse.)

- Because it is the philosophy of the Practical Nursing program that learning occurs most effectively when classroom theory is correlated with appropriate clinical experience, in the event of dismissal from clinical practice and if remediation is possible, the student may be allowed to continue in theory classes only until the end of the current semester.

C. **Readmission into the Practical Nursing Program**

- NOTE: A student may not be eligible for reinstatement into the Practical Nursing program if dismissed on the grounds of:
  1. Academic or clinical dishonesty,
  2. Alcohol or drug abuse,
  3. Continued unsafe clinical behavior
4. Is prohibited from receiving clinical experiences at any of the sponsoring agencies.

- A student may go through the appropriate channels established by Student Services to request readmission into the ADRN program (i.e. Petition, etc.).
  1. Reinstatement will be limited to one opportunity after the initial failure.
  2. If a student is dismissed from their clinical practicum and this is their second attempt at the ADRN program, the student is dismissed from the program. Theory and classroom attendance ends immediately at the point of the second dismissal.
  3. A student may be readmitted conditionally or unconditionally. If on conditional status, specific criteria will be formulated as identified in a contractual agreement.
  4. A returning student must repeat any clinical performance checks or objectives successfully prior to any clinical practicum.

Relationships

Health Occupations faculty and Clinical Preceptors/Externship Supervisors have the responsibility to assure that they are not involved with HO Department students in dual or multiple relationships. Dual or multiple relationships are defined as relationships that in addition to the teacher/student role, may include financial, business, personal, intimate, or family relationships that could bring into question the ability of the parties to perform their duties in a professional, arms-length, objective fashion, or that might subject the student to the potential of threat or coercion associated with differential positions of power. If these relationships are pre-existing, they should be disclosed to the supervising faculty or the department chair in order to ascertain whether the student needs to be reassigned to another faculty member or moved to an alternative clinical/externship location. The sensitivity to and prohibition of dual relations is not only for the protection of the student involved, but also to the integrity of the program. Furthermore, it can serve as an assurance to other students in the program that the standards upon which a student will be graded are fair, objective, and not potentially biased by factors outside of a student’s actual performance in the program.

Student Governance

Nursing students enrolled in the Practical Nursing program will have student governance opportunities. Each admission class elects class officers/leaders. As class
representatives, student leaders are invited to participate in program staff/faculty meetings. The purpose of this participation includes an opportunity to professionally dialogue regarding the program. According to university policy, each student is asked to carefully evaluate all Practical Nursing program courses and faculty. To provide the best possible teaching/learning environments and opportunities for students, these evaluations are considered essential during course and program revision/evaluation.

Each student is also asked to evaluate clinical nurse preceptors and clinical facilities/sites. These clinical-related student evaluations are used to make decisions regarding clinical sites and preceptors.

Graduation

As a candidate for the Intermediate Technical Certificate at the College of Technology, Idaho State University, practical nursing students are valued participants in the ISU commencement ceremonies. This ceremony is a special recognition of achievements at ISU. All graduates of the Practical Nursing program are urged to participate. Though students may officially graduate three times per year, ISU commencement occurs once per year in May.

Students planning to graduate should apply for graduation no less than one semester before all requirements are completed. College of Technology students need to contact the Student Services Office to obtain applications for graduation and to pay a graduation/diploma fee.

Licensure

In the final semester of your program, you will apply for Board of Nursing licensure. This process includes the NCLEX-PN (National Council Licensure Examination for PN) testing process and requires Board of Nursing licensure fees as well as testing fees. The Board of Nursing license application form requires answers to screening questions that include actual or pending nursing license discipline in any state, physical and mental competence, charges of felony/misdemeanor in any jurisdiction, etc. For complete information contact the Idaho Board of Nursing at PO Box 83720, Boise, ID 83720-0061; phone (208) 577-2476. You may also refer to their web site at ibn.idaho.gov. Answering yes to these questions may prevent you from being eligible to obtain a nursing license under Idaho State Statutes. It does not necessarily mean you will be excluded from taking the NCLEX-PN but you must follow specific guidelines. The Board of Nursing will
review information on a case-by-case basis. Absolute honesty on the licensure application is required.

Disability Services

MISSION STATEMENT

The mission of Disability Services (DS) is to increase equal opportunities and equal access to all programs and services sponsored or funded by Idaho State University. DS is dedicated to creating an accessible environment for students, employees, and community members with disabilities. In achieving this, DS:

Works collaboratively with University Partners to foster a welcoming, diverse, and inclusive University community.

Collaborates with and empowers individuals who have documented disabilities by working together proactively to determine reasonable accommodation(s).

Promotes a culture of self-advocacy, responsibility, and agency.

Ensures compliance with the Americans with Disabilities Act Amendments Act (ADAAA) and other current legislation.

Readily responds to grievances and advances inclusion through the removal of identified informational, physical, and/or attitudinal barriers.

Advocates for Universal Design (UD) as a crucial framework to support the diverse needs of students, faculty, staff, and community members.

Develops partnerships with external community members/groups to support the advancement of equity and inclusion at the local, state, and national levels.

Provides institution-wide advisement, consultation, and training on disability-related topics, including but not limited to: legal and regulatory compliance and universal design.

CONTACT INFORMATION

Disability Services; Division of Student Affairs:

Rendezvous Complex, Room 125
921 South 8th Avenue, Stop 8121
Pocatello, ID 83209-8121
Office of Equity and Inclusion

MISSION STATEMENT

The Office of Equity & Inclusion is committed to creating and maintaining a safe and respectful learning and working environment for all staff and students at Idaho State University by providing leadership, expertise and education in our mission to create an environment where all members of the ISU community can thrive. Our webpage will detail the specifics of each of our areas of service to the campus community including:

- EEO policy and procedure
- Civil Rights including harassment and discrimination
- Title IX compliance
- Gender Resource Center
- Diversity Resource Center
- Training, workshops and events

Our helpful and friendly staff are available to work with any member of the university community. We look forward to serving you.

CONTACT INFORMATION

Office of Equity and Inclusion:

Rendezvous Complex, Room 157
921 South 8th Avenue, Stop 8315
Pocatello, ID 83209-8315
Phone: 208-282-3964
Fax: 208-282-5829
V. Clinical Foundations Manual

Required Clinical Courses, with Corresponding Clinical Objectives

PNUR 114 Clinical Foundations of Nursing I: 3 credits. Through hands-on clinical experience in a variety of settings, the student nurse will be exposed to the skills basic to nursing practice.

Following the completion of this course the student will be able to:

- Assess vital signs, identify the rationale, and accurately record and report findings
- Demonstrates nursing interventions for procedures and treatments of the patient requiring oxygen therapy, types of suctioning, and urinary catheterization
- Collect, implement, and evaluate data that contributes to the client’s plan of care using the nursing process
- Safely demonstrates administration of topical, oral, rectal, sublingual, intradermal, subcutaneous, intramuscular, and intravenous medications
- Appraise and compare the effects of pharmaceuticals on human body systems across the life span
- Implement psycho-social, cultural concepts when contributing to clients’ plans of care across the life span
- Implement communication skills and strategies with client’s families and other healthcare providers
- Demonstrates critical thinking in problem solving, utilizing evidence-based practice in the clinical setting
- Implement pre-defined teaching/learning strategies with clients’ families needing healthcare information
- Demonstrates caring behaviors toward clients and their families as well as other health-care providers
- Demonstrates beginning knowledge of how to use the nursing process in any setting

PNUR 121 Clinical Foundations of Nursing II: 2 credits. Application of practical nursing concepts within increasingly more complex patient care situations including care of the family; includes application of the nursing process as well as drug and IV therapy.

Following the completion of this course the student will be able to:

- Collect, implement, and evaluate data that contributes to the client’s plan of care using the nursing process
• Safely demonstrates administration of topical, oral, rectal, sublingual, intradermal, subcutaneous, intramuscular, and intravenous medications
• Appraise and compare the effects of pharmaceuticals on human body systems across the lifespan
• Implement psycho-social, cultural concepts when contributing to clients’ plans of care across the life span
• Implement communication skills and strategies with client’s families and other healthcare providers
• Demonstrates critical thinking in problem solving, utilizing evidence-based practice in the clinical setting
• Implement pre-defined teaching/learning strategies with clients’ families needing healthcare information
• Demonstrates caring behaviors toward clients and their families as well as other health-care providers
• Demonstrates beginning knowledge of how to use the nursing process in any setting
• Safely demonstrate the ability to apply the nursing process to the inpatient child or adult perioperative setting
• Safely demonstrate the ability to apply the nursing process to the child or adult medical unit setting
• Safely demonstrate the ability to apply the nursing process to the long-term care, rehabilitation or transitional care setting
• Safely demonstrate the ability to apply the nursing process to the clinic or physician’s office setting
• Demonstrate the ability to safely apply other basic nursing theory principles to the clinical setting
• Demonstrate the ability to apply basic nursing learning laboratory principles to the clinical setting
• Demonstrate the ability to apply medication administration principles to the clinical setting
• Demonstrate the ability to apply nutrition theory principles to the clinical setting
• Demonstrate the ability to apply medical-surgical theory principles to the clinical setting
• Demonstrate the ability to apply medical-surgical learning laboratory principles to the clinical setting
• Demonstrate the ability to apply drug therapy theory principles to the clinical setting
• Demonstrate the ability to apply intravenous therapy theory principles to the clinical setting
• Demonstrate the ability to apply intravenous therapy learning
• Begin to recognize characteristics unique to the medical, perioperative, and long-term care settings
• Begin to recognize similarities between various nursing settings (medical, perioperative, long-term care)
• Locate and apply practical nursing scope-of-practice, delegation, and procedure policies at the facility assigned

PNUR 131 Clinical Foundations of Nursing III: 3 credits. The theory and principles of the nursing care of the critically ill in real situations.

Following the completion of this course the student will be able to:

• Collect, implement, and evaluate data that contributes to the client’s plan of care using the nursing process
• Safely demonstrates administration of topical, oral, rectal, sublingual, intradermal, subcutaneous, intramuscular, and intravenous medications
• Appraise and compare the effects of pharmaceuticals on human body systems across the lifespan
• Implement psycho-social, cultural concepts when contributing to client’s plans of care across the life span
• Implement communication skills and strategies with client’s families and other healthcare providers
• Demonstrates critical thinking in problem solving, utilizing evidence-based practice in the clinical setting
• Implement pre-defined teaching/learning strategies with clients’ families needing healthcare information
• Demonstrates caring behaviors toward clients and their families as well as other health-care providers

PNUR 137 Clinical Foundations of Nursing IV: 1 credit. Clinical experience in a variety of settings, including leadership roles within the practical nursing scope of practice.

Following the completion of this course the student will be able to:

• Collect, implement, and evaluate data that contributes to the client’s plan of care using the nursing process
• Safely demonstrates administration of topical, oral, rectal, sublingual, intradermal, subcutaneous, intramuscular, and intravenous medications
• Appraise and compare the effects of pharmaceuticals on human body systems across the life span
• Implement psycho-social, cultural concepts when contributing to clients’ plans of care across the life span
- Implement communication skills and strategies with client’s families and other healthcare providers
- Demonstrates critical thinking in problem solving, utilizing evidence-based practice in the clinical setting
- Implement pre-defined teaching/learning strategies with clients’ families needing healthcare information
- Demonstrates caring behaviors toward clients and their families as well as other health-care providers
- Apply management concepts to practical nursing practice through direct and indirect observation of nursing leadership, management roles within the community and varied healthcare settings
- Analyze the use of delegation and supervision by the practical nurse through participation and observation in a variety of healthcare settings
- Identify the role of manager of care by the practical nurse in community, acute and long-term care healthcare settings

PNUR 0155 Veteran to Nurse Fundamental Practicum: 1-4 credits. Provides practical application of the nursing process and basic clinical skills which develops the foundation for nursing practice. Provides practice of intravenous therapy within the practical nursing scope and includes the administration of medications. Course may contain laboratory, virtual, simulation and real-time clinical experiences.

PNUR 0156 Veteran to Nurse Medical Surgical Practicum: 1-4 credits. Provides application of medical-surgical nursing interventions and procedures/skills within the scope of the practical nurse; including care of adult clients with a variety of disease processes and in a variety of settings (mental health, outpatient, inpatient and community health). Course may contain laboratory, virtual, simulation and real-time clinical experiences.

PNUR 0157 Veteran to Nurse Maternal Child Practicum: 1-3 credits. Provides application of obstetrical and pediatric theory and procedures/skills within the scope of the practical nurse; including care of pregnant women, neonates, and pediatric patients (well and ill) in a variety of settings (outpatient, inpatient and community-based settings). Course may contain laboratory, virtual, simulation and real-time clinical experiences.

PNUR 0158 Veteran to Nurse Issues in Nursing Practicum: 1-2 credits. Provides practical application of the development of leadership and professional skills for the practical nurse. Course may contain laboratory, virtual, simulation and real-time clinical experiences.
Professionalism

Professionalism is defined as those behaviors that demonstrate the ability to make independent and sound judgments. These judgments are congruent with current standards of practice. The student is responsible to participate as a member of the health care team within the limits and responsibilities of the functions and scope of practice of the practical nurse as defined in Section 54-1408 Idaho Code Nursing Practice Act.

Professionalism also encompasses those traits that project an image. This includes attitude, ethics, honesty, integrity, mannerisms, appropriate communication skills (verbal, non-verbal, written, electronic), personal hygiene, and the ability to remain effective under stress.

Practical nurse students are accountable and responsible for their own nursing actions and decisions. Student interact within legal aspects of the practical nurse role in terms of documentation, confidentiality, honesty and integrity, medication administration and treatments as prescribed by those healthcare providers authorized to prescribe medications, and maintaining safe and effective practical nursing care rendered directly or indirectly.

Practical nurse students are accountable and responsible for maintaining a level of physical and mental health that allows them to function safely and competently in the health care arena. This is a board of nursing, as well as a program requirement.

Instructions for Preparing for Clinical

This is applicable to all clinical semesters.

1. For ALL rotations, at least one week prior to that rotation, review the documents specific to that setting within the file on the Moodle site.
2. For ALL rotations, review the Clinical Expectations within this handbook.
3. For ALL precepted rotations, the student should take a copy of the Clinical Performance Evaluation Form and an envelope to clinical with them.
4. For ANY ROTATION WHERE THE STUDENT IS PHYSICALLY SEPARATED FROM THE INSTRUCTOR, the student should read and take with them to clinical the ISU Practical Nursing Program Preceptor Handbook.
5. Students need to bring documentation for lab skills successfully checked off to clinical with them. See Skills Documentation form.
6. In all ACUTE AND REHABILITATION SETTINGS, the student will be required to research the total, individualized cares of one or more patients on that unit. Acute settings include any of the following:
   - Hospital Medical Units
   - Hospital Pre- & Post-Surgical Units for which the patient stays overnight
   - Hospital Pediatric Units
   - Post-Partum Units for which the patient will stay at least one night
   - Hospital GYN Units
   - Intensive Care Units (ICU) or Critical Care Units (CCU) – including NICU or PICU

7. For OUTPATIENT, SUB-ACUTE, OR STEP-DOWN SETTINGS, the student will not perform total patient care of a specific client and therefore does not need to complete research for total or individualized care. The preparation will be more generic or related to common practices for these settings. These settings include the following:
   - LTC, ECF, TCU Leadership Rotations
   - Bannock County Jail
   - IV Therapy
   - Urgent Care
   - ER or ED
   - L&D, Nursery
   - Physician’s Office Clinic
   - OR
   - PACU
   - Same Day Surgery (SDS), Outpatient Surgery, or Rocky Mountain Surgery Center
   - Behavioral Health Unit
   - State Hospital South (General Adult C Unit, General Adult D Unit, Admissions, Adolescents)
VI. ISU Practical Nursing Program Preceptor Guidelines

I verify that I have read the following guidelines and agree to comply with them.

Name of Facility__________________________________________________________

Instructor Signature______________________________________________________

Preceptor Signature_______________________________________________________

Student Signature________________________________________________________

In an attempt to provide the student an opportunity to fulfill objectives provided by the Idaho Board of Nursing (IBN), it is occasionally necessary to physically separate the student from the facility where his/her clinical instructor is located – or place the student at the facility at a different time than the clinical instructor is there. When a student is placed with a nurse employed by an affiliating agency in the absence of the clinical instructor, this is called a preceptorship. The nurse is the preceptor and the student is the preceptee. Neither the preceptor nor the preceptee is compensated by ISU. The IBN sets strict criteria for clinical preceptorships:

The instructor’s role is as follows:

1. The instructor is to act as a resource for both the preceptee and the preceptor.
2. The instructor must be available via telephone at all times the preceptee is with the preceptor.
3. The instructor will arrange with the preceptor and preceptee that the top of this document is completed (with the signatures of the preceptor, the preceptee, and the instructor) and returned.
4. The instructor will arrange with the preceptor and preceptee that the Clinical Observation Form is completed (with the signatures of the student and the preceptor).
   a. The instructor will provide to the preceptor the following documents prior to the first day of preceptorship.
      i. A copy of the clinical schedule listing the dates and times that the student(s) will be at the facility and contact information for the instructor.
      ii. A copy of the student’s current immunization status.
      iii. Portions of the current student handbook, which contains the Practical Nursing program policies and the IBN objectives.
      iv. Portions of the current Practical Nursing clinical manual, which contains the facility specific expectations for the student.
v. A copy of the procedure forms for skills taught in learning lab.

5. The instructor must be able to demonstrate that the preceptor meets the IBN requirements for preceptor status.

Faculty role and responsibilities:

• Assist and consult with the preceptor throughout the assigned clinical course experiences
• Assure that each preceptor has a copy of the clinical course description, objectives, and faculty contact information
• Communicate frequently with the assigned Practical Nursing students and clinical nurse preceptors; this communication includes on-going as well as mid-term and end-of-course connections
• In collaboration with clinical nurse preceptors, review responsibilities related to Practical Nursing student assignments
• In collaboration with clinical nurse preceptors, review the student performance via the student clinical summary form
• Provide all grading and evaluation of Practical Nursing student’s clinical performance

Preceptor’s role:

1. The clinical nurse preceptor must be a licensed nurse (LPN, RN, or APN) and must be employed by the affiliating agency. The student may work with other facility personnel, as long as it is understood that it is the nurse who is precepting that student. The student must leave the facility if a licensed nurse is unavailable as a preceptor.
2. The top of this document is to be signed by the preceptor at the start of the student’s shift. The student will provide this.
3. The preceptor will advise the student concerning the facility/unit routines and policies on the first day of the rotation. Examples: patient admission process, exam room set ups, diagnostic procedures, etc.
4. The preceptor will monitor and supervise the student in the safe performance of medication administration and any invasive skill (injections, IV related activities, catheterization, blood draws, etc.) until such time as the preceptor believes the student is safe to perform the skill independently.
5. The preceptor will monitor and supervise student documentation for accuracy and relevance.
6. The preceptor will supervise the student’s performance of clinical skills and work ethic according to nursing Standards of Practice and Code of Ethics.
7. The preceptor will serve as a role model to the student and will promote adherence to defined practical nurse scope of practice and practice standards such as are found in the Idaho State Board of Nursing Nurse Practice Act.
8. The preceptor will communicate with the student’s clinical instructor on a daily basis or as needed.
9. The preceptor will immediately communicate concerns regarding student performance to the clinical instructor.
10. The preceptor will complete the provided observation of the student’s performance on a daily basis. The preceptor observation form can be found within the handbook as well as the Practical Nurse Program Preceptor Handbook. This blank form and an envelope should be given to the preceptor, by the student, at the conclusion of each day of preceptorship. The document should be completed as follows:
   a. The preceptor will complete the observation form and discuss his or her observations with the student.
   b. Both the preceptor and the student will sign the preceptor observation form.
   c. The preceptor will place this form in the student-provided envelope for return to their instructor on the same day as the rotation.
11. Note: The licensed nurse is ultimately responsible for the patient and their care. Close supervision of the student is recommended.

Preceptor qualities include:
Clinical expertise, leadership and communication skills (includes assertiveness), critical thinking and problem-solving skills, and interest in professional growth and the teaching/learning process, a non-judgmental attitude, sensitivity to students’ needs, and finally, flexibility, adaptability, and a good sense of humor.

Preceptor responsibilities include:
- Professional:
  o Commitment to the preceptor role and a desire to supervise and share experience
  o Commitment to the leadership process in nursing
- Procedural:
  o Carefully read and study the PN Clinical Nurse Preceptor Information booklet prior to the experience as a clinical nurse preceptor; sign the form indicating this process.
  o Orientation and socialization of the precepted student to the clinical unit and facility
  o Supervising and monitoring of precepted nursing student(s)
    ▪ Observation and review of the precepted student; on-going communication of these observations and reviews with the faculty member AND the student
  o Participate in site visits/conferences with the faculty member
Facilitate the clinical practice of the precepted student
- Directly supervise patient care provided by the student and inform faculty member if any problems arise during the clinical rotation time period
- Identify the student’s ability to meet course objectives and validate the accomplishment of course assignments and objectives; at the completion of the clinical hours, prepare a summary of the student’s performance related to course objectives using the clinical summary tool
- Validate the student’s level of preparation for the assigned patients and unit
- Maintain strict confidentiality of all student-related information

The clinical nurse preceptor is an LPN, RN or NP who will serve as a willing supervisor for the PN student. The clinical nurse preceptor should be knowledgeable and competent in the direct application of the nursing process and critical thinking in caring for patients within her or his clinical area of expertise. The clinical nurse preceptor should show a keen interest in steering PN nursing students’ growth and transition into the practical nurse practice role.

The assigned clinical nurse preceptor will directly supervise the activities of the PN nursing students within the clinical area. The preceptor will regularly communicate with faculty regarding student performance.

**Preceptor guidelines for calling/paging the clinical course faculty member**

**Immediate notification of the faculty member:**

In the case of a sentinel event, the immediate notification of the clinical course faculty member is imperative. Notify the faculty member:

- When any event occurs that results in the use of an incident report
- When the student is absent or late for scheduled clinical experiences
- If you observe the student as being unsafe, unprofessional, or in violation of nursing practice standards and/or practical nurse scope of practice

**Notations regarding the practical nursing student’s (preceptee) role:**

The PN student will work with the preceptor, in the same manner as outlined in the student handbook, for instructor-student relations.

1. The PN student preceptee will, with the assistance of the preceptor, seek out a variety of clinical experiences.
2. The PN student preceptee will carefully review and competently complete the clinical objectives for the assigned area and clinical course.
3. The PN student preceptee will follow guidelines listed within the practical nurse student handbook, clinical expectations, facility policy and procedure documents, and Standards of Practice set forth by the IBN and nursing textbooks.
4. The PN student preceptee will arrange for the instructor to sign the top of this document prior to the rotation and for preceptor to sign the top of this document at the start of the shift. The person signing the top of this document as preceptor must be a NURSE, at or above LPN status.
5. The PN student preceptee will arrange for the preceptor to complete the student observation form as stated in the guidelines and will participate in the clinical observation discussions as well as the signing of the clinical observation form. The nurse preceptor completes the clinical observation form.

PN Student Role and Responsibilities:

- To be on-time, dependable, healthy, and adequately prepared for each clinical day and experience
- Appropriately document and report all pertinent information, and patient responses to teaching and care, according to standards of practice and unit/facility policy
- Immediately communicate significant findings and changes relative to patient status, to the clinical nurse preceptor and as appropriate, other members of the healthcare team
- Demonstrate knowledge of ethical/legal practice, communication, cultural diversity and lifespan, conservation of resources, evidence-based practice, pharmacology, pathophysiology, critical thinking, caring, and teaching/learning, when caring for assigned patients
- Discuss with the preceptor the actions, side effects, contraindications, required patient teaching, mathematical calculations, and recommended dosage ranges for all medications and treatments administered
- Demonstrate awareness of own strengths and weaknesses and describe methods for improvement during each clinical experience
- Request help and supervision from clinical nurse preceptor when unsure and when performing unfamiliar procedures
- Function within the practice and scope (no greater) of the pre-licensure practical nursing student during precepted clinical experiences.
- Move beyond the “comfort” level of familiar CNA practice and scope
• During clinical experiences, sign name as follows: Jane M. Doe, ISU, SPN (or according to clinical site requirements).

Student Limitations:

• Students are NOT permitted to administer any blood, blood products, radioactive agents, or IV chemotherapeutic medications
• Students are NOT permitted to function as code team leaders and may not intubate, insert central lines, or infuse medications via epidural route
• Students are not permitted to take independent verbal orders or sign off orders. Clinical nurse preceptors are encouraged to allow preceptees the opportunity to "listen-in" when telephone or verbal orders are needed and follow-up with the appropriate signature. This will allow students this opportunity without jeopardizing legal requirements
• Students are NEVER permitted to work as CNA’s or follow CNA protocol or practice, during PN clinical experiences.
VII. Generic Clinical Expectations

Conduct

A. EACH CLINICAL DAY, THE STUDENT IS EXPECTED TO REMAIN AWAKE AND ALERT—THIS INCLUDES BREAKS.
   1. Sleeping students will be dismissed from the clinical area and receive appropriate penalties up to and including potential dismissal from the course and program. Extreme fatigue is considered a physical impairment and violates the Idaho BON requirements for safe nursing practice.

B. If staff is busy, the PN student should be busy.

C. For each full day:
   1. One brief (15 min. max) break may be taken, arranged with council of the licensed nurse the student is working with and/or faculty member. Patient safety and needs take precedence over breaks.
   2. A lunch break of 30 minutes may also be taken, with the same person aware of the student’s location. It is understood that some facilities (i.e. doctor’s offices) take longer than the allotted 30 minutes. Breaks and lunch are never included within the clinical hour allocations.
   3. Students must stay in the facility to which they are assigned during breaks and during lunch in hospitals and long-term care settings. Cafeteria and/or vending machines are available for purchase of meals or snacks in hospitals. At clinical sites where food/drink is not provided, the student will need to bring his or her lunch or arrange a lunch location with their instructor.
   4. Students may never neglect patient responsibilities for the purpose of personal breaks or lunch.

D. Children are not allowed in the classroom, nursing skills lab, or the clinical facility (includes the times when accessing client information, during meals, and when the student is dropped off/picked)

E. It is the student’s responsibility to notify the primary caregiver of skills he/she can and cannot perform. The student should contact his/her instructor if unsure. The student should keep a list of his/her skill check-offs and the score received with them during clinical rotations. Always remember that it is the student’s responsibility to know his or her own limitations as well as competence levels.

F. Close Unit
   1. If a unit closes while the student is assigned to it, he/she should call the instructor.
2. If a unit is closed upon student arrival to select a patient, the student should arrive at the facility at the rotation start time and then call the instructor.

3. The instructor will direct the student to any new assignment. Failure to contact the instructor for direction on new assignment will be considered unsafe clinical practice.

G. Consent:
1. The student must obtain PATIENT consent for caring for clients or observing in the following settings:
   i. Hospital units (do not have to obtain consent if scheduled in the OR for the entire day).
   ii. OR unless assigned to the unit for the shift.
   iii. Labor and delivery
2. In addition to patient consent, the student must obtain the PHYSICIAN’S consent to observe the following:
   i. Surgery
   ii. Delivery of an infant

H. Contacting your instructor:
1. Contact the instructor by calling their cell phone. If there is no answer, the instructor is likely talking to another student or in an area of the hospital where cell phones must be shut off (i.e. ED). Leave a message and then stay near the phone for up to five minutes so they can contact you. Only in the case of emergencies is the student to page the instructor overhead. When working with a clinical nurse preceptor, the instructor can be contacted by cell phone.
   i. Instructors may not have their cell phones on except during assigned clinical rotations, but messages relating to clinical can be left.
2. Unless implementing a call list or given explicit permission to do so, students are not to call an instructor’s personal residence.
3. If, for whatever reason, the student has not made verbal or face-to-face contact with the instructor within two hours of the start of a hospital rotation, the student should be very assertive in seeking the answer as to why this is.

Dismissal from the Practical Nursing Program

Probation is a process initiated by the instructor as a result of serious or repeated violation of policy by the student. When a student is placed on probation the instructor will identify, in writing, specific actions exemplifying violation of policy by the student, remediation measures required, and consequences to the student if
remediation does not occur. The student will return to good standing upon graduation.

When a student action is identified as being unsafe, the following steps may be initiated:

1. Student’s problem is identified by the instructor and discussed with the student (documented and signed by the student acknowledging the occurrence).
2. If the problem persists, the instructor discusses the situation with the PN faculty and/or chairperson. The instructor will confer with the student and identify in writing, via a probationary contract, remediation measures and time frame for completion, which will be signed by the student and the instructor. The original paper will be in the student’s file and a copy will be given to the student.
3. If remediation is not satisfactory, the student will be dismissed from the program.
4. The student is notified of the faculty’s decision for dismissal and given an opportunity to meet with the instructor(s) and/or chairperson.
5. A student dissatisfied with the decision of the PN faculty may appeal. The appeal process is outlined in the ISU Student Handbook under scholastic appeals.

**Dismissal - Immediate**

A student may be requested to leave the program at any time for any of the following reasons:

1. Unsafe practice in the clinical area; any act that is harmful or potentially detrimental to the patient. This includes:
   a. Inability to apply classroom theory to clinical practice.
   b. Inability to determine capabilities or limitations.
   c. Inability to follow written and/or oral instructions.
   d. Inability to demonstrate nursing care at level of education.
2. Consistently coming to clinical area poorly prepared, such as, but not limited to:
   a. Illness.
   b. Fatigue from lack of sleep.
   c. Impaired reflexes and/or judgment.
   d. Family/personal crisis.
   e. Substance abuse.
3. Exhibiting false and fraudulent behavior (Integrity, honesty, dependability and trustworthiness are the most important characteristics of the nurse).
4. Grade below "C- "in any of the required courses.

Because it is the philosophy of the PN program that learning occurs most effectively when classroom theory is correlated with appropriate clinical experience, in the event of dismissal from clinical practice and if remediation is possible, the student may be allowed to continue in theory classes only until the end of the current semester.
Documentation

Students are expected to chart on all patient records as applicable. The instructor or assigned nurse can assist with this as needed. The student may document a narrative entry on a separate piece of paper if he/she wants it to be reviewed by the instructor or nurse before being written into the permanent record. Documentation should be completed with a black permanent ink pen.

If the student removes the patient chart for study purposes, he/she must leave an indicator in the chart file identifying who has the chart, where he/she is with it, and when it will be returned. When the chart is returned, the student should remove the indicator.

Assessments and interventions of any kind must be documented within a half-hour of completion. In long-term care settings the student may not be required to chart assessments, discuss with staff.

The student should sign each MAR for the patient, even if he/she does not give meds listed on the MAR during the shift. The student should indicate on the MAR what shift he/she was assigned to.

ISU Practical Nursing Clinical Skills Checklist

Students will be responsible to have available their Clinical Skills Checklist while in the clinical setting. The student must be able to present the Clinical Skills Checklist to their instructor, floor nurse or nurse preceptor to verify skills that the student is able to complete in the clinical setting. The Clinical Skills Checklist should be presented at mid-term and during the clinical final evaluation for review and discussion to ensure both student and clinical instructor are able to validate performance of skills in the clinical setting.

Dress & Hygiene

**Dress for patient research prior to clinical:** In order to access patient information, student uniform or lab coat and nametag must be worn over conservative professional attire. NO shorts, tank tops, jeans or other inappropriate attire is to be worn.

**Dress during clinical rotations:** All ISU students are required to wear student uniforms in the clinical area unless otherwise indicated by an affiliating agency. Specialty areas, such as Behavioral Health, require the use of casual clothes and not uniforms. During some hospital clinical experiences such as OR and PACU, scrubs provided by the hospital will be worn.
Students must wear complete uniforms during scheduled lab and clinical hours. No dirty and/or wrinkled uniforms will be permitted. All students will be required to have their dress approved by the PN faculty prior to the start of clinical.

**Complete uniforms include:**

- Program's approved uniform-scrubs and lab coat—too loose or tight fitting clothing are not acceptable.
- School name badge.
- White program approved shoes with non-skid soles. Shoes and laces are to be clean. (No open-toed shoes).
- White or Black T-shirts or turtlenecks are required.
- Wrist watch with sweeping second hand.
- Stethoscope, BP cuff, functional penlight, bandage scissors, hemostats, goggles and instrument holder—any malfunctioning equipment should be replaced.

**CLINICAL DRESS CODE AND APPEARANCE REQUIREMENTS (per student handbook)**

- Facility policy will be adhered to.
- Idaho State University photo name badges will be worn and clearly visible at all times, during all clinical experiences.
- Uniform
  - Uniforms must be the designated official practical nurse uniform. Lab coats are solid white. Uniforms must be free of ornamentation and must fit appropriately.
  - Shoes are white duty shoes or all white athletics. No exposed foot or open-toed shoes are to be worn in clinical areas.
  - Socks must be white. Hose may be white or beige.
- The school patch must be worn on the left sleeve of all uniforms and lab coats. The patch will be secured on all edges and will appear on the outer clothing. That is, during clinical experiences, the patch will be visible at all times.
- Required accessories include a watch with a sweep second hand, bandage scissors, and a pen with black ink. Additional equipment, such as a stethoscope and forceps, may be needed based on clinical area requirements. Some clinical sites such as mental health areas have special requirements.
- Personal appearance
  - Minimum of cosmetics may be worn
  - Hair is clean, neat, and preferably of natural color. Long hair is contained.
  - Nails are short and maintained. No artificial nails. Only clear nail polish.
  - No visible body jewelry other than a watch, plain wedding bands, and plain post earrings (earrings may not be allowed in certain clinical areas such as with psychiatric or pediatric patients).
  - Body odor is unacceptable (includes perfumes, aftershaves, etc.).
Note: Noncompliance with the dress code may result in dismissal for the clinical day.

Driving to Clinical

During clinical rotations, a student will be required to provide his/her own transportation to clinical sites. At some time in the program each student will be required to drive from 50-100 miles or more one-way. A student needs to plan extra time for the drive, or inclement weather, to enable him/her to arrive safely, yet on time at his/her clinical site. It will be extremely important for the student to ensure adequate sleep the night before clinical to be safe to drive the distance to his/her clinical site, as well as being safe to care for the patient.

When a student has clinical experience at multiple sites, learning is enhanced. It is impossible to provide all of these learning experiences in one community or to always arrange more than one student rotate to the same facility. A student may have the opportunity to experience clinical situations in small to large-sized hospitals, medical clinics and doctor’s offices, long-term care centers, and many others as they become available clinical sites for the Practical Nursing program.

It is highly recommended that the student obtains a reliable vehicle, or when possible, arrange carpooling with other students, in order to arrive safely at the clinical site. Occasionally, carpooling may present a problem if a student becomes ill while at clinical or is sent home due to being unprepared. In situations where there are hazardous driving conditions, a student should contact his/her instructor and discuss possible options.

Note: Per ISU policy, students are not to travel with an instructor unless an ISU vehicle is arranged.

Evaluation

Staff: Evaluation of nursing staff is optional, but strongly encouraged for quality improvement purposes. The document used for the student evaluating the nurse can be found on the clinical Moodle site.

Student: The staff nurse (or preceptor) the student worked most closely with is to complete a supervision/observation form on the student each clinical day. The daily observation form can be found within this clinical manual. The document should be completed as follows:

- The preceptor will complete the supervision/observation form and discuss these observations with the student.
- Both the preceptor and the student will sign the observation.
• The preceptor will place this form in the student-provided envelope for the student to return to their instructor on the same day as the rotation.

Instructor: The student may complete an evaluation of his/her instructor at the end of the semester.

Facility Information

On the clinical Moodle site, there is a document titled Facility Information. This document has the following information in it:

• Unit/facility abbreviation
• Unit/facility phone number
• Max # of students allowed on/in the unit/facility per rotation
• Shift start time
• Time the rotation ends
• Whether the rotation is a preceptorship
• The full name and address of the unit/facility

The first page includes all of the long-term care settings we use for the CHARGE NURSE rotations that take place the semester that Management class takes place. The remainder of the document is in alphabetical order by abbreviation. The information in this document is constantly changing. We will note dates the document is updated.

Grading - Weekly

To allow the instructor to give student feedback and suggestions on performance, the instructor will need to interact, observe, and in other ways test and evaluate the student’s understanding of factors associated with patient care in the clinical setting.

While the instructor will note actions that demonstrate exemplary student performance or less than exemplary student performance, the instructor is not focusing on student errors. The student-instructor interactions have the primary goal of increasing student understanding, when needed, and of improving the student’s critical thinking. In other words, the instructor is not focusing on single infractions of a non-serious nature, but on improvement over time. A student’s attitude and active participation in learning may be reflected on their final course grade.
Due to these phenomena, it is very difficult for the faculty member to identify grade performance until the end of the semester. The instructor can and should, however, identify patterns (both positive and negative) that are being noticed, as soon as they are noticed, so that the student can work on improving if necessary.

Grading – Overall Performance

A student’s clinical practice progresses from simple to complex in relation to individual health needs of all age groups and include the family as a support in a variety of settings. For example, students taking one patient in an acute care setting during final semester will score lower than a student who takes two or more patients of the same acuity.

A student’s clinical instructor will complete a clinical performance evaluation for each semester and/or summer session. This Performance Evaluation will be signed by both the student and the instructor and will remain in the student’s file.

Clinical Grades

Clinical grades are assigned as follows:

- See clinical course objectives and faculty-generated clinical evaluation form within this clinical manual.
- The faculty member reviews the clinical course objectives and assigns a score to each subcategory of the Faculty-generated Clinical Evaluation Form.
- If a total score is less than 70%, the instructor will provide examples of non-exemplary performance (either directly on the Evaluation Form or as an attached page. Faculty may also provide students with education warnings, as needed.
- A copy of the faculty-generated evaluation and accompanying comments will be provided to the students.

Hours of Clinical

The program faculty will hand out a clinical schedule at the first of each semester. This will state both the dates and hours of each rotation and for post-clinical conferences.

If the student is at a facility outside of his/her assigned times, with the exception of pre-rotation preparation, the student is practicing outside the scope of practice for an SPN. This is grounds for immediate dismissal. See: Unsafe Clinical Practices Policy (Student Handbook)
Journaling and Discussion Postings

Journals and participation in Moodle discussion postings are methods of reflectively thinking about the clinical experience and increasing learning. Journals and/or discussion postings may be required during the student’s clinical rotations and will be graded on a pass/fail basis rather than grade assignment.

Narcotic Count and Narcotic Keys

A narcotic count must be completed if any narcotics are given by the student before leaving the facility for the day. Students are allowed to participate in this. If the nurse does not remember, it is the student’s responsibility to remind him/her. If the narcotic locks have to be re-keyed due to the student leaving the facility with the keys, the cost of the re-keying will be borne by the student. Neither ISU nor the facility will pay this cost.

Parking

For all facilities, students will park in an area furthermost from any building or as directed by each facility at the facility orientation.

Post Clinical Conference

1. For each full clinical day, (time – as decided by faculty) will be spent in post-clinical conference (PCC). This is our time to reflect upon student activities and experiences, and a time to discuss concerns, clarify confusion, for additional learning activities and for the instructor to make announcements. The students should consult his/her clinical instructor for the time post-clinical is arranged.
2. The instructor will arrange locations for PCC and pass this information on to the student as soon as possible. The student is advised to keep this schedule with clinical information. Occasionally a change is made.
3. Students are expected to be on time for PCC. Faculty will take into account that an occasional emergency does occur, but if a pattern of behavior develops where the student is often late, it will be factored into grading under Dependability. ‘Emergency’ means just that. If an opportunity to complete a task that the student has not previously completed arises and it is close to PCC time, the students should contact the instructor to discuss whether or not he/she may participate.
4. Students need to plan travel to the PCC location when determining when to
leave the unit or facility. This should never be more than 30 minutes before PCC unless travel from another town is necessary.

5. Students who have late rotation start times will still be required to attend PCC (i.e. doctor’s offices).

6. Students are expected to take notes in PCC. This is so the student may refer back to points discussed and so that the student can share information with a student that might have missed PCC. Students do not need to take notes on student experiences, but all other information should be noted. If a student misses a PCC (i.e. absence or late/missed due to events on the unit), it is the student’s responsibility to obtain the information from another student.

Students are expected to know the announcements made even if late or absent.

Preceptorships

During certain clinical rotations, students’ faculty representative may be located in another location.

Students will be notified of which faculty member is assigned to the various facilities at the start of, or prior to these rotations. Guidelines for clinical preceptorships are outlined in this manual as well as the ISU Practical Nurse Preceptor Handbook. Please carefully study each of these documents.

Safe Practice

The student nurse is responsible for adhering to safe practice. The student will demonstrate patterns of professional behaviors which follow the legal and ethical codes of nursing; promote the actual or potential well-being of clients, health care workers, and self in the biological, psychological, sociological, and cultural realms; demonstrate accountability in preparation, documentation, and continuity of care; and show respect for the human rights of individuals.

Prior to the clinical practicum (PNUR 114), the student is expected to score 90% or better on the math and medication administration exam.

A returning student must repeat clinical check offs successfully prior to any clinical practicum.

The student must successfully complete all course work ("C-" or better) in each semester in order to advance to the next semester or session in the PN program. The only exception to this is if a grade below C minus is earned in HO 105 or OT 170, for which the student may continue in the program, but must achieve a C minus in the course prior to
graduation. A certificate from the PN program will not be given for a cumulative GPA of < 2.0.

**Smoking**

Smoking is **NOT** allowed at any clinical site. A student found to be smoking during clinical hours will be dismissed for the remainder of the clinical day. Continued abuse of this policy may result in a failing grade in the clinical course and non-progression on the Practical Nursing Program.

**Miscellaneous**

At units/facilities where report is taken and/or inpatient rotations:

1. **Report:**
   - The student should be on time for report or should not attend report. The student will have to receive report from his/her primary caregiver after report is over if he/she is late.
   - The student should allow staff to sit at the report table first as a professional courtesy and sign of respect. If there are left over seats when all staff has arrived, the student may then sit at the table.
   - The student should take report on his/her patient every morning of the clinical rotation. A lot can happen overnight.

2. Upon arrival to the unit, the student should ask the charge nurse or unit clerk where he/she would like the student’s books, bags, coat kept. The facility will not be responsible for lost or stolen items.

3. The student should keep staff updated on patient status and should notify the primary caregiver of changes in patient condition as soon as they occur. Also, the student is not to leave the unit, even for break, without notifying the patient’s primary caregiver and the clinical instructor.

4. Prior to leaving the unit for the day, the student must report off duty to the primary care giver of their patient. The student must give the primary caregiver a thorough END-OF-SHIFT report (patient status and interventions completed) before leaving. While receiving clinical experience in any of the health care facilities, the student works under the immediate direction of the nursing staff with supervision by their clinical instructor in the area or available by phone. *The staff nurse retains the ultimate responsibility for the patient’s care.* Therefore, close communication among the student, staff nurse and instructor is essential.

5. In areas where specific patient information must be obtained, the student is responsible for acquiring all patient information prior to assigned clinical time.
• **Note:** This may involve coming to the hospital during the weekend, particularly on Sunday to prepare for clinical that begins Monday morning. Specific expectations regarding patient selection and preparing for clinical can be found in this clinical manual and on the Clinical Moodle site.

6. The student will be responsible for current assignments, which include nursing case studies, and reports, which may require outside reading. Example: Oboler Library, etc.

7. The student will report to assigned area on time.

8. If the student is assigned to an area, which requires a special change of clothing, he or she must report in advance of the scheduled time (Example: OR, PACU units).

9. Students must be familiar with their facility’s policy and procedure manual that may limit their ability to perform certain skills learned in the program (Example: blood transfusion policy). Knowledge of this will prevent “practicing outside their scope of practice” and receiving an "F" in their clinical practicum.

10. During clinical, students must notify the primary care nurse or charge nurse when leaving the floor for break or lunch. The student will not neglect their assigned patient(s) to take a break.

11. During clinical experience, students will end their clinical assignment only with the knowledge and permission of their instructor and the staff/charge nurse.

12. In addition to the written nurse’s notes, the student must make a verbal report as needed to the staff and/or charge nurse in all inpatient settings.

13. If a student is practicing at a clinical facility outside of clinical hours without their instructor’s express permission, this will result in immediate dismissal from the Practical Nursing program. An example of ‘practicing’ includes documentation or contacting the patient outside of clinical hours. Contacting the patient means via telephone contact and/or social visits not first authorized by the clinical instructor the student is assigned to.

14. The instructor may plan some evening experience as well as some night experience if she feels this experience would best serve students in meeting certain educational objectives during these hours.

15. On occasion, objectives may best be met by attending in-service classes at health care facilities and/or workshops outside the regularly scheduled hours of instruction. Attendance at these classes is mandatory. An absence from the class may be considered a clinical absence.
VIII. Student Clinical Expectations

Professional Performance

I. Manner and Appearance – the PN student will:
   A. Demonstrate awareness of the effect of own interactions with patients, peers, staff, and instructors.
   B. Exhibit discretion and maintenance of confidentiality by:
      • Speaking in a modulated voice at all times in the clinical area.
      • Discussing patient information only with those directly concerned with the patient’s care and welfare and only in a private setting.
   C. Remain effective when under stress.
   D. Exhibit courtesy and tact to patients, peers, staff, and instructors.
   E. Maintain a positive demeanor.
   F. Maintain personal hygiene and grooming standards acceptable to the nursing profession by:
      • Practicing good oral and body hygiene.
      • Conforming to uniform dress standards as outlined in the practical nursing policies and procedures.

II. Dependability – the PN student will:
   A. Exhibit dependability by:
      • Being consistently prompt for clinical.
      • Completing assignments on time or reporting promptly if unable to do so.
      • Reporting to clinical area any absences at the time designated in the practical nursing policies and procedures.
      • Taking breaks and lunches within the time limit outlined in the practical nursing policies and procedures and as specified by the clinical instructor.
      • Report promptly to clinical conferences; participate with pertinent contributions.
   B. Report to the clinical setting fully prepared and ready for the work assignment. This includes assigned written work and/or drug guide.

III. Ethics – the PN student will:
   A. Maintain confidentiality by discussing patient information in appropriate learning situations only.
   B. Exhibit honesty and integrity by:
• Reporting promptly to instructor any errors in patient care procedures or personal judgment.
• Prioritizing the needs of the patient without being influenced by personal need.
• Assume responsibility for his/her own actions by practicing clinical procedures in the skills lab until he/she has established beginning proficiency and has validated the correctness of these practices with the clinical instructor.
• Reporting any errors or problems promptly so that necessary action can be taken to rectify the situation.

C. Honor the code of conduct for nurses outlined in textbooks, ISU’s practical nursing policies and procedures, class lecture and discussion, etc.

D. Exhibit discretion in conversations with peers, instructors, staff, patients and families. Keep conversations professional and appropriate.

E. When representing the nursing profession as a student nurse, show an understanding and acceptance of the personal, ethical and legal responsibilities of the nursing profession and the rights of the patient by consistently adhering to the criteria established by:
   • The practical nursing policies and procedures
   • The laws, rules, and regulations of the Idaho State Board of Nursing
   • The readings in assigned textbooks
   • Information received in class lectures and discussions
   • Guidelines outlined by the clinical facility in which the student is practicing

IV. Professional Growth – the PN student will:

A. Show evidence that he or she can accept and profit from constructive criticism by:
   • Being receptive, non-defensive, and responsive to constructive criticism.
   • Not offering excuses for behaviors.

B. Show evidence of profiting from past experience by:
   • Changing behavior if indicated.
   • Continuing to build skills.
   • Showing increasing ability to problem solve and implement nursing care for the individual patient.

C. Be able to identify own strengths and weaknesses and take steps to improve deficient areas.

D. Set personal goals, establish a plan to achieve these goals, and evaluate progress made toward achieving those goals.

E. Exhibit responsibility for his/her own learning by:
• Arranging with instructor for clinical absences promptly.
• Minimizing personal problems and conflicts that interfere with school commitments.
• Arranging for and completing all make-up assignments.
• Setting up conference time with instructor when encountering problems.
• Becoming familiar with disease entities and all drugs of assigned patients prior to patient care.
• Becoming familiar with routines of the clinical setting.

V. Interpersonal Relationships: When with patients – the PN student will:
   A. Maintain the patient’s dignity and privacy at all times.
   B. Recognize the emotional needs of the patients.
   C. Use therapeutic communication effectively.
   D. Identify and avoid the use of blocks to therapeutic communication.
   E. Demonstrate an awareness of the effect of one’s own interactions with patients.
   F. Demonstrate an understanding of an ability to establish a professional nurse/patient relationship by:
      • Using empathy versus sympathy; transmitting feelings of warmth, kindness, and concern in all interactions.
      • Establishing a helping versus social relationship in which qualities of the helping person are demonstrated along with the use of techniques of therapeutic communication.
      • Showing respect for others, their opinions, way of life, values, and making the effort to determine the meaning of personal objects, belongings, beliefs, etc. that may have significance in the patient’s recovery.
      • Exhibiting non-judgmental attitudes and acceptance of patient’s rights through delivery of quality nursing care to the patient whose moral, social, religious standards differ from one’s own.
      • Avoiding imposing own personal, moral, social, or religious values on the patient.
      • Limiting patient contact to hours of clinical including obtaining consent to care for the patient.

VI. Interpersonal Relationships: With Staff/Instructors – the PN student will:
   A. Demonstrate awareness of the effect of one’s own interactions with staff and instructors.
   B. Use a problem solving approach to work out solutions to difficulties that may arise between staff or instructors.
C. Make attempts to solve interpersonal difficulties with the other person involved prior to seeking outsider assistance.
D. Demonstrate professional support for colleagues.
E. Maintain communication with staff or instructors with whom he/she is having conflicts.
F. Avoid seeking medical advice for self or family from staff, physicians or instructors.

VII. Interpersonal Relationships: With Peers – the PN student will:
A. Demonstrate awareness of the effect of one’s own interactions with peers.
B. Use a problem solving approach to work out solutions to difficulties that may arise between peers.
C. Make attempts to solve interpersonal difficulties with the other person involved prior to seeking outsider assistance.
D. Demonstrate professional support for colleagues.
E. Maintain communication with peers with whom she/he is having conflicts.

Technical Performance

I. Assessment – the PN student will:
A. Perform a concise head-to-toe assessment on each assigned patient. This is done to establish baseline data and to assess changes in the patient’s condition. This assessment is also used in care plan formulation.
B. Admit patients, obtains complete nursing histories, perform a physical assessment, and write admission notes.
C. Make hourly patient rounds to reassess patient status; more frequently if necessary.
D. Assess and identify physical and psychosocial problems/needs to establish and update nursing care plans.
E. Assess each patient’s and family’s understanding of the disease process and the need for patient/family teaching.
F. Assess the patient’s surroundings for safety.
G. In a real or simulated situation, the student will be able to:
   • Identify signs and symptoms of respiratory cessation.
   • Identify signs and symptoms of cardiac arrest.
   • Initiate cardiopulmonary resuscitation.

II. Planning – the PN student will:
A. Assist in formulating the initial nursing care plans, based on data from nursing history and physical/mental assessment.
B. Plan care for the day after performing an assessment and reviewing patient's record.
C. Communicate with appropriate staff members regarding plan of action.
D. Set realistic goals, both short and long term, with the patient for his or her care and recovery.
E. Plan patient and family instruction prior to discharge.

III. Implementation

A. Organization—the SPN will exhibit organizational ability by consistently:
   • Gathering information about the patient from major available sources before performing direct care and completing care plan.
   • Gathering equipment before beginning care.
   • Utilizing time, material, and equipment efficiently.
   • Making decisions about proposed nursing care with consideration for particular basic needs of the individual patient.
   • Maintaining a neat and orderly environment.
   • Taking into consideration a number of factors in the environment such as: needs of patients, overall unit activities, temperature regulation, lighting, ventilation, odors and noise control, safety and privacy, limitations of physical surroundings, etc.
   • Changing plans for care as new information or circumstances arise without undue excitement or disorganization.
   • Organizing work so that several different situations occurring closely together or simultaneously can be met with good nursing judgment.
   • Discriminating between individual problems that are pressing; establishing priorities.
   • Completing assigned tasks within a reasonable amount of time, finishing work within the allotted time frame.

B. Problem Solving—the SPN will:
   • Use a problem solving approach when giving patient care in a real or simulated setting while providing for the safety, ethical, hygienic and comfort needs of the patient.
   • Recognize patient’s basic needs and make beginning nursing interventions using a problem-solving approach.

C. Initiative and Adaptability—the SPN will:
   • Come prepared to the clinical facility by following the guidelines outlined in specific Policy and Procedure books.
   • Independently seeks answers from appropriate textbooks and other resources.
   • Seeks new experiences in the clinical setting.
   • Assists other care givers as appropriate.
• Actively works at improving deficient skill and knowledge areas without reminders from the instructor.

D. Procedural Skills—the SPN will:

• Implement beginning and advanced learned skills in a real or simulated setting that include, but are not limited to:
  1. Use of medical asepsis, infection control, and universal precautions.
  2. Use of surgical asepsis.
  3. Accurate assessment of vital signs, height, weight personal hygienic care: hair, nails, foot, mouth, eye, ear, skin.
  5. Moving and positioning patients.
  6. Patient exercise and ambulation.
  7. Restraint use.
  8. Cast care, traction care, turning frame use.
 13. Cardiopulmonary resuscitation.
 15. Assisting with special procedures.
 16. Venipuncture and IV therapy.
 17. Administration of medications.

E. Perform all direct patient care procedures exhibiting:

• A good level of manual dexterity.
• An adequate level of competence.
• A degree of self-confidence.
• Reasonable speed and accuracy.
• Medical and/or surgical asepsis.

F. Follow prescribed procedural steps outlined in textbooks, lecture, clinical facility policy, and procedure manual.

G. Prepare the patient physically and emotionally for procedures as outlined in textbooks, lecture, clinical facility policy and procedure manual.

IV. Reporting—the PN student will:

A. Recognize and report significant changes and/or factors in the patient’s condition to the primary caregiver and/or charge nurse, as indicated.
B. Give a concise verbal or taped report of the patient’s condition and nursing care provided to the primary caregiver and/or charge nurse prior to leaving the unit.

V. Documentation—the PN student will:
   A. Accurately record intake and output, vital signs, defecation, diet consumed, basic cares, etc.
   B. Chart neatly and legibly using a permanent black ink pen.
   C. Chart completed procedures.
   D. Use correct medical terminology and abbreviations in reporting and recording.
   E. Chart about the problems listed in the patient care plan.
   F. Accurately describe assessments, subjective and objective, planning, implementation of the nursing plan of care, and evaluations of planning and care.

VI. Safety—the PN student will:
   A. Be aware of environmental safety hazards.
   B. Promote safety to prevent harm to patients, peers, instructors, and staff.
   C. Protect the patient and self from thermal, mechanical, chemical, biological injury.

VII. Medication:
   A. When assigned to medication administration, in a real or simulated situation, the student will:
      - Observe the six rights: right patient, medication, dose, route, time, and documentation.
      - Follow established hospital routine including: checking physician’s orders; checking the orders along with the medication sheet(s) at the beginning of each shift and after physician’s rounds, checking nursing notes and/or medication administration record when appropriate; replacing and/or ordering medication; accurately recording medication administrations; researching medication prior to administrations; and/or accurately computing dosage in all systems.
   B. When assigned to patient care, know what medications the patient is receiving, the desired effects, possible adverse reactions, and how that patient is responding to said medication. Be able to answer patient queries or refer the patient to the proper resource, i.e., doctor, charge nurse, etc.
   C. Perform IV therapy within guidelines specified by the Idaho State Board of Nursing, classroom lecture, textbooks, and clinical facility policy.

VIII. Evaluation – PN student will:
   A. Evaluate and document each client’s response and progress.
   B. Continuously evaluate the quality of the nursing care the client is receiving.
C. Identify own need for guidance by asking for help when needed.

Correlation of Theory and Practicum

I. Weekly Work: Specific instructions regarding weekly work will be given prior to clinical assignments.
II. Clinical Quizzes, journaling or discussion postings: Quizzes on math for medications and medical abbreviations may be given periodically during clinical conference. Journaling or discussion postings outside of clinical hours may be required.
III. Major clinical papers or projects: Projects, presentations, and/or other papers may be assigned.
IX. College of Technology Policies

Intoxicants Policy

Any instructor who observes behavior which suggest that a student may be under the influence or detects the odor of an intoxicant of a student will take the following actions:

1. The instructor will notify the student that they will not be allowed in the classroom or lab.
2. Public Safety should be contacted to escort the student to a safe place.
3. The student will meet with the Director of Student Services the following day to discuss which steps should be taken.
4. The Director will communicate with the Office of Student Affairs regarding the violation.
5. The Director will contact the instructor and Department Chair summarizing any outcomes.

This policy does not supersede other laws or university student conduct policies pertaining to alcohol or drug possession, consumption or delivery.

Dismissal Policy

A student may be dismissed from a College of Technology program if the student fails to meet the academic and/or nonacademic continuation standards of the program/department including unprofessional/unethical behaviors and unsafe practices, or if the student is not making satisfactory progress in the program. Prior to making a decision of dismissing a student, the faculty of the program will meet with the student for a disciplinary review in order to give the student due process which includes a student’s right to be adequately notified of charges and the opportunity to be heard.

DICIPLINARY PROCEDURE

1. The faculty will notify the student privately of the incident(s) that have led to a disciplinary review and schedule a meeting time for the review. The purpose of a disciplinary review is to discuss the facts of the incident(s), to hear the student’s perspective, and if a violation has occurred, to determine an appropriate level of discipline which may lead to dismissal.
2. The meeting should be scheduled as soon as possible after the incident(s) occurred.
3. The student should refrain from attending any clinical, lab, externship, etc. that may threaten or pose a danger to the health, safety or welfare of any individual. After the disciplinary review, the faculty should determine what sanction to impose. In determining what sanction to impose, mitigating and aggravating factors may be considered, such as the individual’s prior disciplinary record, the nature of the offense, the severity of the damage, injury or harm resulting from the violation, and any restitution made.

NOTIFICATION PROCEDURES

1. The student must be notified in writing of the outcome of the disciplinary review and if sanctions will be imposed. If the student is dismissed, the letter must be sent by certified mail, return receipt requested.
2. The letter should indicate the incident(s) that occurred and the decision made regarding the incident(s). The student should be notified in the document that he or she has the right of appeal according to the Idaho State University Student Handbook. The student should be given a copy of the ISU Student Handbook or notified that it is available online.

CHANNELS OF REDRESS

An aggrieved student may:

1. Present any unresolved issues to the Department Chairperson. If the Department Chairperson is named in the complaint, the Dean of the College where the alleged infraction occurred shall appoint another member of the college to act in the Chairperson role for the appeals process.
2. Present any unresolved issues in a formal hearing before the Dean of the College involved. In the case of dismissal from a program, that is the college in which the program resides; for an appeal of a course grade, it is the college in which the course was offered. At this hearing, parties shall submit written charges, answers, and arguments to the Dean. The Dean shall preserve these documents for use in later appeals to a Scholastic Appeals Board, if such an appeal becomes necessary. Only written charges, answers and arguments presented at the Dean’s formal hearing will be subject to review by a Scholastic Appeals Board. The Deans shall be charged with preserving all tangible evidence and all written charges, answers, and arguments submitted at hearing before them. The student must have specifically demonstrated at the formal hearing before the Dean how the alleged
infraction led to his or her dismissal from the program or adversely affected his or her final grade in order to pursue an appeal to a Scholastic Appeals Board. The Dean must notify, in writing, the student and faculty member of his or her decision within one week following the formal hearing. The Dean shall have the authority to direct the Registrar to change a student’s grade.

3. And Department Chairperson or College Dean may elect to utilize an internal committee to assist in making a decision on academic appeals at the departmental and/or college levels. Department Chairs and Deans may interview the student and/or instructor, or conduct an additional investigation deemed appropriate to help in the decision-making process. Nothing contained in these procedures shall act to enlarge or restrict the existing authority, if any, of any Dean or the Provost and Vice President for Academic Affairs to take any action, including the changing of student grades or reinstating a student, outside of the appeals process described herein.

PROCEDURE FOR AN APPEAL TO SCHOLASTIC APPEALS BOARD

1. If the student wants to appeal the decision reached in the formal hearing, he/she must obtain a scholastic appeal petition form from the Office of Student Affairs, and return it there when completed. The completed petition shall include a concise description of the complaint, the signature of the student instituting the petition, and the signatures and comments of the faculty member, Department Chairperson, if any, and the Dean involved, if said persons are still available.

2. Copies of all written charges, answers, and arguments and all tangible evidence presented at the Dean’s formal hearing shall be made available to the student to attach to the original petition submitted to the Office of Student Affairs. The petition and additional materials will be secured in the office.

3. A scholastic appeal petition must be initiated before the end of the semester following the formal hearing. The petition is initiated when the student formally presents his or her complaint to the Office of Student Affairs and requests a scholastic appeals petition.

4. The Office of Student Affairs will then notify the Chairperson of the Academic Standards Council of the need to consider the petition. The Chairperson will then choose a Chair for the Scholastic Appeals Board, and the rest of the Board will be constituted.
X. Idaho State University Policies

The following policies fall under the guidance of the Idaho State University Student Handbook.

For more information on each topic, please find the policy and descriptions using the handbook link.

1. **Smoking** (page 23; Smoking Policy ISUPP 2370)
2. **Sexual Harassment** (page 18; Sexual Harassment Policy)
3. **Withdrawal** (page 6; Withdrawing from Courses)
4. **Academic Standing** (page 10; Academic Standing)
5. **Petitions** (page 16; Petition Policies)
6. **Academic Integrity** (page 15; Academic Integrity and Dishonesty Policy ISUPP #4000 for Undergraduates)
7. **Substance Abuse** (page 20; Substance Abuse Policy)

[isu.edu/Student_Handbook](isu.edu/Student_Handbook)

Additional Idaho State University policies:

1. **FERPA**
   - [isu.edu/ferpa](isu.edu/ferpa)
2. **Title IX**
   - [isu.edu/titleIX](isu.edu/titleIX)
3. **Satisfactory Academic Progress**
   - [isu.edu/satisfactory-academic-progress](isu.edu/satisfactory-academic-progress)
XI. Idaho State University Resources and Services

The following are Idaho State University resources and services to help our students succeed.

For more information on each topic, please use the links given.

1. Disability Services
   • isu.edu/disabilityservices
2. Student Resources
   • isu.edu/student-resources
3. Parking Services
   • isu.edu/parking
4. Counseling and Testing Services
   • isu.edu/ctc
5. Health at ISU
   • isu.edu/health
6. Commencement
   • isu.edu/graduation
7. Career Services
   • isu.edu/career/
8. Coronavirus
   • isu.edu/coronavirus
XII. College of Technology
Resources and Services

Section I: Services for Students

Student Services: This office is located in two locations, the main floor of the Roy F. Christensen (RFC) Complex, Room 184, and the William M. and Karin A. Eames Advanced Technical Education and Innovations (Eames) Complex, Room 102. Student Services assists students with specific information about the programs at the College of Technology. Academic advisors are available to give students assistance with admissions, class and schedule advisement, academic resources, and specific information pertaining to a student’s educational goals.

Hours are 7:30 am to 5:00 pm Monday through Friday. Appointments can be made by calling (208) 282-2622. Appointments are recommended but are not required. Tours of the programs are available by appointment and can be set up by calling (208) 282-2800.

isu.edu/tech/student-services

Tutoring Assistance: Students who are experiencing difficulties with their program instruction or classroom assignments may receive assistance. The student’s instructor should be contacted first, as many of the training programs have ‘peer tutors’ available who are familiar with the required curriculum and assignments.

Note: It is important to request assistance as EARLY in the semester as possible! At the point a student recognizes he/she is having difficulty, help should be sought immediately! Contact the TAP Center, (Tutoring, Academic support, Peer mentoring), located in Room 162 of the RFC Complex. Or telephone at (208) 282-3208 for an appointment to discuss specific tutoring needs.

isu.edu/tech/tutoring

The Center for New Directions: Located within the RFC Complex on the third floor. The Center’s telephone number is (208) 282-2484. Support programs are available at no cost for men and women who are interested in entering/re-entering the job market due to issues which might include: divorce; separation; death; or disability of a spouse. Services are available on job seeking skills, career information, self-esteem, self-confidence
The Center for New Directions (CND) offers academic advising, assistance with financial aid, and personal counseling. The Center also provides a limited number of scholarships for single parents and for women and men interested in pursuing ‘not-traditional’ fields of training.

isu.edu/cnd

Section II: Registration and Fee Collection Policy

- All students who are enrolled in semester-based programs must pay their tuition by the Friday before classes begin to avoid a $50 late fee. For tuition payment information, login to the ISU BengalWeb and go to the Finances tab.
- Students who are enrolled only in the eight-week classes (early and late), must pay tuition by the first day of class.

Note: It is the individual student’s responsibility, regardless of funding source, to see that their tuition is paid on time and that they are officially enrolled at ISU. Students who do not pay tuition prior to the deadline may be disenrolled.

Section III: Financing Your Education

Students attending the ISU College of Technology can apply for federal financial aid by submitting a Free Application for Federal Student Aid (FAFSA) form each year they are enrolled at the University. FAFSA applications are available on the web at:

studentaid.gov/fafsa

It is strongly recommended that students apply early. Keep the Financial Aid office notified of any changes in student status such as address change, marriage, etc.

Note: Students who leave school prior to successful completion may have to repay federal financial aid received. Call the ISU Financial Aid office immediately if you plan to withdraw from school, (208) 282-2756. The website for financial aid is:

isu.edu/financialaid

Numerous scholarships are available to College of Technology students. The ISU Scholarship Department website lists those scholarships through the Bengal Online Scholarship System (BOSS).

The most common scholarships are the Associated Students of ISU (ASISU) Need and Scholastic awards. Funds for these scholarships come from a portion of the registration
fees each student pays. Many scholarships are donated by business/industry, organizations, or individuals and have specific criteria, which must be met.

isu.edu/scholarships

**Section IV: Short-Term Loans**

The Short-Term loan program is funded by Friends of Idaho State University. It is limited to loans for books and educational expenses. The maximum amount of each loan is $500. The loans are issued for up to 90 days. They must be repaid upon receipt of financial aid, 90 days after issue, or the last day of the semester, whichever arrives first. Your ISU internal credit rating will be reviewed prior to loan approval. Failure to pay this loan as agreed will adversely affect the credit rating used internally by ISU.

isu.edu/short-term-loans

**Section V: Traffic and Parking**

**Note:** Please refer to the ISU Parking web address at:

isu.edu/parking

Every motor vehicle on the ISU campus must be registered and display an appropriate ISU decal. Parking permits are available at the ISU Traffic Office located at the corner of South 5th and Humboldt Street, telephone (208) 282-2625.

**Cost:**

- General Lot: $100
- Reserved Lot: $300
- Reduced Fee: $50 (at Holt Arena only)

Students may park only in the area their parking decal designates. Students at the College of Technology may not park in the Cosmetology Patron parking spaces. The parking meters at the RFC Complex are reserved for visitors and new applicants inquiring about school. Students are NOT PERMITTED to park in metered spaces. Students should be aware of the ISU towing policy. Any vehicle will be towed at the owner’s expense when it accumulates $50 in citations.

Any traffic tickets resulting in fines owed to the University must be paid or student’s transcripts, certificates, and/or degrees will not be released upon completion of their
training program. In addition, registration for the next term will not be permitted until the fines and other financial obligations are paid or proper arrangements are made by the student.

Section VI: Transportation

**ISU Commuter Express:** Idaho State University Commuter Express is a system designed to assist commuting students enrolled at ISU with a source of transportation to and from the campus. Buses run on a daily basis (Monday through Friday) and pick up students at various locations in outlying areas of the region including Idaho Falls and Blackfoot. The bus schedule operates from the first day of each semester and continues until the last day of final examination week. For information on costs and schedule, telephone (208) 282-4460, or go to:

[isu.edu/transportation/commuter-express](isu.edu/transportation/commuter-express)

**Bengal Shuttle:** Pocatello Regional Transit (PRT) provides a shuttle bus service on campus from Holt Arena to various drop off points on a 10-minute basis during the school day and is free of charge. PRT provides transportation services within the metropolitan Pocatello vicinity. Student discounts are available. For information on schedule and drop off points, go to:

[isu.edu/parking/bengal-shuttle](isu.edu/parking/bengal-shuttle)
XIII. Handbook Signature Form & Photography Consent Release

HANDBOOK SIGNATURE FORM

I acknowledge that I have received, read and understand the Practical Nursing Handbook. I have also reviewed the Idaho State University Student Handbook and understand the privileges and responsibilities of attending Idaho State University.

________________________________________________________________________
PRINTED NAME                                           DATE
________________________________________________________________________
SIGNATURE                                               BENGAL ID #
________________________________________________________________________
INSTRUCTOR SIGNATURE

CONSENT FOR PHOTOGRAPH RELEASE

I understand that my photograph may be used for educational purposes. I also understand that these photographs may be used in classroom discussions, reproduced to facilitate written and digital formats (including online), and/or be used in promotional materials (brochures, pamphlets, flyers, etc.).

If there are limitations, please check one of the following boxes:

☐ Photographs must be altered to ensure facial identity is hidden.
☐ Do NOT use my photo for promotional or educational use.

________________________________________________________________________
PRINTED NAME                                           DATE
________________________________________________________________________
SIGNATURE
XIV. Computer Usage Policy

COMPUTER USAGE POLICY

Person(s) using any of the ISU computing resources for personal gain, violation of security/privacy or who otherwise compromise the integrity of the hardware and/or software shall be prosecuted to the full extent of the law.

Legitimate use of a computer or computer network does not extend to whatever you are capable of doing with it. Although some rules are built into the system itself, these restrictions cannot limit completely what you can do and can see. In any event, you are responsible for your actions whether or not rules are built in, and whether or not you can circumvent them.

Inappropriate use of the computer is considered computer misuse. The supervisor of each lab will determine what deemed “inappropriate use” for their particular lab. For specific computer lab policies, see individual lab instructors. Inappropriate use may result in denial of computer lab access at the College of Technology.

The misuse of this computing account, or use of an account belonging to another, may result in the loss of your computer privileges. Where computing is required to complete course work this may effectively require transfer to a non-computer related program and/or hinder your pursuit of a degree. Examples of misuse are: sharing your personal account with another individual, using unauthorized passwords, use for financial gain or business purposes, sending offensive electronic mail or internet correspondence, chain letter, or other such correspondence, unauthorized transfer of computer programs or data, attempts to circumvent established procedures, computer security breach or attempts to break security.

I have read the entire student computing contract. I acknowledge and agree to use the ISU computing resources solely for University instructional, administrative, or research activities in accordance with above policy. I further acknowledge that any abuse of the above privilege may result in loss of computing privileges whether or not such privileges are necessary for continued enrollment in my present course of study.

PRINTED NAME ___________________________ DATE ____________

SIGNATURE ___________________________ BENGAL ID # ____________
XV. Educational Warning & Documentation Record

Practical Nursing Program

Student Name__________________________       Date________________

Course Name and Number__________________________

Professor/Instructor__________________________

Subject of Educational Warning:__________________________

Persons Attending Meeting__________________________

_____ Educational Warning Signed

_____ Refer to Educational Warning for methods to improve, resources, remediation, etc.

_____ Options Discussed:

_____ Chooses to continue in course

_____ Withdraw from Class [Deadline to withdraw from a class is one week after the official midterm grade reporting deadline as shown in the current ISU Academic Calendar.]

_____ Withdraw from Program/ISU (circle one)

_____ See Academic Advisor and/or Program Director

_____ Read Student Handbook

_____ Referred to College Dean or Department Chair

_____ Referred to Student Services Advisor/Counselor

NOTE: Reentry into nursing courses includes space availability and Program/Instructor approval. Facility approval may also be needed for clinical courses.

Comments:

________________________________________       ____________

Student’s Signature       Date

________________________________________       ____________

Instructor’s Signature       Date
Educational Warning & Documentation Record

Associate Degree Registered Nurse Program

Student Name_________________________________________ Date____________________

Course Number and Title________________________________________________________

Semester/Year_______

Reason(s) for concern regarding course requirements, objectives and/or ADRN program policies/requirements/expectations:

__________________________________________________________________________

__________________________________________________________________________

Plan of action, on behalf of the student, to address concern(s) (i.e., the student will...):

__________________________________________________________________________

__________________________________________________________________________

Plan of action, on behalf of the faculty member, to address concern(s) (i.e., the faculty member will...):

__________________________________________________________________________

__________________________________________________________________________

Benchmarks (when actions will be completed and/or evaluated):

__________________________________________________________________________

__________________________________________________________________________

Consequences of inaction or lack of improvement:

__________________________________________________________________________

__________________________________________________________________________

Faculty member’s signature and date:___________________________________________

Date this Educational Warning was presented to the student:_______________________

Student’s signature and date:___________________________________________________

CC: Student, Student’s Advisor, Program Director, Student File
XVI. Informed Consent and Release to Allow ISU to Use Student’s Criminal Background Investigation, Drug Screen, and Any Other Applicable Reports

Practical Nursing Program

Instructions: This form is to be used when a student is: 1) applying for admission to a program, 2) applying for field-based experience, or 3) requesting to complete a healthcare program’s clinical requirement. Questions may be directed to the Office of General Counsel at (208) 282-2683.

I am submitting this form in conjunction with my: (check one applicable item)

_____1. Application for admission to the ISU College of Technology Practical Nursing program.
_____2. Application for field-based experience with the ISU College of Technology Practical Nursing program.
_____3. Request to participate in healthcare clinical education for the ISU College of Technology Practical Nursing program.

I hereby authorize the University, any qualified agent, and/or clinical affiliate/agency to receive and use in connection with the program checked above any of the following information including, but not limited to: criminal background information, including copies of my past and present nationwide law enforcement records; drug screen reports; insurance; Social Security number trace for previous residencies; employment checks, Office of Inspector General (OIG) Sanctions List, General Services Administration’s Excluded Parties Listing System (GSA/EPLS), violent sex offender and predator registry search; applicable state exclusion list, US Treasury Office of Foreign Assets Control (OFAC), and the list of specifically designated nationals. I will purchase an ISU approved criminal background investigation from the designated third party vendor for the purpose of assisting the Program and/or the clinical affiliate/agency in evaluating my suitability for admission to a program, field-based experience, or participation in a clinical internship experience. The release of information pertaining to a background investigation is expressly authorized.

I understand that information contained in the criminal background report or any additional reports may result in: 1) my being denied full admission to the Program and, consequently, dismissal from the Program; or 2) my being denied or dismissed from the field-based experience and, consequently, denied admission to or dismissal from the Program; or 3) my being denied a clinical assignment and, consequently, dismissal from the program. I also understand that I will be afforded the opportunity to be heard before any such withdrawal from the Program.

I understand that I have online access to the vendor’s results to review the same information that the Program receives in a criminal background investigation. I understand that reasonable efforts will be made by ISU to protect the confidentiality of the information it receives. I further understand that the results of the criminal background check and other reports may be reviewed by the following individuals and entities when evaluating my suitability, including but not limited to: the applicable dean, chair, program, department, the Office of General Counsel, and clinical affiliates or agencies.

If adverse information is contained in my report(s), I understand that I can view my own results and may be
asked to provide more information in writing to the Program. I understand that admission decisions made by the Program are not subject to appeal.

I hereby give the Program permission to release my criminal background report and any other reports to affiliates and/or agencies to which I am assigned for clinical or educational experience prior to beginning the assignment and regardless of whether such affiliates and/or agencies have required the background check or other reports. I understand the affiliates or agencies may refuse me access to their clients/patients based on information contained in the criminal background check or other reports and that the affiliates'/agencies' criteria may differ from that of the Program.

I hereby release and hold harmless the State of Idaho, the University, its agents, officers, governing board, employees and/or the affiliates and agencies from any liability or damage in providing and disclosing such background information or any other reports. I agree that a photocopy of this authorization may be accepted with the same authority as the original.

I understand the University is not responsible for the accuracy and content of the background information provided by the third party vendor or any other reports and I hereby further release and hold harmless the State of Idaho, the University, its agents, officers, governing board, and employees from any and all claims, including but not limited to, claims of defamation, invasion of privacy, wrongful dismissal, negligence, or any other damages of or resulting from or pertaining to the collection of background information.

Additionally, I understand that the background check, drug screen, additional reports, program admission, field experience, and placement are subject to the requirements of the ISUPP Student Affairs.

I understand that I am responsible for all costs associated with this process.

My signature below show that I have carefully read this document and understand and agree to its contents:

___________________________________________
Student’s Signature (Student or Parent/Legal Guardian if under 18)   Date

___________________________________________
Student’s Name (Print)   Student Date of Birth

Please print or type all names you have used in the past (use other side of page if necessary):

___________________________________________
___________________________________________
___________________________________________
___________________________________________

___________________________________________
ISU Witness   Date

___________________________________________
Printed Name   Department
XVII. Background Check with CastleBranch

Order Instructions for:

 Idaho State University College of Technology Health Occupations

1. Go to mycb.castlebranch.com
2. In the upper right hand corner, enter the Package Code that is below.
   • Package Code ID41

ABOUT

About CastleBranch:
Idaho State University College of Technology Health Occupations and CastleBranch – one of the top ten background screening and compliance management companies in the nation – have partnered to make your onboarding process as easy as possible. Here, you will begin the process of establishing an account and starting your order. Along the way, you will find more tailored instructions on how to complete the specific information requested by your organization. Once the requirements have been fulfilled, the results will be submitted on your behalf.

Order Summary

Payment Information:
Your payment options include Visa, Mastercard, Discover, debit, electronic check, and money orders. Note: Use of electronic check or money order will delay order processing until payment is received.

Accessing Your Account:
To access your account, log in using the email address you provided and the password you created during order placement. Your administrator will have their own secure portal to view your compliance status and results.

Contact Us:
For additional assistance, please contact the Service Desk at 888-666-7788 or visit mycb.castlebranch.com/help for further information.
XVIII. Medical History and Physical Examination

**Idaho State University**

**College of Technology**

Practical Nursing Program

College: ___________________ Department: ___________________

921 South 8th Avenue, MS ___________________
Pocatello, Idaho 83209- __________

Program of Study ___________________

Fax Number: ___________________ ATT: ___________________

**STUDENTS PLEASE COMPLETE**

**BEFORE GOING TO YOUR PHYSICIAN FOR EXAMINATION**

**REPORT OF MEDICAL HISTORY**

<table>
<thead>
<tr>
<th>M/F</th>
<th>Last Name</th>
<th>First</th>
<th>Middle</th>
<th>Sex</th>
</tr>
</thead>
</table>

Home Address: Number & Street ___________________ City ___________________ State __________ Zip __________ Date of Birth __________

**PERSONAL HISTORY**

Please check those which you have had or now have

<table>
<thead>
<tr>
<th>Have You Had</th>
<th>Yes</th>
<th>Date</th>
<th>Comments</th>
<th>Have You Had</th>
<th>Yes</th>
<th>Date</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head Injury with Unconsciousness</td>
<td></td>
<td></td>
<td></td>
<td>Tuberculosis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High or Low – Blood Pressure</td>
<td></td>
<td></td>
<td></td>
<td>Heart Condition</td>
<td></td>
<td></td>
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<tr>
<td>Back Problems</td>
<td></td>
<td></td>
<td></td>
<td>Jaundice</td>
<td></td>
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<tr>
<td>Stomach, Intestinal, Gallbladder Trouble</td>
<td></td>
<td></td>
<td></td>
<td>Disease or Injury of Joints</td>
<td></td>
<td></td>
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<tr>
<td>List All Operations:</td>
<td></td>
<td></td>
<td></td>
<td>Kidney Disorder</td>
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<td>List All Current Medications:</td>
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<td>Allergy: Asthma</td>
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<td></td>
<td>Hay Fever</td>
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</tbody>
</table>

I hereby declare that I have no illnesses or emotional problems not discussed with my physician that will interfere with my enrollment in the program. I hereby grant permission for the information requested on this form to be released to the

________________________________________
Applicant’s Signature

________________________________________
Date

ISU College of Technology - 85 - Student Handbook 2020 - 2021
PHYSICIAN PLEASE COMPLETE

REPORT OF HEALTH EVALUATION

<table>
<thead>
<tr>
<th>BP</th>
<th>Height</th>
<th>Vision – Right 20/</th>
<th>Left 20/</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pulse</td>
<td>Weight</td>
<td>Corrected – Right 20/</td>
<td>Left 20/</td>
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</tbody>
</table>

ARE THERE ANY ABNORMALITIES?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DESCRIBE</th>
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<tbody>
<tr>
<td>1. Head, Ears, Nose, or Throat</td>
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<tr>
<td>2. Respiratory</td>
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<td>3. Cardiovascular</td>
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<td>4. Gastrointestinal</td>
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<td>5. Hernia</td>
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<td>6. Eyes</td>
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<td>7. Genitourinary</td>
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<td>8. Musculoskeletal</td>
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<td>9. Metabolic/Endocrine</td>
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<td>10. Neuropsychiatric</td>
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<td>11. Skin</td>
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HEPATITIS B | INFLUENZA | MMR | Tdap | VARICELLA | TB

+ Positive Titer -Negative Titer

Attach lab result

Yearly Vaccine

August – March

2 documented doses OR proven serologic immunity to all three

Booster as an adult within the last 10 years

2 documented doses OR proven serologic immunity

Skin Test (PPD) Mm induration (>10mm is +) OR IGRA + or –

Attaches copy of document PPD mm reading or IGRA lab result

If positive* CXR attach report from radiology

Attach copy of vaccine administration record OR attach lab result

Attach copy of vaccine administration record OR attach lab result

Attach copy of vaccine administration record OR attach lab result

Please refer to ISU screening recommendations for details about serologic immunity, vaccines, and *TB screening

Is the patient now under treatment for any medical or emotional condition? Yes No

Does this person have any limitations regarding lifting and moving of people and or equipment? Yes No

In your opinion, does this applicant have the mental and physical health to meet the requirements of being an active and successful student in the Department as well as for being employed professionally following graduation? Yes No

Comments:

Physician’s Signature Date Address

Print Name Phone

ISU College of Technology - 86 - Student Handbook 2020 - 2021
## XIX. Preceptor-Generated Clinical Performance Observation Form

### Practical Nursing Program

**Course Title & Number**

**Student Name**

**Dept./Facility**

**Preceptor**

**Date**

Note to clinical nurse preceptor: All students are presumed to begin their clinical experience at zero (0). Changes over the course of the clinical experience should be based on specific observations that can be shared with the student. Feel free to use the final page for any specific comments you would like to make regarding student behaviors.

### Professional/Ethical/Legal

<table>
<thead>
<tr>
<th>Below Expectation</th>
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Professional/Ethical/Legal: The program participant practices within the scope of their practice in an ethical manner. Contributes to the assessment of health status by collecting, reporting and recording objective and subjective data. Participates in the development and modification of the plan of care. Maintains safe and effective nursing care. Participates in the evaluation of responses to interventions. Fulfills charge nurse responsibilities in health care facilities as allowed by state and federal law. Delegates to others as allowed by the application of the decision making model. Accepts delegated assignments only as allowed by application of the decision-making model. The program participant is personally accountable and responsible for all actions taken in carrying out nursing activities and adheres to the decision-making model.

### Communication

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Appropriate verbal, non-verbal, and electronic communication with all members of the healthcare team to include patients, families, and all members of the healthcare team.

### Cultural Diversity and Life-Span

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Appropriately applies nursing principles of growth & development through the lifespan for patients and families from diverse backgrounds with cultural competence.
### Conservation of Resources

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Perceives healthcare economics as a personal and professional responsibility (includes time management and cost control).

### Evidence-Based Practice

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Able to make evidence-based decisions (providing scientific rationale).

### Pharmacology

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Demonstrates safe and effective administration and monitoring of pharmacological therapeutics.

### Pathophysiology

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Relates scientific knowledge to the care of patients and families facing disease processes within a variety of settings.

### Critical Thinking

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Participates and contributes to problem-solving, priority setting and responding to changes in patient situation, uses appropriate judgment in working with patients/families.

### Caring

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Demonstrates appropriate genuineness, respect and demeanor toward patients and families in a variety of settings. Demonstrates non-judgmental attitude, and promotes clients rights.
<table>
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</table>

Contributes to client educational needs and health promotion. Continuously developing learning goals and seeking learning opportunities to improve knowledge and skills.

Student Signature_________________________________________ Date_____________________

Nurse/Preceptor Signature____________________________________

Faculty Signature___________________________________________
XX. Faculty-Generated Clinical Performance Evaluation & Grading Form

Practical Nursing Program

Course Title & Number ___________________________ Midterm/Final (Circle One)

Student Name_______________________________ Dept./Facility______________________________

Preceptor_______________________________ Date_______________________________

All students are presumed to begin their clinical experience at zero (0). Changes over the course of the clinical experience should be based on specific observations that can be shared with the student. Feel free to use the final page for any specific comments you would like to make regarding student behaviors.

Grading Scale
+3 = 100
+2 to +2.9 = 90-99%
+1 to +1.99 = 83-89%
Zero (0) to +0.99 = 75-82%
-1 to -0.99 = 68-74%
-2 to -3 = 60-67%
-3 = below 60%

Final Score_______________________________
Final Percentage________________________

Professional/Ethical/Legal
Professional/Ethical/Legal: The program participant practices within the scope of their practice in an ethical manner. Contributes to the assessment of health status by collecting, reporting and recording objective and subjective data. Participates in the development and modification of the plan of care. Maintains safe and effective nursing care. Participates in the evaluation of responses to interventions. Fulfills charge nurse responsibilities in health care facilities as allowed by state and federal law. Delegates to others as allowed by the application of the decision-making model. Accepts delegated assignments only as allowed by application of the decision-making model. The program participant is personally accountable and responsible for all actions taken in carrying out nursing activities and adheres to the decision-making model.

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</tbody>
</table>

Comments:
### Communication
Appropriate verbal, non-verbal, and electronic communication with all members of the healthcare team to include patients, families, and all members of the healthcare team.

<table>
<thead>
<tr>
<th>Score</th>
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Comments:

### Cultural Diversity and Life-Span
Appropriately applies nursing principles of growth & development through the lifespan for patients and families from diverse backgrounds with cultural competence.

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Comments:

### Conservation of Resources
Perceives healthcare economics as a personal and professional responsibility (includes time management and cost control).

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Comments:

### Teaching/Learning
Contributes to client educational needs and health promotion. Continuously, developing learning goals and seeking learning opportunities to improve knowledge and skills.

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Comments:
### Evidence-Based Practice
Able to make evidence-based decisions (providing scientific rationale)

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Comments:

### Pharmacology
Demonstrates safe and effective administration and monitoring of pharmacological therapeutics.

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Comments:

### Pathophysiology
Relates scientific knowledge to the care of patients and families facing disease processes within a variety of settings.

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Comments:

### Critical Thinking/Clinical Decision Making
Participates and contributes to problem-solving, priority setting and responding to changes in patient situation, uses appropriate judgment in working with patients/families.

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Comments:
Professional/Ethical/Legal

The following aspects should be considered when observing students: demonstrated empathy and client advocacy; initiates advocacy for clients’ needs; demonstrates appropriate genuineness, respect and demeanor toward patients, families, communities; seeks opportunities to offer help to professional peers as well as clients/families/communities; demonstrates non-judgmental attitude & promotes clients’ rights to self-determine. Uses a soothing tone of voice. Uses affective touch. Listens to client & significant others. Refrains from talking to others in room as though client not present.

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Comments:

Student Signature______________________________ Date________________

Instructor Signature____________________________ Date________________
XXI. Clinical Reasoning in the Clinical Setting: Reflection Journal

To be completed by the Student after completing Clinical Shift

Student Name_________________________________________ Date________________________

Clinical Site/Unit_____________________________________

The Reflection Journal provides the nursing student to “read” the patient and how he/she are responding to current nursing interventions and adjust what nursing interventions are implemented related to the patient’s response to the current plan of care. The goal of this activity is to reflect on a significant event during the student’s clinical experience and determine:

• What can be learned from it?
• What would the student do differently?
• How could the student use this knowledge in the future?

Describe a situation you encountered in the clinical setting that required you as the nurse to formulate a correct clinical judgement to either advance the plan of care or to recognize clinical data that represented a change in clinical status.

Event:

What can be learned from this?

What would you do differently? Provide at least 2 examples.

How can you use what has been learned from this to improve patient care in the future?
XXII. Drug Screening Letter of Introduction

Please see the attached Idaho WorkCare Drug Screening Letter of Introduction.
**Letter of Introduction**

**DO NOT PAY at Idaho WorkCare Collection Sites**

Failure to report to a collection site listed below, and provide results as instructed, before ______________ may be considered a refusal to test. Students are responsible to make appointments for testing as necessary. Please retain a copy of your results.

Program: _COT Practical Nursing_ Date Scheduled: ______________ Time: ______________

Student Name:__________________________________________ ID#:________________________

**Reason for test:**

- _X_ Pre-Practicum
- _____ Random
- _____ Post Accident
- _____ Return to Duty
- _____ Other: _______________

**Type:**

- _X_ **Instant** 10-panel
- _____ Breath Alcohol

**Collection Facility:**

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<tr>
<th>Location</th>
<th>Address</th>
<th>Phone</th>
<th>Cost</th>
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<tbody>
<tr>
<td><strong>Idaho Falls</strong></td>
<td>Legacy Health Partners 203 N. Holmes Idaho Falls, ID 83401 (208) 522-2591</td>
<td>(208) 522-2591</td>
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<tr>
<td><strong>Blackfoot</strong></td>
<td>Ellis Chiropractic 512 W. Judicial Blackfoot, ID 83221 (208) 782-9793</td>
<td>(208) 782-9793</td>
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<tr>
<td><strong>Twin Falls</strong></td>
<td>Canyon Springs Chiropractic 2167 Village Park Ave. #100 Twin Falls, ID 83301 (208) 737-1430</td>
<td>(208) 737-1430</td>
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<tr>
<td><strong>Rexburg</strong></td>
<td>Orchard Chiropractic 160 E. Valley River Drive #3 Rexburg, ID 83440 (208) 656-8883</td>
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**Other Collection Facilities:**

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<tr>
<td><strong>Meridian</strong></td>
<td>Unity Health Center 745 South Progress Ave Meridian, ID 83401 (208) 895-6729</td>
<td>(208) 895-6729</td>
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<tr>
<td><strong>Pocatello</strong></td>
<td>ISU Student Health Center Pocatello, ID 83209 (208) 282-2330</td>
<td>(208) 282-2330</td>
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<tr>
<td><strong>Pocatello</strong></td>
<td>Portneuf Medical Center Work-Med 500 So. 11th Ave. #500 Pocatello, ID 83201 (208) 239-1940</td>
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**STUDENT:** By signing below you are requesting that the testing facility and/or Idaho Work Care release your results to Idaho State University College of Technology Health Occupations Department. This information will be used to determine your practicum eligibility. These results will be protected, and will only be shared with parties with an educational need to know as allowed by FERPA. By signing below, you agree to allow testing facility and/or Idaho Workcare to release this personal health information.

Student Signature: __________________________________________ Date: ____________________

**All Testing Sites:** If further testing is required, please contact ISU. A clear, readable, copy of this release and the screening results must be sent to ATT: Tashina Hunsaker at fax: 208-282-3743 or email: browtash@isu.edu.

**Idaho Workcare Testing Sites:** ISU will pay $25.00 per student to have one Pre-Practicum, instant, 10-panel drug screen completed per student. A clear, readable, copy of this release and the screening results must be sent to ATT: Tashina Hunsaker at fax: 208-282-3743 or email: browtash@isu.edu.

Collector Printed Name: __________________________ Signature: __________________________

Date result sent to ISU: _______ Time Sent to ISU: _____ Method Used (circle one) FAX/EMAIL/STUDENT