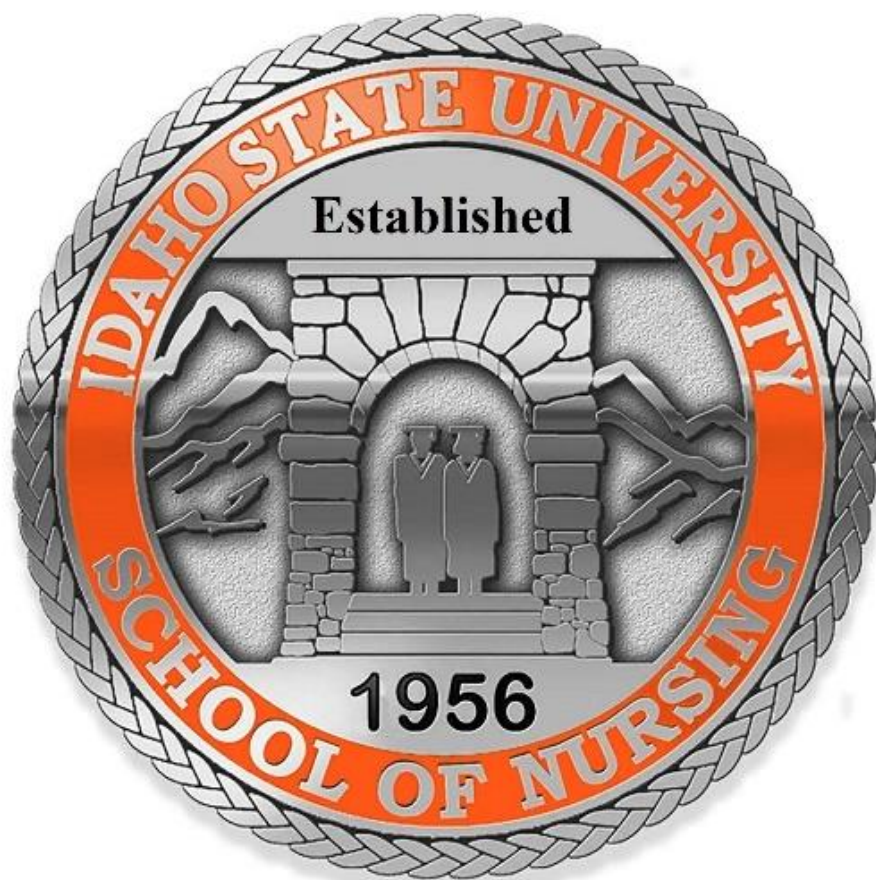


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# UNDERGRADUATE STUDENT HANDBOOK 2022-2023



IDAHO STATE UNIVERSITY  
SCHOOL OF NURSING

UNDERGRADUATE NURSING STUDENT HANDBOOK  
TABLE OF CONTENTS

<b>Undergraduate Program Overview</b>	5
Traditional Program	5
Accelerated Program	5
BS Completion Program	6
Mission of University	6
School of Nursing Vision	6
School of Nursing Mission Statement	6
School of Nursing Philosophy	6
Incivility in Academia	7
 <b>Undergraduate Program Outcomes</b>	 8
 <b>Core Attributes</b>	 8-11
Critical Thinking	8
Leadership	9
Technological Competence	9
Effective Communication	9
Population Based Health	9
Professional Behavior	10
Clinical Practice	11
 <b>Aggregate Level Outcomes</b>	 11-15
 <b>Progression of Students in the Undergraduate Nursing Program</b>	 16-20
Minimum Grade for Courses	16
Grading Scale	16
Incomplete Grade	16
Withdrawal/Dismissal Issues	16
Academic Dismissal	16
Violation of Code of Professional Conduct Dismissal	17
Personal Withdrawal	17
Military Withdrawal	17
Application Process for Readmission	17
Readmission Criteria	17
Academic Dismissal	17
Violation of Code of Professional Conduct Dismissal	18
Personal Withdrawal	18
Military Withdrawal	18
Process for Readmission	18
Waiver of Course and/or Deviation from Published Curriculum	19

Independent Study Courses	20
Plan of Study and Graduation Review	20
<b>Student Responsibilities in the ISU School of Nursing</b>	<b>21-25</b>
Contact Information	21
Access to Computer and Internet	21
Student Review of Personal Permanent File	21
Malpractice Insurance	21
Nursing Lab Courses	21
Standards of Confidentiality	21
Affiliating Agencies	22
Transportation to Clinical Agencies	22
Dress Code	22
Name Badges	24
Faculty Supervision of Students in Nursing Lab Course during Off-Hours	24
Preceptor Learning Environments	25
Writing Criteria for School of Nursing	25
<b>Code of Professional Conduct</b>	<b>25-32</b>
Unprofessional Behavior	26
Level I and II Infractions	26
Consequences of Unprofessional Behavior	27
Sexual Misconduct/Harassment in External Lab Site	31
<b>Resolution of Student Issues</b>	<b>32-34</b>
<b>Academic Dishonesty</b>	<b>34-36</b>
Consequences for Academic Dishonesty at the SON Level	35
Consequences for Academic Dishonesty at the Division Level	35
Consequences for Academic Dishonesty at the University Level	36
Restitution of Scholarship Funds	36
<b>Faculty Advisors for Students</b>	<b>36</b>
Student Advising	36
Faculty Class Advisor	37
<b>Student Organizations</b>	<b>37-39</b>
ISU Student Nurses Association	37
Class Representatives – Traditional Program	38
Class Officers – Accelerated Program	39
Meetings	39
<b>Student Loan and Scholarship Programs</b>	<b>39</b>
Financial Aid	39
Scholarship Opportunities	40

<b>Health Status Requirements</b>	40-45
Health Evaluation	40
Communicable Disease	41
Tuberculosis (TB) Screening	41
Immunization Status	41
<b>Safety and Protection Assurances</b>	45-53
Criminal Background Checks	45
Cardio Pulmonary Resuscitation (CPR)	46
Effective Communication	46
Bloodborne Pathogen Exposure Control	47
<b>Licensure Examination</b>	53
National Council of Licensure Examination - NCLEX-RN Preparation	53
<b>Idaho State University Resources</b>	54
<b>References</b>	55
<b>Appendices</b>	56-79
Appendix A Incomplete Coursework	56
Appendix B School of Nursing Course Petition	57
Appendix C University Student Petition	57
Appendix D Independent Study Contract	58
Appendix E Confidentiality Agreement	59
Appendix F Code of Professional Conduct	60
Appendix G Written Record of Student Violation of Code of Professional Conduct	61
Appendix H Bloodborne Pathogen Exposure Control Forms	62-64
Appendix I Declination Form for Seasonal Influenza Vaccine	66
Appendix J Confidentiality Understanding and Consent and Release for Simulation Experiences	67-68
Appendix K Annual Follow-up Tuberculosis Health Questionnaire for Previous Positive Skin Test	69
Appendix L SON Student Drug Testing Policy	70-71
Appendix M Receipt of UG Student Handbook	72
Appendix N SON Formal Complaint Policy	73-75
Appendix O St. Luke's Policy on Covid-19	76-77
Appendix P Aerosol Generating Procedures	78-79

## IDAHO STATE UNIVERSITY SCHOOL OF NURSING

All students enrolled in the School of Nursing (SON) are subject to the policies and procedures of Idaho State University (ISU). Students are responsible to review the ISU Undergraduate Catalog and the ISU Undergraduate Student Handbook. These documents are available online. The Undergraduate Nursing Student Handbook is an official communication of the policies and procedures for the School of Nursing.

### **Undergraduate Program Overview**

The Bachelor of Science (BS) with a Major in Nursing degree is a critical first step for a career in professional nursing. The American Association of Colleges of Nursing (AACN), the national voice for baccalaureate and graduate nursing programs, recognizes the baccalaureate degree as the minimum educational requirement for a professional nursing practice. Nurse executives, federal agencies, the military, leading nursing organizations, health care foundations, community hospitals, public health agencies and minority nurse advocacy groups all recognize the unique value that baccalaureate-prepared nurses bring to the practice setting. A nurse with a baccalaureate degree is well-prepared to meet the demands placed on professional nurses in today's society. Baccalaureate prepared nurses from Idaho State University are recognized for their skills in communication, critical thinking, professionalism, leadership, and health promotion. As graduates of the Idaho State University School of Nursing, graduates are fully prepared to practice across a variety of inpatient, outpatient and community settings. The Idaho State University School of Nursing offers three undergraduate degree options which include the Traditional baccalaureate program, the Accelerated program, and the BS completion program.

#### **Traditional Baccalaureate Program**

The Traditional Baccalaureate Degree is well-suited to students with no prior nursing experience who are seeking their first degree in nursing. The Traditional program provides learning opportunities for undergraduate students in a variety of classroom and clinical settings to prepare students to take the National Council Licensure Examination Registered Nurse (NCLEX-RN) to secure licensure as a professional nurse. Earning a Baccalaureate degree (BS) with a major in Nursing from Idaho State University requires students to earn 120 credits which are completed over a minimum of four years. Students take general education and nursing prerequisite courses their first two years at the university. Then students must apply and be accepted into the baccalaureate nursing program to complete their program of study.

#### **Accelerated Program**

The ISU-Meridian Accelerated Nursing undergraduate degree is offered to individuals who have a bachelor's degree in another discipline and wish to make a career change. This program is three semesters in length and admits students every summer semester. The Accelerated program provides learning opportunities for undergraduate students in a variety of classroom and clinical settings to prepare students to take the National Council Licensure Examination Registered Nurse (NCLEX-RN) to secure licensure as a professional nurse.

### **Bachelor of Science (BS) Completion Program**

The BS Completion Program for Associate Degree Registered Nurses is available for registered nurses who want to continue their education to obtain a baccalaureate degree. The BS Completion Program offers unique opportunities for associate degree nurses with expansive knowledge and skills to function at the baccalaureate degree level. Each student must earn a minimum of 120 credits to graduate from Idaho State University. An individualized program of study is developed for each student when they are accepted to the BS Completion Program.

### **Mission of University**

<http://www.isu.edu/acadaff/strategicplan/index.shtml>

### **School of Nursing Vision**

To be an internationally renowned school of nursing sought out by those who are committed to lifelong inquiry for improving the health of diverse populations.

### **School of Nursing Mission Statement**

To prepare caring, exemplary nurse leaders who integrate education, service, and scholarship, through practice and research, to enhance the quality of life for rural and diverse populations.

### **School of Nursing Philosophy**

The faculty in the School of Nursing subscribe to a common philosophy about human beings, nursing, and nursing education that encompasses both the undergraduate and graduate programs. Faculty strives to be leaders and visionaries in their role as nurse educators, and advocates for consumers of health care, and health professionals. Humans are dynamic, holistic, and multidimensional. They have intrinsic worth and needs which are uniquely experienced and expressed within the totality of their environment. The manner in which an individual's needs are met influences the individuals', families', and community's growth and development throughout the life cycle. Humans have the right and the responsibility for their health and well-being. Moreover, they have the right to access basic health services for promotion and maintenance of a wellness state, and treatment of acute or chronic illness. To this end, the faculty recognizes a responsibility to sanction access for health care through educational, leadership, political, and public service activities.

Education is a community responsibility shared by recipients and providers of health care, students, and faculty. The faculty is committed to creativity in the learning process and continuous quality improvement in curriculum and program development. Faculty facilitates the educative process, promotes an environment for effective application of nursing knowledge, stimulates critical thinking, and role model professionalism. As learning is a lifelong process, students are active participants in their education and are accountable for developing personal and professional knowledge. Professional nursing is educative, facilitative, and caring. Professional nursing practice is grounded in sound scientific and humanistic knowledge formed from a complex and diverse field of study. Furthermore, nursing practice is a collaborative endeavor, which promotes health and wellness in a variety of ways and settings. Nurses administer healing arts; assist the terminally ill to die with dignity and physical, emotional, and

psychological comfort; and support families through normative and tragic transitions. Professional nurses use decision-making, teaching learning, research, therapeutic communication, problem solving, and critical thinking processes in the provision of services. Utilization of nursing knowledge is the major focus in the undergraduate curriculum in the development of beginning level practitioners.

The undergraduate program prepares graduates to meet the present and emergent public health concerns at local, regional, and global levels. Throughout the development of the professional role, students learn to view the recipients of nursing care as individuals, families, groups, or communities within cultural and environmental contexts. The population distribution and geographical nature of Idaho mandates that graduates be able to practice competently in urban, rural and frontier nursing settings.

Graduate education is built upon undergraduate education. Students are prepared to assume advance practice roles by developing nursing knowledge through research, theory, and practice. At the graduate level, faculty and students contribute toward the application and elaboration of nursing theories to describe, explain, predict and understand nursing phenomena. Graduate education facilitates learning environments where students can construct their own knowledge integration at an advanced level. Advanced practice nurses develop broad based knowledge and experience to facilitate or deliver personalized, holistic health care to clients over the lifespan in a variety of settings with emphasis on rural practice.

### **Incivility in Academia**

Included in our program is the need to maintain a civil mannerism. At the ISU SON, our goal is to assist and provide an atmosphere that fosters civility and a desire for education. Our expectation is that each participant, including faculty, students, and staff will radiate acceptance of all diverse populations, in every setting. Civil behavior is respectful, communicative, visionary, and a progression to a common goal. Faculty and students will maintain high level of civility and create an atmosphere conducive to higher levels of critical thinking, scholarly advancement, and compassion.

Ways students can maintain civility are:

- 1) Respect all individuals;
- 2) Courtesy and promote "Goodwill";
- 3) Include everyone in activities and utilize inter-professional collaborative approaches;
- 4) Communicate;
- 5) Establish a sense of humility and fairness in activities;
- 6) Strive to achieve high-quality goals for community, university, class, and self;
- 7) Try not to internalize when faced with incivility; forgive, and move on.

### **Inappropriate behaviors may include:**

Sleeping in class	Challenging faculty in class settings
Leaving class early	Rude comments
Improper use of cellphones	Engaging in conversations while instructor is speaking
Threatening activity	Unprepared for class
Dominating class	Demonstrating bored or apathetic attitudes

## Undergraduate Program Outcomes

Completion of the undergraduate program provides the graduate with the abilities to:

1. Evaluate critical thinking skills based upon nursing knowledge integration, the sciences and the humanities, in planning direct and indirect care for diverse populations in rural or urban settings.
2. Develop individual traits and personal power to interact constructively with clients, families and communities.
3. Evaluate the broad range of technology requirements.
4. Create effective communication with clients, families, communities and other health care providers using verbal, non-verbal, electronic and/or written modalities.
5. Evaluate the principles of population health needs.
6. Value behaviors congruent with current standards of professional practice, and promote the nursing profession.
7. Appraise basic nursing science information and develop expertise in the comprehensive care of clients, families, and communities.

## Core Attributes

The faculty support nursing education that assures the development of knowledge, skills, and judgment. This is accomplished via classroom and online learning opportunities, computerized enhanced simulation and direct client care experiences and community-based screening and educational events. The nursing profession demands that nurses have knowledge, skills and judgment to be able to work collaboratively as part of an interdisciplinary team which includes the client, family, community, and other health care professionals. Baccalaureate prepared nurses from ISU are recognized for their skills in critical thinking, population health, leadership, professionalism, communication, clinical practice, and technical competence. Graduates are fully prepared to practice across a variety of inpatient, outpatient and community settings. Students are expected to **actively** participate in a structured program of learning focused on developing affective, behavioral, cognitive and psychomotor skills to assure safe care for clients and community.

Seven core attributes have been developed to guide each student to successful completion of the program. These attributes include:

1. Critical Thinking
2. Leadership
3. Technological Competence
4. Effective Communication
5. Population Based Health
6. Professional Behavior
7. Clinical Practice

**Critical thinking** is the use of skills and abilities to make decisions based on the process of actively and skillfully conceptualizing, applying, analyzing, synthesizing, or evaluating to solve problems. Critical Thinking involves gathering data by observation, experience, reflection, reasoning or communication as a guide to belief or action. In nursing, critical thinking is used to solve problems by incorporating evidence-based practice and research findings in evaluating effective strategies for the delivery of quality care (Scriven and Paul, 1987).



The key concepts essential for the development of critical thinking include inquiry, analysis, critical and creative thinking; methods for evaluating health resource literature; evidence-based practice; nursing research process and ethical conduct in research; knowledge integration with integration of knowledge and practice; and ability to problem solve and make decisions.

**Leadership** is the ability to use individual traits and personal power to interact constructively with clients, families and communities; to guide interdisciplinary groups to solve healthcare problems; and to build relationships and work with partners to empower others to set and achieve realistic goals. Inherent to leadership is the notion that the process requires adaptation along the way as environmental changes occur and new knowledge emerges.

The key concepts essential for development of leadership abilities include understanding of health care finance; the ability to create an environment of inclusion, teamwork, inter-professional understanding and interdisciplinary collaboration; health care policy; regulatory issues; legal issues; quality improvement with understanding of workflow and process improvement; safety and systems analysis.

**Technological competence** includes the understanding of a broad range of technology requirements which are needed for nurses in today's complex society. These technologies encompass both advances in health care science and health information technology which will result in increased client care options and a greater demand for management of health care information.

The key concepts essential for the development of technological competence include emergent computer, virtual and medical technologies and information technology.

**Effective communication** is the ability to exchange information between individuals with the use of verbal, non-verbal, written and electronic communication strategies. Use of effective communication strategies enable students to facilitate professional and therapeutic relationships with peers, faculty, staff, clients, families, communities, and other health care professionals. Confirmation of effective communication involves demonstration of understanding through verbal, non-verbal, written and electronic responses by the recipient(s).

The key concepts essential for the development of effective communication include advocacy, client education, collaboration, information literacy, human interface and health literacy.

**Population based health** encompasses several broad categories. The population health needs include the ability to develop partnerships to work effectively to provide health promotion, risk-reduction and disease prevention education, screening and surveillance services for clients, families, communities and other health care professionals. The goal of health promotion is to assist individuals, families and communities to achieve optimal levels of health and well-being.

The key concepts essential for the promotion of the health of individuals and populations include health promotion, risk reduction and disease prevention with interventions appropriate to primary, secondary and tertiary levels of health; community-based care; families; gerontology; health disparities; mental health and care of individuals with addictions; poverty; underserved populations; end-of-life issues; nature of a global society; human growth and development; complementary and alternative therapies;

cultural assessment awareness; and sensitivity; inter-professional and community collaboration; and prevention (primary, secondary, and tertiary).

**Professional behavior** includes a broad range of intellectual and emotional skills and abilities which allow the student to fully engage and experience the expectations of professional nursing practice. Students will demonstrate professional behaviors in all settings throughout the nursing program. The American Nurses Association Standards of Practice have been used to develop the ISU School of Nursing standards for professional behavior.

The student will:

1. Accept responsibility for one's own actions and attitudes.
2. Demonstrate the ability to develop and maintain therapeutic relationships and appropriate personal boundaries.
3. Demonstrate a respectful, sensitive, and non-judgmental manner when communicating with others. whether in verbal, nonverbal, written, or electronic formats. In this policy, 'others' refers to peers, faculty, clients, families and facility and school staff.
4. Provide prior notification to appropriate faculty when he/she is unable to meet commitments or requirements, detailing how and when he/she will make up requirements.
5. Participate in classroom and lab activities as scheduled throughout the nursing program. Reports for scheduled activities on time.
6. Complete assignments and tests as required and scheduled.
7. Demonstrate professional appearance and professional presentation in classroom and lab settings and activities directly related to the ISU School of Nursing.
8. Demonstrate personal and professional ethics, honesty and integrity.
9. Demonstrate the ability to use good judgment in all decision making.
10. Demonstrate accountability in preparation for classroom and lab activities.
11. Respect others during classroom and lab activities (i.e., no talking while others are talking, cell phones are silenced, and no inappropriate use of electronic devices.
12. Demonstrate respect and politeness to all individuals regardless of culture, ethnicity, religion, work experience, gender, age and sexual orientation.
13. Maintain Standards of Confidentiality as explained later in the handbook.
14. Actively participate as a team member.
15. In regard to nursing lab courses, the student will:
  - a. Notify facility and instructor prior to an absence, tardiness or early departure from the course. Exception may be made in cases of emergency.
  - b. Demonstrate preparedness for the courses to ensure that safe and quality client care is provided.
  - c. Demonstrate professional appearance and presentation per the dress code.
  - d. Report unethical, harmful or unprofessional behavior(s) of other health care persons which affect client welfare.

The key concepts essential for the development of professional behaviors include caring, ethical reasoning/values, genetics and genomics, service, social justice, and a commitment to lifelong excellence.

**Clinical practice** is the ability to learn basic nursing science information; demonstrate competence in the care of clients, families, and communities; provide comprehensive health assessment for clients and communities in all settings and interpret significant assessment findings; and share this information verbally and in writing.

Each student must meet the objectives and competencies in the following areas in order to be admitted and continue in the nursing program:

1. Must be able to make visual observations of patient's status, detect unsafe environmental conditions, and possess visual acuity of near clarity of vision at 20 inches or less and far clarity of vision at 20 feet or more.
2. Hear spoken verbal communications from others and detect sounds used for patient assessment such as breath sounds, blood pressure, apical pulse, and other sounds which would indicate changes in the patient's physiological status.
3. Utilize clear, effective speech when communicating with patients, families and health care team.
4. Possess the ability to sufficiently access patient pulses, monitor patient skin temperature, assess for edema and other important signs of changes in patient's physiological status.
5. Detect odors which indicate changes in the patient's physiological status and be able to perceive odors which indicate unsafe environmental conditions, i.e., to be able to smell the presence of an infection.
6. Possess full manual dexterity of upper extremities, including neck and shoulders and possess unrestricted movement of lower extremities, back and hips.
7. Lift and/or support at least 50 pounds to safely transfer, ambulate, and reposition patient.
8. Adhere to the policy and procedures or expectations of the clinical facilities that have affiliation agreements with the School of Nursing.

If a student should present with any limitation in the above areas, each case will be evaluated on an individual basis by the undergraduate nursing faculty. If possible, reasonable accommodations will be made.

The key concepts essential for the development of clinical practice skills include the ability to observe and understand interactions needed for the provision of exceptional care.

The core attributes identified by the ISU School of Nursing were developed using information from the American Nurses Association (2004), the Essentials of Baccalaureate Education for Professional Practice (2008), and the University of Washington, School of Nursing (2008).

## **Aggregate Level Outcomes**

### **Expectations for ISU Undergraduate Nursing Programs**

Educational core attributes are based on The Essentials of Baccalaureate Education (2008). The knowledge, skills, and attitudes that students need to develop in order to achieve program outcomes are defined as terminal level outcomes using Bloom's Taxonomy (2005): Remembering, Understanding, Applying, Analyzing, Evaluating, and Creating, and Benner (2001, 2010) as applied to the novice, advanced beginner and competent student nurse.

#### Level III Outcomes

The terminal outcomes expected for students upon graduation.

Level II Outcomes

The outcomes expected for students in their final semesters of the program.

Level I Outcomes

The outcomes expected for students in the first semesters of the program.

Specific outcomes for each course may be at a higher level than the Level outcome if the course information warrants a higher-level expectation.

Core Attributes	Essentials of Baccalaureate Education (2008)	Terminal Outcomes Based upon the Core Attributes
<p><b>Critical thinking</b> is the use of skills and abilities to make decisions based on the identification of measurements, reason, analysis, integration and synthesis of nursing solutions, and to solve problems by incorporating evidence-based practice and research findings in evaluating effective strategies for the delivery of quality care.</p> <p>Key concepts essential for developing critical thinking include inquiry, analysis, critical and creative thinking; methods for evaluating health resource literature; evidence-based practice; nursing research process and ethical conduct in research; knowledge integration with integration of knowledge and practice; and ability to problem solve and make decisions.</p>	<p>Essential I: Liberal Education for Baccalaureate Generalist Nursing Education</p> <p>Essential III: Scholarship for Evidence Based Practice</p>	<p>Level III Outcome Evaluate critical thinking skills based upon nursing knowledge integration, the sciences and the humanities, in planning direct or indirect care for diverse populations in rural or urban settings.</p> <p>Level II Outcome Analyze critical thinking for decision making in self-assessment, in the provision of client care, and in system analysis.</p> <p>Level I Outcome Understand beginning concepts of critical thinking skills.</p>
<p><b>Leadership</b> is the ability to use individual traits and personal power to interact constructively with clients, families and communities; to guide interdisciplinary groups to solve healthcare problems; and to build relationships and work with partners to empower others to set and achieve realistic goals. Inherent to leadership is the</p>	<p>Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety</p> <p>Essential V: Healthcare Policy, Finance, and Regulatory Environments</p>	<p>Level III Outcome Develop individual traits and personal power to interact constructively with clients, families and communities.</p> <p>Level II Outcome Analyze individual traits and personal power to interact constructively with clients, families and communities.</p>

<p>notion that the process requires adaptation along the way as environmental changes occur and new knowledge emerges.</p> <p>Key concepts essential for developing leadership abilities include understanding of health care finance; the ability to create an environment of inclusion, teamwork, inter-professional understanding and interdisciplinary collaboration; health care policy; regulatory issues; legal issues; quality improvement with understanding of workflow and process improvement; safety and systems analysis.</p>		<p>Level I Outcome Understand the ability to use individual traits and personal power to interact constructively with clients, families and communities.</p>
<p><b>Technological competence</b> includes understanding of a broad range of technology requirements that are needed for nurses in today's complex society. This technology encompasses both advances in health care science and health information technology that will result in increased client care options and a greater demand for management of health care information.</p> <p>Key concepts essential for developing technological competence include emergent technologies and information technology.</p>	<p>Essential IV: Information Management and Application of Patient Care Technology</p> <p>Essential I: Liberal Education for Baccalaureate Generalist Nursing Practice</p>	<p>Level III Outcome Evaluate the broad range of technology requirements.</p> <p>Level II Outcome Analyze the broad range of technology requirements.</p> <p>Level I Outcome Understand the broad range of technology requirements.</p>
<p><b>Effective communication</b> is the ability to use verbal, non-verbal, electronic, and written communication strategies to enable student to facilitate professional and therapeutic relationships with peers, faculty, staff, clients, families,</p>	<p>Essential VI: Inter-professional Communication and Collaboration for Improving Patient Health Outcomes</p>	<p>Level III Outcome Create effective communication with clients, families and communities and other health care providers using verbal, non-verbal, electronic and/or written modalities.</p> <p>Level II Outcome</p>

<p>communities, and other health care professionals.</p> <p>Key concepts essential to developing effective communication include advocacy, client education, collaboration, information literacy, human interface and health literacy.</p>		<p>Analyze effective communication with clients, aggregates and other health care providers using verbal, non-verbal, electronic and/or written modalities.</p> <p>Level I Outcome Understand concepts of effective communication with clients, aggregates and other health care providers using verbal, non-verbal, electronic and/or written modalities.</p>
<p><b>Population-based health</b> encompasses several broad categories and includes the ability to develop partnerships to work effectively to provide health promotion, risk-reduction and disease prevention education, screening, and surveillance services for clients, families, communities and other health care professionals. The goal of health promotion is to assist individuals, families and communities to achieve optimal levels of health and well-being.</p> <p>Key concepts essential for promoting the health of individuals and populations include rural health care; health promotion, risk reduction and disease prevention with interventions appropriate to primary, secondary and tertiary levels of health; community based care; cultural dimensions of practice, intercultural competence, and cultural assessment, awareness, and sensitivity; nature of the global society; gerontology; health disparities; mental health and care of individuals with</p>	<p>Essential VII: Clinical Prevention and Population Health</p>	<p>Level III Outcome Evaluate the principles of population health needs.</p> <p>Level II Outcome Apply the principles of population health needs.</p> <p>Level I Outcome Understand the principles of population health needs.</p>

<p>addictions; poverty; underserved populations; end-of-life issues; human growth and development; complementary and alternative medicine; and inter-professional and community collaboration.</p>		
<p><b>Professional behavior</b> includes a broad range of intellectual and emotional skills and abilities that allow the student to fully engage and experience the expectations of professional nursing practice.</p> <p>Key concepts essential for the development of professional behaviors include caring, ethical reasoning, genetics and genomics, service, social justice, values, and a commitment to lifelong excellence.</p>	<p>Essential VIII: Professionalism and Professional Values</p>	<p>Level III Outcome Value behaviors that are congruent with the current standards of practice, and promote the nursing profession.</p> <p>Level II Outcome Demonstrate behaviors that are congruent with the current standards of practice, and promote the nursing profession.</p> <p>Level I Outcome Understand the behaviors that are congruent with the current standards of practice, and promote the nursing profession.</p>
<p><b>Clinical practice</b> is the ability to learn basic nursing science information; demonstrate competence in the care of clients, families, and communities; provide comprehensive health assessment for clients and communities in all settings and interpret significant assessment findings; and share this information verbally and in writing.</p> <p>Key concepts essential for developing clinical practice skills include the ability to observe and understand interactions needed for the provision of exceptional care.</p>	<p>Essential IX: Baccalaureate Generalist Nursing Practice</p>	<p>Level III Outcome Appraise basic nursing science information and develop expertise in the comprehensive care of clients, families, and communities.</p> <p>Level II Outcome Apply basic nursing science information and demonstrate competence in the comprehensive care of clients, families, and communities.</p> <p>Level I Outcome Understand basic nursing science information and identify competence in the comprehensive care of clients, families, and communities.</p>

## Progression of Students in the Undergraduate Nursing Program

The student takes responsibility for progression in and successful completion of the nursing program. The student takes responsibility for earning the grade he/she desires in each course. He/she accomplishes this by successfully completing the requirements of each course.

### Minimum Grade for Courses

1. A minimum grade of “C” is required in all nursing and required nursing pre-requisite and co-requisite courses.
2. A minimum grade of “C” (75.0) is required in all nursing theory, laboratory and clinical courses.
3. A student who has not achieved a course grade of “C” and a cumulative grade point average (GPA) of 2.0 each semester cannot advance in the nursing program.
4. **Late assignments will be assessed in value by instructors. Please see individual course syllabus.**

### Grading Scale for the Undergraduate Nursing Program

A	93 - 100
A-	90 - 92.9
B+	87 - 89.9
B	83 - 86.9
B-	80 - 82.9
C+	77 - 79.9
<b>C</b>	<b>75 - 76.9</b>
C-	70 - 74.9 this range (C-) is NOT a passing grade
D+	66 - 69.9
D	63 - 65.9
F	62 and below

### Incomplete Grade (I)

The resolution of an incomplete grade is the responsibility of the faculty member who assigns an incomplete for a course grade. The Incomplete Coursework Form must be completed by the faculty whenever arrangements are made for the student to take an incomplete grade in any nursing course (Appendix A). **Please note that depending on the sequence of classes in the program, delay of advancement may occur if the course is needed to move forward.**

Refer to University policy regarding incomplete grade in Undergraduate Catalog:

<http://coursecat.isu.edu/undergraduate/academicinformation/creditandgradingpolicies/>

### Withdrawal/Dismissal Issues

#### Academic Dismissal

Students may be dismissed from the nursing program for academic reasons which include but are not limited to:

1. Students who earn a course grade below a “C” (75.0) in nursing and/or required nursing pre-requisite and co-requisite courses.
2. Students with a cumulative GPA below a “C” (2.0) each semester.



If a student is dismissed from the School of Nursing for academic reasons, an email and/or certified letter will be sent to the student by the designated administrative personnel.

1. The letter will outline the reasons for dismissal and the terms available for readmission to the program, if applicable.
2. The student will be notified that he/she may appeal the dismissal from the School of Nursing. It is recommended that the student meet with his/her faculty advisor to discuss the appeal process for the program.

#### Violation of Code of Professional Conduct Dismissal

See the Code of Professional Conduct Section for details regarding dismissal.

#### Personal Withdrawal

Students may withdraw from the nursing program at any time due to personal needs. Readmission is dependent on space available. The student needs to be in contact with the School of Nursing Advisor or designated administrative faculty in advance of anticipated return to the School of Nursing to evaluate the possibility, process, and status of readmission to the program.

#### Military Withdrawal

Students may withdraw from the nursing program to meet military obligations. The student needs to be in contact with the School of Nursing Advisor or designated administrative faculty in advance of anticipated return to the program to evaluate the process of readmission.

#### **Application Process for Readmission**

All students who withdraw from the School of Nursing Undergraduate Program and want to be readmitted to the program must complete the readmission application. The student needs to be in contact with the School of Nursing Advisor, designated faculty or administrative personnel in advance of anticipated return to the program to evaluate the possibility, process, and status of readmission. Readmission to the Undergraduate Nursing Program will be based on the quality and completeness of the application, cumulative GPA in the Nursing Program and potential for success based on academic record and documented professional conduct in the nursing program. A student can be readmitted to the undergraduate nursing program only one time following an academic or Code of Professional Conduct dismissal.

#### **Note to Advance Through the BSN Program**

**For a student to advance in the BSN program (traditional, accelerated, and BSN Completion) one must pass a course with a 75% or better. Failure to pass a course with 75% or better will result in an academic dismissal from the program and a petition for readmission will need to be submitted at least 3 months after dismissal.**

#### Readmission Criteria

A student who meets readmission criteria must complete a readmission application to the program.

##### Academic Dismissal

To be readmitted,

- Space must be available

- Students can be readmitted only once to the Undergraduate Nursing Program. Students who have been previously readmitted following an academic dismissal will not be considered for a second readmission

#### Violation of Code of Professional Conduct Dismissal

To be readmitted,

- Space must be available
- Consideration and evaluation for readmission will be determined on a case-by-case basis.
- Students can be readmitted only once to the Undergraduate Nursing Program. Students who have been previously readmitted following a Code of Professional Conduct dismissal will not be considered for a second readmission.

#### Personal Withdrawal

To be readmitted,

- Space must be available

#### Military Withdrawal

To be readmitted,

- Student must provide documentation of completion of military obligation that caused withdrawal with application for readmission.
- Space must be available
- The curriculum of the nursing program may have changed from when the student withdrew. The student will be expected to meet the requirements of the current curriculum. Students repeating a theory course must take an independent study (NURS 4491) as a corresponding clinical lab course with requirements determined by clinical faculty. If the student has been absent from the nursing program for more than one year, Admission and Advancement Committee or designated administrative faculty may require the student to remediate previously-completed required courses in order to facilitate successful completion of the program requirements and ensure delivery of safe patient care in subsequent nursing lab courses. Options for remediation may be to retake or audit specific required courses; or take independent study with appropriate faculty for content of specific nursing theory and /or practice.

#### Process for Readmission

If the student meets the criteria for readmission, the application process for readmission is as follows.

1. The student will schedule an appointment to meet with School of Nursing Advisor, designated faculty or administrative personnel to begin completion of a School of Nursing Application for Readmission. This appointment needs to take place at least one semester prior to the semester the student would like to be readmitted.
2. The student must meet with School of Nursing Advisor, designated faculty or administrative personnel for final approval of and signature on the School of Nursing Application for Readmission for submission to the Undergraduate Nursing office.
3. The completed application for readmission will be submitted to the Undergraduate Nursing office of the appropriate program at least 4 months prior to the anticipated

readmission, unless otherwise arranged and documented by the School of Nursing Advisor, designated faculty or administrative personnel.

4. The application will be forwarded to the Admission and Advancement Committee for review. Decision for readmission to the Undergraduate Nursing Program will be based on the quality and completeness of the application, cumulative GPA in the Undergraduate Nursing Program and potential for success based on academic record and documented professional conduct in the nursing program.
5. Recommendation for readmission to the nursing program will be determined by the Admission and Advancement Committee and approved by the Undergraduate Director and/or other designated administrative personnel.
6. The student will be notified of the final decision including specific requirements, including remediation requirements, by the Undergraduate Director of the School of Nursing or designated administrative personnel.

### **Waiver of Course and/or Deviation from Published Curriculum**

Students may petition to substitute courses for existing School of Nursing requirements, to waive existing requirements, or to deviate from the published curriculum. This will be demonstrated with the achievement of equivalent course work, content, and/or test. The Admission and Advancement Committee and/or the Undergraduate Director of the program or designated administrative faculty must approve the petition.

### **For the School of Nursing Departmental Course Petition Form:**

1. The student, with help of an advisor, completes a School of Nursing Undergraduate Program Course Petition (Appendix B).
  - a. The petition to waive/deviate from the published curriculum should be accompanied with supporting course materials:
    - i. Course description and/or course syllabus
    - ii. Evidence of equivalent knowledge
    - iii. Recommendation from nursing advisor
2. Receipt of the signed petition and supporting information is forwarded to Admission and Advancement Committee for review and decision.
3. The Admission and Advancement Committee reviews all Undergraduate School of Nursing petitions and makes determinations about the appropriateness of the student request to waive/deviate from the published curriculum.
4. A copy of the signed approved/disapproved petition will be sent to the student, the Office of Registration and Records, and the original will be placed in the student's permanent file.

### **For the University Undergraduate Student Petition:**

1. The student, with the help of advisor, completes an ISU University Undergraduate petition (Appendix C).
  - a. The petition to waive/deviate from the published curriculum should be accompanied by supporting course materials:
    - i. Course description and/or course syllabus
    - ii. Evidence of equivalent knowledge/experience
    - iii. Recommendation from nursing advisor

2. The signed petition with supporting information is submitted to the Undergraduate office and the petition is given to the advisor.
3. The petition with supporting information is forwarded to the appropriate Department or School within the University for review and recommendation.
4. The petition with supporting materials is forwarded to the Chair of the General Education Requirements Committee if Objective course approval is required.
5. The signed petition with supporting information is forwarded to Admission and Advancement Committee in the School of Nursing for review and decision, if necessary.
6. The signed petition is then forwarded to the Director of the Division of Health Sciences for final approval/disapproval.
7. A copy of the signed approved/disapproved petition will be sent to the student, Office of Registration and Records, and the original petition will be placed in the student permanent folder.

### **Independent Study Courses**

Independent study courses are available to nursing students with permission of the faculty member with whom the student will work. Once permission is provided, the faculty member will make arrangements to open his/her section of NURS 4491 and the student is allowed to register for NURS 4491, Independent Study. Independent Study courses cannot be used for the sole purpose of completing extra clinical hours; however, the objectives and assignments of the course may include clinical hours to complete the final project or meet remediation requirements as described in Readmission Criteria section. The faculty member and student will collaborate to develop objectives and assignments/activities for the Independent Study. If clinical hours are to be completed outside regular school hours, they must be arranged with and covered by faculty prior to the onset of the course. An Independent Study Contract (Appendix D) must be completed and signed by the supervising faculty and the student. The form will be placed in the student folder.

### **Plan of Study and Graduation Review**

Each semester, it is required by the university that the student have the opportunity to meet with his/her faculty advisor from the SON to review the student's individual plan of study to meet ISU and the School of Nursing requirements. Documentation of the advising meeting or declination of meeting or student's failure to respond to notice for advising meeting must be placed in student's file and/or Degree Works by the end of each semester.

Nursing students must refer to the ISU University Catalog regarding graduation requirements. Graduation information is located in the Degree Works account for each student. The graduation clerk at the Registrar's Office should be consulted during the junior year for credit evaluation for graduation. If a student does not successfully complete the requirements for graduation from ISU and the School of Nursing, it will result in non-conferment of the Degree and the student will be unable to graduate and/or apply for National Council Licensure Examination for Registered Nurses (NCLEX-RN).

## **Student Responsibilities in the School of Nursing**

### **Contact Information**

It is the student's responsibility to keep his/her email, phone and street address current and available in the School of Nursing. The student should notify the Administrative Assistant in the School of Nursing whenever there are changes in his/her status and name.

### **Access to Computer and Internet**

It is the student's responsibility to have access to a computer and the Internet. Students are required to routinely check electronic course materials to meet course requirements. It is expected students will have an ISU computer account to complete online coursework and tests.

### **Financial Responsibilities**

The student is responsible for all fees associated with criminal background checks required (by the SON or specific clinical agencies), all required documentation and transportation to attend clinical sites, and any miscellaneous expenses associated with the completion of all studies with the SON.

### **Student Review of Personal Permanent File**

A student has the right to review the materials in his/her file. The School of Nursing requires an appointment be made with the student's advisor and the advisor be present when the file is reviewed. The School must comply within 10 working days of the student's request.

### **Malpractice Insurance**

When in the clinical setting, students are covered under the malpractice insurance provided by the university. Client and student safety are the primary concerns in all learning environments. Students are expected to behave in a mature and clinically competent manner in all settings.

### **Nursing Lab Courses**

There are a significant number of hours required to complete lab courses in the nursing program. There are three hours a week of actual time in nursing lab courses for every credit hour. For example, a one credit lab course equals 3 clinical lab hours per week and a two credit lab course equals 6 clinical lab hours per week. Students are expected to be available to attend all assigned lab activities as directed by the clinical faculty.

### **Standards of Confidentiality**

Due to the personal nature of nursing and nursing education, students are bound to strict confidentiality expectations under clinical circumstances. Confidentiality is defined as private or secret; information confined to particular persons or groups or providing privacy. Violation of the standards of confidentiality can put the School of Nursing and Idaho State University at a significant legal risk; therefore, consequences can include dismissal from the nursing program. Students are bound to the standards of confidentiality for the following:

1. All information relating to a client's health and/or personal status per the Health Information Privacy and Accountability Act (HIPAA) is confidential. All nursing students will complete HIPAA training prior to their first clinical contact with client or

clinical agencies and annually as required by ISU Division of Health Sciences (see Safety and Protection Assurances). Also, students may need to have additional training as part of the orientation to clinical sites. Students are required to sign a Confidentiality Agreement Acceptance of Responsibility for Access to Protected Information (Appendix E) prior to beginning the nursing program. Violation of this policy could lead to dismissal from the School of Nursing.

2. Inclusive in the standards of confidentiality regarding HIPAA is the understanding of students **not to** use electronic or online communication systems to share any information relating to a client's health and/or personal status.
3. All observations made during the performance of other participants in the School of Nursing's simulation, learning and testing environments is confidential. All events, procedures, and information are confidential at all times during the simulation, learning, and testing and after it has ended, including patient history information obtained prior to the actual simulation experience, as well as information obtained and used in the pre-briefing sessions. Information about a simulation, content, learning, or testing process will not be shared with others. The consequences of violating the confidentiality agreement are a minimum of a Level II and potentially a Level I infraction depending on the circumstances and severity of the violation. Students are required to sign a Confidentiality Understanding and Consent and Release for Simulation Experiences (Appendix J) at the beginning of the nursing program, prior to simulation experiences. Violation of this policy could lead to dismissal from the School of Nursing.

### **Affiliating Agencies**

In all agencies where students have learning opportunities, the School of Nursing has an affiliation agreement which allows students and faculty to participate in all aspects of care to the clients. Students may not participate in learning experiences in facilities in which there is no affiliation agreement. Students must comply with facility-specific safety and education requirements at all times. The facility requirements will be addressed in each course syllabus.

Clinical learning experiences are provided in a variety of health care settings through the cooperation and support of administration and staff in these agencies. The administration and staff who work in these facilities are valued and appreciated for their support of ISU students. Please thank the administrators and staff who assist with clinical learning activities.

### **Transportation to Clinical Agencies**

Students are responsible for their own transportation to and from clinical agencies throughout the region. Students should expect to travel anywhere within a 200-mile radius of the ISU campuses in Pocatello and Meridian. Overnight stays away from home may be necessary.

### **Dress Code**

The dress code is required to ensure the safety and control of infection for both students and clients. ISU nursing students will adhere to an appropriately modest and professional dress code in all clinical settings. Examples of immodest attire include, but are not limited to, exposed midriffs and visible undergarments.

Clinical faculty will make the final judgment on the appropriateness of student attire and of the corrective action for dress code infractions. Corrective action may include dismissal from the clinical unit and/or other forms of disciplinary action. Dress requirements in clinical settings may vary. Always verify dress code mandates with the faculty responsible for each clinical site prior to making any agency and/or client contact.

Whenever students are visiting a clinical agency for purposes directly related to the nursing program or attending the learning lab, they must follow these dress code standards:

1. Appropriate identification (name/picture badges) will be worn at all times.
2. School uniforms (Caribbean Blue scrubs) are appropriate for most clinical settings.
3. The ISU School of Nursing logo patch **MUST** be worn on the left sleeve of the scrub top and white lab coat, unless instructed by administrative faculty the patch is to be worn in different place on uniform.
4. Traditional students- A white lab coat with the ISU School of Nursing logo patch worn on the left sleeve may be worn in some settings. Accelerated BSN-students can have a Caribbean blue lab coat.
5. A clean, white, black or Caribbean Blue long-sleeved shirt may be worn under the Caribbean Blue scrub tops.
6. Only clean, solid white or colored, closed-toe shoes, either leather or athletic, will be worn.
7. Socks will be worn.
8. Smart watches and phones are not to be used in clinical while at the School of Nursing. Students are expected to be able to monitor vitals and the Smart watches hinder the access of quick assessments.
9. Denim jeans, sweatshirts/pants, shorts and t-shirts are not acceptable attire in any setting where you are representing the School of Nursing.
10. Hair must be kept clean, neat, conservative in style, good taste, and well groomed. Hair longer than edge of collar must be pinned or pulled back behind ears and off the face to avoid it interfering with performance of procedures. Only neutral colored bands, headbands, hair ties, hair pins, etc. may be used.  
Hair must be of a 'natural hair color,' defined as one that is grown naturally.  
MEN: If not clean shaven, short mustaches, short, cropped beards, and sideburns are to be kept clean and well-trimmed at all times.  
Cultural or religious headdresses, please see your advisor.
11. Fingernails will be short and clean, cut or filed so that the nail does not extend beyond the fingertip, to minimize potential client injury and maximize cleanliness.
  - a. Clear, but not chipped, nail polish is allowed. No artificial nails or tips are allowed.
12. No jewelry will be worn that could potentially injure a client and/or the student and/or compromise any person's safety in any manner.
  - a. Only two small non-dangling, post earrings are acceptable. Only one earring in each ear. No other piercings on the face will be displayed.

13. No visible body piercings will be displayed
14. All visible tattoos must be covered unless the tattoos are on the hands or fingers.
15. Chewing gum is not permitted in any School of Nursing setting.
16. No perfumes, colognes or aftershaves due to allergies.

Students with specific religious or cultural concerns need to address their concerns to their clinical faculty, in writing, prior to client contact.

### **Name Badges**

Each undergraduate student will purchase two badges (see example of name badges below). One badge will have both the first and last name of the student and the other will have only their first name.

1. The badge with the full name is the preferred badge to wear in all clinical settings and in any other setting where the student needs to be identified as an ISU School of Nursing student.
2. The faculty will determine when it is appropriate for the student to wear a badge with their full name or their first name only.
3. The badges can be purchased from the ISU Campus Connection in Pocatello and from appropriate offices in Meridian and Twin Falls.



### **Faculty Supervision of Students in Nursing Lab Courses During Off-Hours**

A faculty member will be “on call” and available to each student who is participating in clinical experiences in a preceptor learning environment. The “on call” faculty member’s responsibility is to be readily available to the preceptor student and to provide immediate advice for student concerns or questions regarding a clinical incident(s). The “on call” faculty member does not cover students in elective courses or students who have general questions regarding a course, assignment or other issues.



The Fall and Spring regular school hours are defined as 8am-5pm, Monday through Friday. Off-hours that need to be covered are 5pm-8am during the weekdays and from 5pm Fridays to 8am Mondays.

Summer regular school hours are defined as 7:30am-4:00pm, Monday through Friday. Off hours that need to be covered are 4:00pm-7:30am during the weekdays and from 4:00pm Friday to 7:30am Monday.

### **Preceptor Learning Environments**

Students in some nursing courses will have the opportunity to work in a preceptor learning environment with an experienced clinical nurse or nurse leader. The faculty is required to make special arrangements to have students participate in a preceptor learning environment.

The following rules apply to all preceptor learning experiences:

1. The School of Nursing must have a current affiliation agreement with the selected agency.
2. Students must have prior authorization from faculty to attend preceptor clinical hours within the agency.
3. Students must be well prepared to actively provide nursing care offered within the agency.
4. Students are expected to complete all clinical hours in required courses during regular school hours.
  - a. If every attempt has been made for the student to complete all clinical hours during regular school hours, yet he/she must complete remaining clinical hours outside regular school hours to meet course requirements:
    - i. The student must have authorization from the faculty of the course prior to working these hours.
    - ii. The faculty must keep a record of where and when preceptor clinical activities will take place.
5. If a student attends clinical hours without prior authorization from his/her faculty member, he/she will be dismissed from the School of Nursing program.

### **Writing Criteria for School of Nursing**

It is expected that students demonstrate the ability to write professionally in APA format. Students will be required to complete professional writing activities in their courses throughout the School of Nursing program. It is recommended that the student utilize the professional writing resources at the ISU Student Success Center if assistance is necessary to successfully complete these activities and writing professional papers.

### **Code of Professional Conduct**

Professional behavior is an essential part of each student's nursing education. The ISU School of Nursing expects each student to maintain professional conduct in both classroom and all clinical lab settings. Unprofessional behaviors that violate the Code of Professional Conduct can result in an academic dismissal.

Students are also required to follow appropriate behaviors as outlined in the ISU Undergraduate Student Handbook and demonstrate professional behaviors noted under Core Attributes in this handbook (pp. 8-11). If a student violates student behavior codes, the faculty will follow School of Nursing and university policies regarding reporting and correcting inappropriate behaviors. Refer to ISU Undergraduate Student Handbook at [www.isu.edu/studenta/handbook.pdf](http://www.isu.edu/studenta/handbook.pdf). Students are expected to read the ISU School of Nursing Code of Professional Conduct each year. A signed statement of understanding (Appendix F) is required of every nursing student during their first semester in the Undergraduate program. The signed statement will be placed in the student's permanent file.

### **Unprofessional Behavior**

There are two types of violations of the Code of Professional Conduct. The first is a **Level I infraction** and the second is a **Level II infraction**.

#### **Level I Infraction**

Level I Infractions include behaviors which have the potential to jeopardize client safety and result in danger and/or harm to clients in any lab setting and behaviors that have the potential to put ISU and/or the SON at legal risk for liability, negligence or malpractice. Such behaviors may result in suspension from the lab course and/or academic dismissal from the nursing program with a first violation.

**Level I Infraction** behaviors include, but are not limited to the following:

1. Demonstrates behaviors that show inappropriate action or impairment in classroom or lab settings. Behaviors may include, but are not limited to the following: excessive, persistent or inappropriate sleepiness, inability or slow to respond to stimuli, excessive or persistent inattentiveness, inappropriate response to questions by the faculty or instructor, excessive or persistent talking or acting without appropriate control, inability to stand or walk without assistance, inability to use arm(s) or hand(s) and impaired judgment.
2. Demonstrates behaviors that may be interpreted by others as sexual harassment.
3. Demonstrates dishonesty in behavior, attitude, and/or communication towards others.
4. Demonstrates communication skills that are ineffective, inappropriate or that recipients (faculty, staff, clients, families, and other health care professionals) consistently cannot understand through either verbal, non-verbal and/or written communication methods (see Effective Communication under Health and Safety Protections of handbook).
5. Demonstrates any act of endangerment.
6. Fails to notify his/her advisor and applicable faculty within ten (10) working days of criminal charges that may affect his/her ability to function in the academic or lab setting (see Criminal Background Check information later in the handbook).
7. Demonstrates acts of omission or commission during the care of clients that result in harm or may result in harm to the client. Examples include, but are not limited to physical abuse, placement of client in hazardous position(s), condition(s) or circumstance, mental or emotional abuse, and more than one medication error\* resulting from failure to implement the "rights" of medication administration and checking the client's allergies. Acts of omission or commission that demonstrate concern for potential harm to the

client(s), such as the student's documented observed performance in clinical setting or lab demonstrates inability to provide appropriate patient care per course criteria/expectations.

8. Demonstrates lack of appropriate preparedness for lab setting(s) and participates in actions that could result in harm to clients.
9. Unauthorized attendance in any lab setting.
10. Violates Standards of Confidentiality as defined in that section earlier in the handbook. Severity of behavior as determined by faculty warrants Level I or Level II Infraction.
11. Demonstrates behaviors identified in ISU Policy and Procedure for Academic Dishonesty [www.isu.edu/studenta/handbook.pdf](http://www.isu.edu/studenta/handbook.pdf)

### **Consequences of Unprofessional Behavior**

It is the goal of the faculty to work with students to improve unprofessional behaviors and/or resolve problems. Disciplinary action should serve as a mechanism to inform students of expected outcomes and collaborate with students to improve unprofessional behaviors. Formal discussion regarding student problems that may be adversely affecting their ability to perform can also be conducted, with suggestions and recommendations for resolution.

### **Level I Infraction**

When a student violates the School of Nursing Code of Professional Conduct by demonstrating unprofessional behavior of a **Level I Infraction** concerning a classroom or lab course, the following actions will take place:

#### **First Violation**

1. Faculty may suspend the student from the nursing lab course assignment(s) until a meeting with the student, involved instructor/faculty and the Undergraduate Director of the School of Nursing or other designated administrative personnel has taken place.
2. The student will provide documentation of a medical evaluation of any behaviors observed by the faculty, preceptor or instructor that shows inappropriate action or impairment in a classroom or lab setting (listed in #1).
3. Faculty will complete the Written Record of Student Violation of the Code of Professional Conduct (Appendix G) of this incident. One copy will be given to the student and the original kept in student's permanent file.
4. The Undergraduate Director of the School of Nursing or designated administrative faculty will evaluate the situation and collaborate with the involved faculty to determine a course of action.
5. Meeting with student will include discussion of the documented violation and a mutually developed plan for improvement and remediation.

#### **Second Violation**

1. Faculty may suspend the student from the nursing lab course assignment(s) until a meeting with the student, involved instructor/faculty and the Undergraduate Director of the School of Nursing or other designated administrative personnel has taken place.
  - a. Faculty will initiate documentation on the Written Record of Student Violation of the Code of Professional Conduct (Appendix G) of this incident.

- b. The Undergraduate Director of the School of Nursing or designated administrative faculty will evaluate the situation and determine a course of action.
  - c. Meeting with student will include discussion of documented violation and consequences of behavior. Documentation of the course of action will be on the Written Record of Student Violation of the Code of Professional Conduct and will be read, discussed and signed by the student and faculty. One copy will be given to the student and the original kept in student's permanent file.
2. A student who violates the Code of Professional Conduct with a second Level I Infraction any time during the nursing program may be dismissed from the ISU School of Nursing.
- a. Explain the incident, including details of how the medication error happened and why.
  - b. What adverse patient outcome(s) did or could have resulted from this incident? Explain how you felt or would have felt if one or more of these adverse outcomes resulted from this error?
  - c. Describe lessons you have learned from this incident and actions you will take to prevent this type of medication error in the future.
  - d. Explain in detail actions you will take to prevent any medication error in the future, both as a nursing student and professional nurse.
1. A copy of the student's medication error documentation will be kept in the student's file.
2. Should the error result in potential or actual endangerment to patient/student, a Level I or II infraction will be issued.

### **Level II Infraction**

Level II Infractions include behaviors which are considered unprofessional. A warning and/or probation will be issued to address those behaviors. [See page 29 and 30 for consequences.](#)

**Level II Infraction** behaviors include, but are not limited to the following:

1. Demonstrates disrespect, insensitivity and/or judgmental manner when dealing with others.
2. Fails to accept accountability for his/her own actions.
3. Demonstrates lack of appropriate preparedness for lab setting, but avoids actions that could result in harm to clients.
4. Violates Standards of Confidentiality as defined in that section earlier in the handbook. Severity of behavior as determined by faculty warrants Level I or Level II Infraction.
5. Does not abide by the dress code for activities directly related to the ISU School of Nursing.
6. Fails to attend nursing lab/clinical courses as directed by faculty and/or fails to provide prior notification to the instructor/faculty and agency of an absence, tardiness, or departure from assigned unit or floor (longer than 5 minutes).
7. Fails to meet School of Nursing health status and/or safety and protection requirements, such as documentation of current immunizations, criminal background checks and CPR certification, per deadlines stated in the handbook or announced during the student's tenure in the program.

8. Fails to complete assignments and/or tests as required/scheduled in a class without prior notification of the instructor/faculty. For example, if the student needs the instructor/faculty to reschedule assignments or tests due to a non-emergent circumstance.
  - a. The instructor/faculty is not required to reschedule nursing lab courses, tests, or assignments for non-emergent circumstances.
  - b. Non-emergent circumstances include, but are not limited to, the following:
    - i. Non-emergent doctor or dental appointments
    - ii. Work or vacation during classroom or lab courses, scheduled tests, or final examination times
    - iii. Special events that interfere or conflict with classroom or lab activities
    - iv. Student arranges preceptor clinical hours in one course after he/she is aware of pre-determined schedule of another required course
    - v. Student experiences fatigue as a result of his/her own actions.

### **Level II Infraction**

When a student violates the SON Code of Professional Conduct by demonstrating unprofessional behavior of a **Level II Infraction** concerning a classroom or lab course, the following actions will take place:

#### **First Violation**

With the first violation of the Code of Professional Conduct, the student will receive both a verbal and written warning of the unacceptable behavior.

1. The involved instructor/faculty will work with student to determine what type of behavior change is expected and within what time period it must occur.
2. Documentation of the warning, expected behavior changes and time frame will be included on the Written Record of Student Violation of the Code of Professional Conduct (Appendix G) and placed in the student's permanent file.
  - a. If the behavior from the first violation does not change within the given time period discussed in the written warning and/or new unacceptable behaviors are noted, the instructor/faculty member will document these behaviors.
    - i. This documentation will be reviewed by the Undergraduate Director of the School of Nursing or other designated administrative personnel or designated administrative person and a course of action will be determined.
    - ii. The written plan will be read, discussed and signed by the student and faculty member.
    - iii. One copy of this violation will be given to the student and the original kept in student's permanent file at the School of Nursing.

#### **Second Violation**

If the student violates the Code of Professional Conduct a second time at any time in the nursing program, he/she will not receive another warning but will be placed on unprofessional conduct probation for the remainder of the nursing program. This probation, expected behavior changes and time frame will be documented on the Written Record of Student Violation of the Code of Professional Conduct. The document will be read, discussed and signed by the student and faculty. A copy will be given to the student and the original kept in the student's permanent file.

1. If the behavior from the second violation notice does not change within the given period of time as discussed in the probation notice, the faculty member has the right to remove the student from the course with further documentation being completed and placed in the student's permanent file at the School of Nursing.
2. The Undergraduate Director of the School of Nursing or designated administrative faculty will evaluate the situation and determine a course of action.
3. Documentation of this action will be kept in the student's permanent file.
4. If the behaviors from the first and second violations are changed by the student per the documented warning or probation, the student may continue in the nursing program. The student will earn removal from an Unprofessional Conduct Probation once he/she successfully passes all of the remaining required nursing courses in the program and does not demonstrate behavior that constitutes a third violation of the Code of Professional Conduct.

### **Third Violation**

If the student violates the Code of Professional Conduct a third time, at any time in the nursing program, he/she will not receive further warnings nor notices of probation but will be removed from the course and his/her case will be evaluated by the Undergraduate Director of the School of Nursing or designated administrative faculty.

1. Dismissal from the nursing program is a possibility with a third violation of the Code of Professional Conduct.
2. Documentation of the course of action will be on the Written Record of Student Violation of the Code of Professional Conduct and will be read, discussed and signed by the student and faculty. A copy will be given to the student and the original kept in the student's permanent file.

### **Simultaneous Level I and Level II Infractions**

If a student demonstrates behaviors that result in simultaneous Level I and Level II Infractions, consequences will depend on the nature and severity of the infractions. The appropriate processes for each infraction will be conducted. Dismissal from the nursing program is a possible consequence.

### **Medication Error**

Medication administration is a systematic process. It begins with the medication order from a health care provider, and proceeds through many steps to the final step, the patient receives the medication. The nurse or nursing student is the last step in the process of medication administration and is the person who administers the medication to the patient. Therefore, it is imperative the nursing student check the "rights" of medication administration per protocol for that facility with their instructor and/or supervising nurse.

If a student, instructor and/or supervising nurse fails to follow the protocol and the student makes one medication error while caring for a patient, the following will be coordinated by the clinical instructor and, if applicable, course coordinator.

3. Student reports medication error to clinical instructor and supervising nurse.
4. Student and clinical instructor follow facility protocol and SON protocol regarding medication error.

- a. If necessary, the student may be dismissed from clinical until further notification by the clinical instructor.
5. Student meets with clinical instructor as soon as possible to discuss the medication error and debrief as needed by the student.
6. Student will be instructed to document answers to the following questions and submit to his/her clinical instructor by documented deadline. Appropriate follow-up meeting with the student and faculty will be scheduled.
  - e. Explain the incident, including details of how the medication error happened and why.
  - f. What adverse patient outcome(s) did or could have resulted from this incident? Explain how you felt or would have felt if one or more of these adverse outcomes resulted from this error?
  - g. Describe lessons you have learned from this incident and actions you will take to prevent this type of medication error in the future.
  - h. Explain in detail actions you will take to prevent any medication error in the future, both as a nursing student and professional nurse.
7. A copy of the student's medication error documentation will be kept in the student's file.
8. Should the error result in potential or actual endangerment to patient/student, a Level I or II infraction will be issued.

In the case of a repeat medication error (more than one error) during the student's tenure in the undergraduate nursing program, the student follows the same procedure. Depending on the circumstances of the repeat medication error, the student may receive a Level I Infraction (see #6 under Level I Infraction behaviors) with consequences appropriate for that Level I Infraction behavior/incident. Any medication error, which presents significant risk of harm to a client will be addressed as a Level I infraction (see p. 26).

1. Designated SON administrative faculty may review documentation of a repeat medication error.
2. Circumstances may indicate the need for a faculty review committee, appointed by the designated administrative faculty, to recommend consequences and resolution.
  - a. This committee will meet within five (5) days of its appointment. The function of this ad hoc committee is to review documentation of the incident and make a recommendation regarding consequences and resolution within 24 hours to the Undergraduate Director of the SON or designated administrative faculty who will make the final decision.

### **Sexual Misconduct/Harassment in External Lab Sites**

There may be instances in external nursing lab course sites where a student feels he/she has been sexually harassed OR the student may be accused of sexually harassing another person. The School of Nursing expects the same appropriate conduct in external clinical sites as the university expects on campus. See the University Handbook regarding the university's policy regarding sexual misconduct and harassment at [www.isu.edu/studenta/handbook.pdf](http://www.isu.edu/studenta/handbook.pdf)

In instances where a student in an external clinical setting feels that he/she has experienced sexual harassment by a client(s), the student should:

1. Maintain professional boundaries with client.
2. Be excused from the environment once safety of the client is assured.

3. Report the incident to the clinical faculty member and/or precepting nurse as soon as possible (ASAP) so that continuation of care is coordinated.
4. Follow the facility's policy and procedure for reporting and documenting the incident.

In instances where a student in an external clinical setting feels that he/she has experienced sexual harassment by another person in the facility, the student should:

1. Be excused from the environment once safety of the clients is assured (if needed).
2. Report the incident to the clinical faculty member and/or precepting nurse ASAP.
3. Follow the facility's policy and procedure for reporting and documenting the incident.

In instances where a student is accused of sexually harassing another person, the following actions should take place:

1. The person accusing the student should report the incident to the precepting nurse and/or clinical faculty member ASAP.
2. The preceptor nurse and clinical faculty member should follow the facility's policy and procedure for reporting and documenting the incident.
3. The clinical faculty member will make the determination about the appropriateness of removing the student from the environment and/or facility.

In the instances discussed above, it is the responsibility of the clinical faculty member to:

1. Discuss the University policy and definition of sexual harassment with all involved.
2. Review the incident with the student, using the incident report and the student's verbal description of the incident.
3. If appropriate, encourage the student to report the incident to one of the following for necessary action to be taken (see campus directory for contact information):

Office of EEO/Affirmative Action  
 Division of Student Affairs  
 University Counseling and Testing Services

In the event there is reason to believe criminal conduct has occurred, i.e., such as sexual assault, battery, rape or attempted rape, etc., it is the responsibility of the clinical faculty member to contact ISU Public Safety and/or the local police department as soon as possible. In the case of possible criminal conduct, the faculty member should not contact the alleged perpetrator, but rather should allow the responding police agency to conduct the appropriate investigation. The student may also be encouraged to contact one of the following for additional support (see campus directory for contact information):

Pocatello Campus	Janet C. Anderson Gender Resource Center
Idaho Falls Campus	Student Health Center
Meridian Campus	Women's Center at Boise State University

## **Resolution of a Student Identified Problem**

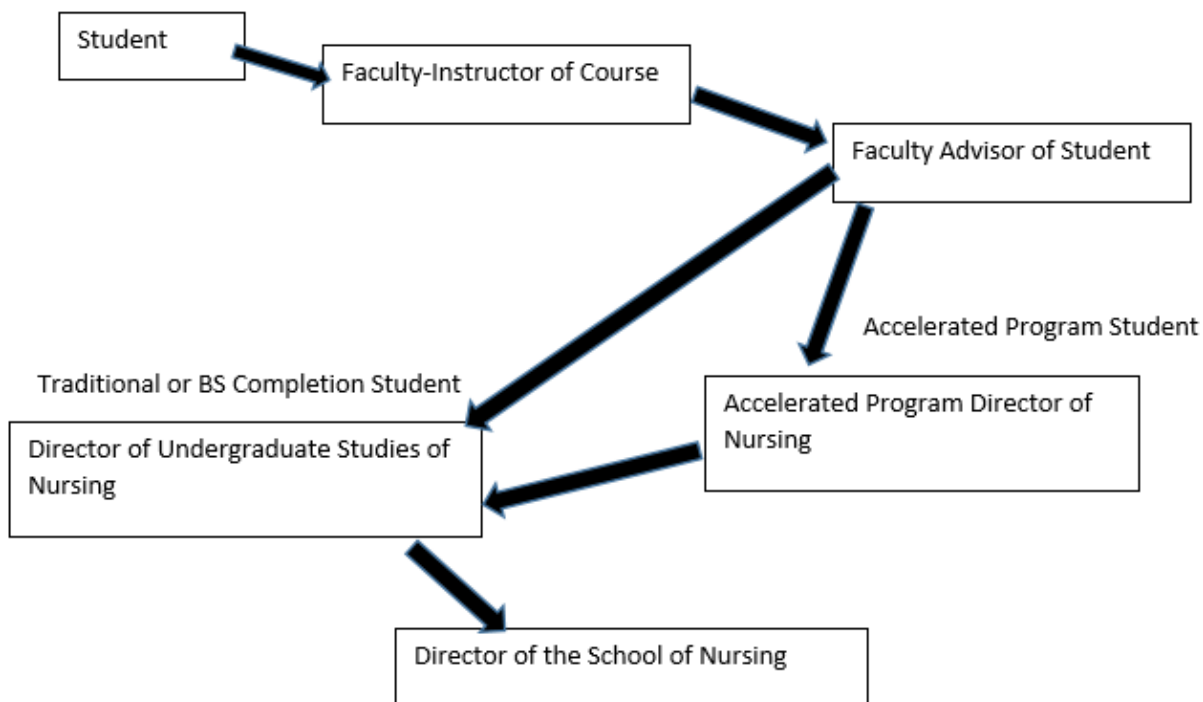
The purposes of the procedure for resolution of student concerns are:

1. To provide due process for students and faculty
2. To provide a mechanism for protection of the rights of students and faculty



3. To provide unbiased fairness in resolving disputes of academic matters. Student should meet with their advisor.

Chain of Command for Resolution of Student Concerns:



**The route of resolution is as follows:**

1. The student will first attempt to resolve the problem, disagreement, or issue with the faculty/instructor of the course.
  - The student will make an appointment to meet with the faculty/instructor to discuss student's concern as soon as the problem is identified.
  - Documentation of the meeting (including written narrative of the student's problem, disagreement or issue) and result of the meeting will be placed in the student's permanent file. The student will receive a copy of this documentation.
    - a. If the concern involves the grade of a paper or project, student has the right to request a second reading by a faculty member selected by the Director for Undergraduate Studies of the School of Nursing or designated administrative faculty.
      - i. The second reader will be given a clean copy of the paper and will follow the criteria as listed in the course syllabus.
      - ii. Prior to the second reader evaluation, the student must agree to accept the grade as evaluated by the second reader in lieu of the first grade earned on the paper.
      - iii. The second reader will return the graded paper to the designated administrative faculty within five working days.
      - iv. The designated administrative faculty will notify the student and the grade adjustment will be made as necessary within 24 hours.
2. If a mutually agreeable resolution cannot be reached with the faculty/instructor and there is clear documentation that the student and faculty/instructor cannot reach a resolution,

- the student needs to make an appointment with the designated administrative faculty to discuss the issue.
- a. The student should bring a copy of the documented meeting with the faculty/instructor.
  - b. Documentation of the meeting and results of the meeting will be placed in the student's permanent file. The student will receive a copy of this documentation.
3. If a settlement cannot be reached with the designated administrative faculty, the student needs to make an appointment to meet with his/her faculty advisor to discuss the issue.
    - a. The student should bring copies of all documentation and the plans for action he/she would like to take to seek resolution.
    - b. The faculty advisor can discuss these plans and help guide the student to find resolution.
  4. If the student would like to proceed to find acceptable resolution beyond the course, he/she should proceed to the Director of the School of Nursing or designated administrative faculty or personnel.
    - a. **Please Note:** At this point, the student's concern changes from an informal to a formal complaint (see Appendix N). The School of Nursing defines a formal complaint as a written letter or e-mail communication which includes a statement of fact and rationale for a claim of difference in opinion, judgment or evaluation. The student should include written narrative of his/her problem, the course of action he/she has taken thus far and plans for action he/she would like to take to seek resolution.
    - b. The student should make an appointment to meet with the Director of the School of Nursing or other designated administrative faculty or personnel to discuss his/her concern after submission of the formal complaint.
  5. If a settlement cannot be reached and the student wants to pursue acceptable resolution, the Director of the School of Nursing or designated administrative faculty or personnel shall appoint a committee of three (3) faculty members who are not directly involved in the student's situation.
    - a. This committee will meet within five (5) days of its appointment. The function of this ad hoc committee is to hear the student's concern and the faculty's response and make a recommendation within 24 hours to the Director of the School of Nursing or designated administrative faculty or personnel who will make the final decision.
    - b. The Director of the School of Nursing or designated administrative faculty or personnel will meet with the student and discuss his/her final decision.
  6. If a settlement cannot be reached and the student wants to pursue acceptable resolution, the student may proceed to the Kasiska Division of Health Science Scholastic Appeals Committee and follow the appeals process at the Division level. See updated Scholastic Appeals Committee Bylaws.-  
<http://coursecat.isu.edu/graduate/generalinfoandpolicies/appealsanddismissals/>

## Academic Dishonesty

### ISU Procedure and Policy for Academic Dishonesty

Academic integrity is expected of all individuals in academic settings. Academic dishonesty includes, but is not limited to, cheating, plagiarism, and fabrication. Faculty of the SON complies with ISU's policy and procedure regarding academic dishonesty. ISU Appeals Process- <http://coursecat.isu.edu/graduate/generalinfoandpolicies/appealsanddismissals/>

### **Consequences for Academic Dishonesty at the School of Nursing Level**

According to the Undergraduate Code of Professional Conduct, academic dishonesty constitutes a Level I Infraction. When a student demonstrates behavior of a **Level I Infraction** (as related to Academic Dishonesty) in a classroom or lab setting, the involved instructor/faculty will:

1. Follow procedures for determination of academic dishonesty at the university level.
2. Once the act of academic dishonesty has been validated, the student, instructor/faculty and a third party if deemed necessary will meet to discuss the consequences for the infraction within 3 days of validation of the incident.
3. The consequences shall be in proportion to the severity of the offense.
4. The following is a list of possible corrective actions and consequences which may be imposed for academic dishonesty.
  - a. Student may be placed on Unprofessional Conduct Probation.
  - b. Corrective action possibilities may be discussed. As an example, the instructor/faculty member may require that the assignment in question be rewritten in conformance with proper academic standards and requirements and/or the instructor/faculty may specify additional requirements.
  - c. Grade reduction
    - i. The student's grade may be lowered, or a grade of "F" may be assigned for a test, project, or other academic assignment.
    - ii. If a grade of "F" is assigned, a zero (0) will be recorded as the grade earned on the test, project, or other academic assignment.
  - d. Failing Grade
    - i. A grade of "F" may be assigned for the course and the student will not proceed with any other nursing courses.
  - e. Dismissal from the School of Nursing
    - i. A student may be dismissed from the School of Nursing. If dismissed, the student is ineligible to enroll in any course offered by the program.
    - ii. The Undergraduate Director of the School of Nursing and/or Director shall notify the student, the instructor, designated administrative faculty, and the registrar, in writing, of the imposition of this sanction.
5. Instructor/Faculty will document incident per the Written Record of Student Violation of the Code of Professional Conduct and place it in the student's permanent file. **This information may be made available to prospective employers or other educational institutions. Thus, any student committing an act of academic dishonesty may be jeopardizing his or her future educational or employment opportunities.**

### **Consequences for Academic Dishonesty at the Division of Health Sciences Level**

Students have the right to appeal processes at the level of the Division of Health Sciences. See updated Scholastic Appeals Committee Bylaws.

The University Guidelines, Procedures, and Policies, and the Policies of the Academic Appeals Board petitions are available at - <http://coursecat.isu.edu/graduate/generalinfoandpolicies/appealsanddismissals/>

### **Consequences for Academic Dishonesty at the University Level**

For penalties of suspension, expulsion, and restitution of scholarship, award, and financial aid, refer to the University Guidelines, Procedures, and Policies, Academic Dishonesty. Refer to ISU Faculty and Staff Handbook: [www.isu.edu/fs-handbook/part6/6\\_9/6\\_9a.html#2](http://www.isu.edu/fs-handbook/part6/6_9/6_9a.html#2)

### **Restitution of Scholarship Funds**

If the student is a recipient of any ASISU scholarship during the semester in which the dishonesty occurs, and the student is suspended or dismissed from the institution, repayment in full of the scholarship amount for that semester will be required. Restitution of funds may also apply to other scholarship or financial aid, at the discretion of the donor. The ISU Scholarship Office will be notified.

### **Title IX**

“ISU is committed to providing a safe educational and work environment. As a university community, we value compassion and the safety of all employees and students. Sex- and gender-based discrimination (including sexual harassment, sexual violence, dating/domestic violence, and stalking) limit access to education and work opportunities. ISU will follow the guidelines set forth in Title IX of the Education Amendments of 1972 to stop, remedy, and prevent negative effects of sex- and gender-based discrimination.

ISU is dedicated to ensuring a prompt, effective, and compassionate response to any report of sex- or gender-based discrimination. **To report possible discrimination**, ask questions, or communicate concerns, contact Melissa Millican, ISU Title IX coordinator at 208-282-1439 or email [millmeli@isu.edu](mailto:millmeli@isu.edu).

**To report online**, use the [secure online incident form](#)

## **Faculty Advisors for Students**

### **Student Advising**

Upon admission to the ISU School of Nursing, all students in the nursing program will be assigned a faculty advisor who will serve as their advisor until the student graduates. Together, they will facilitate the student’s plan of study and success in the nursing program. University requirement states that the student and his/her advisor must meet once a semester to review his/her plan of study. If student chooses not to meet, written documentation of that decision must be submitted to his/her faculty advisor by the sixth week of the semester. Responsibilities of the student and of the faculty advisor are listed in following resource:

<https://www.isu.edu/advising/>

If, for some reason, the faculty advisor or student wishes to change advisor assignment, another faculty advisor will be assigned. If the student needs to change his/her advisor, and attends classes in Pocatello or Idaho Falls, contact the SON Undergraduate office at 282-2132. If the student attends classes in Meridian, contact the SON Accelerated office at 373-1784.

### **Faculty Class Advisor**

Each class of traditional students will be assigned a class advisor. The advisor will assist the class in implementing and reviewing bylaws, facilitating communication with the faculty and administration, selecting class officers/representatives, coordinating pinning ceremony and solving class problems as they arise. The Accelerated students will be assisted with these matters by the Accelerated Program Coordinator or designated administrative faculty and the BS Completion students will be assisted by the BS Completion Program Coordinator.

## **Student Organizations**

### **ISU Student Nurses' Association (SNA)**

All undergraduate nursing students are strongly encouraged to join the Student Nurses' Association. A faculty representative will be assigned to assist with local organization activities. For details of the organization see website: [www.nsna.org](http://www.nsna.org).

The functions of this organization are:

1. To aid the development and growth of the individual student by fostering good citizenship through professional and social unity.
2. To stimulate interest and understanding and to serve as a channel of communication between the student nurses' organization and the professional nursing organizations.
3. To provide a closer bond and a more unified spirit among student nurses through group activities at the local, state, and national.
  - a. To do this, the student organization provides educational programs, community service projects and social activities.
  - b. With the yearly dues the student gains membership in the local, state and national student associations.
  - c. This entitles the student to a monthly copy of the national nursing student publication, Imprint.

### **Election of Student Nurse Association (SNA) Officers (NOT CLASS OFFICERS)**

1. The following positions are available as SNA officers only: President, Vice President, Secretary, and Treasurer. **These positions are SNA and the organization only, NOT CLASS OFFICERS.**
2. Fall Cohort
  - a. The fall cohort will nominate and select two individuals to serve in the positions as President and Secretary.
  - b. 1<sup>st</sup> year nursing program students, as SNA officers, will serve in "shadowing" positions to the 2<sup>nd</sup> year nursing program students SNA officers, until they take over after graduation of the 2<sup>nd</sup> year nursing students.

- c. 2<sup>nd</sup> year nursing program students, as SNA officers, will assume full duties and roles after graduation of previous cohort and will have their term run for 1 academic year. They will train and orient the 1<sup>st</sup> year SNA officers and their roles and responsibilities.
3. Spring Cohort
    - a. The spring cohort will nominate and select two individuals to serve in the positions as Vice President and Treasurer
    - b. 1<sup>st</sup> year nursing program students, as SNA officers, will serve in “shadowing” positions to the 2<sup>nd</sup> year nursing program students SNA officers, until they take over after graduation of the 2<sup>nd</sup> year nursing students.
    - c. 2<sup>nd</sup> year nursing program students, as SNA officers, will assume full duties and roles after graduation of previous cohort and will have their term run for 1 academic year. They will train and orient the 1<sup>st</sup> year SNA officers and their roles and responsibilities.

### **Class Representatives for the Traditional Program**

The SON is committed to providing outstanding education for nursing students. In order to facilitate the process of student leadership and government, class representatives are elected by each nursing school class. **This is the person that represents you and your class.** The following guidelines delineate the roles, responsibilities, and election of each office:

### **Duties of the Class Representative for the Traditional Program**

The primary role of the student representatives is to attend SON council and committee meetings that address undergraduate student issues and report significant issues to the other class officers and students. Class representatives may be asked to collect student input, participate in activities that provide benefit to their class and perform other duties by the class or faculty advisor. The representative will also help with relaying information about activities (e.g. graduation) to the class.

Additional positions can be created at the discretion of the class faculty advisor, in order to facilitate the needs of the class. These additional positions may be appointed or elected according to the discretion of the other class representatives.

Class representatives will be assigned to participate in SON councils and committees which include but are not limited to Undergraduate and Faculty councils and other committees that function to support student learning.

### **Election of Class Representatives**

1. Class representatives will be elected no sooner than one month, and no later than three months, after the start of the nursing program. The positions will continue until graduation or until the representative is unable to fulfill duties for any reason.
2. There will be one class representative per cohort. They will serve as representative throughout the duration of the nursing program. If they are not able to complete this term, a new election will be held to select a new representative.

### **Class Officers for the Accelerated Program only (not the Traditional Program)**

The SON is committed to providing outstanding education for nursing students. In order to facilitate the process of student leadership and government, class officers are elected by each nursing school class. The following guidelines delineate the roles, responsibilities, and election of each office:

#### **Duties of the Officers for the Accelerated Program only:**

##### President for the Accelerated Program

The primary role of the President is to provide leadership for the class and function as the class representative. This includes, but is not limited to, serving as a liaison between the class and the SON faculty and facilitating interaction between the class and faculty members. In addition, the President is charged with facilitating communication among all class officers regarding any matter deemed necessary. The President is responsible for organizing and overseeing the pinning ceremony of undergraduate students at the SON Graduation Ceremony. He/she will co-sign all checks with the class treasurer.

##### Vice President for the Accelerated Program

The primary role of the Vice-President is to assist the President in representing the class and in overseeing the pinning ceremony. In addition, the Vice-President is charged with assuming the role of the President in the event that the President is not able to represent the class.

##### Secretary for the Accelerated Program

The primary role of the Secretary is to work with the other class officers to facilitate communication and record-keeping, including minutes of official meetings. The secretary will be responsible for distributing information to the class.

##### Treasurer for the Accelerated Program

The primary role of the Treasurer is to maintain and oversee the class financial accounts. This includes, but is not limited to, keeping an accurate record of funds received, expenditures and receipts, providing regular reports of the class finances and co-signing all checks with the class president.

### **Meetings**

1. Students are eligible for and encouraged to participate in student senate and university wide activities.

## **Student Loan and Scholarship Programs**

### **Financial Aid**

Financial assistance programs to include Loans, Grants, Non-Resident Tuition Waivers, and employment are available to ISU Undergraduate and Graduate students. A completed FAFSA (Free Application for Federal Student Aid) covering Fall, Spring and Summer for a given school year should be filed as soon as possible after January 1 for the subsequent academic school year. Students are advised to contact the Financial Aid and Scholarship Office at 208-282-2756 or <http://www.isu.edu/finaid/>.

### **Scholarship Opportunities**

Scholarship awards are available to admitted nursing students (undergraduate and graduate level). School of Nursing Scholarship applications are available at [http://isu.edu/nursing/current\\_undergraduate.shtml](http://isu.edu/nursing/current_undergraduate.shtml).

For more information on School of Nursing scholarship opportunities, please contact the School of Nursing Academic Advisor at 208-282-2132.

Nonresident tuition waivers may be available to students who have demonstrated strong academic ability, or demonstrated financial need. Please contact the ISU Scholarship Office at 208-282-3315 or [www.isu.edu/scholar](http://www.isu.edu/scholar).

### **Health Status Requirements**

The School of Nursing requires students to have proof of recent physical health examination, current health insurance coverage, current tuberculosis (TB) screening, and verification of immunization status prior to admission to the nursing program. Students must ensure current documentation is maintained for all the following items: TB screening, flu vaccination, and verification of Hepatitis B vaccination completion and titer results.

*Failure to maintain documentation of current status of these requirements may result in failure to progress and /or dismissal of the student from the nursing program.*

Students may also be required to complete additional health status requirements as required by specific clinical agencies.

### **Health Evaluation**

The required health evaluation form completed by a health care provider must be submitted with the application to the School of Nursing. Students must demonstrate the ability to meet the physical and mental demands required for their clinical and academic activities. Changes in an enrolled student's health status may require documentation of physical and/or mental health evaluation and /or treatment from an appropriate health care provider to maintain progression in the nursing program.

### **Pregnancy**

Upon confirmation of pregnancy, the School of Nursing recommends the students:

- 1) Providing the estimated date of delivery calculated by their health care provider,
- 2) The student has the opportunity to submit a medical release form (see attached) from their health care provider outlining any medical restrictions.
- 3) Comply with the policies and procedures of the clinical agency to which she is assigned,
- 4) Observe pregnancy precautions (for example no chemotherapy), while in the clinical area according to agency policy,
- 5) Notify the nursing program director of any change in student's health status.



### Communicable Disease

When in the clinical or academic setting, the student is responsible for being free of communicable diseases which may put themselves, clients and others at risk. If the student has been exposed to a communicable disease or he/she has symptoms, he/she must inform instructor/faculty before participating with client care in the clinical lab setting.

### Tuberculosis (TB) Screening

Students must demonstrate they do not have active TB to be accepted and continue in the nursing program. Students are required to complete current TB screening for admission to the nursing program. Nursing students will be required to have a TB screening performed annually while in the nursing program. It is the student's responsibility to have a TB screening test completed on a yearly basis and to submit a copy of his/her current results to the Undergraduate Nursing office by the date the former results expire.

If a student has a positive Mantoux or PPD skin test at admission or any time in the nursing program, he/she will need to submit a statement from the primary health care provider that he/she does not have active TB and documentation of any precautionary measures that would limit the student's ability to interact with clients, faculty and staff in a variety of settings. *Admission to and progression in the nursing program may occur only after the School receives statement from the applicant's primary health care provider.* See details in table under Immunization Status.

### Immunization Status

Students must provide documentation of current immunization status and results of titers with the application to the SON. If a vaccination series is in process at the time of application submission, students accepted to the SON must update the immunization records as the series progresses and when a vaccination series is completed as discussed below.

Student must submit signed documentation by his/her health care provider if he/she has a medical contraindication to immunization. If there are questions about immunization status, students should contact their primary care provider or the ISU Student Health Center.

*If documentation of required vaccinations, vaccination series, titers and TB skin tests are not received by the School of Nursing as instructed per email and/or homeroom announcements, students will be suspended from clinical lab settings and may receive a Level II Infraction. Once required documentation is received by the School, the student may resume attendance at the clinical lab setting. Make-up for missed clinical hours is determined by the course coordinator.*

Documented Immunizations and TB Skin Tests required for the Nursing Program include:

1.	<b>Tetanus with Pertussis Booster</b> <ul style="list-style-type: none"> <li>• Tdap Vaccination</li> </ul>	<b>Required</b> –one-time dose of Tdap <b>AND</b> Current Td booster  <i>Tetanus vaccination must be done every 10 years, one of the updates must include pertussis booster. After the Tdap is received once then further tetanus vaccinations are required to be only Td.</i>
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2.	<p><b>Measles, Mumps, Rubella</b></p> <ul style="list-style-type: none"> <li>• MMR vaccination</li> <li>• 2 doses <b>OR</b> positive titer</li> </ul>	<p><b>Required –</b> Documentation of 2 doses of MMR vaccination</p> <p><b>OR</b></p> <p>A positive titer is required.</p> <p><i>If able to provide documentation of two MMR doses no titer is required. If unable to provide documentation of two MMR doses, a titer must be completed. If the titer is non-responsive, or equivocal, documentation of a repeat series, 2 doses of MMR vaccine, is required.</i></p>
3.	<p><b>Hepatitis B Vaccination Series</b></p> <p>Hepatitis B Vaccination is a series of three vaccinations taken on a schedule:</p> <p>#1 Initiation #2 1 month after #1 #3 5 months after #2</p> <p>Or the Heplisav B series is 2 vaccinations on the schedule:</p> <p>#1 Initiation #2 1 month after #1</p> <p><b>VERIFICATION:</b></p> <ul style="list-style-type: none"> <li>• Positive post-vaccination serologic test</li> </ul>	<p><b>Required - Students must provide an anti-HBs which is Hepatitis B surface antibody (also referred to as the post-vaccination serologic test) showing immunity to Hepatitis B OR at minimum, must have completed the first vaccination of the series before the immunization verification deadline.</b></p> <p><b>The purpose of the required Hepatitis B vaccination and post vaccination serologic testing</b> is to make every effort to protect ISU Nursing Students from contracting Hepatitis B during clinical experiences.</p> <p><b>Please Note Important Terminology:</b></p> <p><b>anti-HBs test</b> is Hepatitis B surface antibody (also referred to as the post-vaccination serologic test)- The presence of anti-HBs (greater than or equal to 10mIU/mL) is generally interpreted as indicating recovery and immunity from hepatitis B virus infection. <i>Anti-HBs also develops in a person who has been successfully vaccinated against Hepatitis B.</i></p> <p><b>Three (3) dose Hepatitis B vaccine series</b> - traditional Hepatitis B vaccination series (per CDC guidelines)</p> <p><b>Heplisav-B (HepB-CPG)</b> - the new two (2)-dose Hepatitis B vaccine series (per CDC guidelines)</p> <p><b>Verification deadline-</b> is the date determined by the SON for the individual student to complete each vaccine in the series and/or submission of the post-vaccination serologic test result.</p> <p><b>Required Hepatitis B Documentation at admission must be submitted to the SON on Moodle (Undergraduate students) or Typhon (Graduate students):</b></p> <p><b><u>Students who have completed the Hepatitis B vaccine series</u></b> (either the 3 dose Hepatitis B vaccine or 2 dose Heplisav-B) <b>must submit the post-vaccination serologic (anti-HBs) test result that demonstrates immunity to Hepatitis B.</b></p> <p><b><u>Students who have not completed the Hepatitis B vaccine series</u></b>, at minimum, <b>must submit documentation of completing the first vaccination of the series before the immunization verification deadline.</b></p> <p>Documentation of post-vaccination serologic test result that demonstrates immunity to Hepatitis B must be completed and submitted to the SON within 7 months of the student's acceptance to the program. If documentation of the progress of the vaccination series and/or post-vaccination serologic test result are not received in the SON within 7 months of the student's acceptance to the program, he/she will not be allowed to proceed in the program and/or receive a formal written warning notice.</p> <p><b>Series completed while growing up or greater than 8 weeks before the verification deadline:</b> Students must submit the post-vaccination serologic test showing immunity to Hepatitis B.</p> <p><b>Series completed within 8 weeks of the verification deadline:</b> Students who have completed the vaccination series within 8 weeks of the immunization verification deadline must submit the post-vaccination serologic test showing immunity. The test must <b>be drawn after 4 weeks, but not greater than 8 weeks</b> following the last dose in the series. Submit the post-vaccination serologic test as directed.</p> <p><b>Series initiated but not completed by the verification deadline:</b> Students must submit evidence of initiation of the series by the deadline. Students are required to submit verification of</p>

		<p>initiation of the series by the deadline. Students are required to submit verification of subsequent doses of the vaccination series as they are received</p> <p style="text-align: center;"><b>AND</b></p> <p>Upon completion of the vaccination series, the post-vaccination serologic test results showing immunity, must be drawn <b>after 4 weeks but not greater than 8 weeks</b> following the last dose in the series.</p> <p><b>Students with non-immune post-vaccination serologic test result</b></p> <p><b>With NO documentation of Hepatitis B vaccine series in the SON</b>, student is required to submit documentation of a second series of either the two (2) dose Heplisav-B Vaccine <b>OR</b> the three (3) dose Hepatitis B vaccination series.</p> <p><b>PLUS</b> upon completion of the vaccination series, the post-vaccination serologic test is performed <b>after 4 weeks but not greater than 8 weeks</b> following the last dose of the vaccine. Result of the post-vaccination serologic test must be submitted by the student.</p> <p>If the post-vaccination serologic result demonstrates immunity to Hepatitis B, no further action needed.</p> <p><b>With documentation of Hepatitis B vaccine series in SON</b>, student can get a 'booster' (one dose) of Hepatitis B vaccine. Four <b>weeks but not greater than 8 weeks</b> following the vaccine, the post-vaccination serologic test is performed and student submits result.</p> <p>If the post-vaccination serologic test result demonstrates immunity to Hepatitis B, no further action needed.</p> <p>If the post-vaccination serologic test demonstrates non-immunity result to Hepatitis B, student is required to submit documentation of a second series of either the two (2) dose Heplisav-B Vaccine <b>OR</b> the three (3) dose Hepatitis B vaccination series.</p> <p><b>PLUS</b> upon completion of the vaccination series, the post-vaccination serologic test is performed <b>after 4 weeks but not greater than 8 weeks</b> following the last dose of the vaccine. Result of the post-vaccination serologic test must be submitted by the student.</p> <p>If the post-vaccination serologic demonstrates immunity to Hepatitis B, no further action needed.</p> <p><b>Students with non-immune post-vaccination serologic test result after re-vaccination</b> (either 6 doses of Hepatitis B 3-dose series OR 4 doses of Heplisav-B <b>OR</b> one of each of the 2 series), the student is considered a non-responder.</p> <p>Non-responders are considered susceptible to Hepatitis B infection. The student should take appropriate precautions to prevent exposure and infection to Hepatitis B.</p> <p>If a non-responder experiences an exposure to Hepatitis B, CDC recommends they be tested for HBsAg and anti-HBc for Hepatitis B evaluation. It is the student's responsibility to follow through with CDC recommendation.</p> <p>Other Hepatitis B test results will <u>not</u> be accepted under ordinary circumstances.</p> <p>If the student has an unusual circumstance regarding their Hepatitis B status, they are to contact the Administrative Assistant (AA) for the SON Program the student enrolled in. For Graduate Studies, contact the AA for the DNP, PhD, and Masters Program. For Undergraduate Studies, contact the AA for Traditional Program in Pocatello or the AA for Accelerated Program in Meridian.</p> <p>The student is responsible to have the required <b>post-vaccination serologic test</b> drawn in the event of clinical exposure to blood or other potentially infectious body fluids as stated in the SON Blood Borne Pathogen Policy.</p>
4.	<p><b>Varicella (Chicken Pox)</b></p> <ul style="list-style-type: none"> <li>2 doses of Varicella vaccine <b>OR</b> positive titer</li> </ul>	<p><b>Required -</b></p> <p>Documentation of 2 doses of Varicella vaccination</p> <p><b>OR</b> A positive titer is required.</p>

		<p><i>If able to provide documentation of two Varicella doses, no titer is required. If unable to provide documentation of two Varicella doses, a titer must be completed. If the titer is non-responsive, or equivocal, documentation of a repeat series, 2 doses of Varicella vaccine, is required. If the student has had chicken pox, a Varicella titer is required to verify immunity. If the titer is non-responsive, or equivocal, documentation of a repeat series, 2 doses of Varicella vaccine, is required.</i></p>
5.	<p><b>Influenza</b></p> <ul style="list-style-type: none"> <li>• 1 dose of influenza vaccine annually (October) unless a Declination Statement is signed and submitted to the SON</li> </ul>	<p>Documentation of annual influenza vaccine or a signed Declination Statement (Appendix I) is due by October 30.</p> <p>The student who declines the Influenza vaccination WILL BE REQUIRED to wear a face mask in the School of Nursing Simulation Lab, during all activities that count as clinical hours, <b>AND</b> at all clinical facilities regardless of the clinical facilities policies.</p>
6.	<p><b>Tuberculosis (TB) skin test</b></p> <ul style="list-style-type: none"> <li>• A current negative TB skin test screening to be current at all times while in the SON</li> <li>• Current requires the test to be performed annually and not expired while in the SON</li> <li>• Required Annually</li> </ul>	<p>All students enrolled in ISU's SON must be free of active signs and symptoms of Tuberculosis.</p> <p><b>Students with a previously positive skin test OR have had the BCG immunization:</b> It is <u>not</u> recommended that the student receive another TB skin test. Student must submit negative chest x-ray interpretation, letter from health care provider stating completion of antibiotic therapy, and/or letter from health care provider stating student does not have active Tb. These instances will be handled on a case by case basis. Please contact the SON for further instructions.</p> <p><b>Students with a baseline positive or a newly recognized positive skin test:</b> It is not recommended that the student receive another Tb skin test. Student must complete the following steps:</p> <ol style="list-style-type: none"> <li>1. Evaluation by healthcare professional <ol style="list-style-type: none"> <li>a. Symptom screen; annual symptom screening is required (see Appendix K).</li> <li>b. Chest x-ray <ol style="list-style-type: none"> <li>i. Serial follow-up chest x-rays are not recommended for students with a previous positive skin test who have documentation of a previous clear chest x-ray unless they present with symptoms of TB or a health care provider recommends it.</li> </ol> </li> <li>c. If applicable, QuantiFERON TB Gold QFT-G® test, <ol style="list-style-type: none"> <li>i. If healthcare provider recommends test to be done please submit the results to the SON.</li> <li>ii. Positive QuantiFERON TB Gold QFT-G® test, please contact the SON for further instructions.</li> </ol> </li> <li>d. If applicable, collection of sputum specimens.</li> </ol> </li> <li>2. If Tb disease is diagnosed <ol style="list-style-type: none"> <li>a. Begin anti-tuberculosis treatment and provide documentation to the SON. Please contact the SON for further instructions.</li> </ol> </li> </ol>

		<p>3. If Latent Tb Infection (LTBI) is diagnosed</p> <ol style="list-style-type: none"> <li>a. Treatment for LTBI –then annual symptom screens, please contact the SON for further instructions.</li> <li>b. If treatment has already been completed –submit documentation and contact the SON for further instructions.</li> </ol> <p>HCA Mountain Division Hospitals will be making the following updates to our vaccine requirements for all students in the near future- just wanted to give you a heads up. This will start with Summer rotations 2021:</p> <ul style="list-style-type: none"> <li>• Two-Step tuberculin skin test, T-Spot, or QuantiFERON test performed prior to clinical placement. Annual TB testing required for student if there is a known exposure or ongoing transmission</li> <li>• Proof of Varicella immunity, by positive antibody titers or Varicella immunization.</li> </ul>
7.	<p><b>SARS-CoV-2 (COVID-19)</b></p> <ul style="list-style-type: none"> <li>• 2 doses of Pfizer-BioNTech or Moderna</li> </ul> <p>OR</p> <ul style="list-style-type: none"> <li>• 1 dose of Johnson &amp; Johnson/Janssen</li> </ul>	<p><b>Required</b> – Documentation of either:</p> <p>2 doses of Pfizer-BioNTech given 3 weeks apart OR 2 doses Moderna given 4 weeks apart OR 1 dose of Johnson &amp; Johnson/Janssen</p> <p>Students are considered fully vaccinated 2 weeks after the 2<sup>nd</sup> dose for Pfizer-BioNTech or Moderna, or 2 weeks after the 1<sup>st</sup> dose of Johnson &amp; Johnson vaccine. Boosters are highly recommended. Guidelines may change based on CDC recommendations, legal precedent, relevant clinical research, and/or clinical facility protocols. Exemption process must go through KDHS-</p> <ol style="list-style-type: none"> <li>a. Disability-Health Related</li> <li>b. Office of Equity-Religious</li> </ol>

## Safety and Protection Assurances

### Criminal Background Check

Criminal background checks are required for all applicants to and nursing students in the School of Nursing. Only ISU-approved vendors can be used for criminal background checks. (Vulnerable populations and specific facilities) may require the Idaho Health and Welfare background checks.) The SON will notify students where criminal background checks can be obtained and the cost for the criminal evaluation. Students are responsible for all fees associated with the criminal background check process. *Students who fail to submit receipt verification by the deadline(s) will receive a Level II Infraction or could be dismissed from the nursing program.*

Applicants to the School of Nursing must have a criminal background check in the application year.

Students accepted to the SON are required to have a criminal background check performed **annually** thereafter, while enrolled in the nursing program. Receipt verification of criminal background checks for juniors and seniors must be received by the program by the designated dates for their individual cohort. Students may also be required to have and pay for additional background checks as required by specific clinical agencies.

The results of the background check are reported only to the Director of the School of Nursing. The Director or assigned administrative personnel may contact a student directly if further information and/or clarification about background check findings are warranted. Due to the confidential nature of the background check findings, the results of the background check are not placed in the student permanent file.

Any student who experiences criminal charges while enrolled in the SON is required to notify his/her advisor and applicable faculty within ten (10) working days of such charges that may affect his/her ability to function in the academic or lab setting. Criminal charges include but are not limited to misdemeanors, felonies and convictions, such as shoplifting, drug charges, driving under the influence (DUI), reckless driving and suspended license. These activities do not include legal matters regarding divorce, custody issues or parking tickets. Once the faculty advisor is notified, procedures presented in the Nursing Student Criminal Background Check Policy should be followed for those charges.

### **Cardio Pulmonary Resuscitation (CPR)**

The SON requires students to be CPR certified. Proof of current CPR certification is required prior to admission to the nursing program and must be kept current throughout the nursing program. It is the student's responsibility to maintain a CPR certification and to submit a copy of his/her current certification to the Undergraduate Nursing office. The Certification Card is the only acceptable proof, not proof of payment or the temporary card. Certification will be kept in the student's permanent file. *Failure to maintain documentation of current status of CPR certification in the School of Nursing Undergraduate office will result in a Level II Infraction and/or may result in dismissal of the student from the nursing program.*

Effective January 2010, the **American Heart Association Basic Life Support for Health Care Providers** is the only accepted CPR certification by the School of Nursing. Certification from any other organization will not be accepted. The organization American Heart Association covers all our facilities we have agreements with.

### **Health Information Privacy and Accountability Act (HIPAA) Training**

ISU Division of Health Sciences and the School of Nursing require students to complete HIPAA training prior to their first clinical contact with a client and **annually** while enrolled in the nursing program. Students must submit documentation of completion of the HIPAA training by an ISU-approved vendor or by the method employed by the School of Nursing at the time of their starting classes. Students will be notified of the appropriate method and vendor. *Students who fail to submit receipt verification within one month will receive a Level II Infraction, be suspended from clinical lab and/or could be dismissed from the nursing program.*

### **Effective Communication**

In addition to being one of the seven core attributes, effective communication is also key in delivering safe patient care. Patients must be able to understand information and directions provided by the nursing student through verbal, non-verbal and written communication methods. Consequently, patients will know what to do to maximize their health status, from implementing evidence-based strategies that promote health through lifestyle choices and taking medication appropriately to appropriately preparing for a procedure and performing activities to recover from surgery. The inability of a patient to understand the nursing student's information and directions regarding his/her care can result in harm to the patient; therefore, it is imperative the nursing student's ability to effectively communicate with patients is demonstrated with confirmation of their understanding. Examples include: after the nursing student provides information, the patient does not ask more than one time to repeat the instructions, the patient states she/he understands the reasons to stop smoking by explaining them back to the nurse, the patient demonstrates correct use of the spirometer, and the patient correctly explains why he/she is taking a particular medication. Demonstration of communication skills that are ineffective, inappropriate, or that recipients (faculty, staff, clients, families, and other health care professionals) consistently cannot understand through either verbal, non-verbal and/or written communication methods will be addressed by faculty who observe and/or receive reports of these concerning skills. The student will collaborate with faculty and faculty advisor to develop an improvement plan that will include specific goals for improvement, access to resources that will assist the student to improve communication skills and consequences if goals are not met by deadlines. *If student cannot demonstrate improvement in communication skills as presented in improvement plan, he/she may either fail a course or be dismissed from the nursing program due to patient safety concerns.*

### **Bloodborne Pathogen Exposure Control (approved October, 2009)**

All clinical settings present a risk of exposure to the bloodborne and other pathogens, including but not limited to hepatitis B (HBV), hepatitis C (HCV), and human immunodeficiency virus (HIV). As a student, you need to understand the Bloodborne Pathogen Exposure Control plan and follow the procedures outlined by the Idaho State University (ISU) School of Nursing.

The exposure control plan includes information about **universal precautions, work practices** to minimize exposure, **housekeeping** procedures to ensure cleanliness and sanitation, **hepatitis B vaccination** requirements, **exposure incident report, follow-up medical consultation and treatment**, and **post-exposure evaluation. (All forms are in Appendix H)**

### Student Participation

Students are responsible to protect themselves against bloodborne and other pathogens in all settings. Students are expected to maintain good personal hygiene habits, know the tasks they perform and risks of exposure associated with each task, know where personal protective equipment is located and how to use the equipment properly, and attend the bloodborne pathogens training sessions as offered.

Students are expected to report any potential risks of exposure that are not clearly outlined in policy and/or procedure in all healthcare settings where they are assigned to clinical care of clients. Students are expected to report any exposure incident and to work with faculty and staff

to complete the required documents mandated by the faculty and the ISU SON. If the student is exposed to blood or other potentially infectious materials, the student is expected to follow through with further consultation and treatment if warranted for the exposure incident and the student will have their provider complete the “Post-Exposure Treatment Recommendations” form. It is the student’s responsibility to assure a copy of the completed form is placed student’s permanent file.

This document (Bloodborne Pathogen Exposure Control, 2009) serves to inform the student of potential risks of blood and other infectious exposures. Students are expected to review and understand the unique policies and/or procedures of each institution when they are in the clinical settings.

### Faculty Participation

The faculty is responsible to supervise the students in all clinical settings. In some settings, the students will be directly supervised, with a faculty available in-person at all times when the student is in the clinical setting. And in some settings, the students will be precepted, with the student working directly with an assigned preceptor and the faculty is not onsite, but available at all times via telephone. The faculty will review and understand the general guidelines to prevent blood and other potentially infectious exposure and protect the student in all clinical settings. The faculty will review each facility and clinical area to understand the blood and body fluid exposure risks in the facility and clinical area.

The faculty will educate the students about their risks in each environment and instruct students about decreasing their risk of exposure and about proper use of personal protective equipment. If an exposure incident occurs in the clinical setting, the faculty will assist the student in completing all required forms, and counsel the student about the need to receive further consultation and/or treatment. The faculty will review with the student, the information on the “Post-Exposure Treatment Recommendations” form (Appendix H) completed by a healthcare professional.

### Exposure Determination

In all clinical settings, students will be working in environments where they will have exposure to blood or other potentially infectious materials at all times. In all client care activities, the student has the potential to handle human blood and other potentially infectious materials. This may result in possible exposure to bloodborne and other pathogens. The risks for exposure are higher in certain clinical settings, and the student needs to be keenly aware of potential risk in all settings. This information will serve as an overview to the risks associated with blood and other potentially infected materials in all clinical settings where client contact is required.

### Standard Precautions

All human blood and most body fluids (semen, peritoneal fluid, amniotic fluid, saliva) are treated as if they are known to be infectious with blood or other potentially infectious materials. In circumstances where it is difficult or impossible to differentiate between body fluid types, it is assumed all body fluids are potentially infectious. Standard precautions will be observed at all times when the student is in a clinical setting in order to minimize or eliminate exposure to blood and other potentially infectious materials. Students are also expected to follow Transmission



Based Precautions, using the protective equipment available to them in all clinical settings. Examples of protective equipment include but are not limited to gloves, gowns, masks (N-95 or surgical), eye protection, face shields, foot covers, and head covers.

**Covid-19 Policy (Meridian)-St. Luke's Policy see Appendix O**  
**Aerosolizing/Droplet Policy (Meridian)-St. Luke's Policy see Appendix P**

Work Practice Controls

These practice controls are established to eliminate or minimize exposure in all healthcare settings. When the potential for exposure remains after implementation of controls, personal protective equipment (PPE) will be utilized. It is the student's responsibility to know what equipment is available and how to properly use protective equipment.

1. Sharps Containers (or specimen containers) are provided in all work areas where disposable sharps are used. Each sharps container will be closable, leak-proof, puncture resistant, and will be red in color or labeled with a Biohazard marker. Sharps Containers should be kept in an upright position, replaced routinely, not allowed to overfill, and kept at a height which allows students to see it when it is full.
2. Hand-washing facilities are always provided in each client care area or as close as feasible to client care areas. Students will wash their hands immediately, or as soon as feasible, after removal of gloves or other personal protective equipment. Students will wash their hands immediately following any contact of body areas with blood or any other infectious materials. When hand-washing facilities are not available, students will be provided an appropriate antiseptic hand cleanser and/or clean cloth/paper towels or antiseptic towelettes. When antiseptic hand cleansers or towelettes are used, hands should be washed with soap and running water as soon as possible. If blood or other infectious materials are splashed in the mouth, nose or eyes, the area should be washed or flushed with water as appropriate immediately or as soon as feasible following contact.
3. Needles and other contaminated sharps are not bent, recapped, or removed unless it can be demonstrated that there is NO FEASIBLE ALTERNATIVE; or if the action is required by specific medical procedure; or in the two situations above, the recapping or needle removal is accomplished through the use of a medical device or one-handed technique. Immediately or as soon as possible after use, contaminated sharps will be placed in appropriate containers.
4. Work area restrictions limit contact with blood and other infectious materials and other items. Eating, drinking, applying cosmetics or lip balm, and handling contact lenses is prohibited in work areas where there is potential for exposure to blood and other infectious materials. Food and drink are not kept in refrigerators, freezers, on countertops, or in other storage areas where blood or other potentially infectious materials are present.
5. Aerosolizing procedures will be conducted in a manner which minimizes splashing, spraying, splattering, and generation of droplets or blood or other potentially infectious materials. PPE will be used if such spread of infectious materials can be reasonably anticipated. Students will follow facility procedure while in clinical.
6. All equipment contaminated with blood or other potentially infectious materials shall be handled according to facility policy.

7. Specimens of blood or other materials are placed in designated leak-proof containers, appropriately labeled, for handling and storage.
8. Personal Protective Equipment (PPE) includes, but is not limited to gloves (latex and non-latex), gowns, impervious aprons, lab coats, face shields/masks, safety glasses, resuscitation masks, and foot and head covers. PPE is available to students in all clinical settings. Students will be trained regarding the use of the appropriate PPE. If the student has a question about the use of PPE in the clinical setting, he/she should ask faculty and/or assigned preceptor.
  - a. To ensure that equipment is used as effectively as possible, students will adhere to the following practices when using PPE:
    1. All PPE should be available in appropriate sizes.
    2. Gloves are worn in the following circumstances:
      - a. Whenever employees anticipate hand contact with potentially infectious materials.
      - b. When performing vascular access procedures.
      - c. When handling or touching contaminated items or surfaces.
    3. Disposable gloves are replaced as soon as practical after contamination or if they are torn, punctured, or otherwise lose their ability to function as an “exposure barrier.”
    4. Masks and eye protection (Such as goggles, face shields, etc.) are used whenever splashes or sprays may generate droplets of infectious materials.
    5. Protective clothing (such as gowns and aprons) is worn as appropriate, whenever potential exposure to the body fluids is anticipated.
    6. Protective equipment is considered appropriate only if it does not permit blood to other potentially infectious materials to pass through or reach the student’s clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.
    7. Any garments penetrated by blood or other infectious materials are removed immediately, or as soon as feasible.
    8. All PPE is removed prior to leaving a work area.

### Housekeeping

All clinical settings will have specific housekeeping requirements. In general, students need to be aware of the environment and risks associated with exposure to blood and other infectious materials. All types of wastes should be handled in a safe and protective manner. All waste should be discarded or bagged in containers that are closeable, puncture-resistant, leak-proof if the potential for fluid spill or leakage exists, and/or red in color or labeled with the appropriate Biohazard warning label. Contaminated laundry is handled as little as possible and is not sorted or rinsed where it is used. All equipment and surfaces are cleaned and decontaminated after contact with blood or other potentially infectious materials:

1. After the completion of procedures.
2. After any spill of blood or infectious materials.
3. All pails, bins, cans, and other receptacles intended for use routinely are inspected, cleaned, and decontaminated as soon as possible if visibly contaminated.

4. Potentially contaminated broken glassware is picked up using mechanical means (such as dustpan and brush, tongs, etc.) and placed in a broken glass waste container (not the regular trash).
5. Contaminated sharps are stored in containers that do not require that individuals reach into the container with their hands when processing the sharps.
6. Whenever employees move containers of regulated waste (including sharps containers) from one area to another, the containers are immediately closed and placed inside an appropriate secondary container if leakage is possible from the first container.

### Hepatitis B Vaccination

To protect employees as much as possible from the possibility of Hepatitis B infection, all students are required to have completed the Hepatitis B vaccination series. The vaccination program consists of a series of three inoculations over a six-month period or the Heplisav B is two inoculations over a two-month period. Test for Hepatitis B surface antibody (also known as post-vaccination serologic test) is required to be drawn **after 4 weeks but not greater than 6 weeks** following the final dose in the series to verify immunity status.

### Post-Exposure Evaluation

The post-exposure evaluation information has been developed using the recommendations from the Centers for Disease Control (CDC):

CDC Guidance for Evaluating Health-Care Personnel for Hepatitis B Virus Protection and for Administering Post exposure Management (2013)

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr6210a1.htm>

Updated US Public Health Service Guidelines for the Management of Occupational Exposure to HIV and Recommendations for Post exposure Prophylaxis (2005),

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5409a1.htm>

In order to ensure that students receive the best and most timely treatment if an exposure to bloodborne pathogens should occur, the post-exposure evaluation and follow-up process will begin as soon as possible after the incident occurs. It is the student's responsibility to ensure that an investigation is performed, the incident is evaluated, and that appropriate follow-up is obtained. To initiate an effective response, the student should report the incident immediately to his/her faculty and the supervising staff at the facility.

The student is responsible for understanding the policies and procedures for exposure to blood and other infectious materials in all clinical settings where the student has contact with clients and the student is responsible for following the procedures of the healthcare setting where the exposure occurred. All forms required by the healthcare agency must be completed at the time of the incident. The student should contact his/her faculty as soon as possible after the exposure occurs. The faculty will assist with completion of required documentation.

If a student is involved in an incident where exposure to bloodborne pathogens may have occurred, the following actions should be initiated immediately:

- 1.) investigate the circumstances surrounding the exposure incident,
- 2.) the investigation is initiated within as soon as the incident is reported to the faculty and supervising staff

3.) the student will seek diagnosis and treatment as soon as possible after the incident.

### Exposure Incident Report

Information to be collected initially include:

1. Student Name
2. Name of Faculty
3. Description of the incident
4. When the incident occurred, including date and time
5. Where the incident occurred
6. What potentially infectious materials were involved in the incident (e.g., blood, amniotic fluid, etc.)
  - a. How long was the body part exposed to the infectious materials
  - b. Was decontamination necessary and if so, what was done for decontamination
7. Under what circumstances the incident occurred (e.g., type of work being performed)
8. PPE being used at the time of the incident
9. Equipment involved in the incident (e.g., brand, lot #, etc.)
10. How was faculty, supervising staff, and administration notified and when
11. Unusual circumstances (e.g., equipment malfunction, power outage, etc.)
12. What actions were taken in response to the incident
13. Source Name (if known), Source Social Security Number (if known), Source Address (if known), and Source Telephone Number (if known)
14. Is the source infected with Hepatitis B, Hepatitis C, HIV, or other infection
15. Other people (faculty, staff, family) who were present at the time of the incident
16. It is recognized that much of the information involved in this process must remain confidential, and the privacy of the student and others will be maintained

### Follow-up Medical Consultation and Treatment

Follow-up medical consultation and treatment (if required) should be completed as soon as possible after the incident. All costs associated with follow-up medical care are the responsibility of the student. The Idaho State University (ISU) Student Health Services is the recommended provider for follow-up consultation and/or treatment. Other providers who can provide follow-up care are the local Health Departments, personal physician, or urgent care medical facilities.

If the student chooses to have medical consolation and/or treatment, a base line blood sample should be drawn as soon as possible after the exposure. It is recommended that a base line blood sample be drawn 1-2 hours after the exposure. Students will take a copy of the completed Exposure Incident Report (Appendix H) with him/her when he/she sees provider. It is the faculty's responsibility to make a copy of the Exposure Incident report and place it in the student's ISU School of Nursing file.

In most healthcare organizations the following information will be available to the student following an exposure to blood or other potentially infected materials:

- 1.) documentation regarding the routes of exposure and circumstances under which the exposure incident occurred and
- 2.) identification of the source individual's test results (unless unfeasible or prohibited by law).

Then, if possible and informed consent is obtained, the source individual's blood will be tested to determine HBV, HCV, and HIV infectivity. This information will also be made available to the student if it is obtained. At that time, the student will be made aware of any applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.

#### Information Kept in Student File in the ISU School of Nursing

A student file is kept in the ISU SON and contains all pertinent student information. The following information will be kept in the student file:

1. Health Certification Information
2. Exposure Incident Report (if exposed to blood or other potentially infectious materials)
3. Copies of the results of the examinations, medical testing, and follow-up procedures which took place as a result of a student's exposure to blood or other potentially infectious materials.
4. A copy of the information provided to the consulting provider as a result of any exposure to blood or other potentially infectious materials.

Confidentiality of the employee record will be maintained, except as required by law.

This information has been updated from Idaho State University School of Nursing information; from the Idaho State University Associate Degree Registered Nursing program, and from the Idaho State University Student Health Services.

### **Licensure Examination**

#### **Licensure Examination (National Council of Licensure Examination- NCLEX-RN)**

1. Upon successful completion of all requirements of ISU and the School of Nursing, the student will file a form in the state in which he/she wishes to take the national nursing licensure examination.
2. The Director of the School of Nursing or designated administrative faculty will send a notarized affidavit to the state verifying that the student has met all requirements to take the examination.
3. It may take at least six (6) weeks after graduation for posting of the information necessary for the affidavit to be completed.
4. For more information about the Idaho State Board of Nursing see website: [www@idaho.gov/ibn](http://www@idaho.gov/ibn)
5. If a student is interested in licensure in another state, he/she is responsible to contact that state's Board of Nursing office for information. It is the student's responsibility to notify the School of Nursing of the requirements for licensure.

## **Idaho State University Resources**

### **Accommodation for Disabilities**

Students diagnosed with a disability or who believe they have a disability that might require a reasonable accommodation on the part of the University or School of Nursing, please contact the Director of the ADA, Center of Services for Students with Disabilities, 282-3599; or go to their website at [www.isu.edu/ada4isu/](http://www.isu.edu/ada4isu/) It is the responsibility of the student to disclose a disability PRIOR to requesting that reasonable accommodation be made for disability.

### **Dismissal**

Undergraduate Handbook regarding Nonacademic and Scholastic Dismissal Policies:

### **Incomplete Grade**

University policy regarding incomplete grade in Undergraduate Catalog:  
[www.isu.edu/academic-info/current/](http://www.isu.edu/academic-info/current/).

### **Plagiarism**

ISU Faculty and Staff Handbook: [www.isu.edu/fs-handbook/part6/6\\_9/6\\_9a.html#2](http://www.isu.edu/fs-handbook/part6/6_9/6_9a.html#2) and University Student Handbook: [www.isu.edu/studenta/handbook.pdf](http://www.isu.edu/studenta/handbook.pdf)

### **Sexual Orientation Policy**

Student Handbook: [www.isu.edu/studenta/handbook.pdf](http://www.isu.edu/studenta/handbook.pdf) .

### **Sexual Harassment Policy**

Student Handbook: [www.isu.edu/studenta/handbook.pdf](http://www.isu.edu/studenta/handbook.pdf) .

### **Statement of Nondiscrimination Affirmative Action**

The School of Nursing is in compliance with university policy regarding affirmative action. See Undergraduate Catalogue: [www.isu.edu/academic-info/current/](http://www.isu.edu/academic-info/current/) and the Undergraduate Student Handbook: [www.isu.edu/studenta/handbook.pdf](http://www.isu.edu/studenta/handbook.pdf). The Affirmative Action office is located on the Pocatello campus in the Museum Building: 208-282-3964.

### **Students Rights and Procedure for Scholastic Appeals**

Student Handbook: [www.isu.edu/studenta/handbook.pdf](http://www.isu.edu/studenta/handbook.pdf).

### **Withdrawal**

Undergraduate Handbook regarding Withdrawal Procedures and Medical Withdrawal Policy:  
[www.isu.edu/academic-info/current/](http://www.isu.edu/academic-info/current/).

## References

- American Nurses Association. (2004). *Nursing: Scope and standards of practice*. Silver Spring, MD: Nursesbooks.org. The Publishing Program of ANA.
- Clark, (2017). *Creating and sustaining civility in nursing education*. Indianapolis, IA; Sigma Theta Tau International
- Scriven, M. & Paul, R. (1987). *National Council for Excellence in Critical Thinking*. Retrieved October 30, 2008, from [http://www.criticalthinking.org/aboutCT/define\\_critical\\_thinking.cfm](http://www.criticalthinking.org/aboutCT/define_critical_thinking.cfm).
- The Essentials of Baccalaureate Education for Professional Practice*. (2008). American Association of Colleges of Nursing.
- University of Washington School of Nursing. *Essential Qualifications of Candidates for Undergraduate and Pre-Licensure MEPN and GEPN Admission, Continuance, and Graduation*. (Revised August 2007). Retrieved October 30, 2008 from <http://www.son.washington.edu/admissions/memo.asp?id=27>.
- Yoder-Wise, P. (4<sup>th</sup> ed.). (2007). *Leading and managing in nursing*. St. Louis: Mosby.

Appendix A**IDAHO STATE UNIVERSITY SCHOOL OF NURSING****INCOMPLETE COURSEWORK**

Note: This form is to be completed by the faculty member responsible for the course in which a student has been assigned an INCOMPLETE in lieu of a course grade. The original will be retained in the student permanent folder and a copy will be given to the student.

---

 Student

---

 Student Identification No.

---

 Date Form Completed

---

 Course Number / Title

---

 Credit Allocation

---

 Semester

---

 Academic Year

 Outstanding Course Requirements:
 

---



---



---



---



---

 Date Requirements **Due**


---

 Date Requirements **Completed**


---

 Faculty Signature

---

 Faculty Signature

---

 Student Signature

---

 Student Signature

 4/15/08 (Approved Undergraduate Faculty)
 

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## **School of Nursing Course Petition**

Appendix B –

See the Nursing website for latest version of the SON Course Petition

## **University Student Petition**

Appendix C –

Contact the Nursing Advisor for the printed, multi-page copy of the petition

Appendix D

IDAHO STATE UNIVERSITY SCHOOL OF NURSING

INDEPENDENT STUDY CONTRACT

Course Number/Title \_\_\_\_\_

Credit Allocation \_\_\_\_\_

Student \_\_\_\_\_

Student Identification No. \_\_\_\_\_

**Objectives/Outcomes** of the Independent Study:

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

Student will be expected to complete the following **assignments/activities** for completion of Independent Study requirements:

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

Date Course Requirements Due \_\_\_\_\_

\_\_\_\_\_

Signature due at the Beginning and at Completion of the Independent Study.

**Initial Agreement**

**Completion**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Faculty Signature

\_\_\_\_\_  
Faculty Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\_\_\_\_\_  
Grade

## Appendix E

**Idaho State University School of Nursing  
Confidentiality Agreement  
Acceptance of Responsibility for Access to Protected Information**

As part of my student experience with the Idaho State University School of Nursing, I am expected and required to access, evaluate, and annotate records of the clients and health care facilities. These processes require the handling of and exposure to protected or confidential client (student/faculty/staff/client) and facility information occurring in both paper and electronic form.

I understand and agree that confidential information I am exposed to will not be discussed, disclosed, or in any way communicated with anyone other than the approved faculty and/or other facility personnel directly connected to my position as a nursing student.

I acknowledge and understand that I must comply with federal and state laws, as well as University policies, regarding the confidentiality of information relating to clients and each facility where I will provide clients services.

I agree to report to my faculty and/or appropriate facility personnel, any request made by unauthorized persons to access (duplicate or release) confidential records.

I acknowledge and understand that the improper disclosure by me of information relating to clients or the facility may subject the University to civil penalties or other penalties under the law, and in some instances, these penalties may extend to me. I also acknowledge and understand that such improper disclosure may result in disciplinary action up to and including failing grade for the nursing course and/or termination of eligibility to graduate.

---

Student Name (please print)

---

Student Signature

---

Date

The original signed version of this form will remain in the student permanent file in the undergraduate nursing office on the Pocatello or Meridian campus.

Approved Undergraduate Faculty: 4/15/08  
Revised 8/2011

## Appendix F

## Idaho State University School of Nursing

## Code of Professional Conduct

Statement of Understanding:

I have read and understand the ISU School of Nursing's Code of Professional Conduct. I acknowledge that I must comply with all aspects of the Code at all times throughout my role as a professional nursing student. I acknowledge and understand that failure to do so may result in disciplinary actions, up to and including expulsion from the nursing program.

---

LEGAL name (please print): \_\_\_\_\_

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

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

ISU ID (Bengal Card #): \_\_\_\_\_

Email address: \_\_\_\_\_

Approved Undergraduate Faculty: 4/15/08

Approved Undergraduate Faculty: August 2015

## Appendix G

## ISU School of Nursing Written Record of Student Violation of Code of Professional Conduct

Identifying Information		
Student Name:	Date:	
Student ID:	Nursing Course:	
Faculty Name:	Faculty Title:	
Type of Infraction		
<input type="checkbox"/> Level I Infraction (1 <sup>st</sup> Violation)	<input type="checkbox"/> Level II Infraction (1 <sup>st</sup> Violation)	<input type="checkbox"/> Level II Infraction (3 <sup>rd</sup> Violation)
<input type="checkbox"/> Level I Infraction (2 <sup>nd</sup> Violation)	<input type="checkbox"/> Level II Infraction (2 <sup>nd</sup> Violation)	
Type of Violation		
<input type="checkbox"/> Tardiness/Leaving Early	<input type="checkbox"/> Absenteeism	<input type="checkbox"/> Violation of School Policies
<input type="checkbox"/> Harmful Actions to Clients	<input type="checkbox"/> Violation of Safety Rules	<input type="checkbox"/> Disrespect to Clients/Coworkers
<input type="checkbox"/> Other:		
Details		
Description of Violation: (Includes reference to the UG Student Handbook)		
Plan for Improvement w/ Deadline Dates:		
Consequences of Further Infractions/Failure to meet Deadline Dates:		
Acknowledgement of Receipt of Warning		
<p><i>By signing this form, you confirm that you understand the information in this warning and have re-read the ISU School of Nursing Code of Professional Conduct. You also confirm that you and your nursing instructor have discussed this warning and a plan for improvement. Signing this form does not necessarily indicate that you agree with this warning. This form will be kept in the student's Permanent File.</i></p>		
Student Signature		Date
Faculty Signature		Date

## Appendix H

Idaho State University School of Nursing  
**Bloodborne Pathogen Exposure Incident Report**

Student Name \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_

Faculty Name \_\_\_\_\_

Facility \_\_\_\_\_

Description of the incident:

Where the incident occurred:

What potentially infectious materials were involved in the incident (blood, amniotic fluid, etc.):

How long was the body part exposed to the infectious materials:

Was decontamination necessary and if so, what was done for decontamination:

Under what circumstances the incident occurred (e.g., type of work being performed):

Personal Protective Equipment (PPE) being used at the time of the incident:

Equipment involved in the incident (e.g., brand, lot #, etc.):

Unusual circumstances (e.g., equipment malfunction, power outage, etc.):

How was faculty, supervising staff, and administration notified and when:

What actions were taken in response to the incident:

Source Name (if known) \_\_\_\_\_

Source Social Security Number (if known) \_\_\_\_\_

Source Address (if known) \_\_\_\_\_

Source Telephone Number (if known) \_\_\_\_\_

Is the source infected with Hepatitis B, Hepatitis C, Human Immunodeficiency virus (HIV), or other infection?

Yes \_\_\_ No \_\_\_ Unknown \_\_\_

Is the source willing to have his/her blood tested for Hepatitis B, Hepatitis C, and/or Human Immunodeficiency virus (HIV)? \_\_\_ Yes \_\_\_ No \_\_\_ Unknown

If so, complete the "Consent for Hepatitis B, Hepatitis C, and Human Immunodeficiency virus (HIV) testing.

Other people (faculty, staff, family) who were present at the time of the incident:

It is recognized that much of the information involved in this process must remain confidential and the privacy of the student and others will be maintained.

## Appendix H

Idaho State University School of Nursing  
**Bloodborne Pathogen Exposure Incident**  
**Post-Exposure Treatment Recommendations**

Directions: This form will be completed by a qualified healthcare professional following an exposure incident and must be provided to the student within 15 working days of the exposure incident.

Student Name \_\_\_\_\_

Date of Exposure \_\_\_\_\_

**Hepatitis B**

\_\_\_\_\_ Hepatitis B vaccination is indicated.

Date Vaccination Received \_\_\_\_\_

If vaccination is indicated and not received, please explain:

\_\_\_\_\_ Hepatitis B vaccination is not indicated.

**HIV/AIDS**

\_\_\_\_\_ Repeat HIV/AIDS testing at 3, 6, and 12 months

Date Initial Testing Completed \_\_\_\_\_

\_\_\_\_\_ Post Exposure Prophylaxis is indicated.

Date Post Exposure Prophylaxis Started \_\_\_\_\_

**Hepatitis C**

\_\_\_\_\_ Repeat Hepatitis C testing at 3, 6, and 12 months

Date Initial Testing Completed \_\_\_\_\_

Other Recommendations (Please Specify):

I, the undersigned Healthcare Professional, acknowledge the student has been informed of the results of this evaluation for exposure to blood or other potentially infectious materials, and he/she understands the treatment options (if warranted).

Healthcare Professional Signature \_\_\_\_\_

Healthcare Professional Name (Please Print): \_\_\_\_\_

Date \_\_\_\_\_

Post-exposure information is available from the Centers for Disease Control (CDC):

2001 MMWR Report, <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5011a1.htm>

2005 MMWR Report, <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5409a1.htm>

## Appendix H

Idaho State University School of Nursing  
**Bloodborne Pathogen Exposure Incident**  
**Consent for Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus (HIV) Testing**

I, the undersigned Source, understand that, \_\_\_\_\_ a nursing student in the Idaho State University School of Nursing program was exposed to my blood or body fluids. The Center for Disease and Prevention Control and Prevention (CDC) advises evaluation of the possibility on an infection from my blood or body fluids. I understand that the results of my laboratory blood tests will be helpful in determining treatment options for this student.

If I consent to testing, I understand that I am responsible for the costs of the testing. With my consent, the results of the laboratory blood tests will be provided to the exposed student through his/her healthcare professional.

Please indicate:

\_\_\_\_\_ I consent to confidential testing for Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus (HIV).

\_\_\_\_\_ I do not consent to confidential testing for Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus (HIV).

\_\_\_\_\_ I consent to share the results of my Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus (HIV) test with the healthcare provider caring for the student named above.

\_\_\_\_\_ I do not consent to share the results of my Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus (HIV) test with the healthcare provider caring for the student named above.

Source Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Social Security Number \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Witness Name (please print) \_\_\_\_\_

Witness Signature \_\_\_\_\_

Date \_\_\_\_\_

Instructor Name \_\_\_\_\_



## Appendix H

Idaho State University School of Nursing  
Bloodborne Pathogen Exposure Control  
Release of Information Form

---

**Student Name:** \_\_\_\_\_  
 Bengal ID Number: \_\_\_\_\_ Email address: \_\_\_\_\_

Statement of Understanding

By signing below on Student's behalf, I acknowledge and affirm the following: "ISU" means Idaho State University, its governing board, the State of Idaho, and each applicable officer, faculty, agent, employee, subcontractor, representative, volunteer, and student whom ISU employs.

I have read and understand the ISU School of Nursing's Bloodborne Pathogen Exposure Control policy.

I understand that the Student is responsible to follow each instruction outlined in the Bloodborne Exposure Control policy, and that the Student is responsible to:

- 1.) report any exposure incident to the Student's assigned faculty and the nurse manager in the facility where the Student is assigned to undertake clinical experiences;
- 2.) follow-up with medical interventions as directed by the faculty supervising the Student's clinical experiences; and
- 3.) allow the ISU School of Nursing to obtain personal health information from any health care provider who provides assessment, diagnosis and treatment for any bloodborne exposure that the Student incurs as a direct result of participation in assigned clinical activities.

Release

"Liability" means any liability, loss, damage, expense, claim or cause of action – including any reasonable attorney's fee.

By signing this Release of Information form, I indicate that:

- I am at least eighteen years of age and fully competent to sign the Agreement on Student's behalf;
  - I have read and understand the Student's responsibilities upon any Bloodborne Pathogen exposure that the Student incurs while in an assigned clinical experience;
  - whoever signs this document does so of his/her own free will; and
  - I release ISU from any Liability that arises from the Student's failure in a timely and complete manner to seek follow-up care related to any bloodborne exposure, including any Liability that foreseeably arises from that failure.
-

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

[Student/ Parent/ Guardian, if Student is a minor]

Legal Name (please print): \_\_\_\_\_

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

Address \_\_\_\_\_

\_\_\_\_\_

Contact Phone # \_\_\_\_\_

## Appendix I

**DECLINATION FORM FOR SEASONAL INFLUENZA VACCINE**

Name (printed): \_\_\_\_\_

The School of Nursing has required that I receive influenza vaccination in order to protect myself and the patients I serve.

**I acknowledge that I am aware of the following facts:**

- Influenza is a serious respiratory disease that kills an average of 36,000 persons and hospitalizes more than 200,000 persons in the United States each year.
- Influenza vaccine is recommended for me and all other healthcare workers to prevent influenza disease and its complications, including death.
- If I become infected with influenza, I will shed the virus for 24-48 hours before influenza symptoms appear,
- Even when my symptoms are mild or I have no symptoms, I can spread severe illness to others.
- I understand that the strains of virus that cause influenza infection change almost every year, which is why a different influenza vaccine is recommended each year.
- I cannot get the influenza disease from the influenza vaccine.
- I acknowledge that influenza vaccination is recommended by the Centers for Disease Control and Prevention (CDC) for all healthcare personnel to prevent infection from and transmission of influenza and its complications, including death, to my patients, my coworkers, my family, and my community. Despite these facts, I am choosing to decline the influenza vaccination right now.

I am declining because:

\_\_\_\_\_

- I understand that if I choose to decline the influenza vaccine, the clinical sites may require me to wear a surgical mask during my shifts because there is risk that I may infect patients or become infected with the flu, I will be required to wear a surgical mask beginning Fall semester, 2011. *Failure to wear the surgical mask during my clinical shift may result in disciplinary action.*
- I understand that I may change my mind at any time and accept influenza vaccination, if vaccine is available.
- I have read and fully understand the information on this declination form.

Signature

Date



## Appendix J

# Idaho State

## UNIVERSITY

### School of Nursing

#### CONFIDENTIALITY UNDERSTANDING AND CONSENT AND RELEASE FOR SIMULATION EXPERIENCES

##### Confidentiality Understanding

By signing below, I acknowledge having read and understand this statement and agree to maintain the strictest confidentiality regarding all observations I may make about the performance of other participants in the School of Nursing's simulation, learning and testing environments.

Participants are observers, learners, performers, teachers, or patients. As a student, I will demonstrate professional behaviors at all times (see p. 10 of UG Student handbook). I understand I am expected to keep all events, procedures, and information confidential at all times during the simulation, learning, and testing and after it has ended, including patient history information obtained prior to the actual simulation experience, as well as information obtained and used in the pre-briefing sessions. I agree not to share information about a simulation, content, learning, or testing process with others.

The consequences of violating the confidentiality agreement are a minimum of a Level II and potentially a Level I infraction, depending upon the circumstances and severity as set forth in the undergraduate handbook. For graduate students, violation may result in an unsatisfactory grade or dismissal from the program.

I have read all of the above and agree to the terms of this Confidentiality Understanding.

Print Name:

Date:

\_\_\_\_\_

\_\_\_\_\_

Signature:

\_\_\_\_\_

Parent/Guardian Signature (if under 18): \_\_\_\_\_

Date:

\_\_\_\_\_

##### Audiovisual Digital Recording Consent and Release

I am hereby informed that there is a continuous audiovisual digital recording in rooms in the Learning Lab. I consent to continuous audiovisual digital recording while I am in the Learning Lab. I understand that the audiovisual digital recordings will be used for grading of my knowledge, skills, and attitudes. For all other uses, unless authorized by me, I will not be specifically identified by name and the recordings will be shown only for educational, research, presentations, or administration purposes. No commercial use of personal audiovisual recording electronic devices will be permitted. This includes the camera on a cell phone or other electronic devices with comparable capabilities. I release the State of Idaho, Idaho State University, School of Nursing, and those acting pursuant to its authority from liability for any perceived violation of any personal or proprietary right I may have in connection with such use. I agree ISU School of Nursing owns the audiovisual digital recordings. I have read all of the above and agree to the terms under the audiovisual digital recording.

Print Name:

\_\_\_\_\_

Date:

\_\_\_\_\_

Signature:

\_\_\_\_\_

Parent/Guardian Signature (if under 18): \_\_\_\_\_

Date:

\_\_\_\_\_

**Consent and Release for Still Photographs**

I authorize faculty and administrators of the School of Nursing to publicly show still photographs (slides and prints) depicting me during my classes or in the Learning Lab. The photographs will be used internally in the School of Nursing. I understand that, unless otherwise approved by me, I will not be specifically identified by name, and that photographs will be shown only for educational, research, or administration purposes. No commercial use of the photographs (slides or prints) will be made without my permission.

I release the State of Idaho, Idaho State University, School of Nursing, and those acting pursuant to its authority from liability for any violation of any personal or proprietary right I may have in connection with such use.

Print Name:

\_\_\_\_\_

Date:

\_\_\_\_\_

Signature:

\_\_\_\_\_

Parent/Guardian Signature (if under 18): \_\_\_\_\_ Date: \_\_\_\_\_

**Consent and Release for Commercial Use of Audiovisual Digital Recording and Still Photographs**

I authorize the faculty, Office of Professional Development, and administrators of the School of Nursing to use audiovisual digital recordings and still photographs for commercial purposes. I will not be specifically identified by name.

I release the State of Idaho, Idaho State University, School of Nursing, and those acting pursuant to its authority from liability for any violation of any personal or proprietary right I may have in connection with such use.

Print Name:

\_\_\_\_\_

Date:

\_\_\_\_\_

Signature:

\_\_\_\_\_

Parent/Guardian Signature (if under 18): \_\_\_\_\_ Date: \_\_\_\_\_

## Appendix K

**Idaho State University School of Nursing**  
**Annual Follow-up Tuberculosis Health Questionnaire**  
**for Previous Positive Skin Test**

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

Our records show you have a history of having a positive (reactive) PPD skin test for Tuberculosis (TB). If you have had a positive (reactive) PPD skin test you should never again receive another skin test. A positive skin reaction means that sometime during your life you have come into contact with tuberculosis bacteria. It does not mean that you have tuberculosis now.

An annual chest x-ray is not required. This brief questionnaire is very important to assure you have not developed active TB. Please answer all of the following questions once a year on your annual TB due date. Please print this form, complete and sign, and upload to the annual TB Test assignment in the Undergraduate/Graduate Homeroom. If this form is not completed on an annual basis you will be considered delinquent in the Tuberculosis (TB) Health Status requirement.

	YES	NO
1. Productive cough (for more than three weeks)	_____	_____
2. Persistent weight loss without dieting	_____	_____
3. Persistent low-grade fever	_____	_____
4. Night sweats	_____	_____
5. Loss of appetite	_____	_____
6. Swollen glands, usually in the neck	_____	_____
7. Recurrent kidney or bladder infections	_____	_____
8. Coughing up blood	_____	_____
9. Shortness of breath	_____	_____
10. Chest Pain	_____	_____
11. Recent or past course of corticosteroids	_____	_____

I have reviewed the signs and symptoms of active TB and verify I have none present at this time. I will let my adviser know if and when I present any of these symptoms.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## References:

Portneuf Medical Center Employee Health Annual Tuberculosis Health Questionnaire,  
777 Hospital Way, Pocatello, ID.

Joseph Patrick, MD, California Infection Control Consultants, San Ramon, California.

Basic Training Course, Association for Professional in Infection Control and Epidemiology (APIC), July 1992

Approved by UG Faculty: 11/12/2012; by Graduate Faculty: 02/04/2013

Appendix L  
Idaho State University  
School of Nursing  
Student Drug Testing Policy

**Purpose**

In alignment with clinical affiliation agreement procedures through agencies/organizations where students are placed for clinical experiences, the School of Nursing (SON) requires all students to voluntarily participate in substance testing while enrolled in the program. This document sets forth the policy for substance testing required for student for admission and progression in programs of the SON.

**Substance Use Testing**

1. Students enrolled in SON programs are subject to substance use testing (urine) as required by clinical placement site, and according to any site-specific policy in which the student is placed.
2. Substance use testing may be required based on clinical need or if background checks reveal a past history of substance use or associated criminal or civil charges.
3. Substance use testing may be required upon admission and every year thereafter while enrolled in the bachelor or graduate nursing programs in the SON.
4. All costs associated with the drug testing are the responsibility of the student.
5. Refusal to complete the substance use testing process will prohibit the student from enrollment in any SON course and may lead to program dismissal.
6. Students must use and follow the procedures of a drug testing laboratory approved by the SON.
7. Students may be tested using laboratory testing methods that meet the criteria for the up to Twelve Panel Non-Rapid urine drug screen. Testing for the following substances are required (minimum):
  - a. Marijuana (THC metabolite)
  - b. Cocaine
  - c. Amphetamines
  - d. Opiates (including heroin)
  - e. Phencyclidine (PCP)
8. A record of the test results must be sent directly from the testing agency to the SON. Test results will be kept in the student's confidential file and protected in accordance with SON and Idaho State University requirements.

**Positive Substance Use Outcome**

1. All positive drug test results will be reviewed with the laboratory to ensure the results accurately reflect non-prescribed drug usage (student should disclose medication usage at time of testing). In the event of question, the results will be reviewed with Idaho State University SON administration for a final determination on the results.
2. Students with a positive drug test will meet with the assigned advisor of the SON to review the testing results and the SON policy.
3. Students with a positive substance use test at any time while enrolled in any SON program will be dismissed from the nursing program.

Reasonable Suspicion Testing

1. Students may be required to submit to reasonable suspicion testing while participating in class or clinical experiences. Reasonable suspicion may be based on but not limited to observable phenomena such as direct observation of substance use and/or the physical symptoms or manifestations of substance abuse such as:
  - a. Speech – incoherent, confused, rapid, slow, slurred, rambling, shouting, profanity, or change in speech.
  - b. Coordination – swaying, staggering, lack of coordination, grasping for support, slowed reflexes.
  - c. Demeanor- change in personality, excited, combative, agitated, aggressive, violent, argumentative, indifferent, threatening, antagonistic, mood swings, irritability, restlessness.
  - d. Alertness – change in alertness, sleepiness, drowsiness, confused.
  - e. Physical – bloodshot eyes, teeth grinding, nasal redness, dry mouth, flushed face, tremors, pupillary changes, odor of substance and/or alcohol.
  - f. Appearance- dirty clothing, disheveled.
  - g. Performance – unsafe practice, unsatisfactory work, absenteeism, tardiness.
  - h. Evidence of involvement in the use, possession, sale, solicitation or transfer of drugs.
2. If a faculty member or clinical agency staff member observes behaviors listed above, the student will be removed from the educational setting immediately.
3. The faculty responsible for the course or clinical will decide if substance testing is warranted. If the decision is made to test the student, arrangements will be made to have the testing done immediately.
4. The student will be responsible for obtaining transportation to the designated testing facility. If the results of the substance use test are positive, the student will be dismissed from the SON.
5. Students will not be able to return any clinical setting while the test results are pending.
6. If the student refuses testing, this refusal will be treated as a positive test and the student will be dismissed from the SON.

LEGAL name (please print): \_\_\_\_\_

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

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

ISU ID (Bengal Card #): \_\_\_\_\_

Email address: \_\_\_\_\_



## Appendix M

## Idaho State University School of Nursing

## Received and Read the Student Handbook

Statement of Understanding:

I have received and read the ISU School of Nursing's Student Handbook. I acknowledge that I must comply with all aspects of the Handbook at all times throughout my role as a professional nursing student. I acknowledge and understand that failure to do so may result in disciplinary actions, up to and including expulsion from the nursing program.

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LEGAL name (please print): \_\_\_\_\_

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

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

ISU ID (Bengal Card #): \_\_\_\_\_

Email address: \_\_\_\_\_

## Appendix N

### **School of Nursing Formal Complaint Policy**

A formal complaint is a written letter or email communication, which includes a statement of fact and rationale for a claim of difference in opinion, judgement or evaluation by a student, faculty, staff or community member, regarding an issue involving the university, a university program(s), individual, or circumstance at or about the university. Formal complaints are managed as directed by university policy in the University Student Handbook, the ISU Faculty/Staff Handbook, the Graduate School Catalog, and the SON Faculty Staff Handbook, Undergraduate Student Handbook, and the Graduate Student Handbook. A formal complaint in all SON programs is a written document that provides a clear, substantive statement of the issue and supportive documentation of fact. A formal complaint can be submitted to a course instructor, program administrative personnel based on chain of command, or Director. Any complainant is encouraged to first attempt to resolve a concern/complaint through direct conversation with those involved and/or at the appropriate level of administration before taking formal, written action in the form of a formal complaint. Should resolution not be possible, the complainant can file a formal, written complaint according to the process herein.

#### **Student Formal Complaints**

A formal complaint is resolved with the student attempting to resolve the complaint with the faculty/instructor responsible for the course, policy, procedure, or decision that resulted in the complaint/grievance. The student will make an appointment to meet with the faculty/instructor to discuss the student's concern as soon as the problem is identified. Documentation of the meeting (including written narrative of the student's problem, disagreement or issue) and result of the meeting will be placed in the student's permanent file. The student will receive a copy of this documentation. If a mutually agreeable resolution cannot be reached with the faculty/instructor and there is clear documentation that the student and faculty/instructor cannot reach a resolution, the student needs to make an appointment with their advisor to discuss next steps. The faculty advisor can discuss plans and help guide the student to resolution of any complaint. The student then can move to the administrative faculty to discuss the issue according to chain of command and organizational structure based on organizational chart in the SON. The student should bring copies of all documentation and the plans for action he/she would like to take to seek resolution. If the student is unable to resolve the complaint, the student can proceed through the chain of command following the same process to the point of the Director. If a settlement cannot be reached and the student wants to pursue acceptable resolution, the Director shall appoint a committee of three (3) faculty members who are not directly involved in the student's situation. This committee will meet within five (5) days of its appointment. The function of this SON ad hoc committee is to hear the student's concern and the faculty's response and make a recommendation within 24 hours to the Director. The Director will make a final decision on the student complaint. The Director will meet with the student and discuss his/her final decision. If a settlement cannot be reached and the student wants to pursue acceptable resolution, the student may proceed to the Division of Health Science Scholastic Appeals Committee [in the case of a grade appeal] and follow the appeals process established at the KDHS level.

A formal complaint process beyond the Director of the SON will be handled according to university policies [and Graduate School policies as appropriate] and then to the Idaho State Board of Education policies [see links here].

Policy on student complaints and grievances can be found in the ISU Student Handbook at <http://www.isu.edu/media/libraries/student-affairs/Student-Handbook.pdf> [p. 18].

ISU Graduate Council policies can be found at:

<http://coursecat.isu.edu/graduate/generalinfoandpolicies/appealsanddismissals/>

Idaho State Board of Education Complaint procedures can be found at:

<https://boardofed.idaho.gov/higher-education-private/private-colleges-degree-granting/state-authorization-reciprocity-agreement-sara/complaint-procedures/>

[All student grievances must exhaust institution's dispute resolution processes first]

## Appendix O

## St. Luke's Policy on Covid-19

Memo: Student participation in AGP care & N95 Fit-Testing

Academic Partners,

We have been fortunate to allow students back into nearly all patient care settings as of July 5<sup>th</sup>. Non-provider students are restricted from providing care for COVID positive, COVID rule out, or isolation precaution patients. These limitations, coupled with the recent CDC recommendations to require care providers to wear N95 or PAPR for all aerosol generating procedures (AGP) regardless of COVID status, have further limited our ability to have students engage in valuable learning opportunities across a variety of areas and patients. AGP is now a common dynamic in patient care

Our organization has decided that students arriving with a school-provided NIOSH-certified N95 mask (without exhalation valve or vent) for which the school has provided fit-testing, will be allowed to be involved in AGP care.

For your students to begin participating in AGP care, the following criteria should be satisfied:

- I. Academic Partners supply student(s) with N95s that meet the following specifications.
  - NIOSH approved
  - No valves/vents
  - New and unused
- II. Student must arrive with enough masks to comply with St. Luke's mask use/reuse guidelines (see supplemental attachments) and [CDC guidelines](#)
- III. Academic Partners will facilitate/retain the [OSHA medical questionnaire](#) and if student is medically cleared to wear a respirator, will complete a fit test. At the time of fit testing, instruction will occur on adherence to the St. Luke's Re-use Program.
- IV. Documentation necessary:
  - Student(s) to be provided a copy of the fit test record (template provided by SLHS) and will be required to bring this on site. This should be worn in their badge holder or in a wallet for easy access.
  - School to retain copy of student(s) OSHA medical questionnaire and fit test record (optional template provided by SLHS)
- V. Re-fit testing, should it be needed, will be completed by the school.

We know that this may be difficult to accomplish in time for your students' 2019 clinicals. It is always our goal to provide formative, positive experiences for your students -- our future healthcare workers and leaders. If a school is not able to stand up a fit-test process or is unable to supply the approved N95 respirators, your students are still welcome at St. Luke's but will be limited from caring for AGP procedures. Our hope is that within the coming months, and certainly into 2021, this will expand learning opportunities for your students.

Thank you,

Student Services

St. Luke's Health System

## **FAQs**

### **Q. What type of N95 masks are approved?**

A. N95 masks must be new and unused and must be NIOSH certified. Masks with valves or vents are not acceptable. [Here is a CDC list to help.](#)

### **Q. How many N95s should a student have?**

A. Students should have an adequate supply to be able to rotate them following the St. Luke's Reuse procedure. (*Example: a student on site for 5 consecutive days, will need 5 N95s*). If unable to provide a sufficient supply of N95s a student will still be able to participate in clinicals, but experiences may have limitations due to AGPs once they have exhausted their supply of N95s per St. Luke's Reuse procedure.

### **Q. What if our school does not have someone trained to fit test?**

A. Please reach out to your St. Luke's Student Coordinator or [students@slhs.org](mailto:students@slhs.org) for Occupational Safety to provide information on OSHA consultation services or a St. Luke's "train the trainer" session.

### **Q. What if the geographic location of the student and our school makes fit testing a challenge?**

A. Please contact your St. Luke's Student Coordinator or [students@slhs.org](mailto:students@slhs.org) for more information about the possibility of sending your student(s) to Occupational Safety or Occupational Health.

### **Q. What if we have students who are employees of St. Luke's and have already been fit-tested?**

A. Students fit-tested as employees of St. Luke's do not need to be fit tested again and may use the supply provided by St. Luke's.

### **Q. What if we have students who have been fit tested by a third party, such as an Occupational Health Clinic, or as an employee of another healthcare facility?**

A. Students already fit-tested by an organization other than St. Luke's will be fine to proceed as long the N95 masks are new, unused, and NIOSH certified. Again, masks with valves or vents are not acceptable. Additionally, documentation of the fit test and the model of the N95 should be verified and completed as outlined in step IV in the memo above.

**Q. What if our school is unable or chooses not to supply or fit test students? Will they still be able to come to clinicals?**

A. Yes, students can still attend clinicals! The inability to provide AGP care may result in students participating in fewer or compromised experiences. If advanced notice is provided to your St. Luke's Student Coordinator, we may be able to be strategic in where your student(s) are placed to maximize their learning opportunities accordingly.

## Appendix P

**Aerosol Generating Procedures- (Replaces the CDC AGP example list)**

An aerosol is a suspension of solid particles or liquid droplets in gas. Aerosols are produced when an air current moves across the surface of a film of liquid; the greater the force of the air the smaller the particles that are produced.

Aerosol-generating procedures (AGPs) are procedures performed on patients that are more likely to generate higher concentrations of infectious respiratory aerosols than coughing, sneezing, talking, or breathing. AGPs can produce airborne particles <5 micrometers ( $\mu\text{m}$ ) in size which can remain suspended in the air, travel over a distance and may cause infection if they are inhaled. Therefore, AGPs create the potential for airborne transmission of infections that may otherwise only be transmissible by the droplet route.

The below list replaces the example list published by the CDC. [St. Luke's guidelines](#) should be followed to determine when and what patients require PPE protection when AGP's are delivered during the COVID-19 pandemic.

DEVICE	NOT AGP	Rationale
Nasal Cannula	X	These are oxygen delivery devices. There is no heat or humidity associated with them, so they are not considered an AGP.
Oxymask	X	
Non-rebreather	X	
Hudson Advanced Comfort Fit (Wood River Only)	X	Bubble bottles do not produce enough humidity content to be considered an AGP
Bubble Bottle	X	
Meter Dose Inhaler (MDI)**	X	MDI do not produce aerosols. If delivering, remain 6ft back from patient to reduce risk of exposure from direct cough
NP/OP, mid-turbinate swab, nasal swab/nasal wash**	X	These do not produce aerosols, however the procedure may induce a cough.

DEVICE / PROCEDURE	AGP	Rationale
Heated High Flow Oxygen (i.e. Vapotherm, Optiflow etc.)	X	Vapotherm provides heated humidified oxygen at high levels of flow.
Isolette w/humidity	X	An isolette provides a warm humidified environment that is thermoregulated with air currents.
BiPAP / Non-invasive ventilation (i.e. V60, Trilogly etc.)	X	Humidified, positive pressures are delivered using a BiPAP/CPAP. Substantial exposure to exhaled air occurs due to the positive pressures used in BiPAP/CPAP.
Invasive Ventilation / Ventilators	X	Heated, humidified gases are delivered at positive pressures. Although ventilators are a closed-circuit system, there is potential for the circuit to disconnect which would cause substantial exposure.
Home CPAP/Hospital CPAP	X	These devices contain a humidifier chamber to humidify the gas that is delivered to the patient.
Intubation / Extubation	X	Very high potential for direct exposure to droplets and aerosols from exhaled air /mucosa during the procedure
Trach care/ trach insertion/ Laryngectomy care	X	
Nasal/tracheal suctioning in open system and Cough Assist	X	
Manual ventilation with resus bag	X	
Any endoscopic procedures involving the respiratory tract such as bronchoscopy, TEEs	X	
Cardiopulmonary resuscitation	X	
Nebulizer / Aerosol therapy/Metaneb/cough assist	X	Very high potential for direct exposure to droplets and aerosols from exhaled air during the procedure
Sputum Induction	X	Very high potential for direct exposure to droplets

\*\*Clinician has high risk for direct exposure to droplets from cough and exhaled air during administration of treatment or collection of respiratory specimens. For this reason, the clinician may consider the use of a respirator (N95/PPR) while administering the treatment/collecting specimen on PUI/COVID+ patients.