SEATTLE UNIVERSITY
COLLEGE OF NURSING

UNDERGRADUATE STUDENT HANDBOOK
Bachelor of Science in Nursing &
Bachelor of Science in Diagnostic Ultrasound
2018-2019
# TABLE OF CONTENTS

**WELCOME TO SEATTLE UNIVERSITY COLLEGE OF NURSING**......................... 5  
  History of the College of Nursing........................................................................................................................................................................ 5

**College Overview**......................................................................................................................... 7 
  Mission............................................................................................................................................ 7 
  Vision ............................................................................................................................................. 7 
  Values ............................................................................................................................................ 7

**Bachelor of Science in Nursing (BSN)**.................................................................................. 8 
  BSN Program Learning Outcomes.................................................................................................. 8 
  BSN Curriculum Description ........................................................................................................... 8 
  Concepts Central to BSN Curriculum ............................................................................................... 9 
  Competencies ................................................................................................................................. 11 
  Sequencing of the Nursing Program .............................................................................................. 11

**Bachelor of Science in Diagnostic Ultrasound**............................................................... 12 
  DIUS Program Learning Outcomes ................................................................................................. 12 
  DIUS Learning Outcomes ............................................................................................................... 12

**Seattle University Policies**.................................................................................................. 13 
  Statement on Diversity & Inclusion .................................................................................................. 13 
  Seattle University Nondiscrimination Policy.................................................................................... 13 
  Students with Disabilities ................................................................................................................. 14 
  University Academic Calendars ....................................................................................................... 14 
  Seattle University Student Handbook.............................................................................................. 14

**Seattle University Resources**............................................................................................. 15 
  Counseling and Psychological Services (CAPS) ........................................................................... 15 
  Disabilities Services .......................................................................................................................... 15 
  Learning Assistance Programs ......................................................................................................... 15 
  Lemieux Library ............................................................................................................................... 15 
  Copy Machines ............................................................................................................................... 15 
  Collegia Program ............................................................................................................................ 16 
  Additional Information ...................................................................................................................... 16 
  Expenses ........................................................................................................................................ 17 
  Financial Resources ........................................................................................................................ 17 
  Financial Aid .................................................................................................................................. 17 
  Scholarships and Financial Awards ................................................................................................ 17 
  Upper Division Employment .......................................................................................................... 18
WELCOME TO SEATTLE UNIVERSITY COLLEGE OF NURSING

The College of Nursing is proud to be part of Seattle University, whose Jesuit mission is dedicated to educating the whole person, to professional formation, and to empowering leaders for a just and humane world. Established in 1935, the college has an 80+ year history of preparing excellent nurses who are held in high regard by their employers, colleagues, and communities. In 2017, the college welcomed the Bachelor of Science in Diagnostic Ultrasound program.

The Seattle University College of Nursing (CON) undergraduate programs are designed to meet the needs of entering freshman and transfer students pursuing a Bachelor of Science in Nursing (BSN) or in Diagnostic Ultrasound (DIUS). These degrees translate into a minimum of 180 quarter-hour credits that includes core requirements, sciences, other prerequisites, and major courses. The BSN program of study prepares graduates as entry-level generalists in the nursing profession, and students graduating from Seattle University with the BSN degree are eligible to take the National Council Licensure Examination for Registered Nurses (NCLEX-RN), which is the licensing exam required to practice as a registered nurse in the United States. Likewise, the DIUS program of study prepares graduates as entry-level sonographers, and students graduating from Seattle University’s DIUS program are eligible to take the American Registered Diagnostic Medical Sonography (ARDMS) boards.

The undergraduate curricula challenge students to grow intellectually, professionally, and personally. This handbook contains CON policies and procedures to guide and support students in their journey toward becoming a healthcare professional. The current version of the handbook can be accessed on our website at https://www.seattleu.edu/nursing/bsn/. Please note that this handbook is subject to change throughout the academic year.

History of the College of Nursing

The history of Seattle University College of Nursing is linked to the early history of Providence Hospital in Seattle. In 1877, the Sisters of Providence responded to a request to care for the sickly poor in the Seattle area. The "Poor House" on 5th and Spring Street was eventually moved to 17th and Jefferson, becoming Providence Hospital. By 1907, seventeen Sisters of Charity of Providence were registered as nurses in the state of Washington, and, as needs for nursing care increased, the Providence Hospital School of Nursing was opened July 16, 1907 with four lay students enrolled. The first class of the Providence Hospital School of Nursing graduated in 1910.

The School grew, and in 1923 affiliated with the University of Washington for instruction in specific science courses. During this period, students spent forty-eight hours a week “on duty” and were assigned to older students on an apprenticeship basis. Classes were held at night on the students’ own time. Enormous uniform pockets, covered by voluminous white aprons, were convenient for carrying candy or hot water bottles on a cold night to and from classes.

In the fall of 1931, Seattle School became the first Jesuit School to admit women to its evening extension; in 1933, this privilege extended to day classes. In 1934, in conjunction with the University of Washington, Providence Hospital School of Nursing strengthened its nursing education program and met the requirements that led to a degree of Bachelor of Science in Nursing. The first class to finish under this program received their degrees in 1937, although students still had the option of completing the diploma-only requirements and graduating from Providence Hospital School of Nursing.

Beginning in 1935, the Department of Nursing was introduced at Seattle School, and the first graduates completed the program in 1939. The same type of affiliation that the University of Washington had for Providence students was arranged with Seattle School and, for a few years, students were permitted to
select their collegiate affiliation with either Seattle School or the University of Washington; they were also given the option to terminate after the diploma requirements were met. The completion of the collegiate program required five years since the student was unable to carry more than a couple of courses each quarter due to the time spent in the hospital “on duty”. Soon after, the Department of Nursing was given the status of School when the entire collegiate program was transferred to Seattle School in 1941. Affiliation with the University of Washington was still continued for some courses, though students graduated from Seattle School.

In 1948, Seattle School became Seattle University, so the nursing school became Seattle University School of Nursing. In February 1953, the Seattle University School of Nursing basic collegiate program was approved by the National League for Nursing (NLN), making it the second university in Washington State to receive this honor. Convinced that experience on nights and weekends did not optimize student learning, Seattle University became the first school of nursing in the nation to eliminate night and weekend clinical experiences in the 1950s. The American Journal of Nursing requested and published an article explaining this innovative program.

In the spring of 1961, the student nurses moved from the nurses' residence at Providence Hall to the women's dormitories on the Seattle University campus. By the mid-1960s, faculty offices and classrooms were being transferred to the Seattle University campus, and the move was completed in August 1967. Additional clinical faculties were added, and the increased clinical experience expanded the opportunities for student learning.

During the 1980-1981 academic year, the School of Nursing was given its own building on campus in the renovated Gene E. Lynn Building, and then in July 1994, the School of Nursing moved again into its present location in the completely renovated historic Garrand Building at the center of campus. This building is the oldest on campus, and was the original site of Seattle College. A rededication of the building was held on December 8, 1994 with Archbishop Thomas Murphy officiating at a morning mass.

Many people have played a part in the development of the School and several Deans have guided the program through the years. Sister Mary Ruth Niehoff, the Dean from 1956-1969, played a major role in establishing the School of Nursing as a sound academic unit within Seattle University and provided the inspiration for subsequent Deans to follow her example in achieving and maintaining a quality program. A core of continuing faculty has devoted time, energy, and talent to develop and maintain high standards for the program. Curriculum changes over the years reflect the responses to changing healthcare needs and delivery of care, as well as growth and development of the profession. Several grants have been awarded to study and improve the curriculum over the years, and continued expansion of clinical facilities has increased opportunities for student learning. The School of Nursing is an integral part of Seattle University, and in 2004, the School was named College of Nursing, reflecting the growth and complexity of its programs of study.

On July 16, 2005, the community got its first look at the $65-million-dollar renovation of the former Providence Hospital, which houses the Seattle University College of Nursing’s Clinical Performance Lab. Within the newly renovated and retrofitted building, reopened as the James Tower Life Sciences Building, 19,000 square feet was set aside for the College of Nursing’s Clinical Performance Lab. The state-of-the-art facility houses research labs, classrooms, faculty offices, high-fidelity simulation suites, and an exam clinic. Through patient simulators and other innovative processes, the new lab seeks to replicate hospital and clinical settings, thus giving students experience a more real and hands-on experience.
History of the Diagnostic Ultrasound Program

The Diagnostic Ultrasound program was founded in 1978 by sonographer and educator Joan P. Baker, MSR, RDMS, RDGS, FSDMS. As part of the College of Science and Engineering, the program grew from its first graduating class of two students to 22-24 students per year. In July 2017, the DIUS program joined the College of Nursing.

COLLEGE OVERVIEW

Mission
We educate and inspire leaders to transform healthcare for a just and humane world.

Vision
We are recognized as an engaged, creative and dynamic learning organization, committed to social justice, innovation, scholarship, teaching excellence, and the formation of professionals ready to meet the evolving healthcare needs of a global community.

Values
- Empowerment
- Innovation
- Caring
- Social Justice
- Integrity

Refer to http://www.seattleu.edu/about/mission/ for the vision, mission, and values of Seattle University.
BACHELOR OF SCIENCE IN NURSING (BSN)

BSN Program Learning Outcomes

The learning outcomes of the Undergraduate Nursing Program are constructed to provide the educational preparation for entry-level nursing practice.

Upon completion of the program undergraduate nursing students will be able to:

1. Integrate knowledge from liberal arts, nursing science, and related disciplines to promote well-being through a generalist practice.
2. Provide patient-centered care by applying the nursing process to maximize the health of patients.
3. Demonstrate critical thinking attitudes, skills, and abilities in clinical decision making and evaluation of evidence-based nursing practice.
4. Integrate technology and information management with relationship-centered nursing care across the health continuum in a variety of healthcare settings.
5. Use interpersonal communication, collaboration, and organizational skills to work in partnership with patients, families, community members, and the healthcare team to facilitate healthy communities.
6. Apply leadership principles and quality improvement techniques to influence health policy, regulations, and the provision of care to ensure quality and safety.
7. Demonstrate professional values through commitment to self-evaluation, lifelong learning, professionalism, service, respect for diversity, and social justice.

BSN Curriculum Description

The BSN Program at Seattle University is a collaborative approach to a generalist model of nursing. The focus of the program is health. The environment is recognized as a central mediator of health, and patients include individuals, families, groups, and communities. The learners interact in a partnership with patients in a dynamic environment and in diverse situations. The interaction of student and patient in this environment depends on emerging competencies that include critical thinking, relationship skills, community skills, nurse provider skills, and care management skills. The student interaction with patients is mediated by the curriculum focus on values: altruism, autonomy, human dignity, integrity, and social justice. The practice of professional nursing is based on Judeo-Christian values in the Jesuit tradition that fosters ethical, moral, and spiritual development that graduates embody in their ethical decisions and care of patients (see model). Essential to understanding the curriculum are the assumptions, definitions, and competencies integral to the program, and the program objectives.

In designing this program, the faculty makes certain assumptions about the nature of health, learners, and learning within this educational experience.

- The focus of the program is health. Health is not conceptualized on a continuum, but is understood as inclusive of wellness and illness states; that is, even when working with a person's or group's illness state, the focus is on health promotion. Health is not a goal in itself, but a means toward assisting a person, family, group, or community toward higher level wellness to attain their own life goals. Healthcare processes are influenced by state and federal policies, and by values at the community, regional, and national levels.

- The patient is understood as a multi-level concept encompassing the individual, family, and community. The content in this curriculum is presented as a multi-level approach rather than a
progressive view of individual to community. Within an effective collaborative system of care, patients are not victims or passive recipients, but are contributors to their own care.

- The program prepares a generalist professional nurse, who will be equipped to fulfill a variety of healthcare roles. Base competencies are the primary teaching foci of this program. The Nursing curriculum assists learners to be independent problem-solvers within the context of collaborative healthcare. The program develops nurses who are assertive, confident, and able to articulate what nursing has to offer society.

- Students enter the program with unique backgrounds and interests that require an approach that bends and meets the needs of unique people. Students are life-long learners, and thus the emphasis is in learning to think from the perspective of a variety of healthcare areas and the attainment of skills to independently access additional information.

**Concepts Central to the BSN Curriculum**
The following concepts are central to the BSN Program: *Health, Patient, Environment, and Nursing Values.*

- **Health**  
  Health is a dynamic process that incorporates patterns of both wellness and illness. Wellness is an experience of harmony and integrity of function and interaction. Illness is the experience of imbalance, be it physical, psychosocial, or spiritual. In contrast, disease is an externally defined entity marked as a deviation from health norms. Wellness can co-exist with disease and lack of disease does not indicate wellness.

  The health of a community is defined as the competency to meet the physical, sociocultural, and economic needs of their constituents. Community health is a process that involves the identification and alteration of patterns that result in competency and integrity. This process is done in partnership with the community.

- **Patient**  
  Patients are defined as individuals, families, groups, and communities receiving or potentially receiving care. As individuals, persons are multidimensional beings capable of change and relationships. Persons have a unique nature that gives them an inherent dignity and worth. While nursing interactions may be at times with individuals, the nurse is aware that individuals are to be considered in the context of their family, groups, and community.

  Family is a social group whose members share common values, occupy specific roles, and interact with each other over time. Families are based on biological, social, and/or emotional relationships. Particularly within vulnerable populations, individuals bond into families for many reasons. Families are self-identified by the individuals that comprise them. Nurses work with families of diverse composition and are sometimes accessed through the individual members.

  Groups may be self-identified as when families bond to announce concerns and requests for assistance, although groups also can be identified as a patient by the nurse. For example, a group may be those families with members carrying the HIV in a metropolitan area. These groups may not already have been identified and organized for support and services. Through such efforts, populations may move toward community.
Community is a group of individuals who interact with each other, have shared identity, and, often, specific geopolitical boundaries. The individuals in a community perceive themselves as interdependent. A community may or may not combine its efforts to meet their collective needs. A community is an interactive whole.

- **Environment**
  An environment is the landscape of humans, inclusive of physical, historical, social, political, cultural, and economic domains. Within this landscape, persons create meaning in their lives and form relationships; as such, the environment is a central mediator of health. Nursing knowledge includes key concepts that are threaded through the curriculum and are essential knowledge for the student's achievement of core competencies: environment (ecology), health, change, transformation, communication, and diversity.

- **Nursing Values**
  Values are defined as beliefs to which an individual is committed and which guide behavior. These are reflected in attitudes, person qualities, and consistent patterns of behavior. The values include those defined by the American Association of Colleges of Nursing (AACN), and integral to Jesuit education; the AACN Essential Values* are listed below.

  - **Altruism**: Concern for the welfare and well-being of others. Altruism is demonstrated by the concern shown for the welfare of patients, other nurses, and other healthcare providers. Examples of altruism include: demonstrates understanding of cultural differences, respect for the beliefs of others, advocacy for patients, takes risks on behalf of patients and co-workers, and assists the learning of other healthcare professionals.

  - **Autonomy**: Right of self-determination. The nurse respects patients’ rights to make decisions about their healthcare. Examples of a demonstration of a value for autonomy include: planning care in partnership with patients, honoring the rights of patients and families to make healthcare decisions, and giving information so that informed decisions can be made.

  - **Human Dignity**: Respect for the inherent worth and uniqueness of patients, co-workers, groups, and populations. Examples of a value for human dignity include: providing culturally sensitive care, respecting confidentiality and privacy of all patients and co-workers and individualizes care.

  - **Integrity**: Acting in accordance with an appropriate code of ethics and accepted standards of practice. The nurse is honest and provides care based on an ethical framework that is accepted within the profession. Examples of acting with integrity in nursing include: giving truthful information to patients and groups, documents care accurately and honestly, tries to correct or address errors made by self or others, and is accountable for one’s actions.

  - **Social Justice**: Upholding moral, legal, and humanistic principles. The nurse works to ensure equal treatment and access to healthcare. Examples include: impartiality and non-discrimination in care, supporting universal access to care, and supporting legislation that promotes improvement for healthcare.

**Competencies**

Students are expected to achieve competency in the following areas. These competencies have overlapping knowledge bases.

- **Critical Thinking**
  Students will learn the elements of reasoning, the criteria by which to judge reasoning, multiple approaches to gathering additional information, and ethical standards. In addition, students will develop a habit of thinking critically, especially within ambiguous situations.

- **Relationship/Communication Skills**
  Students will develop purposeful relationships with patients and other healthcare colleagues, the purpose of these relationships being to enhance patient’s self-sufficiency and well-being. The relationships will be characterized as assertive and valuing human dignity. A key to building relationships is effective communication, and so students will be able to articulate clearly in verbal, written, and electronic forms for a variety of audiences, e.g., patients, colleagues, and the public.

- **Nursing Community and Nursing in the Community Skills**
  Students will learn concepts of community functioning and community-based care in a variety of settings. Students will apply principles of public health and epidemiology to work on issues of health promotion in the community, demonstrating problem-solving and inter-professional collaboration skills to improve the health of individuals, communities, and populations.

- **Nurse Provider Skills**
  Students will focus extensively on health promotion, disease prevention, and treatment skills in the three levels of care: primary, secondary, and tertiary. Care will include the provision of direct care in addition to teaching, counseling, and anticipatory guidance. Direct care includes, but is not limited to, assessment and technological skills.

- **Care Management Skills**
  In a variety of healthcare settings, the student will use leadership and management principles to provide quality healthcare. The student will learn principles to coordinate healthcare and develop the ability to document results through outcomes research approaches.

**Sequencing of the Nursing Curriculum**

Students are required to complete the Seattle University core curriculum requirements, courses numbered levels 1000-3000, and all nursing major pre-requisites before starting the first quarter of the nursing sequence (Spring or Fall). Students must also meet prerequisite program requirements prior to entry. Therefore, it is advisable to carefully study the published requirements and consult advisors regularly for planning. Programs of studies for freshman and transfer students are provided in Appendix A. These courses of study outlines are typical patterns only.

Courses are arranged so that nursing knowledge progresses from simple to complex concepts. Therefore, certain nursing courses are prerequisite to subsequent courses. Nursing students are enrolled in a combination of theory, lab, seminar, and clinical practicum courses. Specialty theory courses are paired with clinical learning opportunities in the inpatient, primary care, home care and community settings to teach the students how to apply theory knowledge while caring for individuals and communities. Therefore, both the theory and clinical course must be successfully completed before a student may progress to the next courses in the sequence. During all clinical experiences, clinical faculty are available to students for consultation, collaboration, and supervision related to course objectives. After beginning the nursing sequence of courses, students are expected to work closely with their advisor to complete the program of study in the required sequence.
BACHELOR OF SCIENCE IN DIAGNOSTIC ULTRASOUND (DIUS)

DIUS Undergraduate Program Offerings
The Diagnostic Ultrasound Program at Seattle University offers both a Bachelor of Science degree (meeting the Seattle University requirement of 180 credit hours) and a Diagnostic Ultrasound Certificate option. Upon completion of both the academic and clinical internship undergraduate requirements for either the bachelor degree or certificate option, students are eligible to sit for specialty exams of the ARDMS and CCI national credentialing organizations.

DIUS Learning Outcomes
Upon completion of requirements, Undergraduate Diagnostic Ultrasound students will be able to:

- Apply critical thinking skills to the analysis of human pathology using laboratory and medical imaging criteria.
- Express ultrasound findings in both written and oral presentations, working individually and in collaborative groups.
- Demonstrate entry-level proficiency with ultrasound systems and related equipment and technology.
- Analyze and discuss medical ethical issues and how patient care and medical facilities’ resources are impacted.
- Demonstrate integration of didactic knowledge and clinical skills through participation in a clinical internship.
- Participate in and contribute to the global sonographic community through interactions with other students, faculty, medical professionals, and professional organizations.
- Contribute to quality patient care.
- Obtain employment as entry-level imaging professionals within their chosen specialty area.

Diagnostic ultrasound, or sonography, is a medical imaging science that compliments other diagnostic tests and clinical evaluations. Sonographers are an integral part of the healthcare team and must often make preliminary diagnostic decisions about the images they acquire. This level of responsibility requires extensive knowledge, continuing education, and concentrated clinical experience. Accredited educational programs in sonography follow guidelines and standards outlined by the Joint Review Committee for Diagnostic Medical Sonography (JRCDMS) to ensure that graduates of these programs are qualified to meet this level of patient care. It is the responsibility of all ultrasound educational programs to monitor student performance and to dismiss any students who are not performing at the academic level expected of a healthcare provider or who may not meet clinical performance standards. The Diagnostic Ultrasound Program at Seattle University is part of the College of Nursing and awards graduates a bachelor’s degree in Diagnostic Ultrasound. Students may enter the program as freshman or transfer into the program in the junior year. All prerequisite courses must be completed with a grade of ‘C’ or higher prior to beginning the ultrasound core courses. Students must achieve a grade of ‘C’ or higher in all ultrasound core courses (identified by DIUS) to continue in the Diagnostic Ultrasound Program. All didactic courses must be successfully completed before students can begin the clinical internship year.

The Diagnostic Ultrasound Program is a cohort program in which students take all ultrasound courses in the prescribed order and with the group of students with whom they entered the program. Students must complete the ultrasound curriculum in two years and may not take the ultrasound courses on a part-time or extended basis.
SEATTLE UNIVERSITY POLICIES

Statement on Diversity & Inclusion

Seattle University recognizes the diversity of our community as “an integral component of educational excellence,” and emphasizes the educational benefits of diversity. Seattle University aspires to create and maintain an inclusive learning environment in which campus life reflects a diverse, inclusive, multicultural, and international worldview. The Seattle University community recognizes the multiplicity of similarities and differences among individuals and groups including, but not limited to race, color, national origin, gender identity and expression, sex, age, religious beliefs, sexual orientation, political ideology, veteran status, and physical and mental ability.

We are committed to preparing our students to understand, live among, and work in an inherently diverse and multidimensional country and world. Seattle University is a place that invites our community members to learn and grow from one another’s experiences. To do this well, the institution must commit to fostering a learning and working community that not only values diversity, but also models the principles of inclusive excellence throughout the University. The goal is an institutional culture where there is no false dichotomy between our values of diversity and inclusion, and our goals of educational quality and excellence. Therefore, Seattle University will continue its pursuit of inclusive excellence and aim to create a culture that values empathy, respect, acceptance, and equality for all. In doing so, we hope to serve as pioneers in a much larger way, paving the road for a more diverse and inclusive world, both at home and abroad.

Seattle University Nondiscrimination Policy

Seattle University does not discriminate on the basis of race, color, religion, sex, national origin, age, disability, marital status, sexual orientation, gender identity, political ideology or status as a Vietnam-era or special disabled veteran in the administration of any of its education policies, admission policies, scholarship and loan programs, athletics, and other school-administered policies and programs, or in its employment related policies and practices. In addition, the University does not discriminate on the basis of genetic information in its employment related policies and practices, including coverage under its health benefits program.

All University policies, practices and procedures are administered in a manner consistent with Seattle University’s Catholic and Jesuit identity and character. Inquiries relating to these policies may be referred to the University's Assistant Vice President for Institutional Equity/Title IX Coordinator at 206-220-8515.

Consistent with the requirements of Title IX of the Education Amendments of 1972 and its implementing regulations, Seattle University has designated individuals responsible for coordinating the University's Title IX compliance. Students or employees with concerns or complaints about discrimination on the basis of sex in employment or an education program or activity may contact the following Title IX coordinator or Title IX contact persons:

Andrea Herrera Katahira
Assistant Vice President for Institutional Equity/Title IX Coordinator
Human Resources Department – Rianna Building
(206) 220-8515
katahira@seattleu.edu
Alvin Sturdivant, PhD  
Interim Vice President for Student Development  
Title IX Contact Person  
Student Center 140B  
(206) 296-6066  
sturdial@seattleu.edu

Paula Macias  
Human Resources Manager  
Human Resources Department – Rianna Building  
(206) 296-5868  
maciasp@seattleu.edu

Individuals may also contact the Office for Civil Rights of the U.S. Department of Education. *(Seattle University Code of Student Conduct Handbook, 2017, Section 4.3, p. 13.)*

**Students with Disabilities**

If you have, or think you may have, a disability (including an ‘invisible disability’ such as a learning disability, a chronic health problem, or a mental health condition) that interferes with your performance as a student in any class, you are encouraged to discuss your needs and arrange support services and/or accommodations through Disabilities Services, Loyola 100, (206) 296-5740.

It is the responsibility of the student to provide Disabilities Services with reasonable notice of disability and the request for accommodation. The student must also provide verification of their disability and the disability-related reason for any accommodation that is requested. Disabilities Services will make an individualized assessment of the student’s needs and make a decision about the accommodation request. For additional information or guidance, please refer to the Disabilities Services webpage at the following link, [https://www.seattleu.edu/disabilities-services/](https://www.seattleu.edu/disabilities-services/).

**University Academic Calendars**

Seattle University Academic Year Calendars are published online and are available at least one year in advance. These calendars include final exam weeks. All BSN students and DIUS students years 1-3 are to make plans for work, travel, weddings, other social events, etc. based on the Seattle University Academic Calendars. Year 4 DIUS students may be required to begin clinical internship before the start of a quarter and extend past end of the quarter in order to obtain minimum required hours for registry exam. All CON students are expected to be physically available from the first day of quarter through the last day of finals week, each quarter, for course activities that may take place outside the classroom (ex: clinical orientations). Travel arrangements should be made to depart after 6pm on the Friday of finals week. There are no exceptions made for student travel needs. The academic calendar can be found at [https://www.seattleu.edu/redhawk-axis/academic-calendar/](https://www.seattleu.edu/redhawk-axis/academic-calendar/).

**Seattle University Student Handbook**

The Seattle University Student Handbook is the handbook for all students at the University. It contains information about resources on campus, activities, organizations, policies and rules and regulations. In addition, it has the university calendar, emergency numbers and often-called numbers of University offices. You are responsible for being informed about the University’s policies and regulations in the Handbook or referred to in the Catalog.
SEATTLE UNIVERSITY RESOURCES

Counseling and Psychological Services (CAPS)

CAPS offers individual, couple and group counseling for those students who may be experiencing issues such as anxiety reactions, depression, relationship stress, or life changes. Various workshops are offered during the academic year on subjects related to issues such as self-esteem, conflict, and assertiveness. Counseling is free of charge to enrolled students and confidentiality is maintained except by written consent or as required by law. CAPS is located in Pigott Pavilion for Leadership, Suite 120, 206-296-6090.

Disabilities Services

The Office for Disabilities Services in the Learning Center offers resources and assistance for students with disabilities. Students seeking reasonable accommodations for a disability or with disability-related questions or concerns should contact this office located in Loyola 100, 206-296-5740.

Learning Assistance Programs

The Learning Assistance Programs offers academic support to all Seattle University students. Tutors are available to refine strategies for more effective study and learning. Workshops on test taking and study techniques are offered quarterly. Peer review and critique of written work is available at no charge at the Writing Center. All programs are located within the Lemieux Library and McGoldrick Learning Commons – 2nd floor, and can be reached at 206-398-4450.

Campus Ministry

The Campus Ministry team develops faith community, provides pastoral care, reaches out to serve others, promotes social justice, and celebrates God’s presence through worship and fellowship. Campus Ministers foster opportunities for personal and spiritual growth through educational offerings, international service experiences, and a variety of retreat programs. Telephone (206) 296-6075.

The Chapel of Saint Ignatius provides a spiritual home for the university’s Catholic faith community, with daily and Sunday liturgies.

Lemieux Library

The library has an expanding collection of books and journals (hard copy and electronic) related to all College of Nursing specialties. Students may check books and periodicals out from the library, and tours are offered each quarter to acquaint students with services offered. Students are strongly encouraged to tour the library and become acquainted with its resources, including College of Nursing indexes. Students are also encouraged to advise faculty regarding potential purchases for library holdings (books and journals) as needed. Library personnel are available to assist students with specific questions about assignments and research.

Copy Machines

Copy machines are available for student use all buildings on campus. You can find information for all things related to the copy machines found across campus at the Reprographics website: https://www.seattleu.edu/repro/campus-copiers/
**Collegia Program**
Undergraduate CON students are invited to enroll in the Reidy Collegium on the 3rd floor (#310) of the Student Center once they reach junior standing. The collegia offer home-like environments where students can rest between classes, meet with classmates and faculty, have conversations with friends, enjoy a snack, or join in a special activity. The warm and attractive environment includes a small kitchen, comfortable sofas, reading lamps, study tables, computers, printers, newspapers, books, and access to snacks from an honor bar. All junior and senior students are invited to join this program. Space is limited, so please register early. [https://www.seattleu.edu/deanofstudents/collegia-program/reidy-collegium/](https://www.seattleu.edu/deanofstudents/collegia-program/reidy-collegium/)

**Information Technology Services**
ITS is the unit responsible for managing computer and technological resources at SU. ITS not only manages resources campus wide, but also provides all faculty, staff, and students with hardware and software support through their Help Desk.

**Student Academic Services**
Student Academic Services provides a variety of opportunities that help students engage more fully in their education and achieve their potential for academic success.

**Student Health Center**
The Health Center offers on-campus healthcare for free or at minimal cost for many student healthcare needs. The Health Center is located in Bellarmine Hall 107, and can be reached at 206-296-6300.

**Campus Public Safety and Transportation**
Public Safety offers a variety of services related to campus safety, parking, transportation, and nighttime safety escort service. For normal business (parking issues, lost and found), please call the Business line at 206-296-5992. For general assistance outside of business hours (safety escort, building access, etc.), please call the 24-hour Business Line 206-296-5990. For more immediate safety and security issues, please call the 24-hour Campus Emergency Line 206-296-5911.

**Additional Information**
*MySU* is a Seattle University web portal containing news and announcements, upcoming event information, and SU blogs.

The Office of the *Registrar* provides services including class registration, grading, graduation evaluation, academic transcript processing, academic record protection and maintenance, transfer credit evaluation, and degree audit.

SU Online is the university website where students can view the schedule of classes, search for classes, view the final exam schedule, and view SU academic policies.
Expenses
Undergraduate students will have some expenditure in addition to tuition, books, and living expenses. Planning for these costs may help to lessen the strain on the budget. First, please note that fees are assessed for college lab and clinical lab courses that require small class sizes, evaluative external/national testing, and costs associated with laboratory courses (see SU Catalog). Other expenses include, but are not limited to, the following items:

- Health and accident insurance (required)
- Professional liability insurance (BSN optional, DIUS required)
- Annual health requirements (examples: TB screening, immunizations, health assessment)
- Castle Branch Tracker Fee to manage annual health requirements
- CPR Certification fees
- Uniform (Seattle University scrubs, lab coat [DIUS optional], and shoes)
- Name badge
- Stethoscope
- Watch with second hand
- Pocket calculator
- Quarterly fees (BSN only)
- Transportation to clinical agencies
- Application fees for NCLEX-RN, ARDMS, and licensing
- College of Nursing pin (ordered during final quarter)
- DIUS Clinical Onboarding fees

Financial Resources
The Office of Student Financial Services provides a variety of services related to grants and scholarships, loans, paying your tuition bill and opportunities for student employment.

Financial Aid
Financial assistance is available to new and continuing students to help with education and living expenses. To qualify for financial aid, students must file a Financial Aid Form each year. There are essentially four types of financial aid given to students: scholarships, grants, loans, and work-study opportunities. Details for all financial aid can be obtained through the Student Financial Services Office. All scholarship options sent to the College of Nursing are forwarded to the Student Financial Services Office for access.

Scholarships and Financial Awards
There are a variety of scholarships available for nursing students; below are links to websites where some of these can be accessed. Announcements of additional scholarship opportunities will be made throughout the year via email.

- The Foundation of the National Student Nurses Association (FNSNA)
- Washington Center for Nursing (WCN)
- Nursing Students of Washington State (NSWS)
- King County Nurses Association (KCNA)
- Washington League of Nursing (NLN)
- Sigma Theta Tau (STT), Alpha Sigma Chapter (SU Local Chapter)
- The Eileen Ridgway Scholarship
- SCCA Future of Oncology Nursing Scholarship
**Upper Division Employment**

Many undergraduate students work part-time during the academic year. However, the time commitment involved in clinical courses makes it very difficult to maintain part-time work and successfully carry a full academic load. It is recommended that if outside employment is necessary, the student work the absolute minimum required, no more than 10 hours per week. Students must keep in mind that course and clinical schedules and time requirements must take precedence over work hours and scheduling requirements. Therefore, students are encouraged to discuss employment commitments, financial difficulties, and academic plans with their advisor.

**Reference for Employment**

Typically, employers request references from two faculty members, and it is preferable to select an instructor with whom you have worked closely, such as an advisor or clinical instructor. Please complete a Reference Letter Request Form, which permits the faculty to share information with the facility. See the following link for this form: [https://www.seattleu.edu/redhawk-axis/forms/](https://www.seattleu.edu/redhawk-axis/forms/)

**Nursing Technician Information**

To **begin** working as a Nursing Technician in Washington State you must:

- Have successfully completed NURS 3305, NURS 3405, NURS 3190 and NURS 3191 in the College of Nursing program of study.
- Be a student in “good standing” as described below.
- Obtain and complete a Washington State Nursing Technician Registered Program Application available online: [http://www.doh.wa.gov/portals/1/Documents/Pubs/669238.pdf](http://www.doh.wa.gov/portals/1/Documents/Pubs/669238.pdf)
- Complete Section 1 of the Education Verification Form. Submit this form to the Undergraduate Program Coordinator to complete Section 2. Allow 2-3 business days for processing. When completed, you will be notified to pick up your document.

To **continue** working as a Nursing Technician in Washington State:

- You must be enrolled in nursing courses and a student in “good standing”.
- Your employing agency must verify your satisfactory completion of each quarter and your “good standing” in the nursing program by sending a memo to the College of Nursing. If you are on probation, dismissal, suspension, or non-compliant with your health record, you are not in good standing.
- You must provide your employer with an updated skills checklist if requested. You will receive a copy of your skills checklist upon successful completion of NURS 3405. Please be certain to retain a copy of this skills checklist in your portfolio to provide to prospective employers upon request.

**Nursing Assistant – Certified (NAC)**

To **begin** working as a Nursing Assistant - Certified (NAC) in Washington State you must:

- Complete a minimum of 85 hours of training through a state approved program. Students who are in an LPN or RN program and have met the minimum requirement also qualify. Our program meets this requirement once you have completed NURS 3405, NURS 3190, and NURS 3191.
- Pass the competency exam.
- Meet all licensing requirements as listed [here](#).
**Student Status – “Good Standing”**

A College of Nursing student is considered to be in “good standing” when the student meets all of the following:
- Compliant with all College of Nursing health and other related requirements
- Not on probation in the College of Nursing for any reason
- Currently enrolled full-time and attending classes
- Registered for a full-time load of credits for each quarter of their program of study

**COLLEGE OF NURSING POLICIES AND RESOURCES**

**Electronic Communication**

*You are responsible and accountable for electronic messages and information sent to your Seattle University email address. Students are expected to check and respond to email daily.*

The primary means of communicating with students is through the Seattle University email system. It is the University’s expectation that students check their Seattle University email account daily to keep current with College of Nursing and Seattle University information. Important emails will inform you of class notices, registration information, health record updates, and other important information pertinent to students (ex: scholarship announcements, student association activities, NCLEX review classes). Official correspondence may include academic-related deadlines, registration, advising and graduation information, virus alerts, student government notices, etc. Additionally, faculty will direct course information, assignments, discussions, and clarifications to students through email.

If you are new to Seattle University, you will need to establish your campus email address as soon as you matriculate. Each student is provided a Seattle University email address free of charge. This may be set up through the Information Technology Services (ITS) office at 206-296-5571. One major advantage of using your Seattle University email account is that, while your mailing address may change throughout the course of your enrollment, your email account may always be accessed from the SU homepage email link.

**Faculty Access**

Faculty members are available daily by email and in their offices during office hours/by appointment. Please feel free to ask them questions and for additional resources when needed. Location of administrative and faculty offices can be found on the College of Nursing website as well as the office directory in the entrance foyer of the Garrand Building. To contact faculty members, students may use email, Canvas messaging, or telephone. Faculty members may supply you with additional contact information, such as cell phone number, as needed, for access from clinical sites.

**Student Advisement**

Seattle University College of Nursing advisors serve as a guide and resource to promote a smooth entry and progression in the programs. There are two types of advisors in the BSN and DIUS programs: Professional Advisors and Faculty Advisors. At the beginning of the BSN nursing program, freshmen and sophomore (first and second year in the four-year program of study) students will be assigned to a Professional Advisor who is skilled in navigating the nursing program of study, triaging questions, and connecting students with campus resources. At the beginning of the junior year, students will be reassigned to Faculty Advisors who can help with the remaining curriculum planning, career discernment, and NCLEX preparation. DIUS students have Professional Advisors for year one and Faculty Advisors for
years two through four of the program. The Professional Advisors and Faculty Advisors work closely with the Associate Dean and Program Director to promote student success.

Each quarter, the Office of the Registrar will place an Academic Advising Hold on all undergraduate student accounts. This hold is a reminder that students must meet with their assigned advisor to discuss registration for the following quarter. Once the meeting is complete, the advisor completes an advising note and removes the Academic Advising Hold. It is expected that students will meet with their advisor on a quarterly basis; however, many students schedule more frequent visits for a variety of supportive services. Additionally, if students have specific issues or difficulties, appointments can and should be made with the advisor as early as possible to problem solve options and take action in a timely manner. Individual needs and concerns are best directed to the assigned advisor first. However, all faculty members are most willing to be consulted about career pathways related to their CON specialty.

Successful Student Strategies to Enhance Advising Appointments:

- Be prepared to discuss your current classes and program progress.
- Prepare a list of questions/concerns ahead of time.
- When making an appointment, request the appropriate amount of time for your needs.
- If you are unable to attend your advising appointment, alert your advisor as soon as possible.
- Communicate with your advisor about all schedule changes that could impact your CON program of study.
- Actively participate in the advising meeting.
- Notify the Associate Dean if an advisor has not been assigned, or if you are having difficulty making contact with the advisor. Students who have difficulty with their assigned advisor should first discuss the problem with the advisor. If the difficulties cannot be resolved, the student may request a change of advisor through the Associate Dean of Undergraduate Education or DIUS Program Director.

Online Registration

All undergraduate students should keep themselves informed of online registration procedures through email. Please note that variations of the registration process may be implemented in order to facilitate clinical placements. Questions regarding nursing registration should be addressed to the BSN program coordinator. Questions regarding diagnostic ultrasound registration should be addressed to the DIUS program director.

Written Assignments

Students must have the ability to write in an orderly and logical manner. Papers must reflect appropriate knowledge of grammar, punctuation, and syntax in the English language. Research and documentation skills are also essential.

Currently most nursing and diagnostic ultrasound journals require that articles be submitted using the American Psychological Association (APA) format, 6th edition. Thus, formal papers submitted for CON courses must follow the writing and documentation guidelines referenced in the 2009 Publication Manual of the American Psychological Association (6th ed.). The manual is a required publication and is available for purchase in the Seattle University Bookstore.

Time Management

Students should plan for approximately three (3) hours of study time each week for every theory credit hour, separate from reading and written assignments. The BSN time requirement for clinical practice, its
preparation, and written work can be estimated by calculating thirty (30) clock hours per credit per week (typically 150 hours for a five [5] credit clinical course; 240 hours for an eight [8] credit clinical course).

**Taking Exams in Class**

In order to promote academic honesty by providing a safe and secure testing environment, the following procedures will be used when tests are given in major classes:

- There will be NO late admissions into the classroom for testing.
- Students are expected to take care of personal needs prior to the start of the exam.
- Students will be required to bring pens/pencils only to exams. If calculators are necessary, these will be provided by faculty administering the exam.
- Students will not be permitted to use any personal electronic devices during exams. These should be turned off and stored securely.
- All student belongings will be stored in closed packs, and these will be placed on the floor around the perimeter of class rooms the exam.
- Visors and hats with visors may not be worn during quizzes and exams.
- Students will sit themselves so that they are separated as much as possible.
- Missed exams may only be made up for an excused absence. Valid reasons for missing an exam include acute illness or family emergency. In these instances, the student must notify the faculty by phone or email prior to the exam in order for the absence to be excused.
- In the event that an exam is missed, it is the responsibility of the student to make arrangements with the course faculty for make-up. Faculty reserve the right to substitute an alternative form of the exam when it is taken at a different time. The form of the exam can be oral or written (any objective testing style, multiple choice, or essay).

**OPPORTUNITIES FOR STUDENT GOVERNMENT AND LEADERSHIP**

**BSN Cohort Officers**

Each cohort in the BSN program will elect class officers (President, Vice President, Secretary, Treasurer, and Mentorship Officer) during their second quarter in the CON. Nominations for these positions are sought through the student governance structure.

Cohort officers are the “voice” of the students they represent. All officers are expected to foster and protect professionalism, integrity, civility, and mutual respect by modeling and defending these values. As leaders and representatives, cohort officers must possess strong communication and interpersonal skills, collaborate with administrators, faculty, and peers, and have a duty to guide and direct their cohort in discourse with the College of Nursing.

**Committee Membership of the College of Nursing**

College of Nursing faculty value student input in addressing issues that affect students and their educational process in the nursing program. For this reason, student representation on committees within the College of Nursing is invited on both the Undergraduate Curriculum and Evaluation Committee (UCEC) and the Student and Community Affairs Committee (SCAC), and active participation is welcomed and supported.

The presidents of each cohort and the president of the Seattle University Student Nurses Association (SUSNA) currently serve as representatives to the above committees. Participation on a committee provides the opportunity to advocate for the perspective of students as well as share in the critical analysis of various aspects of the educational experience.
The SCAC is made up of all the cohort officers for the traditional and transfer cohorts as well as faculty members, and is chaired by a faculty advisor. The SCAC meets to discuss student events within the CON and cohort concerns. The date for SCAC meetings is determined quarterly based on the availability of the majority of the cohort officers. Attendance is not mandatory; however, officers have an obligation as leaders to be present and each cohort should ensure that at least one officer is present at each meeting to represent their cohort.

Cohort presidents attend UCEC meetings to provide feedback and a student’s perspective, as solicited by committee members. The dates for UCEC meetings are determined quarterly based on the availability of the chairperson and committee members. Each cohort is expected to send a representative to each UCEC meeting.

**Roles and Responsibilities of BSN Cohort Officers**

**President**
- Represents the cohort in meetings with the faculty.
- Represents the cohort on CON Committees (UCEC & SCAC).
- Serves as a spokesperson for the cohort and the board of cohort officers.
- Calls meetings of the cohort and presides over them.
- Appoints the chairpersons/spokespersons of all standing committees.
- Prepares the agenda for and leads cohort officer meetings.
- Holds transitional meetings with the incoming cohort officers (native to native; transfer to transfer).
- In the event of the Treasurer’s provisional absence, serves as secondary account liaison with the Manager of Budget and Operations, Tim Mildren, for all financial transactions including, but not limited to, reimbursements.

**Vice President**
- Maintains and promotes community outreach with the assistance of the Secretary.
- Oversees/Receives reports from all committees and reports their status to the President.
- Organizes election of next respective cohort officers (native to native; transfer to transfer).
- Represents the cohort in meetings with the faculty.
- Assumes the duties of the President in that officer’s provisional absence.

**Secretary**
- Records minutes at cohort meetings and cohort officer meetings and ensures they are timely distributed for comment and approval.
- Maintains the records of the cohort.
- Mediates constructive communication and encourages cohort to foster positive communication.
- Is responsible for general communication and correspondence (ex: cohort emails, announcements).
- Represents the cohort in meetings with the faculty.
- Assumes the duties of the Vice President in that officer’s provisional absence.

**Treasurer**
- Is responsible for the financial affairs of the cohort, including fundraising.
- Serves as the primary account liaison with the Manager for Budget and Operations, Tim Mildren, for all financial transactions including, but not limited to, reimbursements.
• Serves as a timekeeper during cohort meetings.
• Provides financial reports to the board of cohort officers as needed.
• Creates and submits a budget to the board of cohort officers, soliciting budget items from the board of cohort officers and committee chairs.
• Represents the cohort in meetings with the faculty.
• Assumes the duties of the Secretary in that officer’s provisional absence.

Mentorship Officer
• Develop program expectations, goals and materials with the help of the Mentorship program team.
• Recruits upperclassmen to serve as mentors (i.e. the Mentorship program team).
• Explains program expectations and goals to mentors with the help of the Mentorship program team.
• Promotes program to underclassmen with the help of the Mentorship program team.

Officer Succession
• If the President decides to step down, falls out of sequence, becomes incapacitated, or is otherwise unable to serve that office, the Vice President shall succeed to the office of President. The position of Vice President shall then be filled by majority vote of the cohort. All cohort members, including current officers, are eligible to run for the vacant position.

• If any other officer decides to step down, falls out of sequence, becomes incapacitated, or is otherwise unable to serve their office, such position shall be filled by majority vote of the cohort. All cohort members, including current officers, are eligible to run for the vacant position.

Elections Process
The elections process shall begin in the first quarter of the BSN Program with a presentation by the previous corresponding cohort officers explaining both the process and the roles. This presentation will occur between the fifth and eighth week of the first quarter.

Rules and Regulations:
1. Faculty will be expected to reasonably accommodate requests for time limited, in-class presentations.
2. Elections will be determined by majority vote.
3. In the event of a tie, the Vice President will create a new ballot slide allowing the cohort to revote.

Student Committees and Organizations

Awards Nomination Committee
The Awards Nomination Committee (ANC) is responsible for soliciting nominations of students and faculty for the Most Inspirational Faculty and Most Inspirational Student awards, to be presented at the Pinning Ceremony. Based on student nominations, the ANC will select the recipient of each award and present such awards at the Pinning Ceremony. The chairperson of the committee is appointed by the President. The chairperson will coordinate with the faculty chair of the Student and Community Affairs Committee (SCAC) and the Undergraduate Program Coordinator.
Pinning Ceremony Advisory Committee
The Pinning Ceremony Advisory Committee (PCAC) is responsible for soliciting ideas, preferences and suggestions from their cohort for the Pinning Ceremony. The PCAC committee will be composed of volunteers. Two committee spokespersons will be chosen by the Cohort Officer Board to communicate directly with the undergraduate program coordinator and nursing program assistant.

National Student Nurses Association
All students are invited to join the Seattle University Student Nurses Association (SUSNA), an organization active in local community service activities and in student government. SUSNA is a constituent member of the state association, Nursing Students of Washington State (NSWS), and of the National Student Nurses Association (NSNA). NSNA is a pre-professional association for student nurses that offer students opportunities for involvement in self-governance and leadership. Attendance at the annual state and national convention each spring is organized by the chapter officers. Further information is available through the chapter officers, the club advisor and/or from the Associate Dean of Undergraduate Education.

Sigma Theta Tau International
Sigma Theta Tau International (STTI) is the International Honor Society for nursing, with chapters in universities and colleges throughout the world. Acceptance for membership is based upon the individual’s record of scholarship, excellence in clinical practice, and potential for leadership in nursing. Nursing majors in the top 35% of their class and having completed a minimum of three quarters of upper division nursing course work may be considered for membership in Alpha Sigma, the Seattle University College of Nursing chapter of STTI. Students who have started the nursing sequence are eligible to apply for the Eileen Ridgway Scholarship awarded each year by the Alpha Sigma Chapter: https://www.seattleu.edu/nursing/support-nursing/ridgway-scholarship/

Graduation
Graduation Activities
Fulfillment of program requirements culminates in a series of university activities in June, including a graduation breakfast, Baccalaureate Mass with reception, and a commencement ceremony. Attendance at these functions provides an opportunity for thanksgiving and sharing of accomplishments with loved ones and faculty. As there are currently no graduation ceremonies held in the summer, undergraduate students anticipating graduation in August may participate in the June ceremonies.

BSN Pinning Ceremony
The Nursing Pinning Ceremony is a national tradition in nursing education where each college has a unique pin that identifies each nurse as a graduate of that university. Also traditional is a pinning ceremony symbolizing the welcoming of new nurses into the profession of nursing. It is a special time for celebration of the graduates, their families and faculty. In conjunction with the Student and Community Affairs Committee (SCAC), College of Nursing seniors plan for their pinning ceremony for graduates in June and in August. Pins are available only through the Seattle University Bookstore, and students approaching graduation will be notified when pins are available for purchase.
The Seattle University pin is gold with a red border that surrounds the University seal. The seal, like a family crest, is a mark of genuineness. The seal contains the traditional symbols of the house of Loyola, as well as other symbols which signify the relationship between the University and the Northwest. The American eagle and shield symbolize the relationship of the university to the nation. At the upper left of the shield proper, the two wolves over the pot are traditional symbols of the generosity of the house of Loyola, family of the founder of the Jesuits. The upper right quadrant of the shield holds the Greek abbreviation (IHS) of Jesus. The seven diagonal stripes in the lower right are awards for valor made to the family. In the lower left portion of the shield, the evergreen tree represents the State of Washington and is a traditional symbol of knowledge.

The planning process for the pinning ceremony is shared by the College of Nursing and the graduating cohort. The College of Nursing is responsible for the cost of the ceremony (within allotted budget) and the students are responsible for the cost of their own College of Nursing pin. The graduating cohort may opt to raise funds to purchase the pins for all students in their cohort at their discretion. The graduating cohort may opt to raise funds to pay for additional catering of refreshments that are over the college-budgeted amount, at their discretion.

The shared responsibilities for the pinning ceremony are outlined below:

<table>
<thead>
<tr>
<th>Graduating Cohort</th>
<th>College of Nursing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Choose date for Pinning Ceremony (in consultation with cohort)</td>
<td>Responsible for refreshments, decorations, award plaques, printing, and supplies ($1500 budget)</td>
</tr>
<tr>
<td>Reserve venue for Pinning Ceremony (i.e., Campion Ballroom)</td>
<td>Choose recipients for College of Nursing student awards (SCAC Faculty Chair)</td>
</tr>
<tr>
<td>Select student speakers</td>
<td>Order student and faculty award plaques (SCAC Faculty Chair)</td>
</tr>
<tr>
<td>Choose MC and faculty keynote speaker</td>
<td></td>
</tr>
<tr>
<td>Choose “Most Inspirational Teacher Award” (and student who will present it)</td>
<td></td>
</tr>
<tr>
<td>Each student chooses a nurse to pin him/her</td>
<td></td>
</tr>
<tr>
<td>Develop the Pinning Ceremony program (in consultation with SCAC faculty members)</td>
<td></td>
</tr>
<tr>
<td>Design Pinning Ceremony invitations</td>
<td></td>
</tr>
<tr>
<td>Each student purchases his/her own pin and ribbons</td>
<td></td>
</tr>
<tr>
<td>Communicate with catering services (i.e., Chartwells or other)</td>
<td></td>
</tr>
</tbody>
</table>
**Honors**

**Honors at Graduation**
Refer to the Undergraduate Catalog for honors at graduation or [https://www.seattleu.edu/media/redhawk-axis/Graduation-honors-75-218548.pdf](https://www.seattleu.edu/media/redhawk-axis/Graduation-honors-75-218548.pdf)

**BSN Student Awards**

**Outstanding Senior Award**
Every year Alpha Sigma, the Seattle University College of Nursing chapter of Sigma Theta Tau, honors a graduating senior with the Outstanding Senior Award, joining other university seniors also selected as outstanding in their respective Colleges.

**The Sister Mary Ruth Niehoff Award**
This award is given to an outstanding senior nominated and elected by the faculty of the College of Nursing. Criteria for choosing the recipient include academic excellence, personal qualities, and community involvement. The award is announced prior to commencement.

**Spirit of the College of Nursing Award**
To acknowledge a senior who has promoted student service activities. Criteria or characteristics to consider include: Leader, Catalyst, Motivator, and Initiator.

**Nursing Service Award**
This award acknowledges a senior who has contributed to his or her peers and patients in the following manner: Mentor, Motivator, Role Model, Collaborator, Listener, One who unifies and promotes community, and Volunteer/participant in College of Nursing activities.

**Most Inspirational Faculty Award**
This award is presented at each pinning ceremony in honor of Terri (Theresa) Perkins, a beloved College of Nursing faculty member. Following Terri’s death, the June 2009 cohort instituted the award to recognize a faculty member who embodies Terri’s spirit by igniting, motivating, and helping students discover their passion for nursing. The award is intended to acknowledge a faculty member that was pivotal to the success of a given cohort. The recipient is voted by the students based on the following criteria.

The Most Inspirational Faculty Member:
- Goes above and beyond the “duty” of a nursing faculty.
- Is dedicated to the Seattle University mission statement to aid students to become leaders through professional formation gained by mutual respect and positive constructive feedback.
- Sets the standards of success high and provides the tools for students to achieve these goals.
- Is able to bridge communication between students and faculty in a manner that is effective and respectful.
- Has motivated this class to achieve better visions of them through encouragement and by being an available, reliable resource.
- Exemplifies teamwork through active participation on CON committees and engagement in the community.
Clinical Rotations and Facilities

Clinical experiences occur in a planned sequence which allows for integrating theory with clinical practice. The College of Nursing contracts with numerous healthcare agencies in the greater Seattle area to provide clinical learning opportunities in inpatient acute care settings and community based agencies across the specialty courses. This allows students to interact with multi-disciplinary healthcare professionals and to care for a wide variety of patients and families. Different clinical sections may have varying hours depending on the goals for the experience, the clinical setting, and guidelines set by the facility. Clinical hours may include evening, night, and weekend hours. Some clinical sites that are regularly used are some distance from the university. While travel to some sites may present a challenge, SU is privileged to have many options for clinical placements of students.

All CON students are required to keep their health records, vaccinations, certifications, and background checks up to date at all times. These items are detailed in the section on health requirements. Students are required to update all requirements according to the important dates in the academic planning calendar. The dates are as follows:

<table>
<thead>
<tr>
<th>Clinical Quarter</th>
<th>Vaccinations Due By</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall</td>
<td>August 31st</td>
</tr>
<tr>
<td>Winter</td>
<td>Week Seven of Fall Quarter</td>
</tr>
<tr>
<td>Spring</td>
<td>Week Seven of Winter Quarter</td>
</tr>
<tr>
<td>Summer</td>
<td>Week Eight of Spring Quarter</td>
</tr>
</tbody>
</table>

Students who do not meet these deadlines will be placed on academic probation effectively immediately, and may be withdrawn from the next quarter’s clinical rotation.

Seattle University College of Nursing is very fortunate to have the ability to place students in a variety of quality clinical sites. However, class sizes are large and clinical sites are limited. DIUS clinical sites are negotiated annually through the DIUS clinical internship coordinator, while BSN clinical sites are negotiated each year in coordination with all nursing programs in the area and with each clinical facility through the Northwest Clinical Placement Consortium. The clinical facilities then assign placements to each nursing school for a certain number of students in specific units on certain days and Seattle University must abide by these decisions. The clinical placement decisions are communicated to Seattle University College of Nursing at varying dates for the following quarter. There is no specific deadline by which they must communicate the placements. Seattle University College of Nursing expects undergraduate students to exercise patience and understanding with the process.

It is understood that there are many important reasons students prefer certain clinical sites. However, it is not realistic that every student will have their first choice or the most desired clinical placement. Therefore, the College of Nursing retains the right to assign students to clinical sections. Following BSN clinical assignments, nursing students will be notified of a period of time in which they may negotiate a change/trade with a fellow student (except for senior practicum). Both students must agree in writing that the change in assignment is satisfactory to both parties before the change will be effective, and the clinical
placement coordinator will approve of the change. After this period, the clinical placements become final. DIUS students request changes through the DIUS clinical internship coordinator. Students are expected to make arrangements to attend clinical at the time scheduled and at the site assigned. Regardless of clinical placement assignment, each student is expected to assume responsibility for transportation to the clinical sites, and to resolve conflicts with work schedules, childcare, etc. Students may not participate in student clinical experiences on a unit at an agency in which the student is employed because of the possible conflict of interest with changing roles.

Transportation

Regardless of clinical placement assignment, students are responsible for their own transportation to/from clinical sites. Students are expected to meet their own transportation needs that may include travel to distant clinical sites such as Bremerton, Marysville, Tacoma, and Issaquah for nursing, and out-of-state sites for diagnostic ultrasound. Theory and lab courses are held on campus or in the Clinical Performance Lab (CPL), which is within walking distance from campus. Although the Seattle bus system can offer convenient access to some agencies, students may need to use a personal vehicle. Students may arrange a carpool, but the College of Nursing does not make clinical assignments based on individual or carpool needs. If you choose to use a personal vehicle for transportation, Seattle University assumes no responsibility or liability. A student without a vehicle is not guaranteed a clinical placement within walking distance of campus. Students who carpool are not guaranteed clinical placements at the same clinical agency or on the same shift.

Clinical Dress Code

In uniform, students represent themselves, the Seattle University College of Nursing, and the healthcare profession. Students begin wearing the Seattle University College of Nursing uniform when participating in lab courses at the Clinical Performance Lab (CPL) or Ultrasound Lab, and later when at clinical agencies. The uniform consists of regulation navy blue scrubs and a lab coat, both with the SU logo on pocket. These items must be purchased at the Seattle University Bookstore. Additionally, professional shoes with non-perforated leather or rubber uppers are required (no canvas or crocs). Shoes should have closed toes (for safety with liquid spills, bodily fluids, and sharp instruments), offer good support, and should be reserved for clinical use only. At all times the uniform should be clean and pressed, and shoes clean and in good repair. Any questions about the appropriateness of attire will be resolved at the discretion of the clinical faculty.

CON students are required to wear a name badge identifying them as Seattle University students at all times in all clinical settings. A CON student photo ID badge is available in addition to your Seattle University ID card. Some internship sites may issue site-specific ID badges.

Additional College of Nursing dress code considerations:

- Students must be personally clean and well-groomed to minimize odor. Healthcare professionals are expected to maintain good personal hygiene.
- Perfume, cologne, aftershave and lotions with fragrances should not be worn. Strong odors may cause nausea, and many patients are allergic to perfumes. The CPL is a scent free zone.
- Hair should be gathered to the back and long hair pulled back for cleanliness and safety. Men should shave daily, and any facial hair should be well trimmed.
- Makeup should be worn with discretion and moderation.
- Nails should be kept short, clean, and in good repair. If nail polish is worn, it should be neutral and not chipped. Acrylic or artificial nails are not allowed, as they promote bacterial growth and put patients at risk for infection.
• Jewelry should be minimal (ex: a wedding band; small, plain, non-dangling earrings limited to one per ear). Some clinical agencies and units require students to remove all jewelry. If this is the case, clinical faculty will inform students of this restriction.
• Students must adhere to the agency’s dress code in accordance with jewelry and tattoos.

The Seattle University lab coat with a Seattle University College of Nursing name badge over professional clothes (no denim jeans) should be worn when in the hospital to review charts, interview patients, in labs at the Clinical Performance Lab (CPL) or Ultrasound Lab, or to obtain a clinical assignment prior to the actual clinical day. This modified uniform may be required on other occasions such as office and clinic visits, as indicated by the instructor. Additionally, some clinical experiences such as the mental health nursing rotation and at some of the outpatient or community-based clinical sites may require the modified uniform. Guidelines for appropriate attire will be provided by the clinical instructor and questions on attire should be directed to them as well.

Clinical Preparation Attendance Policy

Workshops, laboratories, and orientation to the clinical facility are essential to student success. Attendance is mandatory at all learning activities that prepare students for clinical experiences. A student may be required to produce documentation if an absence is due to extenuating circumstances such as illness or family death. If a student is absent from a mandatory learning activity, without prior written permission of the clinical faculty and course coordinator, the student may be denied progression to clinical experiences. A copy of the written denial will be forwarded to the Progression Committee.

Expectations for Patient Care

Safety of both patients and students is a priority concern for the faculty in the clinical setting. Guidance will be provided by the faculty to assist the student in applying theory and in developing requisite skills and confidence for giving professional nursing care. However, students are expected to be self-directed and accountable for preparation prior to patient care and in seeking learning opportunities in the clinical setting. It is also expected that each student engage in self-evaluation and be open to feedback from faculty and nurses in the clinical setting to maximize the learning process.

Students are expected to care for all patients and families, respecting the dignity of each person in accord with the philosophy of the College of Nursing and Seattle University. Confidentiality is of paramount importance, and each student is responsible for knowing agency rules for HIPAA and confidentiality statements. All patient data as well as other agency specific proprietary data must be respected. Photocopying of any agency/patient record is not allowed for any reason. Student conduct judged unethical or unprofessional in the clinical setting, including but not limited to breaches of confidentiality, may result in sanctions as outlined in Policy 75-3.

Acute Illness

Students should not attend clinical sites with any illness which may be transmitted to a patient, other students, and faculty, or if the student is unable to fully participate in care. The number of clinical days missed due to illness or other extenuating circumstances and arrangements for make-up time are at the discretion of the clinical faculty. In some cases, there may not be sufficient time within the quarter for the student to meet clinical objectives, and as a result the student may not pass the clinical course. Students are encouraged to identify a primary care provider in the Seattle area who will be available for treatment of acute illnesses in a timely manner in order to limit absences for clinical practice.
If a student must be absent from clinical for any reason, the student must be responsible for advanced notification of the clinical instructor and the clinical or community agency according to the procedure described in course syllabi.

**Emergency care**

If injury or illness occurs while a student is at a hospital providing patient care, the hospital will provide emergency care. The student is responsible for payment of any charges accrued during any medical visit.

**College of Nursing Policy on Abortion**

Seattle University is a Catholic University; therefore, it is university policy that faculty and students do not participate in abortion procedures during College of Nursing clinical activities and experiences. Caring for a patient before or after an abortion is not regarded as participating in abortion procedures.

**DIUS Policies and Resources**

**Clinical Rotations and Facilities**

Clinical experiences occur in a planned sequence with clinical practice following theory courses. Diagnostic Ultrasound contracts with numerous healthcare agencies in the greater Seattle area and across the country to provide clinical learning opportunities in inpatient acute care settings and outpatient imaging clinics in several areas of specialty. This allows students to interact with multi-disciplinary healthcare professionals and to care for a wide variety of patients and families. To comply with ARDMS and JRC-DMS guidelines, clinical internship consists of a full calendar year (12 months) of full-time clinical experience (38 hours/week). While travel to some sites may present a challenge, SU is privileged to have many options for clinical placements of students.

Clinical experience may include training in cardiac, obstetric, pediatric, vascular, and/or general ultrasound. Students have the option to study one ultrasound specialty for the entire twelve-month period or two specialties for six months each. Arrangements for clinical internship are made through the Diagnostic Ultrasound Program (DIUS) by the Clinical Coordinator. Students are not permitted to arrange their own clinical rotations.

Seattle University DIUS is very fortunate to have the ability to place students in a variety of quality clinical sites; however, clinical sites are limited. DIUS clinical sites are negotiated annually through the DIUS Clinical Coordinator. The scheduling of clinical internship is a year-long process ending with provisional placement announced at the end of Spring Quarter of the junior year. Every effort is made to place all qualified students in a clinical rotation beginning in Fall Quarter of the senior year. Seattle University DIUS expects undergraduate students to exercise patience and understanding with the process.

It is understood that there are many important reasons students prefer certain clinical sites; however, it is not realistic that every student will have their first choice or the most desired clinical placement. Therefore, the Diagnostic Ultrasound Program retains the right to assign students to clinical rotations. Students are expected to make arrangements to attend clinical at the time scheduled and at the site assigned. Regardless of clinical placement assignment, each student is expected to assume responsibility for transportation to the clinical sites, and to resolve conflicts with work schedules, childcare, etc. Students may not participate in student clinical experiences at an agency in which the student is employed because of the possible conflict of interest with changing roles.

**Transportation**
Regardless of clinical placement assignment, students are responsible for their own housing and transportation to/from clinical sites. DIUS students are expected to meet their own transportation needs that may include travel to distant clinical sites such as Bremerton, Tacoma, and Bellingham, as well as out-of-state sites. Local student interns attend a weekly ultrasound seminar course on campus. Although the Seattle bus system can offer convenient access to some agencies, students may need to use a personal vehicle. Students may arrange a carpool, but DIUS does not make clinical assignments based on individual or carpool needs. If you choose to use a personal vehicle for transportation, Seattle University assumes no responsibility or liability. A student without a vehicle is not guaranteed a clinical placement within walking distance of campus. Students who carpool are not guaranteed clinical placements at the same clinical agency.

Clinical Dress Code
In uniform, students represent themselves, the Seattle University College of Nursing, and the healthcare profession. Students begin wearing the Seattle University College of Nursing uniform when participating in lab courses at the DIUS Lab, and later when at clinical agencies. The uniform consists of regulation navy blue scrubs with the SU logo on pocket. These items must be purchased at the Seattle University Bookstore. Additionally, professional shoes with non-perforated leather or rubber uppers are required (no canvas or crocs). Shoes should have closed toes (for safety with liquid spills, bodily fluids, and sharp instruments), offer good support, and should be reserved for clinical use only. The uniform should be clean and pressed at all times, and shoes clean and in good repair. Any questions about the appropriateness of attire will be resolved at the discretion of the clinical faculty.

DIUS students are required to wear a name badge identifying them as Seattle University students in all clinical settings. A College of Nursing student photo ID badge is available in addition to your Seattle University ID card. Some internship sites may issue site-specific ID badges.

Additional College of Nursing dress code considerations:
- Students must be personally clean and well-groomed to minimize odor. Healthcare professionals are expected to maintain good personal hygiene.
- Perfume, cologne, aftershave and lotions with fragrances should not be worn. Strong odors may cause nausea, and many patients are allergic to perfumes. The DIUS Lab is a fragrance-free zone.
- Hair should be gathered to the back and long hair pulled back for cleanliness and safety. Men should shave daily, and any facial hair should be well trimmed.
- Makeup should be worn with discretion and moderation.
- Nails should be kept short, clean, and in good repair. If nail polish is worn, it should be neutral and not chipped. Acrylic or artificial nails are not allowed, as they promote bacterial growth and put patients at risk for infection.
- Jewelry should be minimal (ex: a wedding band; small, plain, non-dangling earrings limited to one per ear). Some clinical agencies and units require students to remove all jewelry. If this is the case, clinical faculty will inform students of this restriction.
- Students must adhere to the agency’s dress code in accordance with jewelry and tattoos.

Clinical Preparation Attendance Policy
Workshops, laboratories, and orientation to the clinical facility are essential to student success. Attendance is mandatory at all learning activities that prepare students for clinical experiences. A student may be required to produce documentation if an absence is due to extenuating circumstances such as an illness or family death. If a student is absent from a mandatory learning activity, without prior written permission of the clinical faculty and Clinical Coordinator, the student may be denied progression to clinical experiences. A copy of the written denial will be forwarded to the Progression Committee.

Interview Policy
Prior to the start of each clinical internship rotation at an affiliate site, students are required to interview with the site’s Clinical Instructor. It is the student intern’s responsibility to arrange a mutually agreeable time for the interview. The interview is an opportunity for the student intern and Clinical Instructor to discuss topics specific to that clinical site such as work hours, dress code, professional behavior, departmental policies and procedures, and organizational orientation requirements. A phone interview may be scheduled if the clinical affiliate site is located out of the area and an in-person interview is not possible.

**Clinical placement is not confirmed until successful completion of the interview.** If the Clinical Instructor determines the interview to be unsuccessful, the clinical internship placement will be canceled. A student will have the opportunity to interview for placement at up to two (2) clinical internship affiliate sites. A student who has two unsuccessful interviews will be referred to the Progression Committee.

**Expectations for Patient Care**
Safety of both patients and students is a priority concern for the faculty in the clinical setting. The faculty will provide guidance to assist the student in applying theory and in developing technical skills and confidence for providing professional care; however, students are expected to be self-directed and accountable for preparation prior to patient care and in seeking learning opportunities in the clinical setting. It is also expected that each student engages in self-evaluation and remain open to feedback in the clinical setting to maximize the learning process.

Students are expected to care for all patients and families, respecting the dignity of each person in accord with the philosophy of the College of Nursing and Seattle University. Confidentiality is of paramount importance, and each student is responsible for knowing agency rules for HIPAA and confidentiality statements. All patient data as well as other agency specific proprietary data must be respected. Photocopying of any agency/patient record is not allowed for any reason. Student conduct judged unethical or unprofessional in the clinical setting, including but not limited to breaches of confidentiality, may result in sanctions as outlined in Policy 75-3.

**Acute Illness**
Students should not attend clinical sites with any illness which may be transmitted to a patient, other students, and faculty, or if the student is unable to fully participate in care. The number of clinical days missed due to illness, other extenuating circumstances, and personal time off may not exceed 24 hours per quarter. In some cases, there may not be sufficient time within the quarter for the student to meet clinical objectives, and as a result the student may not pass the clinical course. Students are encouraged to identify a primary care provider in the area who will be available for treatment of acute illnesses in a timely manner in order to limit absences for clinical practice.

If a student must be absent from clinical for any reason, the student must be responsible for advanced notification of the Clinical Coordinator and the clinical or community agency according to the procedure described in course syllabi.

**Emergency Care**
If injury or illness occurs while a student is at a hospital providing patient care, the hospital will provide emergency care. The student is responsible for payment of any charges accrued during any medical visit.

**College of Nursing Policy on Abortion**
Seattle University is a Catholic University; therefore, it is university policy that faculty and students do not participate in abortion procedures during College of Nursing clinical activities and experiences. Caring for a patient before or after an abortion is not regarded as participating in abortion procedures.
HEALTH REQUIREMENTS FOR THE COLLEGE OF NURSING

ALL CON students must have current and up-to-date documentation of meeting ALL health and safety requirements for their Clinical Passport on file with the online CastleBranch.com MyCB Tracker (formerly Certified Background). All requirements must be met prior to participation in patient care/clinical experience and in order to maintain a status of good standing. Students will place their background check order on CastleBranch.com and then set up their MyCB Tracker. Students will be able to view all the requirements mandated by the College of Nursing for their online tracker and Clinical Passport. Upon completion of each requirement, students are able to upload, fax or mail in their documentation to their MyCB Tracker. Once completed the requirements will be reviewed and verified online. Failure to meet the requirements and specified College of Nursing deadlines will prevent a student from entering or continuing in any CON courses and thereby alter progression in the program.

As a CON student, the requirements of the College of Nursing take precedence over any travel arrangements (including study abroad), job requirements, etc. In order to be eligible to participate in CON courses, students must have a completed MyCB Tracker and Clinical Passport, be in good standing and meet all other nursing requirements and deadlines. Out-of-sequence students, who may have completed a health packet previously, will need to complete a new packet to align with their new cohort. Prior to their return to the program of study, they should contact the Manager of Compliance to see which documents and immunizations are transferable, and which must be renewed.

Students are to keep all health records current and up to date in their online MyCB Tracker for College of Nursing compliance and in order to complete their Clinical Passport. These documents must be available at all times in order to provide immediate verification to clinical agencies, employers and other parties as required. Students have 24/7 access to their online MyCB Tracker for convenient management. Agencies conduct zero tolerance compliance audits throughout the program and will not accept records that expire during a quarter. As a result, students are required to renew requirements months in advance of any mid-quarter expiration dates. Failure to meet the requirements and specified College of Nursing deadlines will prevent a student from entering or continuing in any CON courses and thereby alter progression in the program and their good standing.

Background Check

You will be expected to undergo a background check through CastleBranch.com and Washington State Patrol and provide the report results before you are accepted for assignment to a clinical training site. In addition, your clinical site will require you to provide it with a satisfactory criminal background check before you begin your clinical assignment or may require you to undergo a criminal background check of the agency’s choice prior to beginning a clinical experience in that agency. It is the student’s responsibility to meet all deadline requirements specified by the College of Nursing in order to participate in any CON courses and remain in good standing.

CPR Certification

Students must hold current certification in: American Heart Association – Basic Life Support (BLS) Provider Course (2-year certification). Other CPR courses are not accepted (ex: Red Cross CPR is not acceptable). The American Heart Association BLS Provider Course is designed to teach the skills of CPR for victims of all ages (including ventilation with a barrier device, a bag-mask device, and oxygen), use of an automated external defibrillator (AED), and relief of foreign-body airway obstruction. It is intended for participants who provide healthcare to patients in a wide variety of settings, including in-hospital and ambulatory care settings.
Students must show evidence of proper certification prior to starting clinical practice. **Any lapse in coverage will render the student ineligible for participation in classes and in clinical CON courses.** It is the student’s responsibility to meet all deadline requirements **specified by the College of Nursing** in order to participate in any CON courses and remain in good standing.

**Health Assessment/Physical Examination**

Each student is required to obtain a physical examination from a licensed healthcare provider who, in turn, is requested to verify the student’s health status based on professional judgment as to the student’s eligibility to fully participate in the educational program of study with patients of all ages, stages of development, and who present many varied conditions/diagnoses. The clinical assignments require color recognition by testing as well as corrected vision and hearing to normal range. The extent of the physical examination is the responsibility of the healthcare provider. The history and physical examination report may be submitted on a form utilized by the provider, and attached to the completed health assessment / physical examination form required by the College of Nursing. Any condition which may interfere with the provision of care in the clinical setting should be discussed with the student’s clinical instructor(s) and the Associate Dean. (See Policy 90 in this Handbook for further additional information.) In most instances, this physical examination will fulfill requirements through graduation or for two calendar years. **Under no circumstances will a student be allowed to progress into second quarter BSN or second year DIUS courses without meeting this requirement.**

**Health and Accident Insurance**

Students are required to carry comprehensive health and accident insurance. Information on the Seattle University student insurance plan is available through the Seattle University Student Health Center. Students must show evidence of current health insurance coverage by providing a copy of their current health insurance card.

**Students are expected to maintain continuous insurance coverage data.** Evidence of current coverage can be required at any time during the program of study. Lapse of insurance coverage will restrict clinical participation, the consequences of which are the sole responsibility of the student. **NOTE:** The College of Nursing is required by clinical agencies to provide evidence of coverage by a comprehensive health and accident plan which will provide continuous coverage during participation in clinical.
IMMUNIZATION / TESTING REQUIREMENTS

This information outlines the immunizations and testing requirements while in the undergraduate programs of study. All records must have agency signatures and list the agency name and address. Students will place their background check order on CastleBranch.com and then set up their online MyCB Tracker. Students will be able to view all the requirements mandated by the College of Nursing. Upon completion of each requirement, students are able to upload, fax, or mail in their documentation to the online CastleBranch.com MyCB Tracker. Once completed, the requirements will be reviewed and verified online.

Students are to keep all health records current and up to date in their online CastleBranch MyCB Tracker for College of Nursing compliance and their Clinical Passport. These documents must be available at all times in order to provide immediate verification to clinical agencies, employers and other parties as required. Students have 24/7 access to their online CastleBranch MyCB Tracker for convenient management. Agencies conduct zero tolerance compliance audits throughout the program. Failure to meet the Clinical Passport requirements, specified College of Nursing deadlines, or agency audits will prevent a student from participating in patient care/clinical experience and thereby alter their good standing and progression in the undergraduate programs.

1. TUBERCULOSIS SCREENING

REQUIRED RECORDS: DATES OF ADMINISTRATION AND INTERPRETATION, RESULT OF TESTING WITH SPECIFIC INDURATION FINDINGS; AGENCY NAME OR HEALTHCARE PROVIDER SIGNATURE IS REQUIRED AS WELL AS STUDENT NAME AND BIRTH DATE.

This requirement must be completed annually by the specified College of Nursing deadline. Two-step TB Skin Test: Two (2) TB skin tests (each test involves two visits – one for the placement of the test and one to have the results read 48-72 hours later) within the past year OR QuantiFERON TB Gold test required. Measurement of induration, if present, must be reported/documentedit in millimeters along with the lapsed time between test and reading, usually 48-72 hours. The reading must be done by the same healthcare provider. If the student’s history or physical condition indicates the need to retest, despite negative results, a second test should be done within three weeks. If a student tests positive, a follow-up examination, chest x-ray and treatment are indicated. Reports of treatment plan and use of prophylactic drug therapy, if prescribed, must be documented. Absence of clinical disease must be verified by the healthcare provider with Annual Review and Education on Symptoms of Active TB form updated and kept on file.

2. HEPATITIS B VACCINE

REQUIRED RECORDS: DATES OF EACH INJECTION AND POSITIVE ANTIBODY TITER RESULTS; AGENCY NAME OR HEALTHCARE PROVIDER SIGNATURE IS REQUIRED AS WELL AS STUDENT NAME AND BIRTH DATE.

Both of the following are required: Three (3) vaccinations AND a positive antibody titer (lab report required). The series of three injections must be spaced as follows: Dose one and two, one month apart; dose three, six months after dose one. A positive titer is required after all three doses (lab report required). If the titer is negative or equivocal, you must repeat series and provide a 2nd titer. If you cannot provide vaccination documentation and can demonstrate a positive antibody titer, a negative surface antigen titer is required in lieu of vaccination documentation.
3. **TETANUS-DIPHTHERIA-PERTUSSIS (TDAP)**

   **REQUIRED RECORDS: DATE OF IMMUNIZATION; AGENCY NAME OR HEALTHCARE PROVIDER SIGNATURE IS REQUIRED AS WELL AS STUDENT NAME AND BIRTH DATE.**

   Tdap immunization or booster within the last 10 years (Must be Tdap, as Td is not accepted).

4. **MEASLES / MUMPS / RUBELLA (MMR)**

   **REQUIRED RECORDS: DATE OF TWO IMMUNIZATIONS OR POSITIVE ANTIBODY TITER FOR ALL THREE COMPONENTS; AGENCY NAME OR HEALTHCARE PROVIDER SIGNATURE IS REQUIRED AS WELL AS STUDENT NAME AND BIRTH DATE.**

   One of the following is required: Two (2) vaccinations OR positive antibody titer for all three components (lab report required). If any titer is negative or equivocal, you must receive one (1) booster shot and provide a 2\textsuperscript{nd} titer.

5. **CHICKENPOX / VARICELLA**

   **REQUIRED RECORDS: DATE OF TWO IMMUNIZATIONS OR POSITIVE ANTIBODY TITER; AGENCY NAME OR HEALTHCARE PROVIDER SIGNATURE IS REQUIRED AS WELL AS STUDENT NAME AND BIRTH DATE.**

   One of the following is required: Two (2) vaccinations OR positive antibody titer (lab report required). If the titer is negative or equivocal, you must receive one (1) booster shot and provide a 2\textsuperscript{nd} titer. History of disease is not accepted.

6. **INFLUENZA**

   **REQUIRED RECORDS: DATE OF IMMUNIZATIONS OR APPROVED DECLINATION WAIVER; AGENCY NAME OR HEALTHCARE PROVIDER SIGNATURE IS REQUIRED AS WELL AS STUDENT NAME AND BIRTH DATE.**

   One of the following is required: documentation of a flu shot administered during the current flu season OR a completed Flu Declination Waiver. For nursing students the declination waiver must be completed on school form and are available by permission only; DIUS students are required to receive the flu vaccine.

7. **ADDITIONAL IMMUNIZATIONS**

   Additional immunizations may be required based on the agency or program of study. It is the student’s responsibility to meet all requirements specified by the clinical agency as well as the College of Nursing in order to participate in any major courses and remain in good standing. If students participate in international field experiences, additional immunizations may be required. The Center for Disease Control and Prevention Travel Advisory Guidelines for the specific region or country will be used to determine requirements.
EVALUATION AND PROGRESSION IN THE COLLEGE OF NURSING

Calculation of Course Grades

A final course grade will be calculated based upon established evaluation criteria documented in the related course syllabus each quarter. Final grade distribution is as follows:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Score Range</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>94-100%</td>
<td>Superior</td>
</tr>
<tr>
<td>A-</td>
<td>90-93%</td>
<td></td>
</tr>
<tr>
<td>B+</td>
<td>87-89%</td>
<td></td>
</tr>
<tr>
<td>B</td>
<td>83-86%</td>
<td>Good</td>
</tr>
<tr>
<td>B-</td>
<td>80-82%</td>
<td></td>
</tr>
<tr>
<td>C+</td>
<td>76-79%</td>
<td>Adequate</td>
</tr>
<tr>
<td>C*</td>
<td>73-75%</td>
<td>Adequate</td>
</tr>
<tr>
<td>C</td>
<td>70-72%</td>
<td></td>
</tr>
<tr>
<td>D+</td>
<td>66-69%</td>
<td></td>
</tr>
<tr>
<td>D</td>
<td>63-65%</td>
<td>Poor</td>
</tr>
<tr>
<td>D-</td>
<td>60-62%</td>
<td></td>
</tr>
<tr>
<td>F</td>
<td>0-59%</td>
<td>Failing</td>
</tr>
</tbody>
</table>

*Note: A grade of C (2.0 or 73%) is the minimum passing grade in all CON major classes. Rounding of any grades is at the discretion of the faculty member teaching the course.

Grading by CR-Credit

Courses approved for Credit/Fail grading alternative will be evaluated so that minimum acceptable performance for credit equates to "C" performance. Failure to meet the minimum acceptable performance will result in a grade of F, which is reflected in the grade point average.

Student Clinical Evaluations

Students enrolled in clinical courses are expected to engage in an evaluation of progress periodically as directed by the course instructor. Mid-quarter conferences may be initiated by either the student or instructor to discuss progress or problems. Throughout the quarter the student will be informed of progress either in written or verbal form, and a final written evaluation will be provided by the instructor at the end of the rotation, to be reviewed and signed by the student. These final evaluations are filed in the student's record in the College of Nursing. Student-faculty final clinical evaluation (BSN conferences) must be completed prior to the last day of classes each quarter. Failure to complete a final clinical evaluation conference prior to the above deadline will result in a grade of ‘I’ (incomplete) for the student, who then may be unable to progress in the program of study until the ‘I’ grade is replaced with a letter grade.

Professional Behavior

Students are expected to maintain professional behavior at all times and at all sites (campus, clinical, etc.) while participating in the College of Nursing programs. Consistent with the College of Nursing’s mission, respect for patients, faculty, staff, and student colleagues is expected. Agreement with expressed opinions and facts may not always be possible or even desirable; however, respect for individuals’ right to express those thoughts is the basis for professionalism. As we strive to work in cooperative teams, communication and evaluation of our behaviors and practice by others is imperative for growth. Therefore, willingness to listen to critique and modify behaviors accordingly is the expectation of the College of Nursing community. The goals of the College of Nursing are to nurture an atmosphere of collegiality among students and faculty in order to foster a positive learning environment.
All courses include student professional behavior as an evaluation criterion. If a student does not meet the objective for professional behavior, it is possible the student will earn an unsatisfactory grade in the course even though they have a passing numerical average of other graded items such as exams, quizzes, and papers. When a student earns an unsatisfactory grade in a course for a professional behavior criterion, they will not pass the course based on academic criteria and the course must be repeated for a satisfactory grade.

**Standards of Conduct**

As a Catholic and Jesuit university, Seattle University is a learning community that values the dignity and worth of persons. Consistent with its values, the University fosters the respect needed for students to live, work, study, and socialize together as a community. All members of the University community are expected to observe standards that reflect personal accountability and responsibility for the common good; demonstrate regard for the safety, security, and health of others; maintain the atmosphere needed for study and reflection; show respect for individuals; and value truthfulness and personal integrity. This policy is referred to as the “Code of Student Conduct”.

Standards of conduct assist each student in the development of a responsible lifestyle rewarding to the individual student, respectful of the rights of others, and compatible with the legal norms of society. It is neither possible nor necessary to specify every instance of behavior of misconduct that could result in disciplinary action against a student. Conduct that evidences good intentions, measure consideration of the foreseeable consequences, and respect for the rights of others generally will not conflict with University standards.

**Ethical Conduct**

College of Nursing faculty are committed to the principle that ethical conduct and professional integrity are of paramount importance for all CON students. At all times and in all contexts, professional and respectful behavior is expected from CON students.

The College of Nursing views violations of the Academic Honesty Code as ethical violations. Cheating and plagiarism are direct violations of the Seattle University Academic Integrity Policy. Plagiarism is defined as the taking of an idea or expression from another person and using it as one’s own; an example of this would be copying a phrase or sentence from a reference source without properly referencing.

Other examples of academic dishonesty include, but are not limited to: working with another student on an assignment or exam meant to represent individual effort; adding items to a reference list that were not used in writing a paper; obtaining exam questions from a student who previously took the exam; having someone else complete assignments or exams; and copying or photographing test items.

In the clinical setting, students are at all times expected to comply with ethical standards for the professional as defined by the National Student Nurses Association Code of Conduct or the Society of Diagnostic Medical Sonography Code of Ethics. Students are expected to comply with state and federal standards that relate to confidentiality of patient records and information; care and treatment of patients; documentation and reporting patient information; and administration and handling of medications. Violations of these or other nursing standards by a student in a clinical setting may result in a decision that the student has engaged in unethical, unprofessional, or unsafe conduct, and may further result in academic penalty, ranging from reprimand to expulsion.
College of Nursing Social Media Policy
This policy is for the use of social media by faculty, staff, and students.

Background
Seattle University and the College of Nursing recognize that social media sites like Facebook, Twitter, YouTube, Instagram, etc., have become important and influential communication channels for our community (Seattle University, n.d.). Organizations, including healthcare and educational institutions, are integrating use of social media into their education, outreach, and marketing strategies, as well as using these sites to investigate potential employees. Individuals use them to keep abreast of the lives of friends, family members, and public personalities, as well as to research organizations for job opportunities.

Although there are many benefits to using social media, there are a number of risks associated with this practice in the context of healthcare practice and employment. The purpose of this policy is to provide direction for the use of social media by faculty, staff, and students in the College of Nursing.

What is Considered Social Media?

Social media includes text, images, audio, and video communicated via such tools as:

- Blogs and micro-blogs such as Twitter
- Social networks, such as Facebook
- Professional networks, such as LinkedIn
- Video sharing, such as YouTube and vlogs (video weblogs)
- Audio sharing, such as podcasts
- Photo sharing, such as Instagram, Snapchat, Flickr and Photobucket
- Social bookmarking, such as Digg and Redditt
- Public comment sections on webpages (such as those for online news sites)
- User created web pages such as Wikis and Wikipedia
- Any other internet-based social media application similar in purpose or function to those applications described above.

(The above list is taken and updated from the UW School of Nursing Social Networking Policy and Guidelines, 2011)

Social networks are “web-based services that allow individuals to 1) construct a public or semi-public profile within a bounded system, 2) articulate a list of other users with whom they share a connection, and 3) view and traverse their lists of connections and those made by others within the system” (Boyd & Ellison, 2007, cited in ANA, 2011a).

General Considerations

- When engaging in the use of social media, it is important to consider the Seattle University Social Media Policy & Guidelines to ensure that you are appropriately representing the University. These can be found here: [https://www.seattleu.edu/marcom/social-media/guidelines/](https://www.seattleu.edu/marcom/social-media/guidelines/). Remember, unless you are an official spokesperson for the University and/or the College of Nursing, you must have permission from your supervisor as appointed by your department head, and notify Marketing Communications prior to engaging in any form of social media involving the University.
Confidentiality and Privacy: Students, faculty, and staff must always uphold confidentiality and privacy standards and adhere to HIPAA and FERPA regulations during all interactions, including online communication, whether via email or social media platforms. Remember that HIPAA violations are serious and may have serious consequences, including dismissal from the University, as well as civil and criminal penalties; these can include fines and jail time. HIPAA information is accessible at: [http://www.hhs.gov/ocr/privacy/hipaa/understanding/summary/index.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/summary/index.html). FERPA protects student information and information can be accessed at [https://www.seattleu.edu/academic-records/ferpa/](https://www.seattleu.edu/academic-records/ferpa/).

Patient privacy and confidentiality can be breached inadvertently on social media in a variety of ways. Examples include comments in which patients are described with sufficient detail to be identified by someone reading the post, referring to patients in a degrading or demeaning manner, or posting videos or photos of patients (NCSBN, 2011). Any breach of privacy could undermine the College’s relationship with the clinical site, damage the College and University’s reputations, and damage patients’ trust in nurses and sonographers.

Student privacy and confidentiality can be breached inadvertently on social media as well. Examples would include referring to students in a degrading or demeaning manner, or comments in which student information is shared regarding class performance. FERPA violations may result in loss of federal funding to the University, as well as termination of employment.

The information you post online is NOT confidential. Even if you later delete it, the information stays in cyberspace and may be retrieved. Assume anything you post is visible to the public, and that it may affect your professional reputation forever. Today, many employers and academic institutions search potential candidates’ online presence (University of Pennsylvania, n.d.).

Be aware that all postings can potentially be viewed by your colleagues, patients, University and College administration, other institutions, employers, professional contacts, and the general public. Even “private” conversations or postings can be forwarded, copied, or disseminated without the sender’s knowledge. Screenshots of private conversations often appear on public internet sites.

**Policy**

1. Confidential or proprietary information about Seattle University College of Nursing or its affiliates, students, employees, or alumni may not be posted on any social media site. As stated in the Seattle University Social Media Policy & Guidelines, “Seattle University logos and/or visual identity cannot be used for personal social media without university permission” ([https://www.seattleu.edu/marcom/social-media/guidelines/](https://www.seattleu.edu/marcom/social-media/guidelines/)). If you need assistance or guidance with respect to this restriction, please do not hesitate to contact the Marketing Manager in the College of Nursing at (206) 296-2168.

2. Patient privacy must be maintained in all communications, whether by faculty or students. Do not share any information that may be used to identify patients or their health conditions and remember that, even de-identified information may be recognized by patients, their families, or their employers.

3. Students, faculty, and staff must uphold Seattle University and the College of Nursing standards for professional and ethical conduct while using social media sites.

4. Affiliates may not harass, libel, slander, or embarrass anyone. Do not post any material that is obscene, defamatory, profane, libelous, threatening, harassing, abusive, hateful, or embarrassing to another person or entity.
5. Unless you are serving as an approved, official spokesperson for Seattle University College of Nursing, online communications are your personal opinions and do not reflect the opinion of Seattle University College of Nursing or its affiliated entities. Each individual is personally responsible for their posts (written, audio, video or otherwise).

6. Faculty and students may not communicate over social media with patients, patients’ family members or patients’ legally appointed decision-makers.

7. When posting on a social media site, affiliates are advised to use disclaimer language. If you acknowledge your SU College of Nursing affiliation or you may be otherwise known or presumed to be affiliated with SU College of Nursing, include disclaimers in your online communications that indicate you are not speaking officially on behalf of the organization. The following disclaimers would be appropriate: “The postings on this site are my own and do not represent the positions, strategies or opinions of my employer/school,” or “This is a personal web site, produced in my own time and solely reflecting my personal opinions. Statements on this site do not represent the views or policies of my employer/school, past or present, or any other organization with which I may be affiliated. All content is copyrighted.”

References


Seattle University College of Nursing Global Nursing Committee (2014). Policy for use of social media on nursing education abroad trips.


Admission, Progression, Probation, and Dismissal

See Appendix I for Policy 75-3 addressing student performance criteria, outlining requirements for admission and progression, as well as the policy regarding probation and dismissal.

At-Risk Forms

The College of Nursing promotes the early identification of students encountering issues that may impede their successful performance in a course. At-risk forms are used to document that faculty have noticed an issue (class absences, low course scores), talked with the student about that issue, and proposed a course of corrective action. A copy of this form will be placed in the student’s academic file and a copy forwarded to the Associate Dean and/or Program Director, the Progression Committee, and the student’s advisor. See Appendix H for the At-Risk Policy and Procedure and the At-Risk Form.

Medication Safety (BSN)

Medication calculation and administration are competencies with a higher potential for harm to patients. Therefore, in an effort to ensure safety for patients and students, the College of Nursing has adopted a policy that promotes the progressive skills acquisition necessary for safe medication administration in a safe environment. Students will take multiple medication safety exams throughout their nursing education. See Appendix F for the Medication Safety Policy.

HESI Program/Student Testing in Preparation for NCLEX (BSN)

In order to help prepare students for the NCLEX-RN examination, and to provide reports of progress in particular content areas in the undergraduate program, the College of Nursing faculty selected HESI external standardized examinations. These examinations provide students with an objective assessment of their command of nursing knowledge, ability to think critically and inferentially, ability to make sound and appropriate clinical judgments, and evaluation of the outcomes of care.

The exams are given during the final quarter. HESI predictor exams are comprehensive exams similar to the NCLEX, and will be taken last quarter in NURS 4790. Completion of these exams is required and counted as a portion of the course grade. Taking the exams seriously is important not only for individual evaluation of student knowledge and progress, but also for evaluation of the cohort’s progression through the program. Students are expected to take the HESI exams seriously and use as a means to develop an individualized NCLEX study plan.

All students are expected to engage in standardized testing. Each student will receive a customized report following each exam, identifying strengths and weaknesses in particular areas. A copy of this report should be kept so it is readily available during advising appointments. A HESI advisor and the
student’s advisor will work to help students interpret the report and determine what additional methods may be helpful in mastering nursing concepts. See Appendix G for BSN Testing and Remediation Plan for NCLEX Preparation.

**NCLEX (National Council Licensure Examinations) (BSN)**

As of April 1994, all candidates for RN licensure take a national licensure exam using a Computerized Adaptive Testing (CAT) format at designated testing centers.

Applying to take the NCLEX is a multi-step process:
1. Complete an application to the State Board of Nursing where you wish to practice nursing.
2. Register with Pearson Vue (the designated National Council of State Boards Exam vendor responsible for administering the exam)
3. Request official transcripts to be sent to the State Board of Nursing.

Instructions and guidance will be provided during the senior year of nursing education.

Both organizations require registration and payment fees **approximately 6 weeks prior to graduation**.

Application packets containing directions and forms are available via the links below. Updated information about NCLEX is available from the College of Nursing and will be provided to senior nursing students during the NURS 4790 or NURS 4520 course.

1. Application for Licensure:
   [http://www.doh.wa.gov/LicensesPermitsandCertificates/NursingCommission/NurseLicensing/RegisteredNurse](http://www.doh.wa.gov/LicensesPermitsandCertificates/NursingCommission/NurseLicensing/RegisteredNurse)
2. Application for Testing:

The NCLEX application includes many questions about personal data regarding medical (physiological and psychological) conditions, use of chemical substances, illegal use controlled substances, convictions, and sex offenses. Students should answer these questions thoroughly and truthfully. Answering yes to these questions does not preclude licensure or ability to practice. However, it may require further documentation and questioning.

**ARDMS (American Registry of Diagnostic Medical Sonography) (DIUS)**

All DIUS candidates for ARDMS certification take a national certification board exam using a Computerized test.

**CCI (Cardiovascular Credentialing International) (DIUS)**

All DIUS candidates for CCI certification take a national certification board exam using a Computerized test.

**Curriculum Evaluation (BSN and DIUS)**

Curriculum evaluation is necessary to ensure continuing accreditation and to maintain a high-quality program that is responsive to the challenging healthcare environment. Curriculum evaluation consists of a planned sequence of assessments and evaluation strategies at various points in the program of study. It is a professional expectation that all students participate in the curriculum evaluation process. Two examples of opportunities for students to participate in the curriculum and program evaluation process are course and course faculty evaluations at the end of each quarter, and the senior satisfaction survey at the end of the program.
Student evaluation of course content and instructors at the end of each quarter is expected to be responsible, honest, and useful feedback, identifying both strengths and areas for potential change. Student feedback is useful to faculty in assessing course content and teaching/learning strategies for possible future revisions. Student evaluations also provide valuable information for the annual performance evaluation of each faculty member.

The course evaluation process is completed online to increase the security of the evaluation process. The evaluations are managed by a third-party company experienced in the evaluation process for numerous colleges and universities across the United States. Faculty do not have access to the student evaluations until after grade submission, and then have access to only aggregate data, not individual student responses. Students can therefore be confident in the anonymity of the course evaluation process.
APPENDIX A:
PROGRAMS OF STUDY
BSN AND DIUS
### SEATTLE COLLEGE OF NURSING BACHELOR OF SCIENCE IN NURSING - BSN Typical Program of Study Grid

**Bachelor of Sciences in Nursing (BSN)**

**Typical 4 Year Program of Study**

<table>
<thead>
<tr>
<th>2016-2017</th>
</tr>
</thead>
</table>

#### DEGREE REQUIREMENTS
- **Credits:** minimum of 180 credits
- **Credits in major:** 135
- **GPA cumulative minimum:** 2.75
- **GPA major minimum:** 3.0

#### CURRICULUM NOTES
- Major prerequisite courses for all nursing students must be completed before the nursing course sequence begins (winter quarter of sophomore year)
- Students must earn a "C" or better in all nursing and prerequisite courses.

For complete information on courses, prerequisites, etc., use this information in conjunction with the online Catalog (http://catalog.seattleu.edu/) for the current year.

The example below assumes you have completed no degree requirements. Your personal program of study may vary from this due to prior educational experience or individual goals.

*P* indicates prerequisite required for course.

#### TYPICAL 4 YEAR PROGRAM OF STUDY

<table>
<thead>
<tr>
<th>FRESHMAN</th>
<th>COURSE</th>
<th>CREDITS</th>
<th>WINTER</th>
<th>COURSE</th>
<th>CREDITS</th>
<th>SPRING</th>
<th>COURSE</th>
<th>CREDITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>FALL</td>
<td>UCOR 1XXX</td>
<td>5</td>
<td>UCOR 1XXX</td>
<td>5</td>
<td>UCOR 1XXX</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>MATH 1010 or higher</td>
<td>5</td>
<td>PSYC 1200 Introduction to Psychology</td>
<td>5</td>
<td>BIOL 1910 Nursing Anatomy &amp; Physiology I</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>CHEM 1200 Chemistry of Life</td>
<td>5</td>
<td>BIOL 1910 Nursing Cell Biology</td>
<td>5</td>
<td>NURS 2520 Professional Nursing in the 21st Century</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>PSYC 3220 Growth &amp; Development</td>
<td>5</td>
<td>UCOR 2XXX</td>
<td>5</td>
<td>NURS 3305 Introduction to Pharmacology</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>BIOL 2220 Microbiology</td>
<td>5</td>
<td>UCOR 1XXX</td>
<td>5</td>
<td>NURS 3405 Health Assessment &amp; Interventions</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>BIOL 1910 Nursing Anatomy &amp; Physiology II</td>
<td>5</td>
<td>NURS 3205 Pathophysiology</td>
<td>5</td>
<td>NURS 3190 Promoting the Health of Older Adults - Theory</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>UCOR 2XXX</td>
<td>5</td>
<td>NURS 3520 Statistics &amp; Research for Evidence-based Practice</td>
<td>5</td>
<td>UCOR 3XXX</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>NURS 3705 Nutrition for Health Promotion</td>
<td>2</td>
<td>NURS 3390 Promoting Mental Health – Theory OR NURS 3590 Promoting Reproductive Health – Theory</td>
<td>5</td>
<td>UCOR 3XXX</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>NURS 3390 Promoting Mental Health – Theory OR NURS 3590 Promoting Reproductive Health – Theory</td>
<td>5</td>
<td>NURS 3391 Promoting Mental Health – Clinical OR NURS 3591 Promoting Reproductive Health - Clinical</td>
<td>5</td>
<td>NURS 4590 Promoting the Health of Populations and Communities</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>NURS 3391 Promoting Mental Health – Clinical OR NURS 3591 Promoting Reproductive Health - Clinical</td>
<td>5</td>
<td>UCOR 2XXX</td>
<td>5</td>
<td>UCOR 3XXX</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>NURS 4190 Promoting the Health of Children &amp; Families – Theory OR NURS 4390 Promoting the Health of Adults - Theory</td>
<td>5</td>
<td>NURS 4190 Promoting the Health of Children &amp; Families – Theory OR NURS 4390 Promoting the Health of Adults - Theory</td>
<td>5</td>
<td>NURS 4790 Transition to Professional Practice</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>NURS 4191 Promoting the Health of Children &amp; Families – Clinical OR NURS 4391 Promoting the Health of Adults- Clinical</td>
<td>5</td>
<td>NURS 4191 Promoting the Health of Children &amp; Families – Clinical OR NURS 4391 Promoting the Health of Adults- Clinical</td>
<td>5</td>
<td>NURS 4791 Senior Practicum</td>
<td>6</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### DEGREE REQUIREMENTS

- **Credits:** minimum of 180 credits
- **Credits in major:** 135
- **GPA cumulative minimum:** 2.75
- **GPA major minimum:** 3.0

#### CURRICULUM NOTES
- Major prerequisite courses for all nursing students must be completed before the nursing course sequence begins (winter quarter of sophomore year)
- Students must earn a "C" or better in all nursing and prerequisite courses.

For complete information on courses, prerequisites, etc., use this information in conjunction with the online Catalog (http://catalog.seattleu.edu/) for the current year.

The example below assumes you have completed no degree requirements. Your personal program of study may vary from this due to prior educational experience or individual goals.

*P* indicates prerequisite required for course.

#### TYPICAL 4 YEAR PROGRAM OF STUDY

<table>
<thead>
<tr>
<th>FRESHMAN</th>
<th>COURSE</th>
<th>CREDITS</th>
<th>WINTER</th>
<th>COURSE</th>
<th>CREDITS</th>
<th>SPRING</th>
<th>COURSE</th>
<th>CREDITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>FALL</td>
<td>UCOR 1XXX</td>
<td>5</td>
<td>UCOR 1XXX</td>
<td>5</td>
<td>UCOR 1XXX</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>MATH 1010 or higher</td>
<td>5</td>
<td>PSYC 1200 Introduction to Psychology</td>
<td>5</td>
<td>BIOL 1910 Nursing Anatomy &amp; Physiology I</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>CHEM 1200 Chemistry of Life</td>
<td>5</td>
<td>BIOL 1910 Nursing Cell Biology</td>
<td>5</td>
<td>NURS 2520 Professional Nursing in the 21st Century</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>PSYC 3220 Growth &amp; Development</td>
<td>5</td>
<td>UCOR 2XXX</td>
<td>5</td>
<td>NURS 3305 Introduction to Pharmacology</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>BIOL 2220 Microbiology</td>
<td>5</td>
<td>UCOR 1XXX</td>
<td>5</td>
<td>NURS 3405 Health Assessment &amp; Interventions</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>BIOL 1910 Nursing Anatomy &amp; Physiology II</td>
<td>5</td>
<td>NURS 3205 Pathophysiology</td>
<td>5</td>
<td>NURS 3190 Promoting the Health of Older Adults - Theory</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>UCOR 2XXX</td>
<td>5</td>
<td>NURS 3520 Statistics &amp; Research for Evidence-based Practice</td>
<td>5</td>
<td>UCOR 3XXX</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>NURS 3705 Nutrition for Health Promotion</td>
<td>2</td>
<td>NURS 3390 Promoting Mental Health – Theory OR NURS 3590 Promoting Reproductive Health – Theory</td>
<td>5</td>
<td>UCOR 3XXX</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>NURS 3390 Promoting Mental Health – Theory OR NURS 3590 Promoting Reproductive Health – Theory</td>
<td>5</td>
<td>NURS 3391 Promoting Mental Health – Clinical OR NURS 3591 Promoting Reproductive Health - Clinical</td>
<td>5</td>
<td>NURS 4590 Promoting the Health of Populations and Communities</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>NURS 3391 Promoting Mental Health – Clinical OR NURS 3591 Promoting Reproductive Health - Clinical</td>
<td>5</td>
<td>UCOR 2XXX</td>
<td>5</td>
<td>UCOR 3XXX</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>NURS 4190 Promoting the Health of Children &amp; Families – Theory OR NURS 4390 Promoting the Health of Adults - Theory</td>
<td>5</td>
<td>NURS 4190 Promoting the Health of Children &amp; Families – Theory OR NURS 4390 Promoting the Health of Adults - Theory</td>
<td>5</td>
<td>NURS 4790 Transition to Professional Practice</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>NURS 4191 Promoting the Health of Children &amp; Families – Clinical OR NURS 4391 Promoting the Health of Adults- Clinical</td>
<td>5</td>
<td>NURS 4191 Promoting the Health of Children &amp; Families – Clinical OR NURS 4391 Promoting the Health of Adults- Clinical</td>
<td>5</td>
<td>NURS 4791 Senior Practicum</td>
<td>6</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

**College of Nursing Advising Contact Information**

4th Floor Garrand
CONAdvising@seattleu.edu

Work closely with your academic advisor to plan your program of study and the other co-curricular components of your educational plan.

Updated 3/31/2016
# SEATTLE UNIVERSITY COLLEGE OF NURSING BACHELOR OF SCIENCE IN NURSING - Typical Program of Study for Transfer Students

## DEGREE REQUIREMENTS

- **Credits:** minimum of 180 credits
- **Credits in major:** 135
- **GPA cumulative minimum:** 2.75
- **GPA major minimum:** 3.00

### CURRICULUM NOTES

- Math and Psychology coursework must be completed within 10 years of anticipated program start date and science coursework must be completed within 5 years of anticipated program start date.
- Students must earn a “C” or better in all nursing and prerequisite courses.
- Post-Baccalaureate students are waived from UCOR 2500 and UCOR 3400.

For complete information on courses, pre-requisites, etc. use this information in conjunction with the online Catalog (http://catalog.seattleu.edu/) for the current year.

The example below assumes that you enter Seattle University with junior standing (90 credits), have earned a transferable associate’s degree, and have successfully completed the following:

- Math and Psychology coursework must be completed within 10 years of anticipated program start date and science coursework must be completed within 5 years of anticipated program start date.

### FALL

<table>
<thead>
<tr>
<th>COURSE</th>
<th>CREDITS</th>
<th>COURSE</th>
<th>CREDITS</th>
<th>COURSE</th>
<th>CREDITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>UCOR 2XXX</td>
<td>5</td>
<td>NURS 3305 Introduction to Pharmacology</td>
<td>5</td>
<td>UCOR 2XXX or 34XX</td>
<td>5</td>
</tr>
<tr>
<td>NURS 2520 Professional Nursing in the 21st Century</td>
<td>5</td>
<td>NURS 3405 Health Assessment &amp; Intervention</td>
<td>5</td>
<td>UCOR 34XX or UCOR 2XXX</td>
<td>5</td>
</tr>
<tr>
<td>NURS 3205 Pathophysiology</td>
<td>5</td>
<td>NURS 3190 Promoting the Health of Older Adults – Theory</td>
<td>2</td>
<td>NURS 4190 Promoting the Health of Children &amp; Families – Theory or NURS 4391 Promoting the Health of Adults – Clinical</td>
<td>5</td>
</tr>
</tbody>
</table>

### WINTER

<table>
<thead>
<tr>
<th>COURSE</th>
<th>CREDITS</th>
<th>COURSE</th>
<th>CREDITS</th>
<th>COURSE</th>
<th>CREDITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 3390 Promoting Mental Health – Theory OR NURS 3590 Promoting Reproductive Health – Theory</td>
<td>5</td>
<td>UCOR 2XXX or 34XX</td>
<td>5</td>
<td>UCOR 34XX or UCOR 2XXX</td>
<td>5</td>
</tr>
<tr>
<td>NURS 3391 Promoting Mental Health – Clinical OR NURS 3591 Promoting Reproductive Health – Clinical</td>
<td>5</td>
<td>NURS 4190 Promoting the Health of Children &amp; Families - Theory</td>
<td>5</td>
<td>NURS 42910 Promoting the Health of Children &amp; Families - Theory OR NURS 4390 Promoting the Health of Adults - Theory</td>
<td>5</td>
</tr>
<tr>
<td>NURS 4590 Promoting the Health of Populations &amp; Communities</td>
<td>5</td>
<td>NURS 4191 Promoting the Health of Children &amp; Families – Practicum OR NURS 43991 Promoting the Health of Adults – Clinical</td>
<td>5</td>
<td>NURS 4191 Promoting the Health of Children &amp; Families – Practicum OR NURS 43991 Promoting the Health of Adults – Clinical</td>
<td>5</td>
</tr>
</tbody>
</table>

### SPRING

<table>
<thead>
<tr>
<th>COURSE</th>
<th>CREDITS</th>
<th>COURSE</th>
<th>CREDITS</th>
<th>COURSE</th>
<th>CREDITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>UCOR 2XXX</td>
<td>5</td>
<td>UCOR 2XXX or 34XX</td>
<td>5</td>
<td>UCOR 34XX or UCOR 2XXX</td>
<td>5</td>
</tr>
<tr>
<td>NURS 4590 Promoting the Health of Populations &amp; Communities</td>
<td>5</td>
<td>NURS 4191 Promoting the Health of Children &amp; Families – Practicum OR NURS 43991 Promoting the Health of Adults – Clinical</td>
<td>5</td>
<td>NURS 4191 Promoting the Health of Children &amp; Families – Practicum OR NURS 43991 Promoting the Health of Adults – Clinical</td>
<td>5</td>
</tr>
</tbody>
</table>

## CORE MODULE II REQUIREMENTS

- UCOR 2100 Theological Explorations
- UCOR 2500 Philosophy of the Human Person
- UCOR 2920 Ethical Reasoning (Healthcare Ethics)

## CORE MODULE III REQUIREMENTS

- UCOR 2100 Theological Explorations
- UCOR 34XX Humanities and Global Challenges

## SUMMER (after 2nd year)

- NURS 4520 Senior Synthesis: Leadership for Health Equity (5)
- NURS 4790 Transition to Professional Practice (2)
- NURS 4791 Senior Practicum (6)
REFERENCE LETTER REQUEST

LETTER OF RECOMMENDATION REQUEST and AUTHORIZATION to RELEASE INFORMATION from EDUCATION RECORDS to a THIRD PARTY

~ Please Print in Ink or Type ~

Student ID Number: ______________________________________

Phone Number: (______)__________________________________

Student Legal Name:

Last: _________________________ First: _______________________ Middle: ____________________

SU Email: ________________________________@seattleu.edu

I have asked ___________________________________________________ to prepare a letter of recommendation on my behalf and he/she has agreed to provide a recommendation (as demonstrated by his/her signature below). I am completing this release form to enable the faculty or staff member to provide the recommendation.

Faculty/Staff Signature: _______________________________________________

Date: _______________________

Check all information that applies to this authorization to release:

☐ Academic standing or achievement  ☐ Performance in internships or clinical programs
☐ Involvement in extracurricular activities  ☐ Participation in/contribution to SU community
☐ Student conduct records  ☐ Scholarships and financial aid records
☐ The faculty member’s honest judgment about character, work ethic, abilities, skills, and goals
☐ Other: ___________________________________________________________________

To: ________________________________________________________

(Specify complete name of person(s) or organization(s) to receive information)

Address: _______________________________________________________

____________________________________________________________________

____________________________________________________________________

Identify the purpose(s) for which the information may be disclosed:

Check all that apply:

☐ Application for employment  ☐ Admission to an educational institution
☐ Receipt of an honor or honorary recognition  ☐ Application for a scholarship or award
☐ Other: ___________________________________________________________________

(Specify)
I understand that (1) I have the right not to consent to the release of information in my education records; (2) I have the right to receive a copy of such records on request; and (3) this consent will remain in effect until I revoke it in a writing delivered to Seattle University (but I acknowledge that my revocation will not affect disclosures the University made before receiving my written revocation).

I understand further that I may waive my right to inspect and review letters of recommendation.
☐ I waive my right of access to this letter of recommendation.
☐ I do not waive my right of access to this letter of recommendation.

Having acknowledged my privacy rights, I hereby authorize Seattle University and the faculty/staff person named above to release the information about me that I have indicated, some of which may be contained in my education records:

Student Signature: _______________________________________________________

Date: ________________
APPENDIX C:

REQUEST FOR CHANGE OF ADVISOR FORM
BSN AND DIUS
Student Request for Change of Undergraduate Advisor Form

Date: ______________________

Name: _________________________________________________________

Current Advisor: _________________________________________________

Requested Advisor: _______________________________________________

Student must discuss and have agreement to the change from the requested advisor, as well as a signature below verifying this agreement.

Student signature: _____________________________________________

Advisor Signature: _____________________________________________

Requested New Advisor Signature: _________________________________

Forward this form to the Associate Dean of Undergraduate Education

Associate Dean of Undergraduate Education: _________________________

Date: ______________________

Comments:

Forward this form to the BSN program coordinator when completed.
APPENDIX D:

CLINICAL PERFORMANCE LAB POLICIES

1. Student Information and Expectations
2. Equipment Check-Out Policy and Proposal Form
3. CPL Emergency Procedure
CPL Student Expectations and Information

Appearance
Students are to look professional during Lab & Simulation sections scheduled in the Simulation Rooms, Ellipse, Outpatient Clinic Rooms, & Practice Lab:

- Attire
  - Wear clinical-setting appropriate clothing
    - Undergraduate/APNI 1st year – a Seattle University College of Nursing uniform or lab coat with name tag during lab and simulation activities. If wearing a lab coat, professional dress is required. No jeans, no yoga pants.
    - Graduate – professional clothing specific to the clinical environment of the individual advanced practice track (e.g. midwifery, nurse practitioner, public health)
  - Wear closed toe and closed heel shoes
- Hair is to be off the collar and secured during any lab or simulation activities.
- Students who do not meet the appearance expectations may be restricted from participating in the lab class or simulation session.

Computer Lab

- Students are to log-off the computer when finished.
- The CPL is equipped with a “print release” printing station, similar to that at the Lemieux Library. Students must log-in to the computer accompanying the print release station to release their print job. Students’ must use their campus card to print and will be subject to fees paid by campus card and also subject to monitoring for a total maximum number of pages per job or per school year. See CPL front desk with questions.

Food & drinks

- The CPL has many specialized areas for student learning...and as such, require specific eating and drinking rules to be in alignment with health care facility policies for healthcare workers.
- Please note the following below, and review signs posted outside each CPL area.
- Classrooms [Redhawk, Mountain], Student lounge, Conference room, bistro area-food and drink freely allowed
- Practice Lab and Outpatient Clinic-food and drink only on the conference room table. No food or drink items around any clinical equipment.
- Simulation Suites and Computer lab-No food or drink of any kind.
- Ellipse-only drinks in screwtop/secure lids. No disposable cups of any kind...including Starbucks disposable cups and lids.
- Students are expected to exercise care to prevent spills or stains on the furniture and carpet and to dispose of garbage appropriately.
- The Swedish Medical Center cafeteria is on the first floor of the hospital and is open to all Seattle University Students. Microwaves are available for use. There is also a Starbucks in the James Tower lobby and Jefferson Tower Lobby.
• If food is desired for a special event at the lab (e.g. class party), please email CPL@seattleu.edu or call (206) 296-2394 and the CPL team can help you plan your event.

Maintaining the Environment
Students are expected to:
• Clean up after themselves when finished working in the lab
  o Dispose of garbage and remove all personal items
  o Return supplies and equipment to the table or designated location
  o Straighten up lab section area including lower beds, straighten out bed linens, assure one overbed table and stool are at each bedside station, and replace paper on exam tables. (A reminder card listing these tasks is posted at the head of each bed.)
• Return furniture that is rearranged or moved to the original set up and location.
• Exercise care to avoid bumping into the walls with furniture, backpacks.
• Report broken or non-functioning equipment and furniture to a CPL staff member so the items can be pulled out of service for repair.
• Treat the furniture, equipment, and environment respectfully. We are all on the same team!
• Use bulletin boards to post materials that have been approved by the CPL Operations Coordinator. Nothing is to be posted or attached to the walls in the CPL or James Tower.

Restrooms & Lactation Room
Restrooms are located by the elevators outside of the Lab. There is a private bathroom within the CPL for use.

Lactation Room-directly next to the CPL bathroom is a dedicated lactation space for pumping human milk. There is a sink, refrigerator, and cabinet space.

Safety
• No invasive procedures (except injections) are to be performed on students and faculty. This includes no peripheral IV catheters, nasogastric tubes, or any invasive devices or procedures. The only exception are injections under the supervision of a faculty member.
• Students may practice using sharps only under the direct supervision of a faculty member, teaching assistance or qualified CPL team member.
• Sharps are to be disposed of immediately after use in the approved sharps container.
• Infectious waste (Blood, body fluids and materials contaminated with blood or body fluids) is to be disposed of according to OSHA and WISHA standards.
• All volunteer “patients” (including standardized patients and models for special graduate labs) are to complete the appropriate consent forms.
• Students will comply with all Emergency (Fire, Disaster, Evacuation, etc.) policies and procedures.

Shuttle Service
• Students can use the Swedish Shuttle (on a space-available basis) to travel between the First Hill Swedish Medical Center and Swedish Cherry Hill Campus. Patients are given first priority for shuttle use.
• The Shuttle schedule including departure/arrival locations is available at [https://www.seattleu.edu/nursing/clinical-performance-lab/information-for-students-and-faculty/](https://www.seattleu.edu/nursing/clinical-performance-lab/information-for-students-and-faculty/) under “Shuttle Service.”

**Simulation**

• Simulation is an integral part of the curriculum.
• Preparation for simulation should be equal to the student’s preparation for clinical.
• Students should expect to have prep work to optimize educational opportunities in the simulated learning environment. Students are expected to complete prep work.
• Backpacks and pens are not allowed in the simulation rooms due to space constraints and to maintain the expensive equipment. Please store your belongings in the Student Lounge or simulation observation rooms during simulation experiences.

**Student Accessible Space**

Students have unlimited access to the following Lab areas if not in use by a class or other event. Students are required to call 206-296-2394 or email the CPL Administrative Assistant CPL@seattleu.edu and/or check in at the front desk to make an appointment to use spaces outside of their regularly scheduled class time.

• Student Lounge
• Ellipse
• Practice Lab
• Computer Lab
• Reflection Area
• Conference Room
• Classrooms
• Outpatient Clinic
• Community Apartment

Students have restricted access to the following areas (description of restriction):

• Simulation rooms – Pediatric/Newborn, Adult (Faculty or Simulation technician supervision required)

No student access to the following areas:

• Faculty and Administrative Area
• Supply and Equipment Storage Rooms
Procedural Memo — **Equipment Check-Out from the CPL**

**Background:**
The College of Nursing Clinical Performance Lab (CON CPL) maintains various types of nursing skills equipment, some of which is available for students to check out in order to practice their skills away from the lab. Students are always welcome to practice using the equipment that is permanently housed here at the CPL (for example, the head-of-bed-mounted BP cuffs).

To do so, students are asked to check in at the front desk if they are practicing outside of class time so that they may be directed to a room that is not in use by a class. The CPL also accepts practice time reservations at the front desk or by calling 206-296-2394 or by emailing CPL@seattleu.edu. The following policies and procedures apply to student equipment check-out.

**Procedure:**

**General Information**
- **BP cuffs and other physical assessment equipment may be checked out for one week*. If the equipment is not returned within one week, a reminder is sent to the student by the CPL staff, asking for the item to be returned so that others may have their chance with the equipment. Due to our current demand, back-to-back check-outs are not permitted.**
- For students wishing to check out equipment longer than one week, this is determined on a case-by-case basis and anticipated need for the equipment.
- Special requests for equipment/supplies needed for health fairs or other community activities must be received in writing (email is fine) at least one week prior to the event. In almost all cases, the equipment/supplies checked out for community purposes is to be picked up the day before the special event and returned the next business day after the event.
- The CPL expects equipment to be returned in the same condition it was checked out in, minus expected wear and tear. Broken or missing equipment will be charged to the student.
- Reference books, videos/DVDs, and other multi-media do not leave the Lab, much like the items in the reference section of the library. Books are in various locations throughout the lab. Other media can be obtained from the front desk and viewed here in the CPL.

*Equipment is checked out for one week during the Fall through Spring regular school year. In the summer (when accelerated-pace APNI and graduate courses are taking place in the Lab), the check-out period is three days.*

**Check-Out Procedure**
- Students stop at the CPL front desk or lab tech desk to request equipment and complete the check-out form.
- The check-out form requires the student’s full name, student ID number, description of item being borrowed, equipment number of item being borrowed (as applicable), and the date the item was checked out.
- The CPL staff member completing the check-out should assure that all information is completed and legible before the student leaves with the item.
- Upon return of the item, the CPL staff member should briefly inspect the item to determine that it is functional and no pieces are missing. The CPL staff member then marks the date of return on the equipment check-out form and initials the return. The receiving staff member is also responsible for returning the equipment to its proper location within the Lab.
• Special requests for supplies should be requested in advance, preferably in writing. For special requests that are reported to the CPL front desk, the following information should be obtained and a CPL staff member will contact the student regarding the feasibility of the request:
  o Student’s name and ID number
  o Student’s email address
  o Student’s phone number
  o Class number and section associated with the request
  o Item(s) needed
  o Dates and times (duration) the borrowed items will be needed

Late and Lost Items
• If borrowed items are not returned by the end of the quarter in which they were borrowed, or are lost during the borrowing period, the student will be charged for replacement of the item. Replacement costs are clearly documented on the equipment check-out sheet and should be communicated to the borrowing student at the time of check-out. Checks for late and lost items should be made out to Seattle University College of Nursing.
• Replacement Costs:
  o Blood Pressure Cuff = $25.00
  o Stethoscope = $80.00
  o Lab Coats = $30.00
  o Videos/DVD’s = Cost of Replacement, varies
Initiation Date: 7/11/08
Effective Date: Immediately
Initiator: JF/Operations Manager

**CPL Proposal for Obtaining Equipment or Supplies Form**

Student(s) Name: Date Submitted:

Course Number:

Name of Project:

Date Supplies and Equipment are Needed:

Instructions: This proposal should be no longer than one page and should follow the format below. Please email your proposal to CPL@seattleu.edu at least two weeks prior to the event date. Receipt of equipment and/or supplies is not guaranteed so be sure to allow enough time for a response and create a back-up plan should the CPL be unable to meet all or any of your needs. You will be notified by email of approval or denial of request.

- Description and purpose of the event. Include a brief statement of benefit to the community/target population from use of equipment and/or supplies.

- Detailed description of equipment and/or supplies desired, including quantities needed.

- Estimated cost to the CPL for donating supplies to event. (You need to do some basic research about how much the supplies you’re asking for would cost to replace.)

- Length of time equipment will need to be checked out (pick-up and return dates/times).

- Other efforts you have made or explored to secure the equipment and/or supplies.

- Consequence to your project if equipment and/or supplies cannot be obtained from the CPL (including “back-up plan,” if any).

Approved: ______________________________ Date: __________________________

Supplies/Equipment Checked Out (Date): ________________________________

Returned (Date): ________________________________
CPL Emergency Procedures

Background: The College of Nursing Clinical Performance Lab (CON CPL) is a part of the Seattle University (SU) campus, although it is located six blocks east of the main campus in the James Tower at Swedish—Cherry Hill. In an emergency, the tenants in James Tower follow the emergency procedures of Sabey (the building property manager) which coordinates with the City of Seattle public emergency services. For any emergency, Seattle University Public Safety should also be notified (206-296-5911). The following sections outline emergency procedures that should be followed by all staff, faculty, students, and visitors to the CON CPL. These emergency procedures have also been submitted for inclusion in the CON Handbooks: the BSN Handbook, the DNP Handbook, and the Faculty Handbook. The emergency point of contact for the CON CPL is the Operations Coordinator or CPL Director. The emergency point of contact for the CON (Garrand and in general) is the Director of Budget and Operations.

Emergency Phone Numbers
From landlines inside the CPL, DIAL 9-911 from any phone to summon emergency services (fire, rescue, police, etc.).

If you call 911, please also call the front desk or the Operations Coordinator to inform the lab. This will facilitate other notifications and allow us to send someone to wait downstairs to direct emergency personnel.

Emergency Exits
The CPL is equipped with three exits, all suitable for use in an emergency:

- **The front (glass) doors.** (Note there is an emergency exit button on the wall (a) to the right of the front door while facing them from the inside, and (b) on the wall behind the reception desk. The door is equipped with a motion sensor which releases it when locked once a person activates the motion detector. If this mechanism fails, press one of the emergency exit buttons to release the door.)
- **The Computer Lab emergency exit.** Located at the back of the room.
- **The Bathroom/Lactation Room hallway emergency exit.** Located at the end of the short hall between the Outpatient Clinic and the Computer Lab.
- The only exit used on a regular, non-emergency basis is the front door.

Evacuation Routes
**From the front (glass) doors:** Proceed straight ahead to the elevator banks, turn right before the elevators and go down the stairwell to the first floor. Exit the building through the exit doors at the back of the building. Gather on 18th and Cherry street.

**From the Computer Lab emergency exit:**
(1) Proceed straight ahead, past the Neurology clinic entrance, turn left and pass the elevator bank, turn left immediately after passing the elevators and go down the stairwell to the first floor. Continue down the stairs, exit doors at the back of the building. Gather on 18th and Cherry street.

OR

- Turn 180-degrees and proceed down the long corridor, past the Swedish Center for Nursing Excellence and enter through the double doors into Swedish Medical Center. Continue walking straight ahead, through the nursing unit, until it dead-ends at a corridor. Turn right or left at this corridor; there are emergency exits at either end.
From the Bathroom/Lactation Room hallway emergency exit: Turn right and proceed down the long corridor, past the Swedish Center for Nursing Excellence and enter through the double doors into Swedish Medical Center. Continue walking straight ahead, through the nursing unit, until it dead-ends at a corridor. Turn right or left at this corridor; there are emergency exits at either end.

For non-ambulatory employees, students, or visitors: Exit as from the Bathroom/Lactation Room to Swedish Medical Center to await assistance from emergency personnel.

Additional Emergency Exit: If the main stairwell is blocked or otherwise compromised, there is an additional exit stairwell inside the Neurology office in Suite 400. Their Safety Officer will assist in accessing this stairwell in an emergency.

Earthquakes and other shelter in place emergencies:
- In the event of an earthquake, immediately take cover under a sturdy table, desk, or other available shelter and hold on. Stay away from windows and glass. Protect your head and upper torso as much as possible.
- Danger from an earthquake in a modern building is from breaking glass or falling debris from ceilings or cupboards. Do your best to take shelter away from these hazards.
- When the shaking has stopped, slowly count to 10 to give time to assess your safety and the safety of the area around you. Aftershocks are to be expected.
- Stay as quiet as possible to facilitate communication of further directions.
- Do not exit the building until the all clear has sounded.

Safe Room
- In a shelter-in-place or violent intruder situation, the Computer Lab or other designated spaces should be utilized as a “safe room”. Please follow CPL team members instructions carefully.
- If a situation arises that requires the faculty, staff, and students to shelter in place, a CPL team member will walk through the lab and announce “Shelter in Place”. This will not be repeated, please immediately move to the safe room as directed. Faculty should make sure that all students have heard the announcement. If you hear a disturbance that warrants safety measures to commence, do not wait for the announcement and begin moving yourself and your group to the safe room as quietly and quickly as possible.
- The Computer Lab door locks from the inside and there is an emergency exit at the rear of the room (see Emergency Exits and Evacuation Routes above).
- This room is also equipped with basic emergency supplies to minimally include a fire extinguisher, and flashlight(s)

Emergency Equipment
- The SU Campus Emergency Kit (issued by Public Safety) is a large red backpack stored in the Operations Coordinator’s office. The kit contains basic emergency response supplies and will be brought by the Operations Coordinator or designee to the “Safe Room” or evacuation site in an emergency.
- Fire extinguishers are located:
  -Outside the Student Lounge
  -Outside the Classrooms, across from the “Bistro” area
  -Immediately outside the entrance to the Faculty/Administrative Office Area
- In the Practice Lab, at the hand sink
- In the hallway alcove between the Computer Lab and the Supply Closet entrances
- At the Lab Tech Desk

- A Public Safety two-way radio (and charging station) is located at the first faculty touchdown space in the Faculty/Administrative Office Area (first desk on your left upon entering). This radio is to be used during an emergency only and connects only with the SU Public Safety Office.

- First aid kits are located:
  - At the first faculty touchdown space in the Faculty/Administrative Office Area (first desk on your left upon entering)
  - Student lounge
  - Faculty touchdown area

Resources

If you have any questions or concerns about CPL emergency procedures, please contact the Operations Coordinator at 296-2384.

For general information about Seattle University’s Campus Public Safety please see http://www.seattleu.edu/safety/

Last updated: 09/05/2017
APPENDIX E:

MEDICATION SAFETY POLICY (BSN)
Medication Administration Policy & Procedure for Undergraduate Students

<table>
<thead>
<tr>
<th>Course</th>
<th>Policy and Responsibilities</th>
<th>Rationale</th>
</tr>
</thead>
</table>
| NURS 3405 | 1. Students will orient to the policy and responsibilities of safe medication administration with the guidance of their faculty members.  
2. Students will purchase SafeMedicate through the Seattle University bookstore. They will receive a user name and registration code at the time of purchase. Students will have access for two years with purchase.  
3. Students will: a) register for SafeMedicate as a new user and b) complete assigned modules from SafeMedicate (see grid below for required modules). Additional assistance in preparation can be found in the math center. Students will be provided with a handout of the types of math questions contained within the Foundation Numeracy Assessment to help guide math review. The handout will be posted on the Canvas site for N2520.  
4. Students will complete the Foundation Numeracy Assessment (FNA) on SafeMedicate during Week 4 of the quarter. The focus of the FNA is for students to demonstrate competency with addition, subtraction, division, multiplication, fractions, decimal placement, and unit conversion. Calculators will not be used during the FNA exam. Passing score on the FNA is 73% or greater.  
5. Students who do not achieve 73% or greater on the FNA will be allowed to repeat the exam one time. Students will need to wait 48 hours before retesting and will be required to retest by the end of week seven of the quarter. All FNA exams will be held at the CPL computer lab and proctored by CPL personnel.  
6. Students who do not achieve 73% or greater on the FNA on the second attempt will receive an Academic Early Alert Referral and need to set up an appointment with their advisor and faculty to discuss progression. The faculty and student will develop an action plan for student success.                                                                 | 1. The expectation is students will enter the undergraduate nursing program with basic math skills necessary for medication dosage calculation.  
2. The Foundation Numeracy Assessment math exam and results give students diagnostic information that will help them in preparation for the medication administration skills students will need to master in NURS 3405 |
| **NURS 3405** | 1. Faculty will review the Foundation Numeracy Assessments scores from SafeMedicate. Score will be provided by the designated Administrator of SafeMedicate. Any students with an Academic Early Alert Referral will meet with faculty to discuss action plan.  
2. Students are required to complete assigned modules from SafeMedicate (see grid below for required modules) and demonstrate competency by passing the Essential Skills Authentic Diagnostic Assessment (ADA) with a grade of 90% or greater. The ADA will be taken during **Weeks 8-10** of the quarter as assigned by clinical faculty. A calculator is embedded in the exam for student use. The ADA comprises 5% of the course grade. | 1. Safe medication administration is a high-risk nursing intervention that is a learned skill.  
2. Students need time to develop this skill.  
3. The focus in **NURS 3405** is on learning the skills necessary for safe medication administration, including dosage calculation and the psychomotor skills related to medication administration. |
| **NURS 3391**  
**NURS 4191**  
**NURS 4391** | 1. At the beginning of each indicated quarter, students will be required to take a medication administration safety exam prior to entering into the clinical setting. (Please see grid).  
2. Students will be scheduled for an Authentic Diagnostic Assessment (ADA) or an Authentic Assessment (AA) during the first two weeks of the quarter on SafeMedicate. The ADA or AA exam will take place in a proctored environment within the classroom or CPL setting. Students will have 75-90 minutes to complete the exam. The exam will cover content consistent with completed modules on SafeMedicate. Students are required to complete SafeMedicate modules (see grid below) to study and prepare for ADA & AA exams. A calculator is embedded in the exam for student use. In the event that SafeMedicate fails to launch the calculator, one will be provided for student use. Calculators can be checked out through the CPL.  
3. The score on the ADA/AA contributes 10% toward the clinical grade. For those students who are required to retake the exam, the first attempt score will be used in the final clinical grade.  
4. Students are expected to achieve a 90% or greater on the ADA/AA exam before passing medications in the clinical setting.  
5. Clinical Coordination faculty will verify if students achieved 90% or greater via SafeMedicate using the provided username and password. A remediation plan, using a combination of learning modules and practice exams in SafeMedicate, will be provided by clinical coordination faculty and used for remediation to promote 1. Removing the consequences of course failure removes the fear and changes the culture from a punitive one to a culture with emphasis on successful learning.  
2. Allowing 48 hours between attempts encourages a student to return to areas of growth, review, reflect prior to repeating the assessment.  
3. Attaching a percentage of the course grade to the ADA/AA assessment reinforces the seriousness of medication administration safety. |
student success. The math center can always be used as an additional resource by the student. See below remediation plans for each clinical section.

6. Students who do not achieve 90% or greater on the ADA/AA exam will be expected to remediate content areas of growth and retake the exam. Students must wait 48 hours before repeating the exam. Students may repeat the exam up to two times, each 48 hours apart. Students needing to remediate and retest, must complete ADA/AA exams by the end of Week 3 in order to administer medications in the clinical setting.

7. Demonstration of safety in medication administration is a critical competency in the clinical setting. Students who do not achieve a passing score after all attempts have been completed will not be able to participate in medication administration in the clinical setting, and therefore cannot pass the safety criteria of the clinical evaluation.

8. For those students unable to demonstrate safety in medication, an Academic Early Alert Referral will be initiated by the assigned clinical coordination faculty. The student will need to make an appointment with their advisor and faculty to discuss progression options.

| NURS 4791 | Optional Activity: Students are encouraged to take the medication exam given to newly hired nursing staff in the facility where they have their preceptorship. This test would not count toward their grade, but would give students practice taking an exam similar to what they will take upon employment following graduation. | This is suggested to familiarize students with the reality of clinical practice and assist them in identifying remaining areas of deficiency in medication administration, but is not mandatory. |
# Grid for Required Medication Calculation Exams

<table>
<thead>
<tr>
<th>Nursing Course</th>
<th>Grade %</th>
<th>Week Given</th>
<th>Time Allowed for this Exam</th>
<th>Number of Items</th>
<th>Category</th>
</tr>
</thead>
</table>
| NURS 3405: Health Assessment & Interventions        | P/F     | 3-4        | 75                          | 40             | **Foundation Numeracy Assessment (FNA)** Students will complete the following SafeMedicate modules prior to the NFA.  
1.   Introduction  
2.   Prescription Orders and SI Units                  |
| NURS 3405: Health Assessment & Interventions        | 5%      | 8-9        | 75                          | 40             | **Essential Skills-Authentic Diagnostic Assessment (ADA)** Students will complete the following SafeMedicate modules prior to the ADA.  
3.   Tablets and Capsules  
4.   Liquid Medications  
5.   Injections  
6.   IV Infusion (Basic)                               |
| NURS 3391: Promoting Mental Health                  | 10%     | 1-2        | 75                          | 40             | **Essential Skills-Authentic Assessment (AA)** Review Safe-Medicate Modules as needed. All prior modules will be used for testing purposes. (Modules 1-6) |
| NURS 4191: Promoting the Health of Children & Families | 10%     | 1-2        | 75                          | 10             | **Essential Skills Pediatrics-Authentic Diagnostic Assessment (ADA)** Review SafeMedicate modules as listed.  
1.   Essential skills-Pediatrics                        |
| NURS 4391: Promoting the Health of Adults            | 10%     | 1-2        | 90                          | 20             | **Advanced Essential Skills-Authentic Diagnostic Assessment (ADA)** Review SafeMedicate Modules as listed.  
1.   Advanced Essential Skills  
2.   Students will be tested on both continuous and intermittent infusions. |
APPENDIX F:

BSN STATEMENT ON TESTING AND REMEDIATION PLAN FOR NCLEX PREPARATION
BSN Testing and Remediation Plan for NCLEX Preparation
1.1 NCLEX Preparation Statement:

The College of Nursing is committed to fostering a supportive environment for NCLEX preparation. Health Education Systems Incorporated (HESI) is a branch of Elsevier. The purpose of HESI is to guide students towards meeting established standards of nursing practice, develop critical thinking and clinical reasoning skills, and prepare for the NCLEX. The Undergraduate Curriculum and Evaluation Committee (UCEC), in consultation with HESI representatives, created the BSN Testing and Remediation Plan for NCLEX Preparation.

1.2 Orientation to HESI:

Elsevier representatives will provide a detailed orientation to HESI products and resources during week one or two of NURS 3405 Health Assessment & Interventions. Students will be oriented to the Clinical Skills: Essentials videos, proctored exit exams (version 1 and 2), and HESI RN Live Review (3-day course scheduled during finals week of N4250: Senior Synthesis - Leadership for Health Equity).

Students sign-in to HESI products using their Evolve Account. The following website will provide access to both Elsevier and HESI products. Students will use the following website: https://evolve.elsevier.com/ to access HESI products, resources, and technical support.

1.3 Comprehensive Predictor Exit Exam:

The Comprehensive Predictor Exit Exam (CPEE) will be scheduled, administered, and proctored by the CPL personnel and is taken twice (Version 1 and Version 2) during NURS 4790 Transition to Professional Practice. Proctored exams are secure and scored exams. There are no scheduled make-ups for the CPEE at the Clinical Performance Lab (CPL). Make-up for the CPEE is determined on a case-by-case basis and must have extreme extenuating circumstances.

Students testing in the Learning Center need to use established policies and communicate their intention to test in the Learning Center with course faculty and with CPL personnel. Students planning on testing in the Learning Center are expected to notify the CPL at CPL@seattleu.edu at least three business days in advance. Students using the Learning Center are also required to present a faculty signed copy of the white form for testing accommodations to the CPL at three business days in advance. Failure to inform the CPL three business days in advance may result in forfeiture of their scheduled day and Incomplete (I) for the CPEE (students will still need to take the CPEE in order to pass the course). All BSN students are expected to complete the CPEE. Students who miss the CPEE may receive an incomplete (I) for the course until the exam has been completed.

When students sit for the CPEE, there are several issues to consider. Students will sign-up for the CPEE via an exam specific link that can be accessed on Canvas using www.mysignup.com The CPL will provide and manage the link for students. The link will be available on Canvas at least two to three weeks before the CPEE is scheduled to be administered. Students can self-select times to sign-up and may change their time up until 0800 on the first day of testing. If there are any questions or concerns about signing up for a testing time, please contact the CPL at CPL@seattleu.edu or 206-296-2394.

On the day of the CPEE, students will need to present to the CPL at least 15 minutes before their scheduled testing time. Students will be expected to sign-in, sign an honor & confidentiality statement, and show a photo ID. Students need to bring their own set of headphones. All other needed equipment will be provided on testing day, including: ear plugs, white boards, pens, erasers, and testing access information.
After taking the CPEE (Version 1), students are expected to develop a remediation action plan based on their CPEE scores. The remediation plan must be completed and ready for approval by Week five of the quarter. Students requiring remediation will meet with the NCLEX Student Remediation Advisor for questions pertaining to their remediation plan and may seek consultation from course instructors in which the CPEE is administered. Students will schedule for the CPEE (Version 2) as instructed by NURS 4790 faculty.

Additionally, students are expected to review their CPEE scores with their advisor during the quarterly advising period when discussing their NCLEX Preparation Plan.

The CPL will send the CPEE results to the following individuals 48-72 hours after completion of testing:
- Dean
- Associate Dean
- UCEC Chair
- NCLEX Student Remediation Advisor
- Course faculty for N4390, N4520, and N4790

### Comprehensive Proctored Exit Exam

<table>
<thead>
<tr>
<th>HESI Scoring Interval</th>
<th>Performance Level &amp; Remediation Requirements</th>
<th>Conversion Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>≥950</td>
<td>Recommended Performance No remediation required</td>
<td>85%</td>
</tr>
<tr>
<td>900-949</td>
<td>Acceptable Performance, however; Review areas of concern and remediation requested.</td>
<td>80%</td>
</tr>
<tr>
<td>850-899</td>
<td>Barely Acceptable Performance Remediaiton Required</td>
<td>70-75%</td>
</tr>
<tr>
<td>750-850</td>
<td>Below Acceptable Performance Remediation Required</td>
<td>60-65%</td>
</tr>
<tr>
<td>&lt;750</td>
<td>Remediation Required with action plan</td>
<td>&lt;55%</td>
</tr>
</tbody>
</table>

Table 1. Scoring Grid (as suggested by HESI); Schreiner and Brunnert.

1.4 NCLEX Preparation Plan:
The NCLEX Preparation Plan (Appendix A) is a document that traditional students will bring to ALL advising appointments beginning their 3rd quarter of freshman year (NURS 2520 Professional Nursing in the 21st Century). Transfer students are expected to bring the NCLEX Preparation Plan form to ALL advising meetings beginning their 1st quarter of the nursing program. It is expected students and their advisors will engage in a robust dialogue to construct and scaffold a plan for NCLEX preparation as students’ progress through the program.

1.5 NCLEX Advising During Summer Quarter:
Students in the Transfer BSN cohort (August graduates) will receive advising support for their NCLEX Preparation Plan from their respective senior practicum faculty. The support will involve a meeting with senior practicum faculty to discuss and receive advice regarding the NCLEX Preparation Plan (Appendix A) prepared by the students prior to the meeting.
1.6 CPEE Remediation Plan:
The CPEE scores can be indicative of a student’s level of readiness for success in the nursing program and on the NCLEX. Students with lower CPEE scores require more intense remediation. Following the CPEE, students are required to complete remediation activities in accordance with the policy defined below (Table 2). Students will develop and submit, within four days, an individualized plan of study based on the score achieved on the CPEE to the NCLEX Student Remediation Advisor.

A first time HESI conversion score of **80%** (HESI Score of **900**) or successful completion of HESI remediation is required to pass courses NURS 4790. Students who do not achieve an **80%** conversion score (HESI Score of **900**) on the CPEE must complete a Student Remediation Plan and Contract (Appendix B). Students will identify specific activities in their Student Remediation Report to complete in order to improve their understanding of concepts/content based on the guidelines in Table 2. Students have the primary responsibility for developing their remediation plan. The development of the plan is guided by the BSN Testing and Remediation Plan for NCLEX Preparation and based on each student’s individual CPEE score.

After a student has completed remediation activities, they will receive a P (Pass) score for completing the remediation. **If a student does not complete the required remediation plan, the student will receive an (I) incomplete for the course until the remediation is successfully completed.** Remediation must be completed prior to the last instructional day of the quarter in which the CPEE was taken. Students will submit the completed remediation contract to the NCLEX Student Remediation Advisor and a copy will be kept in their student file.

**What to do When You Complete Remediation?**
1) Congratulations!
2) Document date and signature on the Remediation Plan Contract with the NCLEX Student Remediation Advisor. Please keep a copy of the completed contract.
3) Notify the faculty of the course that you have completed the remediation. *(Please provide faculty with a copy of the Remediation Plan Contract.)*

**Resources:**
1) HESI website student view
2) Faculty administering the CPEE.
3) NCLEX Student Remediation Advisor
4) Advisors who review your NCLEX Preparation Plan, CPL staff who schedule, collect, and distribute reports of the exam results to the College of Nursing administration.

**SU CoN Remediation Policy (Table 2. Adapted from HESI Sample Remediation Policies)**

<table>
<thead>
<tr>
<th>HESI CPEE Score/Conversion Score</th>
<th>Remediation</th>
</tr>
</thead>
<tbody>
<tr>
<td>HESI Score &gt; 900</td>
<td><strong>80%</strong></td>
</tr>
<tr>
<td>HESI Score 800-899</td>
<td><strong>75%</strong> (1) Minimum 6 hours of on-line remediation required specific to areas of content missed on the CPEE.</td>
</tr>
<tr>
<td>HESI Score 750-799</td>
<td><strong>60%</strong> (1) Minimum 7 hours of on-line remediation required specific to areas of content missed on the CPEE.</td>
</tr>
<tr>
<td>HESI Score 700-749</td>
<td><strong>55%</strong> (1) Minimum 8 hours of on-line remediation required specific to areas of content missed on the CPEE.</td>
</tr>
<tr>
<td>HESI Score 699 or below</td>
<td><strong>50%</strong> (1) Minimum 10 hours of on-line remediation required specific to areas of content missed on the CPEE.</td>
</tr>
</tbody>
</table>
1.7 HESI 3-Day Live Review:
Students will be expected to sit for the HESI 3-Day Live Review during finals week of NURS 4520 Senior Synthesis: Leadership for Health Equity. This is an on-site course provided by experienced instructors that is conducted over a three-day period. The review can be customized to address the results on the HESI Comprehensive Predictor Exam (Exit Exam).

1.8 NCLEX Support Team:
The process for supporting students and faculty with CPEE remediation is structured around three primary supporting factors. The three primary supporting factors are for:
1) Students who are remediating,
2) Faculty and advisors who are guiding the student remediation process, and
3) Scheduling to provide a secure and accessible testing environment.

The point of contact for each NCLEX preparation supporting factor is as follows:
CPEE Student Remediation Advisor (to be determined)
1) NCLEX Faculty Advisor, Liz Platz, eProduct Sales Specialist – Elsevier
   360-241-6822, l.platz@elsevier.com
2) HESI Scheduling, CPL; Carrie Westmoreland Miller, PhD, RN, CHSE, CNE, IBCLC

An individualized report generated by HESI will provide each student with their CPEE score and the sub specialty score received on the exam. Based on these results, students will be responsible for developing their own remediation plan. The NCLEX Student Remediation Advisor provides guidance to students and obtains and files student contracts. The scheduling team secures the testing environment and provides instructions to students. They also send student reports to students, faculty and administration.
NCLEX Preparation Plan--Advising Appointment

Student Name: _______________________________   June or August graduation (circle one)

Faculty Advisor Name: ______________________  Date of Advising Apt: ________________

1) How are you studying for the Comprehensive Predictor Exit Exams (CPEE) and NCLEX? Please be specific (are you using the HESI (Evolve) case studies, practices exams, NCLEX preparation books, NCLEX apps. etc.).

__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

2) Which NCLEX prep books are you using? Describe how are you integrating alternative format questions into your preparation:

__________________________________________________________________________________
__________________________________________________________________________________

3) Review your CPEE scores (for students currently enrolled in NURS 4790). What areas have you identified that you would like to focus on in preparation for the NCLEX?

CPEE Version 1 Score: ______  CPEE Version 2 Score: ______
__________________________________________________________________________________
__________________________________________________________________________________

4) Review your program and prerequisite course grades (A&P, for example). What are you actively doing to enhance your knowledge in areas that are challenging?

__________________________________________________________________________________

5) How often are you refreshing your knowledge in areas of strong performance?

__________________________________________________________________________________

6) Have you and your classmates formed NCLEX study prep groups? Yes/No (circle one)

   How often do you meet? __________________

   What strategies do you have in place to make time in your schedule to attend these important sessions?

__________________________________________________________________________________
7) How will you know that you are “ready” to take the NCLEX Examination (what are the indicators)?
Be specific:
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

8) What life events could present a challenge to your success on the NCLEX:
__________________________________________________________________________________
__________________________________________________________________________________

Additional Comments:

Student’s Signature: _____________________________ Date: ___________________

Faculty Advisor’s Signature: ______________________ Date: ___________________

Faculty Advisors: Please return this form to Rebecca Severson’s mailbox following the advising
period. Documents will be placed in the student’s academic file.
Comprehensive Predictor Exit Exam Remediation Plan Contract

Student Name: _____________________________ Date: __________________________
Exams: ____________________________________
CPEE Score Version 1: _______________________ CPEE Score Version 2: ____________

1) Hours of HESI on post exam remediation to be completed: ______________________
2) Reading from text/s:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Plan submitted by: __________________________ Date: __________________________
Signature: __________________________________________________________________

Plan approved by: __________________________ Date: __________________________
Signature: __________________________________________________________________

Remediation verified by: ____________________ Date: __________________________
Signature: __________________________________________________________________
Syllabus Statement

In the BSN program, HESI has been selected to help prepare students for NCLEX readiness. The NCLEX is an exam that is considered the "ticket" to the nursing profession. Therefore, the College of Nursing takes the NCLEX exam very seriously.

Comprehensive Predictor Exit Exam (CPEE):
The Comprehensive Predictor Exit Exam (CPEE) is administered NURS 4790 Transition to Professional Practice. Please see the BSN Testing and Remediation Plan for NCLEX Preparation for details regarding how and when exams are administered. Students are expected to complete the CPEE testing and remediation as a requirement of course completion. Students who fail to complete the required CPEE and recommended remediation may receive an incomplete in the course until testing and remediation is completed.

The CPEE exams (Version 1 and Version 2) will take place in the CPL. Students will receive an electronic sign-up link 2-3 weeks in advance on the Canvas site to select their testing times at the CPL. The CPL uses www.mysignup.com for students to register for proctored exams. Students can change their testing times up to the first day of testing. There are no sign-up sheets, and no hard copy rosters. If students have concerns about testing, they can contact the CPL at: CPL@seattleu.edu. For students using the learning center, written notification needs to be provided to the CPL at least three days in advance.
APPENDIX G:
AT-RISK POLICY AND FORM
Progression Committee at Risk Policy and Procedure

I. Purpose
The purpose of the review of at risk by the SUCON Progression Committee is to identify patterns of academic difficulties, unethical, unprofessional, or unsafe conduct and, when appropriate, recommend or require a student plan that addresses the difficulties and/or conduct.

II. Procedure
A. At risk forms are completed by College of Nursing faculty when a student’s course-related academic performance or unethical, unprofessional, or unsafe conduct puts the student at risk of course failure.
   1. Copies of the at-risk form go to:
      a. Faculty who originated the form
      b. Student advisor
      c. Associate Dean of Undergraduate Education/Program Director
      d. Student file (original form)
      e. Student
      f. Army ROTC, if student is ROTC Cadet
      g. Chair, Progression Committee
   2. Student meets with advisor and adds advisor comments on the original at-risk form in student file
   3. Student advisor communicates pertinent information to course faculty and Associate Dean of Undergraduate Education/Program Director

B. The Progression Committee of the College of Nursing may review a student’s course-related academic performance or conduct after a student is issued an At-Risk form. The Progression Committee Chair will notify a student in writing that they will be reviewed, the reason for the review, and the date and time of the review. The student may address, in writing, the Committee concerning their situation that resulted in the At-Risk form(s). The student may be accompanied by their advisor or other faculty support person. An At-Risk form may be issued for one or more of the following reasons:
   1. Failure (C- or lower) in two or more courses in the same quarter
   2. Failure (C- or lower) in two consecutive quarters
   3. Total of three failures (C- or lower) in any three courses or three quarters, and thereafter as the Progression Committee deems appropriate
   4. If requested in writing by two College of Nursing faculty members
   5. In the case of one or more episodes of unethical, unprofessional, or unsafe conduct

C. As a result of the review, the Progression Committee may decide to:
   a. Continue to monitor the student’s performance or conduct while meeting the requirements set forth by the Progression Committee
   b. Require the student to seek assistance from specific SU support services
   c. Require the student to meet with their faculty advisor at a specific frequency for a specified period of time
   d. Require the student to develop and submit a written plan to improve their academic performance and conduct for Progression Committee approval and for monitoring by the student’s faculty advisor
      1) The student’s faculty advisor and student sign the plan when completed
      2) The student’s written plan is maintained in the student’s file
D. The Chair of the Progression Committee communicates with the Associate Dean of Undergraduate Education/Program Director, and they will inform the student of the decision, in writing, within seven working days. The student’s faculty advisor and any other appropriate parties will receive a copy of the communication. A copy of the communication will also be placed in the student’s academic file. Failure to fulfill the Progression Committee’s plan will also be documented in the file, and further action may be reviewed and enacted.
COLLEGE OF NURSING STUDENT AT-RISK FORM

Student: ________________________________  Quarter: ________________

Faculty: ________________________________  Date: ____________________

Course Number and Title: ________________________________

Student Advisor: ________________________________

At-risk forms are completed by College of Nursing faculty when a student’s course-related academic performance or unethical, unprofessional, or unsafe conduct puts the student at risk of course failure.

1. Students are required to meet with faculty to discuss at-risk behavior and changes needed to meet course objectives. Students need to complete and sign the form.

2. The original of the signed at-risk form will be placed in the student’s file. A copy of the form will be provided to the student.

3. A copy of the completed and signed at-risk form will be submitted to:
   a) Faculty who originated the form: ________________________________
   b) Course Coordinator (as appropriate): ________________________________
   c) Student’s advisor: ________________________________
   d) Associate Dean of Undergraduate Education/Program Director: ________________________________
   e) ROTC (as appropriate): ________________________________

To be completed by the College of Nursing faculty:

Describe the at-risk performance related to course objectives, syllabus requirements, and/or expectations of professional conduct.

Outline changes student has initiated and changes still needed to meet the course objective, syllabus requirements, and/or expectations for professional conduct.
To be completed by the student:

Check all the items below that challenge your academic performance:

- ☐ Time management
- ☐ Study habits and organization
- ☐ Frequent absences
- ☐ Homesickness
- ☐ Roommate difficulties
- ☐ Course rigour
- ☐ Balancing work and school
- ☐ Testing skills
- ☐ Health issues
- ☐ Family and/or relationship difficulties
- ☐ Communication with my instructor
- ☐ Underutilization of campus resources
- ☐ Other (please describe):

To be completed by faculty and student during meeting:

Provide a detailed plan for successful course completion:

Signatures

Course Faculty: ____________________________ Date: ____________________________

Faculty Advisor: ____________________________ Date: ____________________________

By signing this document, I state that I have met with the faculty and read the above form.

Student: ____________________________ Date: ____________________________

Revised 08/2017
APPENDIX H:

Admission, Progression, and Dismissal Policy
PERFORMANCE CRITERIA
ADMISSION, PROGRESSION, PROBATION AND
DISMISSAL UNDERGRADUATE COLLEGE OF NURSING

Undergraduate students are subject to all of the academic policies set forth in the Seattle University Catalog including Policy #2004-2, Admission to the University and Policy #2005-2, Academic Probation, Dismissal and Reinstatement for Undergraduate Students. This College of Nursing policy describes additional conditions for admission, progression, probation, and dismissal for students in the Bachelor of Science in Nursing (BSN) and Diagnostic Ultrasound (DIUS) programs.

I. Admission (BSN)
   A. Freshman Admission: In addition to the university admission standards, all applicants to the College of Nursing traditional 4-year program must have a cumulative grade point average (GPA) of at least 2.75 (on a 4.0 scale), and two units of laboratory science, one each in laboratory biology and laboratory chemistry.

   B. Transfer and Post-Baccalaureate Admission: For transfer students applying to the BSN program from other regionally accredited colleges or universities, admission requirements include receipt by the Seattle University Office of Admissions of an official transcript verifying completion of prerequisite courses. Additionally, transfer applicants must meet the following criteria for entry into the nursing course sequence:

      1. Transfer of 90 credits, per University Policy #2004-2, Admission to the University,
      2. A grade of at least C (2.0 on the decimal system) in each nursing major prerequisite course, and
      3. A cumulative GPA of at least 3.0 and a 3.0 GPA in all nursing major prerequisite courses.

   C. Internal Transfers: Current SU student requests for internal transfer to the nursing major will be considered on a space available basis. Qualified applicants who wish to change their major to nursing must meet the freshman admission criteria outlined above.

II. Admission (DIUS)
   A. Freshman Admission: In addition to the university admission standards, all applicants to the College of Nursing traditional 4-year program must have a cumulative grade point average (GPA) of at least 2.75 (on a 4.0 scale), and two units of laboratory science, one each in laboratory chemistry and laboratory physics.

   B. Transfer and Post-Baccalaureate Admission: For transfer students applying to the DIUS program from other regionally accredited colleges or universities, admission requirements include receipt by the Seattle University Office of Admissions of an official transcript verifying completion of prerequisite courses. Additionally, transfer applicants must meet the following criteria for entry into the diagnostic ultrasound course sequence:

      1. Transfer of 90 credits, per University Policy #2004-2, Admission to the University,
      2. A grade of at least C (2.0 on the decimal system) in each diagnostic ultrasound major prerequisite course, and
3. A cumulative GPA of at least 2.5 and a 2.5 GPA in all diagnostic ultrasound major prerequisite courses.

C. **Internal Transfers:** Current SU student requests for internal transfer to the diagnostic ultrasound major will be considered on a space available basis. Qualified applicants who wish to change their major to diagnostic ultrasound must meet the freshman admission criteria outlined above.

III. **Progression (BSN)**
A. In order for SU traditional 4-year students and internal transfer students to begin the nursing sequence courses (NURS) in the winter of the sophomore year, a student must complete all UCOR and nursing major prerequisite courses and maintain a cumulative GPA of 2.75 and a GPA of 3.0 in the nursing prerequisite courses.

B. In order for transfer students to be released for second quarter course registration and to continue in the nursing course (NURS) sequence, official transcripts showing pre-requisite course completion must be received by the end of the first quarter in the academic program.

C. Progression through the nursing program of study for all students is assured only when a student:

1. Achieves a grade of at least C (2.0) in all nursing major (NURS) courses, and

2. Maintains a cumulative GPA of at least 2.75 and a 3.0 GPA in all the nursing major (NURS) courses required for degree completion.

D. Progression is based on the sequential arrangement of the curriculum. Students may not take a succeeding level course without completion of the previous level course(s) or prerequisite courses, without recommendation of the progression committee and/or the approval of the Associate Dean.

E. A student who takes fewer than the required nursing credits for the specified program of study will be considered ‘out of sequence.’ Courses are not offered every quarter, which will affect the timing of re-entry and program completion. Out of sequence students will be allowed to register for nursing courses on a space-available basis.

F. When a curriculum change occurs, the student must complete their enrolled program of study within one (1) year of the last regularly scheduled course in the former curriculum, OR apply for reinstatement to the new curriculum.

IV. **Progression (DIUS)**
A. In order for SU traditional 4-year students and internal transfer students to begin the diagnostic ultrasound sequence courses (DIUS) in the fall of junior year, a student must complete all UCOR and diagnostic ultrasound major prerequisite courses and maintain a cumulative GPA of 2.5 and a GPA of 2.5 in the diagnostic ultrasound prerequisite courses.

B. In order for transfer students to be released for second quarter course registration and to continue in the diagnostic ultrasound course (DIUS) sequence, official transcripts showing pre-requisite course completion must be received by the end of the first quarter in the
academic program.

C. Progression through the diagnostic ultrasound program of study for all students is assured only when a student:

1. Achieves a grade of at least C (2.0) in all diagnostic ultrasound major (DIUS) courses, and

2. Maintains a cumulative GPA of at least 2.5 and a 2.5 GPA in all the diagnostic ultrasound major (DIUS) courses required for degree completion.

D. Progression is based on the sequential arrangement of the curriculum. Students may not take a succeeding level course without completion of the previous level course(s) or prerequisite courses, without recommendation of the progression committee, or the approval of the Program Director and/or Associate Dean.

E. A student who takes fewer than the required diagnostic ultrasound credits for the specified program of study will be considered ‘out of sequence’. Courses are not offered every quarter, which will affect the timing of re-entry and program completion. Out of sequence students will be allowed to register for diagnostic ultrasound courses on a space-available basis.

F. When a curriculum change occurs, the student must complete their enrolled program of study within one (1) year of the last regularly scheduled course in the former curriculum, OR apply for reinstatement to the new curriculum.

V. Repeating a Course (BSN)
A. A student who receives a grade lower than C (2.0) or a W (withdrawal) in any nursing course must repeat that course. A student may repeat any nursing course only once.

B. A student who fails or withdraws from a stand-alone clinical course must repeat the clinical course for a grade and must audit the related theory course concurrently. Awarding of a passing grade in the clinical course being repeated is contingent upon meeting the attendance requirement of the theory class. Students must earn a C (2.0) or better in the repeated stand-alone clinical course in order to progress. The student will be permitted to register for a course being repeated only on a space-available basis.

C. Because repeating a course puts the student out of sequence, a new plan of study must be developed by the student in consultation with their nursing advisor for progression through the sequence of nursing courses. A copy of the plan will be placed in the student’s academic file.

VI. Repeating a Course (DIUS)
A. A student who receives a grade lower than C (2.0) or a W (withdrawal) in any diagnostic ultrasound course must repeat that course. A student may repeat any diagnostic ultrasound course only once.

B. Because repeating a course puts the student out of sequence, a new plan of study must be developed by the student in consultation with their diagnostic ultrasound advisor and the Program Director for progression through the sequence of diagnostic ultrasound courses. A copy of the plan will be placed in the student’s academic file.
VII. Withdrawing from Courses (BSN and DIUS)
   A. A student may withdraw only once from any major course.
   B. A student may not withdraw from a course that is being repeated.

VIII. Graduation (BSN)
   A minimum of a 2.75 cumulative GPA and a 3.0 GPA in all the nursing major (NURS) courses is required for graduation with a Bachelor of Science in Nursing degree.

IX. Graduation (DIUS)
   A minimum of a 2.5 cumulative GPA and a 2.5 GPA in all the diagnostic ultrasound major (DIUS) courses is required for graduation with either a Bachelor of Science in Diagnostic Ultrasound degree (BSDIUS) or a Post Baccalaureate Certificate in Diagnostic Ultrasound.

X. Academic Probation (BSN)
   Determination of probation and the probation process at Seattle University are outlined in Policy #2005-2, Academic Probation, Dismissal and Reinstatement for Undergraduate Students, and this policy applies to all students of the College of Nursing. Additionally, students of the College of Nursing shall be placed on probation when:
   1. A student’s GPA falls below 3.0 in the nursing major (NURS) courses or below 2.75 cumulative GPA,
   2. A student achieves a grade lower than C (2.00) in any nursing (NURS) course, or
   3. A student is found to have engaged in unsafe, unethical, illegal, or unprofessional misconduct. (In certain circumstances, misconduct may warrant disciplinary dismissal rather than probation as per section XII. B.).

   B. When a student is placed on probation, the Associate Dean, with recommendations as needed from the Progression Committee, establishes the terms and conditions for the student’s continuing progression in the BSN program. The student must comply with the conditions of probation in order to progress in the nursing program.

XI. Academic Probation (DIUS)
   Determination of probation and the probation process at Seattle University are outlined in Policy #2005-2, Academic Probation, Dismissal and Reinstatement for Undergraduate Students, and this policy applies to all students of the College of Nursing. Additionally, students of the College of Nursing shall be placed on probation when:
   1. A student’s GPA falls below 2.5 in the diagnostic ultrasound major (DIUS) courses or below 2.5 cumulative GPA,
   2. A student achieves a grade lower than C (2.00) in any diagnostic ultrasound (DIUS) course, or
   3. A student is found to have engaged in unsafe, unethical, illegal, or unprofessional misconduct. (In certain circumstances, misconduct may warrant disciplinary dismissal rather than probation as per section XII. B.).

   B. When a student is placed on probation, the Program Director, with recommendations as
needed from the Associate Dean and Progression Committee, establishes the terms and conditions for the student’s continuing progression in the DIUS program. The student must comply with the conditions of probation in order to progress in the program.

XII. Dismissal from the College of Nursing (BSN and DIUS)
A. **Academic Dismissal** may result from any of the following:
   1. Achievement of a grade lower than C (2.00) in major course being repeated
   2. Achievement of a grade lower than C (2.00) in two different major courses, even though one course may have been repeated satisfactorily
   3. Course failures and/or withdrawals in the same or in different major courses as follows:
      a. Two (2) course failures, or
      b. One (1) course failure and two (2) course withdrawals, or
      c. Three (3) course withdrawals
      d. Violation of University Policy #2011-3, *Academic Integrity*

B. **Disciplinary Dismissal** may result from any of the following:
   1. Violation of the Seattle University Code of Student Conduct
   2. Violation of other university policies and procedures,
   3. Unsafe, unethical, or illegal conduct or behavior, and/or
   4. Manifesting a pattern of unprofessional conduct that reflects poorly on Seattle University, the College of Nursing, or affiliated agencies. Professional conduct for undergraduate students is guided by the standards delineated by professional organizations in:
      c. American Association of Colleges of Nursing, *The Essentials of Baccalaureate Education for Professional Nursing Practice*, Section VIII,
      d. Washington State Administrative Code (WAC) 246-840-700
      e. Commission on Accreditation of Allied Health Programs (CAAHEP)
      f. Society of Diagnostic Medical Sonography, (SDMS) *Code of Ethics*
      g. Society of Diagnostic Medical Sonography, (SDMS)*Scope of Practice*
      h. Society Diagnostic Medical Sonography, (SDMS) *Clinical Standards for the Diagnostic Medical Sonographer*
      i. American Registry for Diagnostic Medical Sonography, Inc. (ARDMS)
      j. American Institute of Ultrasound in Medicine (AIUM)
      k. Cardiovascular Credentialing International (CCI)
      l. *Society for Vascular Ultrasound (SVU)*
      m. American Society of Echocardiography (ASE)

5. **(BSN)** If a student is under investigation for alleged unprofessional, unethical, or
illegal activities, and/or alleged behavior that is in conflict with the regulations of the Washington State Quality Assurance Commission for Nursing, the student will be removed from the clinical setting, pending the outcome of the investigation.

6. Re-Admission after Dismissal (BSN and DIUS): A student must wait one full academic year prior to applying for re-admission to the BSN and BSDIUS programs following an academic dismissal. A student who received a disciplinary dismissal is not eligible for re-admission to the BSN and DIUS programs.

XIII. Appeals (BSN and DIUS)

A. The decision to dismiss a student or to place a student on academic probation due to a failing grade will be reviewed under University Policy #2005-2, Academic Probation, Dismissal and Reinstatement for Undergraduate Students.

B. The decision to dismiss a student or to place a student on disciplinary probation because the Student has engaged in unsafe, unethical, illegal, or unprofessional conduct or because the student has not demonstrated the requisite knowledge, skills, or judgment needed to be a competent practitioner will be reviewed under University Policy #2011-2, Professional Conduct: Appeals Procedures.

C. An academic penalty that results from a violation of Section 3.5 of the Seattle University Code of Student Conduct, such as cheating or plagiarism, will be reviewed under University Policy #2011-3, Academic Integrity.

Originally Issued 9/75
REVISED 01/07, 11/10, 08/11, 02/12, 10/14, 09/17, 06/18
APPENDIX I:

HEALTH POLICIES
Policy and Procedure for Follow-Up to Occupational Exposure to Blood Borne Pathogens


Synopsis (selected, from the MMWR Recommendation):

“Recommendations for HBV post-exposure management include initiation of the hepatitis B vaccine series to any susceptible, unvaccinated person who sustains an occupational blood or body fluid exposure. Post-exposure prophylaxis (PEP) with hepatitis B immune globulin (HBIG) and/or hepatitis B vaccine series should be considered for occupational exposures after evaluation of the hepatitis B surface antigen status of the source and the vaccination and vaccine-response status of the exposed person.

Immune globulin and antiviral agents are not recommended for PEP of hepatitis C. For HCV post-exposure management, the HCV status of the source and the exposed person should be determined, and for HCP exposed to an HCV positive source, follow-up HCV testing should be performed to determine if infection develops.

Recommendations for HIV PEP include a basic 4-week regimen of two drugs (zidovudine [ZDV] and lamivudine [3TC]; 3TC and stavudine [d4T]; or didanosine [ddi] and d4T) for most HIV exposures and an expanded regimen that includes the addition of a third drug for HIV exposures that pose an increased risk for transmission.

In addition, this report outlines several special circumstances (e.g., delayed exposure report, unknown source person, pregnancy in the exposed person, resistance of the source virus to antiretroviral agents, or toxicity of the PEP regimen) when consultation with local experts and/or the National Clinicians’ Post-Exposure Prophylaxis Hotline is advised.

Occupational exposures should be considered urgent medical concerns to ensure timely postexposure management and administration of HBIG, hepatitis B vaccine, and/or HIV PEP” (CDC, 2001).

Summary of Actions:

According to the CDC, “avoiding occupational blood exposures is the primary way to prevent transmission of hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV) in health-care settings. However, hepatitis B immunization and postexposure management are integral components of a complete program to prevent infection following bloodborne pathogen exposure and are important elements of workplace safety” (CDC, 2001).

Occupational exposure is an urgent medical condition and should be dealt with immediately after each occurrence. For some types of prophylaxis, treatment must begin within four (4) hours of the exposure. As a part of facility/course orientation, faculty members must talk with students about the need to report bloodborne pathogen exposures (and other incidents) immediately when they happen.

The same urgency applies for faculty (and staff) exposures – ALL exposures should be dealt with immediately.

For all exposures, the exposed person should IMMEDIATELY remove soiled clothing and wash the affected area with soap and water.

When made aware of an exposure incident, the faculty member should immediately initiate the procedures outlined below and complete the attached form, whether for a student or their own exposure incident.
1. Complete attached form entitled *Report Form for Occupational Exposure to Bloodborne Pathogens*. Every question is important, as the answers will help determine the best course of postexposure follow-up for the exposed individual. Please make every effort to be thorough.

2. Link to institution/agency system for immediate management of exposure by one of the following agency designates: unit manager, infection control coordinator, or other designated manager of OSHA Standards compliance. The procedures and regulations of the hospital, clinic, or healthcare agency will prevail.

3. Immediately provide copies of report form to the exposed person, the facility contact (as above), and the SUCON Associate Dean for the relevant program level (undergraduate or graduate).

4. Give informed consent to have your own blood drawn as soon as possible after the exposure for baseline information. (Note – you may postpone consent to HIV serologic testing, but it is vitally important that you consent to the immediate blood draw so that the option for later serologic testing is preserved.)

5. Link to your primary healthcare provider as soon as possible. If you do not have immediate access to your private healthcare provider, you may identify yourself as SUCON faculty/student with a possible HIV/HBV exposure and access:
   a. the emergency services at the site of incident.
   b. SU Student Health Center (SHC). Notification of the exposure needs to be as soon as possible if the student has SU health insurance or if it is decided to seek care at the SHC. If the SHC is not the primary care provider, there will be an out-of-pocket expense.

**Resources:**
- Seattle/King County Public Health HIV/AIDS Control Program – Postexposure Prophylaxis
  - Primary Contact *during business hours*: 206-296-4649
  - After-hours: Call 206-726-2619 to be directed to the after-hours provider
- National HIV/AIDS Clinicians' Consultant Center (run by UCSF)
  - Post-Exposure Prophylaxis Hotline: 888-448-4911
  - Website: [http://www.nccc.ucsf.edu/](http://www.nccc.ucsf.edu/)
- Clinicians evaluating healthcare workers with occupational exposures will use the detailed guidelines outlined in the full MMWR document to determine appropriate the course(s) of postexposure prophylaxis for the situation, and in consultation with the healthcare worker’s history, medical status, and preferences. See above for full citation.
Report Form for Occupational Exposure to Bloodborne Pathogens

This form accompanies the SUCCON Policy on Follow-Up for Occupational Exposure to Bloodborne Pathogens. Occupational exposure is an urgent medical condition and should be dealt with immediately after each occurrence. For some types of prophylaxis, treatment must begin within four (4) hours of the exposure.

The purpose of this form is to document as many details about the exposure incident as possible so that the exposed person and their healthcare provider may make an informed decision about the nature and extent of postexposure prophylaxis. The form is then signed by the required parties and immediately sent to the Associate Dean of the related program for processing.

1. Date of exposure: ____________________________________________________________
2. Time of exposure: __________________________________________________________
3. Name of exposed person: ____________________________________________________
4. Name of faculty member (if student is exposed): ________________________________
5. Location (facility name, unit, etc.) of exposure: ________________________________
6. Name and phone number of facility contact person: _____________________________

Details of procedure being performed at time of exposure:
Type of exposure (select all that apply)
   ___ Percutaneous injury (amount: ______________________)
   ___ Mucous membrane exposure (amount: ______________________)
   ___ Non-intact skin exposure (amount: ______________________)
   ___ Bites resulting in blood exposure to either person involved

Where and how exposure occurred: ______________________________________________
____________________________________________________________________________
____________________________________________________________________________

If related to sharps device, type and brand of device: ________________________________
How and when in course of handling device did the exposure occur: ____________________
____________________________________________________________________________
____________________________________________________________________________

Details of exposure material and severity:
Type and amount of fluid or material (select all that apply)
   ___ Blood
   ___ Fluids containing blood
   ___ Potentially infectious fluid or tissue (e.g. semen; vaginal secretions; cerebrospinal, synovial, pleural, peritoneal, pericardial, or amniotic fluids)
   ___ Direct contact with concentrated virus

Severity of exposure (e.g., for percutaneous exposure, depth of injury and whether fluid was injected; for skin or mucous membrane exposure, estimated volume of material and condition of skin [e.g. chapped, abraded, intact]): ________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Details about exposure SOURCE (and immediate actions):
KNOWN SOURCES:
Initiate steps to test source per facility procedures.
Test for HBsAg, anti-HCV, and HIV antibody (Notes: direct virus assays for routine screening of source patients are NOT recommended; consider using rapid HIV-antibody test; do not test discarded needles
for bloodborne pathogens; if the source person is NOT infected with a bloodborne pathogen, baseline testing or further follow-up of the exposed person is NOT necessary)

Note here results OR whether steps were initiated and who the contact person is and when results are expected:

HBsAg – ____________________________________________________
Anti-HCV – ____________________________________________________
HIV antibody – ____________________________________________________

If source refuses testing, please document as much as is relevant and known about the source’s medical diagnosis, clinical symptoms, history of risk behaviors, immunization status:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

UNKNOWN SOURCES:
Describe/estimate likelihood of bloodborne pathogen infection among patients in the exposure setting (e.g. HIV treatment clinic vs. pediatric oncology unit):
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

IF SOURCE IS HIV-INFECTED:
Stage of disease, history of antiretroviral therapy, viral load, and antiretroviral resistance, if known
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Details about EXPOSED PERSON:
Hepatitis B vaccination status (dates): ____________________________
Hepatitis B vaccine-response status (if known): ____________________________

Referral and Outcome:
Where referred for counseling and post-exposure management: ____________________________
____________________________________________________________________________________

Notifications performed (Note: Minimal notifications are agency representative for occupational exposure follow-up – see attached policy – and SUCON Associate Dean for the relevant program level.):
____________________________________________________________________________________
____________________________________________________________________________________

Other steps taken: ____________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

SIGNATURES:

Signature of Student Completing Form Date
Signature of Faculty Completing Form Date
Agency Representative Signature (Individual to Whom Incident was Reported) Date
FOLLOW-UP ACTION REQUIRED:
(This section is completed by the Associate Dean/Program Director or Designee)

☐ Student Interviewed
☐ Faculty Interviewed
☐ Education/Training Provided
☐ Other:

☐ Reported to Agency’s Risk Management
☐ Reported to Vice President/University Counsel (SU)
☐ Reported to Dean, College of Nursing

FOLLOW-UP INVESTIGATION AND SUGGESTIONS FOR IMPROVEMENT:

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

ADDITIONAL COMMENTS:

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Signature of Associate Dean, College of Nursing, Seattle University
Date
Policy and Procedure If a Student is Injured or Becomes Ill

Students who are injured or become ill in the clinical area should notify the clinical instructor immediately. In the case of a clinical site-related injury, the student should follow the procedure (if one exists) prescribed by the institution or agency for students who are injured. In the case of an unusual occurrence concerning a patient, student does the following:

When a student is involved in an unusual occurrence concerning a patient, during his/her clinical experience in a hospital or public health agency, the following steps must be followed once the immediate needs of the situation have been met:

1. The policy of the agency for reporting an incident will be followed. Send one copy of the agency’s incident report to Seattle University, Risk Management Office.
2. The student and instructor/preceptor will complete a CON Student Clinical Incident/Injury Form.
   a. One copy goes to Academic Services
   b. Original goes to the identified primary care provider; such as SU Health Center
   c. Student may retain a copy for personal records
3. The Assistant Dean should be notified by phone (206-296-5672) within 24 hours of the incident.

The agency may also request its own incident form be completed. Notify the CON Student Health Center of the incident by calling 206-296-6300. Do this after you have contacted the clinical site’s employee health office or nearest emergency room for immediate triage.

Students who become ill at the clinical site should, along with their clinical instructor, determine if their illness is communicable and a risk for their patients, or determine if the illness will impair the student’s judgment to safely carry out their responsibilities. Treatment of any illness would be done at the student’s expense.

Health Insurance
All Health Sciences students are required to have personal health insurance, or to join a healthcare plan, to cover the expenses of their healthcare, treatments in case of an injury, and/or care for a catastrophic illness or serious chronic condition within or outside the clinical setting.
A student/faculty incident report is completed when any unusual event (such as falls, being struck by a patient, medication error) occurs which may cause harm to a student, faculty member, or patient in the clinical setting or during any other course-related activity. The form should be completed as soon as the faculty member has knowledge of the event. The form is then signed by the required parties and immediately sent to the Associate Dean of the related program for processing.

NAME OF STUDENT/FACULTY ________________________  DATE OF INCIDENT ________________  TIME OF INCIDENT ________________

NAME OF THE AGENCY __________________________  AGENCY PHONE # _________________

NAME OF AGENCY CONTACT: _________________________________________________

EXACT LOCATION OF INCIDENT ________________________________________________

DESCRIPTION OF INCIDENT BY FACULTY/STUDENT (who, what, where, when and how):

NAMES AND TITLES OF ALL INDIVIDUALS INVOLVED IN INCIDENT (i.e. Nurse Manager, Patient, Physician):

DESCRIBE TREATMENT RECEIVED: _____________________________________________

DATE OF TREATMENT: _______________ TREATED AT: _______________________________

BY WHOM: ___________________________________________________________________

IF NOT TREATED, WHY NOT? _________________________________________________

SIGNATURES:

_________________________  ___________________________  ___________________________
Signature of Student Completing Form  Date  Signature of Faculty Completing Form  Date

_________________________  ___________________________  ___________________________
Agency Representative Signature  Date  (Individual to Whom Incident was Reported)
FOLLOW-UP ACTION REQUIRED:
(This section is to be completed by the appropriate Program Associate Dean or Designee)

☐ Student Interviewed  ☐ Reported to Agency’s Risk Management
☐ Faculty Interviewed  ☐ Reported to Vice President/University Counsel (SU)
☐ Education/Training Provided  ☐ Reported to Dean, College of Nursing
☐ Other:

FOLLOW-UP INVESTIGATION AND SUGGESTIONS FOR IMPROVEMENT:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

ADDITIONAL COMMENTS:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Signature of Associate Dean                                           Date
College of Nursing, Seattle University