FRANCISCAN
MISSIONARIES OF OUR LADY
UNIVERSITY

Doctor of Nursing Practice
Nurse Anesthesia Degree Program Handbook

2025-2026

Students are responsible for all the information presented in this Handbook. Information contained herein, and any other information conveyed to the student, is subject to change at any time by the authority of Franciscan Missionaries of Our Lady University. The statements, policies, guidelines, and procedures contained in this Handbook are subject to revision at any time during the effective period or in the future. They are applicable to all enrolled students in DNP-NA Program. All new students are provided with the Handbook via the University's Student Learning Management System. All students are expected to abide by the contents of the Handbook. The Handbook is revised at least annually (at the beginning of each academic year), and amendments to policies and procedures may be included in each new edition. While every effort has been made to verify the accuracy of the information, the DNP-NA Program reserves the freedom to change or revise, without notice, the contents, degree requirements, curriculum, courses, teaching personnel, rules, regulations, tuition, fees, and any other information published herein necessary or as deemed advisable. Additionally, the Program reserves the right to amend policies and procedures in this Handbook. All changes take effect immediately unless otherwise denoted. At the time of revision, change, or amendment, all students are provided with a current version of the Handbook and students are also expected to abide by the updated contents. If changes are made, the student will be informed via electronic communication modes (e.g., University Web site, e-mail, or Moodle).

Franciscan Missionaries of Our Lady University
School of Nursing
Doctor of Nursing Practice-Nurse Anesthesia Degree Program Handbook

This handbook serves as a guide to inform students of the Doctor of Nursing Practice-Nurse Anesthesia (DNP-NA) degree program policies, procedures, and expectations of DNP-NA students at Franciscan Missionaries of Our Lady University. Failure to read this handbook, the University Student Handbook, and the University Catalog does not excuse the student from any of the policies described in these publications. If policies and procedures in this DNP-NA Degree Program Handbook differ from those posted in University publications, this handbook supersedes those in other publications.

Further information can be obtained from personnel in the following offices:

Doctor of Nursing Practice, Nurse Anesthesia Program
Franciscan Missionaries of Our Lady University
Graduate Clinical Education Building
5220 Essen Lane, Office 117
Baton Rouge, Louisiana 70808
225-526-1971

School of Nursing
Franciscan Missionaries of Our Lady University
School of Nursing Building
7500 Hennessy Blvd.
Baton Rouge, LA 70808
225-526-1753

Office of Student Affairs
Franciscan Missionaries of Our Lady University
5414 Brittany Drive
Baton Rouge, LA 70808
(225) 526-1620
studentaffairs@franu.edu

The University assures free and equal access for all qualified persons without regard to race, color, religion, gender, sexual orientation, national origin, age, disability, marital status, pregnancy status, or military status in the admission to, participation in, or employment of its programs and activities. The University will provide reasonable accommodations for students with learning, emotional, or physical disabilities. Students wishing to self-identify are required to contact the Office of Student Affairs.

Table of Contents

APPENDICES

FRANCISCAN MISSIONARIES OF OUR LADY UNIVERSITY

History: When the Franciscan Missionaries of Our Lady ventured to Louisiana from France early in the twentieth century, they had no idea just how profound an impact they would have on the people of Louisiana. Today, Our Lady of the Lake Regional Medical Center employs over 4,000 people and serves 125,000 patients each year. The foundation of this, which has blossomed into the largest hospital system in the state, had its beginnings with the work of the missionaries who came here in 1913.

Healthcare delivery has changed dramatically since 1913, when the first Sister, Mother deBethany, arrived to attend to the needs of the afflicted. Realizing the need to educate employees in the innovations of health care, the Sisters founded a nursing training program in 1923, and Franciscan Missionaries of Our Lady University is the result of those early (as well as more current) efforts of the Sisters who make up the Franciscan Missionaries of Our Lady.

Franciscan Missionaries of Our Lady University, then, is founded on the work of those Franciscan Missionaries who empowered the University to prepare health care practitioners who can share in the Sisters' life dedication to providing health care to this community. Seeking to be faithful to the ideals of this heritage, Franciscan Missionaries of Our Lady University is committed in all of its policies and practices to the pursuit of truth, a respect for differing points of view, and to the ethical and human values inherent in the philosophy of the Franciscan Missionaries of Our Lady. Compassion, Understanding, Respect, and Dignity are Christian virtues we hope to share with you so that you may share them with others. "Grant that we may not so much seek to be understood as to understand," St. Francis said, (My Favorite Quotations, Peale, 1990.) This is at the very heart of this institution, and it has been since the beginning when the first Sisters showed a willingness to sacrifice for the sake of others.

Your education here, though steeped in the specifics of your professed healthcare discipline, will also exemplify the spiritual obligations we have as human beings, both to one another and to God. We pray and hope that when you leave, you take with you not only the health education required for employment but also the deep understanding of the spiritual foundation from which you are given the gift of healing. It is also true that it will be much later in your life when you become fully aware of just how much an effect you have had on your patients, both in ministering to the body and the spirit. The reward for treating others with respect and tenderness is often not apparent at first and usually manifests in ways that surprise us. For as Jesus stated, "Whatever you did for one of the least of these brothers of mine, you did for me." (Mathew 25:40) In healing others, we heal ourselves as well, or, at the very least draw closer to God who has compelled us to undertake this edifying task.

A solid educational foundation in health care can serve as a powerful tool in working with those with whom you come in contact. As life presents us with the many opportunities and challenges that it invariably does, this foundation is of the utmost importance; it provides us with the learning and security that will assist us in moving ourselves forward, enabling us to offer the best possible care.

The history of Franciscan Missionaries of Our Lady University has taught us what it means to be willing to meet new challenges. When Franciscan Missionaries of Our Lady University began its

journey as a diploma school of nursing, few could have predicted the phenomenal growth and expansion, particularly in the last few years. Whereas once enrollment was less than 100, today, the University enrolls over 1,300 students. We have gladly accepted the responsibilities that have come with expansion to find out our full identity at a time when health care is in as great a demand as ever. It has been a journey of enormous importance and we are grateful for having been able to be of help to so many.

Your educational journey and our institutional journey continue together. Discoveries await which will reveal more about our faith and our values and roles in a larger society. Your journey is not undertaken alone, but in concert with the students, faculty, administration, and staff of our University. "Come to me confidently whenever you want," St. Francis once remarked, "and feel free to speak to me with the utmost familiarity." We sincerely hope you will risk the kind of journey afforded you through enrollment in Franciscan Missionaries of Our Lady University, one that will yield up many discoveries about yourself and those with whom you come in contact. How often we refuse to go through the door that is opened for us. We hope that you will find it in your heart to cross this threshold, as the first Franciscan missionaries did. We offer a solid foundation in learning, a tradition of success in helping others and a legacy of service to God's people.

Mission: The mission of the Franciscan Missionaries of Our Lady University is to educate and form Franciscan servant leaders of all faiths. We honor and preserve the legacy of our founders by preparing highly skilled professionals, integrated thinkers, and faith-filled citizens. Inspired by the Franciscan Missionaries of Our Lady to be a living witness to Jesus Christ and the Gospel message, the University is in communion with the teachings of the Catholic Church.

SCHOOL OF NURSING

History: The School of Nursing originated as a diploma program at Our Lady of the Lake Hospital in 1923. In 1990, Franciscan Missionaries of Our Lady University, formerly Our Lady of the Lake College was established based on the recommendation of the nursing faculty. The diploma program was transitioned to an Associate of Science in Nursing program. The first class was admitted in 1990. In 2003, Franciscan Missionaries of Our Lady University began offering the accelerated Associate of Science in Nursing program. As a result of changes in health care, the nursing faculty proposed transitioning the associate degree program into a Bachelor of Science in Nursing program. The BSN program admitted its first class in fall 2012. In 2005, the University began offering graduate-level nursing programs with three degree tracks at the Master's level to include: Nurse Anesthesia, Educator, and Administrator degree programs. In 2015, the Master of Science in Nursing-Nurse Anesthesia degree program transitioned to a Doctor of Nursing Program degree program. In 2017, the Master of Science in Nursing, Family Nurse Practitioner program track was added to the School of Nursing graduate degree offerings.

Mission: In keeping with the spirit of the Franciscan Missionaries of Our Lady University, the School of Nursing prepares exceptional, innovative, reflective nursing professionals to assume leadership roles addressing the needs of individuals, families, and diverse communities in the dynamic healthcare system. Graduates demonstrate service, scholarship, collaboration, and lifelong learning while advancing the profession of nursing.

Accreditation: Franciscan Missionaries of Our Lady University and the Doctor of Nursing Practice Nurse Anesthesia Program are accredited as follows:

Franciscan Missionaries of Our Lady University is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award associate, baccalaureate, masters, and doctorate degrees. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of Franciscan Missionaries of Our Lady University.

Franciscan Missionaries of Our Lady University Nurse Anesthesia program is accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA), 10275 W. Higgins Rd., Suite 906, Rosemont, IL 60018-5603 and can be reached at 224-275-9130., via fax at 847-692-7137 or by email: accreditation@coacrna.org . The program received ten years of continued accreditation in October of 2018 and is scheduled for its next consideration of continued accreditation in Fall 2028.

The Franciscan Missionaries of Our Lady University Doctor of Nursing Practice- Nurse Anesthesia program is fully approved by the Louisiana State Board of Nursing (17373 Perkins Road, Baton Rouge, Louisiana 70810, (225) 755-7500, http://www.lsbn.state.la.us).

DOCTOR OF NURSING PRACTICE PROGRAM IN NURSE ANESTHESIA

History: The Master of Science in Nursing, Nurse Anesthesia (MSNA) Program enrolled its first cohort of students in August 2005. The MSNA degree program was designed as a 28-month continuous program of study with a curriculum requiring the completion of 80 credit hours and 2800 clinical hours.

In January 2015, the MSNA degree program transitioned to a Doctor of Nursing Practice in Nurse Anesthesia (DNP-NA) program. The DNP-NA program requires the completion of 100 credit hours, including a final DNP project, anesthesia lab experience with high-fidelity simulation and task trainers, and 2500 clinical hours over 36 months. The first two semesters of the program are delivered via distance education to allow the registered nurse the ability to continue to practice in the critical care setting. After the first two semesters, the program requires continuous, full-time didactic and clinical instruction with no provision for part-time study. The curriculum is designed to provide the requisite number of anesthesia cases, classroom hours, and clinical hours for each student. The program is composed of sequential and integrated courses designed to facilitate the achievement of its terminal objectives and outcomes.

Mission: The mission of Franciscan Missionaries of Our Lady University's Nurse Anesthesia Program is to provide diverse learners with the knowledge and skills necessary to deliver safe, equitable and evidence-based patient-centered care at the highest level of advanced nursing practice. The program develops leaders and scholars who transform systems of care by improving quality of care and patient outcomes in a variety of healthcare settings. The Program achieves this mission through the creation of an environment that promotes professional socialization, embraces diverse cultures and learning styles, recognizes achievement and promotes excellence while exemplifying the mission and traditions of the Franciscan Missionaries of Our Lady.

Program Administration and Faculty: The administration, faculty, and staff of the DNP-NA degree program are listed below, along with their office telephone numbers and email addresses.

Doctor of Nursing Practice Nurse Anesthesia Degree Program
Program Director
> Ross Castille, DNP, CRNA, APRN
> Ross.castille@franu.edu
> 225-526-1624

Assistant Director
> Lindsay Williams, DNP, CRNA, APRN
> Lindsay.Williams@franu.edu
> 225-526-1991

Director of Clinical Education
> Amber Poirrier, DNP, CRNA, APRN
> Amber.Poirrier@franu.edu
> 225-526-1610

Research Director
> William Schreiter, PhD
> William.Schreiter@franu.edu
> 225-526-1719

Academic Faculty
> Mandy Broussard, DNP, CRNA, APRN
> Mandy.Broussard@franu.edu
> 225-526-1627
>
> Beth Crochet, DNP, CRNA, APRN
> Beth.Crochet@franu.edu
> 225-526-1979
>
> Hylda Nugent, DNP, CRNA, APRN, FAANA
> Hylda.Nugent@franu.edu
> 225-526-1971
>
> Katrina O'Con, PhD, DNAP, CRNA, APRN, FAANA
> Katrina.OCon@franu.edu
> 225-526-1972
>
> Albert Swafford, PhD
> Albert.Swafford@franu.edu
> 225-526-1606

Graduate Nursing Academic Support Coordinator
> Lynn Savoie
> Lynn.savoie@franu.edu
> 225-526-1971
> 225-526-1989 (fax)

EDUCATIONAL PHILOSOPHY

The philosophy of Franciscan Missionaries of Our Lady University's Nurse Anesthesia Program is a continuation of the University's mission and philosophy. The University and the program believe in the individuality of students, taking into account their diverse cultures and learning styles and the contribution that such diversity brings. The program honors the uniqueness of individual learning styles to accomplish higher education.

Nurse anesthesia education requires a broad knowledge base in science combined with intense clinical training to provide patients with safe care during the perioperative process. Critical thinking, clinical judgment, clinical problem-solving skills, and communication skills are crucial for the nurse anesthetist. In addition, the student anesthetist is encouraged to interact and learn from all types of anesthesia providers to foster professional socialization during their educational process.

PROGRAM PURPOSE

The purpose of the DNP-NA program is to prepare the baccalaureate registered nurse for the highest level of advanced nursing practice with a specialization in nurse anesthesia to provide safe and equitable patient-centered care. The graduates of the program are prepared to meet state, regional, and national needs as doctorally prepared advanced practice nurses in leadership positions in health-related organizations to improve systems of care, patient outcomes, and quality of care.

PROGRAM GRADUATE LEARNING OUTCOMES

Upon completion of the DNP-NA Degree Program, the graduate will be able to:
1. Integrate nursing science, advanced levels of systems thinking, and accountability in designing, delivering, and evaluating evidence-based practice to improve healthcare quality;
2. Demonstrate leadership by applying principles of organizational and systems theory to envision, design, evaluate, and manage health organizational systems;
3. Translate research and generate evidence to guide improvements in practice and outcomes of care;
4. Incorporate healthcare information systems and patient care technologies to improve and transform programs of care and care systems;
5. Influence healthcare systems through the design, implementation, and evaluation of healthcare policies;
6. Collaborate interprofessionally in the development and implementation of practice models, peer review, practice guidelines, healthcare policy, standards of care, and scholarly projects;
7. Generate, implement, and evaluate health promotion/disease prevention interventions and strategies to address gaps in care of individuals and populations; and
8. Apply critical thinking and requisite knowledge to provide safe, ethical, evidence-based anesthesia care services to culturally diverse individuals across the lifespan.

PROGRAM OUTCOME MEASURES

1. Outcome 1: Graduates of Doctor of Nursing Practice in Nurse Anesthesia program will be adequately prepared for the NBCRNA NCE as evidenced by:

a. Outcome 1.1: NCE First Time Pass Rate
   i. Benchmark: NCE first time pass rate will be equal to or greater than the national average for first time test takers.
   ii. Preferred Target: NCE first time pass rate will be greater than the national average for first time test takers.
b. Outcome 1.2: NCE Pass Rate Subsequent Attempts
   i. Benchmark: Eventual NCE pass rate of 100% for all test takers on all attempts.
   ii. Preferred Target: NCE pass rate of 100% for all test takers on second attempt.
c. Outcome 1.3: Cohort Mean NCE Total Score
   i. Benchmark: Cohort NCE Mean Total Score equal to or greater than the national average for first time test takers.
   ii. Preferred Target: Cohort NCE Mean Total Score greater than the national average for first time test takers.
d. Outcome 1.4: Cohort Mean NCE Subscores
   i. Benchmark: Mean sub scores equal to or greater than the national average for first time test takers scores on all domains.
   ii. Preferred Target: Mean sub scores equal to or greater than the national average for first time test takers scores on all domains.

2. Outcome 2: The Doctor of Nursing Practice in Nurse Anesthesia program will admit, retain, and graduate students who have the ability to benefit from a nurse anesthesia education as evidenced by:
   a. Outcome 2.1: Admission Standards
      i. Benchmark: 100% of students admitted to the program will demonstrate the ability to benefit from a nurse anesthesia education.
      ii. Preferred Target: 100% of students admitted to the program will demonstrate the ability to benefit from a nurse anesthesia education.
   b. Outcome 2.2: Graduation Rate
      i. Benchmark: The program will retain 90% of admitted students per cohort with a target graduation rate of 90%. Program attrition will not exceed 10% per cohort.
      ii. Preferred Target: The program will retain 90% of admitted students per cohort with a target graduation rate of 95%. Program attrition will not exceed 5% per cohort.

3. Outcome 3: The Doctor of Nursing Practice in Nurse Anesthesia program will graduate students who are prepared to enter into nurse anesthesia practice as a DNP prepared APRN as evidenced by:
   a. Outcome 3.1: Employment Rate
      i. Benchmark: Of those graduates seeking employment, 100% will be employed as a CRNA within 1 year of graduation.
      ii. Preferred Target: Of those graduates seeking employment, 100% will be employed as a CRNA within 1 year of graduation.
   b. Outcome 3.2: Alumni Evaluation
      i. Benchmark:

1. At 1-year post-graduation, 100% of responding alumni will report preparedness to enter anesthesia practice upon graduation of the nurse anesthesia educational program.
2. At 1-year post-graduation, 100% of responding alumni will evaluate the quality of the nurse anesthesia program as favorable in relation to their preparedness to enter into nurse anesthesia practice upon graduation of the nurse anesthesia educational program.
3. At 1-year post-graduation, 100% of responding alumni will report the acquisition of refined communication and research skills necessary to make contributions to appropriate knowledge bases.
4. At 1-year post-graduation, 100% of responding alumni will report active participation in at least one professional organization.

    ii. Preferred Target:

1. At 1-year post-graduation, 100% of responding alumni will report preparedness to enter anesthesia practice upon graduation of the nurse anesthesia educational program.
2. At 1-year post-graduation, 100% of responding alumni will evaluate the quality of the nurse anesthesia program as favorable in relation to their preparedness to enter into nurse anesthesia practice upon graduation of the nurse anesthesia educational program.
3. At 1-year post-graduation, 100% of responding alumni will report the acquisition of refined communication and research skills necessary to make contributions to appropriate knowledge bases.
4. At 1-year post-graduation, 100% of responding alumni will report active participation in at least one professional organization.

c. Outcome 3.3: Employer Evaluation
    i. Benchmark: At 1 year of employment, 100% of responding employers will report that graduates are able to administer safe, compassionate care through a variety of anesthetic techniques.
    ii. Preferred Target: At 1 year of employment, 100% of responding employers will report that graduates are able to administer safe, compassionate care through a variety of anesthetic techniques.

DNP-NA DEGREE REQUIREMENTS

In order to meet DNP-NA degree requirements, students must:
1. Satisfactorily complete of all courses.
2. Satisfactorily complete a DNP Project.
3. Satisfactorily complete all requirements of the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) and the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA).

Each student is responsible for monitoring their progress to ensure that degree requirements are met. If a student finds they are not obtaining a sufficient number of clinical cases or a variety of cases to fulfill the requirements, the student is responsible for notifying the Director of Clinical Education and/or other program administrators immediately. Early notification is imperative so appropriate changes in clinical assignments can be made.

DEFERRAL OF GRADUATION

In very unusual circumstances, a student may be granted a deferral of graduation. Every requirement for graduation must be met before graduation. If a deferral is needed, it must be approved by the DNP-NA Program Director and the Dean of the School of Nursing. This deferral may be granted in the following circumstances:

- Failure to meet graduation criteria
- Student on probation
- Extended medical leave
- Extended military leave (mandatory call to active duty)
- Other extreme circumstances

If a student is granted deferral of graduation, the student will have one academic semester after the original graduation date to fulfill all graduation requirements.

WITHDRAWAL FROM COURSES

Students wishing to withdraw from a course(s) must submit the required University Course Withdrawal form, which can be obtained in the Nurse Anesthesia Program office.

A student leaving the University without following these procedures will receive a grade of "F" for the courses. The student will receive a "W" in all courses if the proper procedure is followed.

A student who withdraws from a course(s) will be considered out of progression and will be dismissed from the Program.

READMISSION TO THE PROGRAM

A student who has withdrawn from the program (withdrawn from all courses) during the first, second, or third semester and is in good standing with the University may reapply to the nurse anesthesia program. Students who wish to reenter the program must meet with the admissions committee. Readmission is contingent on committee recommendations, availability of positions in the program, and previous academic experience. Prior attendance does not guarantee readmission into the program.

REQUIREMENTS FOR ADMISSION

To be considered for admission, applicants must meet the following criteria:

1. Baccalaureate or higher degree in nursing from a college or university fully accredited by a recognized accrediting agency of the U.S. Department of Education.
2. Cumulative undergraduate grade point average of 3.0 on a 4.0 scale;
3. Minimum of 1-year full-time recent experience as a registered nurse in an intensive care unit;
4. Current, unencumbered license to practice as a registered nurse (RN) in any state with eligibility for licensure in Louisiana;
5. Current Basic Life Support (BLS) and Advanced Cardiovascular Life Support (ACLS) certifications;
6. Completion of application requirements by June 15th as stated in the graduate application

Revised 8.17.2025

instructions;

7. Submission of three (3) professional letters of recommendation (one (1) from current immediate supervisor; one (1) from peer);
8. Ability to meet and comply with the DNP-NA Core Performance Standards; and
9. CCRN certification is required for reapplication.
10. As part of the application and admissions process, all applicants will be required to pay a $70 fee and complete the Casper open-response situational judgment test. The test must be completed prior to your interview date.
11. In addition to meeting all other applicable requirements for admission, non-native speakers of English must demonstrate sufficient English language proficiency. This can be demonstrated by submitting any one of the following: an SAT verbal/critical reading score of at least 430; an ACT English subtest score of at least 18; a Duolingo English Test score of at least 105; an International English Language Testing System (IELTS) test score of at least 6.5; or a TOEFL iBT (internet-based test) score of 79 or paper-based test with sub scores each being 20 or higher.

Candidates who satisfactorily meet these criteria may be invited for an evaluated interview.

Upon acceptance into the program, students must meet the following criteria prior to enrollment:

1. Current unencumbered Louisiana registered nurse license; and
2. Pediatric Advanced Life Support (PALS) certification

PROGRAM CORE PERFORMANCE STANDARDS

The practice of professional nursing requires specific skills, characteristics, and qualities. The Core Performance Standards of the Doctor of Nursing Practice-Nurse Anesthesia Degree Program identify the behavioral criteria, which allow the graduate-level student to safely perform in a variety of roles in the advanced practice setting, and successfully progress in the Nurse Anesthesia Program.

Domain	Standard	Examples of Necessary Activities (Not All Inclusive)
Critical Thinking	The intellectual ability to assimilate information and demonstrate sound clinical judgment and problem-solving skills in the classroom setting, as well as in the provision of comprehensive patient care.	Recognizes relationships between concepts and phenomena in the clinical and classroom setting; develops, implements, and prioritizes plan of care in a variety of settings.
Interpersonal	Possesses the interpersonal skills to implement caring behaviors with respect to the values, customs, and culture of diverse populations.	Establishes therapeutic relationships with patients and collaborates appropriately with the health care team.
Communication	Demonstrates the ability to interact with others in standard English in both verbal and written form.	Explains treatments, procedures, provides health teaching, and documents and interprets nursing actions and patient responses. Communicates significant findings with faculty and other members of the health care team in a concise, professional and timely manner.

Mobility	Physical ability to provide for patient safety, to move around the physical environment, to maneuver in small places, and the physical health stamina to carry out nursing care.	Coordinated mobility to move around in patient's rooms, workspaces, and treatment areas; and administer CPR procedures. Lift, move, position, and transport patients without causing harm, undue pain or discomfort to self or patient. Transports mobile equipment in a cautious and timely manner.
Motor Skills	Gross and fine motor abilities to provide safe and effective nursing care. Performs technical skills requiring fine motor skills and manual dexterity,	Calibrate, use, and manipulate instruments and equipment in a safe and effective manner. Administer medications safely via a variety of routes; Position patients in a safe and appropriate manner.
Sensory	Use of the senses of vision, hearing, touch, and smell to observe, assess, and evaluate effectively.	Hear monitor alarms, emergency signals, or cries for help. Smell noxious fumes and distinguish specific smells. Observe patient's physical and emotional responses. Assesses changes in color, texture, or temperature. Perform motor skills for physical examination, including percussion, palpation, and auscultation.
Professional Behavior	Exhibits emotional and mental stability, motivation, and flexibility to function in a variety of situations. Fosters a positive image of the nursing profession. Demonstrates characteristics of self-direction and accountability.	Ability to demonstrate caring and empathetic behaviors in the classroom and clinical setting. Manages time and prioritizes effectively. Ability to respond to constructive criticism and direction from faculty, clinical staff, and peers during learning experiences, seeks out assistance as appropriate. Works collaboratively with a variety of health professionals.
Cognitive	Ability to organize, synthesize, and apply concepts and theories in the classroom and clinical setting. Maintains current knowledge related to advanced nursing practice.	Ability to participate in classroom discussions, seminars, and clinical conferences with faculty, peers, health professionals, and family members. Ability to transfer information learned in the classroom to the clinical setting. Completes all assignments in a professional and timely manner. Ability to successfully complete oral and/or written examinations.
Ethical/Legal	Practices within legal, ethical, and regulatory frameworks of the profession. Uphold honesty and personal integrity with all campus/clinical activities. Functions as a patient advocate when planning and implementing nursing care.	Adheres to the standards of professional nursing practice. Acts as a patient advocate at all times. Reports unethical or dangerous behavior that could affect patients or the campus community in general. Plagiarism, cheating on exams, withholding required information, or falsifying documents are examples of unethical behavior.

Technology Utilization	Ability to utilize basic computer skills for the purpose of scientific inquiry, as well as for documentation of findings and relevant data.	Ability to conduct web-based searches, access and successfully complete web-based assignments, participate in discussion boards, and accurately document nursing notes and assessment findings by computer mode.

STUDENTS WITH DISABILITIES

Refer to the Franciscan Missionaries of Our Lady University Student Handbook for information regarding Students with Disabilities and Disability Services.

Nurse Anesthesia applicants must be able to meet core performance standards for admission and progression. In the event that a nurse anesthesia student is physically or mentally unable to administer safe patient care in all aspects of anesthesia administration, the program reserves the right to dismiss the student from the program.

STUDENT CODE OF CONDUCT

Refer to Student Code of Conduct in the Franciscan Missionaries of Our Lady University Student Handbook.

JURISDICTION

Refer to the Franciscan Missionaries of Our Lady University's Student Handbook for additional information related to conduct procedures, sanctions, and appeals.

LICENSURE AND CERTIFICATIONS

All DNP-NA students must maintain a current, unencumbered license as a registered nurse issued by the Louisiana State Board of Nursing at all times while attending Franciscan Missionaries of Our Lady University. All DNP-NA students must maintain Advanced Cardiovascular Life Support (ACLS), Basic Life Support (BLS), and Pediatric Advanced Life Support (PALS) certifications while enrolled in the program. It is each student's responsibility to submit, electronically, a copy of their original nursing license and their certifications. The copies must be submitted into the student tracking system (Typhon) and must be maintained up to date at all times throughout the program. A copy will be placed in the student's file. If the student has not provided evidence of current licensure to the Academic Support Coordinator, clinical privileges will be immediately suspended. All clinical time missed as a result of such a suspension shall be counted against personal leave time or made up, at the Director of Clinical Education's discretion.

CLINICAL PRIVILEGES

All nurse anesthesia students must continually meet the standards of care promulgated by the Louisiana State Nursing Practice Act and the rules and regulations of the Louisiana State Board of Nursing (LSBN). The Program Administration will investigate and take appropriate action regarding any information suggesting that a student is failing to meet these or any other regulatory requirements. Per regulatory law, the Dean of the School of Nursing will report to the LSBN (and/or other appropriate authorities) any conduct that violates statutory or regulatory laws of the state of Louisiana or the United States.

Revised 8.17.2025

If the Program Administration determines that a student's conduct has presented concerns regarding patient safety, substandard care, or unprofessional conduct, the student's clinical privileges will be immediately suspended. The matter will then be forwarded to the School of Nursing Dean for further consideration and action. Following the suspension of clinical privileges by the Program, the student is prohibited from any patient care activities pending the outcome of the deliberations of the Dean of the School of Nursing. Students are granted clinical privileges through each clinical site and therefore are required to follow the policies and procedures set forth by that institution.

STUDENT HEALTH REQUIREMENTS

Students will receive a health packet detailing all Student Health and Wellness requirements that must be met before the first clinical course. Failure to maintain compliance with the health and wellness requirements each semester will result in the student's inability to attend the clinical portion of their program and may result in dismissal from the program. Students should contact the Office of Health and Wellness if they have any questions regarding these requirements or view the Student Health and Wellness Policies and Procedures.

PREGNANCY

In the event of pregnancy, it is the responsibility of the student to voluntarily declare their pregnancy in writing to program administration and/or the Director of Clinical Education as soon after conception as practical. Students should refer to the Pregnancy Policy and Pregnancy Policy-Additional Information for Clinical Students in the Student Health and Wellness Policies and Procedures.

JUDICIAL DECLARATIONS

Upon acceptance to Franciscan Missionaries of Our Lady University Nurse Anesthesia Program, arrests, charges, convictions, no contest, or guilty pleas related to a criminal offense must be reported to the Program Administration. Failure to notify the program of an arrest or charge, current or prior, is grounds for disciplinary action up to and including dismissal from the program, regardless of whether or not the arrest or charges lead to a conviction. Nurse anesthesia students arrested for other criminal offenses may be immediately suspended from the program until the charges are resolved.

Students are required to complete one or more background checks while enrolled in the program. The Campus Health and Wellness Department will attest to clear background checks for students prior to clinical placement. If a student's background check is not clear, the Campus Health and Safety Department may require the program to share the report with clinical agencies. The University and/or program cannot guarantee clinical placement. Additionally, the University cannot guarantee APRN licensure upon graduation.

SOCIAL MEDIA AND MOBILE PHONE USE

The DNP-NA program acknowledges that social networking sites are a popular means of communication. Additionally, mobile phone use is increasing in healthcare to facilitate communication between providers and improve access to evidence-based practice and clinical information. Students who choose to utilize mobile technology must be aware that posting

certain information and engaging in certain actions is illegal and/or distracting to patient care. Violations of administrative policies and regulations may expose the student to criminal and civil liability. Offenders may be subject to probation, suspension, and possible dismissal from the program. The nurse anesthesia program prohibits the following actions:

1. Students may not disclose the personal health information of other individuals. Removal of an individual's name does not alone constitute proper de-identification of protected health information. Inclusion of data such as age, gender, race, diagnosis, date of evaluation, or type of treatment or the use of a highly specific medical photograph (such as a before/after photograph of a patient having surgery or a photograph of a patient from a medical outreach trip) may still allow the reader to recognize the identity of a specific individual.
2. Students may not report private (protected) academic information of another student.
3. Students may not represent themselves as an official representative or spokesperson for the DNP-NA program or Franciscan Missionaries of Our Lady University.
4. Students may not represent themselves as another person, real or fictitious, or otherwise attempt to obscure your identity as a means to circumvent any prohibitions listed in the School of Nursing Graduate Student Handbook.

Other violations of the policy pertaining to the use of mobile technology or social media would include but are not limited to:

1. Knowingly distributing false evidence, statements, or charges regarding oneself, another student, and/or faculty/staff member.
2. Using electronic channels of communication to disseminate inappropriate or uncivil comments regarding peers, faculty, or staff.
3. Verbal, written, or electronic insults to, or verbal attacks on, Franciscan Missionaries of Our Lady University, the nurse anesthesia program, clinical facilities, clinical preceptors, faculty, staff, or students.
4. Threats or acts of physical violence against Franciscan Missionaries of Our Lady University, the nurse anesthesia program, clinical facilities, clinical preceptors, faculty, staff, or students.
5. Harassment, in any form, of Franciscan Missionaries of Our Lady University, the nurse anesthesia program, clinical facilities, faculty, staff, or students.
6. Violating the confidentiality of a faculty committee by an elected student representative serving on that committee.
7. Inappropriately accessing mobile technology or social media while delivering anesthesia care. Inappropriate mobile technology use is defined as the use of any mobile device [smartphone, tablet, personal digital assistant (PDA)] for any use other than accessing information directly related to that patient's care. Examples include reading, texting, playing games, using headphones, or accessing non-clinical content. Mobile technology should only be utilized in communication with and with the permission of the supervising anesthesia provider for the sole purpose of accessing information related to patient care.
8. Participating in non-clinical mobile phone use in any patient care area (ex. Preoperative holding area, operating room, recovery room).

Students violating the Franciscan Missionaries of Our Lady University Nurse Anesthesia Program's social media use policy may face disciplinary action including but not limited to

dismissal from the nurse anesthesia program. It is important to note that all students engaging in the conversation or responding to any postings will be held accountable.

Refer to Franciscan Missionaries of Our Lady University's Student Handbook regarding Social Media Usage.

STUDENT PROFESSIONAL LIABILITY INSURANCE

Students are required to carry professional liability insurance during clinical practicum courses and throughout their clinical experience. Professional Liability Insurance is purchased and obtained by the program and must be maintained by the student through the American Association of Nurse Anesthetists (AANA) Insurance Services.

AANA MEMBERSHIP

Students are required to maintain membership in the American Association of Nurse Anesthetists throughout the program. The cost of membership shall be the responsibility of the individual student.

EMPLOYMENT

The time commitment for nurse anesthesia education is significant and therefore, employment is discouraged during DNP-NA Program enrollment after the first two semesters.

Employment in the anesthesia field by nurse anesthesia students is prohibited by law, Program, and University policy. At no time should a student nurse anesthetist be employed as a CRNA. Under no circumstances shall a student anesthetist seek employment as a Nurse Anesthetist by title or function until successful graduation from the DNP-NA Program.

VISITORS

University students are personally responsible for their on-Campus visitors; visitors are upheld to the same University rules, regulations, and policies. The University classroom, whether virtual or physical, is a learning space designated for students enrolled in a course and for faculty assigned to teach the course. Visitors are not allowed to attend or observe any class, academic activity, or social function unless specifically invited by the Program. All invitations require the approval of the Program Director.

FACULTY/ STUDENT CONFERENCES OR MEETINGS

The faculty and/or administration reserve the right to engage in student meetings, conferences, and/or advising related to clinical or didactic infractions, concerns, or feedback. Informal meetings and advising sessions may not necessitate the presence of two faculty members. In a formal, faculty-initiated conference, at least two faculty members will be present, and a summary will be documented. The student may request to have a faculty or staff member, another student, a friend, or a family member attend to support the student at a conference. Should the Program Director approve this request for any conference (in person or virtual), the student may be required to sign a FERPA agreement prior to the conference. The support person cannot be an attorney acting as legal representation for the student during the conference. Students or their

representatives are prohibited from recording any meeting and/or conference in any way whether in-person or virtual.

STUDENT LEADERSHIP

Elected Positions
1. President – Each class elects its own president. The president is responsible for providing leadership to the class, serving as a liaison to other organizations without specific representatives, communicating class requests or concerns to the DNP-NA director, etc.
2. LANA Representative – Each class nominates students to serve as a Louisiana Association of Nurse Anesthetists (LANA) student board member. Once all nominations are compiled, the faculty will select the LANA representative from the nominated individuals. The LANA representative is expected to attend monthly LANA Board of Directors (BOD) meetings, annual LANA fall meetings, and other events as requested by the LANA BOD.
3. Social Vice President – Each class elects a social vice president. The social vice president organizes class social events/functions and communicates with program faculty regarding social events.

Student Leadership Advisory Meetings
Cohort student leadership is encouraged to meet on a regular basis and at a minimum of once a semester to discuss program-related matters. Meetings should be coordinated by student leadership and are not the responsibility of the faculty.

Appointed Committees
1. Nurse Anesthesia Program Curriculum Committee – Students will be selected by the faculty during the first year of the program. Beginning in the second year, the students nominate themselves or other individuals in each cohort to serve on the DNP-NA Program Curriculum Committee. The program selects members from the nominated individuals. The representatives attend the committee meetings to offer their perspectives on the activities of the committee.
2. Nurse Anesthesia Program Community Advisory Board – Students will be selected by the faculty during the first year of the program. Beginning in the second year, the students nominate themselves or other individuals in each cohort to serve on the DNP-NA Program Community Advisory Board. The program selects members from the nominated individuals. The representatives attend the committee meetings to offer their perspectives on the activities of the committee.

PROGRAM DESIGN

The program occurs in two phases and is integrated in nature. The first 18 months of the program primarily focuses on didactic education while the second 18 months of the program focuses on both didactic and clinical education. The DNP-NA Program consists of 100 semester credit hours, with 18 semester credit hours offered via distance education. Due to the rigorous nature of nurse anesthesia education and the requirements for degree attainment, DNP-NA students do not follow the academic calendar and may not follow the emergency closure plan based on clinical obligations.

The DNP-NA Program faculty members make every attempt to arrive in a timely manner and hold classes as scheduled. Program faculty members reserve the right to reschedule class/clinical days to meet learning objectives. Occasionally, changes in class times and days may be necessary. Students will be notified by the instructor and are responsible for adhering to class schedule changes.

COPYRIGHT

All course materials, including online content, are property of Franciscan Missionaries of Our Lady University and may not be shared, distributed, or published outside the University. Students are authorized to view, copy, and print documents as needed for the successful completion of coursework. Contents may not be copied for personal, commercial, or non-commercial use.

Course participants retain the copyright of all course assignments and posts; however, these materials may be used for educational purposes within the given course or future courses. In group projects, only the portion of the work completed by that individual is copyrighted by that individual.

Students must observe all applicable restrictions when obtaining copyrighted material from libraries and other sources. The copyright law of the United States (Title 17, United States Code) limits the use of photocopying and reproductions of copyrighted material. Copies may not be used for any other purpose than private study, scholarship, or research. Materials may not be shared, posted, or otherwise distributed without permission from the copyright holder.

TEXTBOOKS

DNP-NA students are required to purchase textbooks for each course as listed in the course syllabus, including required, recommended, and supplemental textbooks. Purchase is at the student's cost.

TRAVEL, HOUSING, & MEALS

Travel, housing, and meals are the sole responsibility of the student.

COMMUNICATION

Communication with nurse anesthesia students is accomplished via:
- *Franciscan Missionaries of Our Lady University* email
- The *Franciscan Missionaries of Our Lady University* website
- Learning Management System
- App-based messaging
- Telephone
- Text messaging
- Written notification
- In-class or conference notification
- Face to Face communication

Revised 8.17.2025

Students are required to inform the Academic Support Coordinator of any changes in email address, home or cell numbers, and address. Students are responsible for checking their email daily (except for those on authorized absence) for any memos or changes in policy or schedule. Additionally, students are required to respond to program and faculty emails **within 48 hours** unless otherwise indicated. All communication from the DNP-NA Program administration has the same importance as the Program policies and will be instituted as such.

STUDENT ADVISING

Program faculty members engage in ongoing formal and informal advising activities, providing students with continual feedback. Each student is assigned a faculty advisor. Formal advising occurs each year during the spring and fall semesters with the student's appointed advisor. Students are required to complete a summative evaluation found in Typhon and meet with their faculty advisor at the end of each spring and fall semester. The faculty and student will review daily evaluations (written and verbal), Typhon records, case log numbers, DNP portfolio, student self-evaluation, didactic strengths and weaknesses, and DNP Project progression (when applicable). The faculty advisor will complete the DNP-NA End of Semester Advising form, which will be saved as part of the student's record. At the end of each fall semester, the student and advisor will complete the Annual Portfolio Review/Reflection Form, which will also be saved as part of the student's record. Informal advising occurs via daily scheduled and unscheduled interactions with Program faculty members.

GRADING

The grading scale for the Franciscan Missionaries of Our Lady University DNP-NA Program is as follows:

Grade	Range	Quality Points
A	90-100	4
B	80-89	3
C	70-79	2
D	60-69	1
F	<59	0
UF=Fail	<80	0
P =Pass	>80-100	0
I	Incomplete	0

All graded course work is calculated to the second decimal place (hundredths column). Only the final course grade is rounded to the nearest whole number with only the first decimal place (tenths column) rounded. For example, a final course grade of 79.5 is rounded to 80 whereas a final course grade of 79.49 is not rounded to 80.

PROGRESSION POLICY

In order to maintain progression status and be in good academic standing, the student must:
- Maintain a current, unencumbered license to practice as a registered nurse (RN) in Louisiana;
- Achieve a minimum final grade of "P" in all pass/fail courses in the DNP-NA curriculum;

- Achieve a minimum final grade of "B" or higher in all didactic courses in the DNP-NA curriculum. A student who earns a "C" in a didactic course will be allowed to progress in the program, provided the student's GPA is a 3.0 or higher;
- Maintain continuous enrollment in the DNP-NA curriculum sequence;
- Meet the University and School of Nursing health and safety requirements; and
- Meet the Core Performance Standards and expectations for behavior outlined in the University Student Handbook and DNP-NA Program Handbook.

NON-PROGRESSION POLICY

A student is considered out of progression if the student fails to meet one or more of the requirements for progression as outlined above. Students may return to progression by following the re-entry procedures, provided they have not been dismissed from the nursing program.

Students will be out of progression for the following:
- Failure to obtain and maintain a current, unencumbered license to practice as a registered nurse (RN) in Louisiana;
- Failure to achieve a minimum grade of "B" in all courses in the DNP-NA curriculum;
- A student who earns a "C" in a didactic course will be allowed to progress in the program, provided the student's GPA is a 3.0 or higher. If the student earns a second "C" in a didactic course, the student will be dismissed from the DNP-NA program.
- A student who fails a pass/fail course (as indicated by a final grade of "UF") will be dismissed from the DNP-NA program.
- A student who fails a didactic course (as indicated by a final grade of "D" or "F") will be dismissed from the DNP-NA program;
- Failure to maintain continuous enrollment in the DNP-NA curriculum sequence;
  - Students who are voluntarily or involuntarily withdrawn from a DNP-NA course are considered out of progression;
- Failure to meet the University and School of Nursing health and safety requirements;
  - Students will be withdrawn from courses if they fail to meet the requirements outlined for nursing students by the Office of Health and Safety;
  - Students who are withdrawn will not be automatically re-enrolled once they have met the requirements.
- Failure to meet the Core Performance Standards and/or expectations for behavior outlined in the University Student Handbook and DNP-NA Program Handbook.
  - Students must meet the Core Performance Standards for admission and continue to meet these standards throughout enrollment in the DNP-NA program.
  - The handbooks outline behavioral expectations including, but not limited to, respect for others, respect for the learning environment, and academic honesty.
  - A student will be withdrawn from courses and/or dismissed from the DNP-NA program for failure to meet behavioral expectations and Core Performance Standards described in the handbooks.
- Failure in any course that places the student in non-progression will result in the student being immediately withdrawn from their clinical placement. Should appeal proceedings occur, the student will remain out of clinical progression until a final appeal decision has been made.

Revised 8.17.2025

TRANSFER OF CREDIT

No coursework may be transferred or substituted for credit into the DNP-NA curriculum.

LAPTOP REQUIREMENTS

The DNP-NA program utilizes multiple online platforms throughout the program. All student laptops must be compatible with these programs. Refer to the University Student Portal for the Minimum Technology Requirements. Additionally, the program relies heavily on the ExamSoft platform. Please refer to the ExamSoft website for minimum laptop requirements.

EXAMINATIONS

ExamSoft is a secure testing product that is used for quizzes and/or examinations via the exam taker's laptop or in the University's Learning Resource Testing Center. The following policies must be followed based upon the testing location:
1. The student must download and install the latest version of the ExamSoft Examplify product prior to the scheduled quiz or examination.
2. Exams or quizzes must be downloaded prior to the posted download deadline. Students who fail to download quizzes or exams by the posted deadline may not be allowed to take them.
3. Each quiz or exam is password-protected. The password will be provided at the beginning of the quiz or exam.

EXAMINATION DAY TESTING PROCEDURES

1. Students must bring the following items to be allowed entry into the testing environment:
   a. Laptop:
      i. Should be fully charged and able to operate on battery for at least 3 hours of normal activity (i.e., web browsing, word processing, wireless).
      ii. May not have access to power for charging during testing.
   b. Privacy Screen:
      i. Filters that attach over the student's laptop display to make information visible only to the exam taker. The privacy screen must be well-fitted and appropriate for the student's laptop device and is required for all computer-based exams.
      ii. Students may not be allowed to take a computer-based examination without an attached privacy screen.
   c. Calculators (as allowed per course instructor)
      i. Scientific and graphing calculators may be allowed at the discretion of the course instructor for testing. The sharing of calculators during the quiz or examination is not permitted.
2. Students are prohibited from bringing the following items:
   a. Cellular phones/smartphones
   b. Smartwatches
   c. Hats
   d. Food or drink
   e. Personal items (backpacks, purses, bags, notebooks, books, etc.)
   f. Writing instruments

g. Scratch paper
h. Keys
i. Badges

3. Paper, textbooks, notes, or any other course documents may not be used during quizzes or examinations unless specified by the course instructor.

4. An erasable whiteboard and dry-erase marker will be provided by the proctor prior to the start of the examination.
   a. Only one white erase board is allowed per student.
   b. Erasable whiteboards may not be used prior to the start of the examination.

5. Students will be given the password to the examination and start the examination at the direction of the proctor. No talking or other communication is allowed once a testing session begins.

6. Each examination session has a prearranged duration and will be noted by course faculty. An examination session will begin at the start time designated by the course faculty and will encompass the prearranged duration. For example, a 90-minute exam, if started at 9:05 am, will end at 10:35 am.

7. Once an examination begins, all personnel should refrain from conversing with examinees. This includes clarification or interpretation of exam questions. The examination proctor has the discretion to provide critical information to the class when necessary.

8. Entering/Leaving the Testing Environment
   a. Late Arrivals
      i. Students arriving late for an examination are permitted entrance until the first student has exited the testing environment.
      ii. Students who arrive late for an examination are not allowed additional time to complete the exam.
      iii. ExamSoft timer may not be reflective of the total time remaining. As previously stated, the start and end time will not be altered.
   b. Reentry
      i. If a student leaves the testing environment for any reason, the student will not be allowed to return to complete the examination.
   c. Examination Completion
      i. Before leaving the testing environment, students must show the completion screen, signifying examination completion. Students are to upload examinations prior to the published examination upload deadline.

9. In the event of a laptop malfunction:
   a. If a student experiences a laptop problem or malfunction before, during, or upon exiting an exam, he or she must immediately notify the proctor. If a student's laptop fails during an examination, the student may be allowed to continue answering the exam by hand-writing it at the discretion of the proctor. No additional time will be allowed for attempting to resolve computer problems during the exam.
   b. After the examination has concluded, an attempt may also be made to retrieve exam answers from the student's hard drive. The retrieved examination portion, together with the hand-written portion, will be submitted to the course instructor for grading. Only if exam answers cannot be retrieved within 24 hours, may the

Program Director, in consultation with the instructor, determine any additional remedial options, if any. However, no consideration will be given to a student who failed to alert the proctor at the time of the difficulty.
10. Examination Absence
    a. Students must notify the course instructor if they will not be present for an examination.
    b. Make-up examinations will be given at the discretion of the course instructor.

EXAMINATION REVIEWS

The purpose of an examination review is to provide students with an opportunity to identify patterns of mistakes or subject content deficiencies. The examination review is not an opportunity for students to challenge the validity of exam items or debate scores. Examination reviews are an optional service and are not guaranteed nor required but administered at the prerogative of each course instructor. Students should remain collegial at all times during the examination review.

In order to maintain the integrity of exam items, the DNP-NA program secures its test item bank. Therefore, the following procedures have been instituted to assist in maintaining item security while providing a sound educational experience for students. Students who do not follow the procedure outlined below will be asked to leave the exam review and his/her actions may result in disciplinary action. The following policies apply for all examination review sessions:
1. Exam review sessions will be scheduled by the course faculty.
2. An exam review session will not be rescheduled for students who do not attend the scheduled session.
3. Students who do not attend the exam review session forfeit their right to review the exam.
4. Inquiries about examination questions may be allowed at the discretion of the individual faculty member.
5. Students are not permitted to take a break or leave the room during an exam review session.
6. Students will be allowed to review only the exam items answered incorrectly (question, correct response, and the given response) for an amount of time as determined by the course instructor.
7. Students are not allowed at any time or under any circumstances to discuss exam items with peers.
8. Unauthorized distribution or receipt of test questions, attempts to access the exam or the exam review outside of the scheduled administration period, or any attempts to copy, photograph, or otherwise distribute or duplicate exam items is considered cheating and as such, will be subject to disciplinary action and/or dismissal from the program.
9. The following materials are prohibited during the exam review session:
    a. Mechanical or electronic devices such as cellular telephones, laptops, electronic tablets, calculators, digital watches, watches with computer communication and/or memory capability, recording or filming devices, notebooks, textbooks, writing utensils, radios, hats, book bags, backpacks, briefcases, and purses.

Revised 8.17.2025

b. Any item that has the potential to undermine exam security will be seized, or the student will be instructed to secure the item in another location.

10. The Nurse Anesthesia Program reserves the right to discontinue all exam review sessions for students and/or the entire class who violate policies related to exam review should large-scale attempts to undermine exam security be identified. Attempts by students to undermine the secure examination policy may result in dismissal from the program.

GRADE APPEAL POLICY

Please refer to the Student Grade Appeals Policy within the Franciscan Missionaries of Our Lady University Student Handbook.

ACADEMIC GRIEVANCE POLICY

Please refer to the Student Complaint and Grievance Procedure within the Franciscan Missionaries of Our Lady University Student Handbook.

RECORD RETENTION POLICY

Student records are confidential and only those faculty or staff members who are directly responsible for the student's progress will have access to student files. All student records including admission applications, NBCRNA transcripts, and summative evaluations are stored on a password-protected computer or in a locked cabinet inside a locked room within the DNP-NA Program Office and are retained in accordance with the COA and University Record Retention Policy. For additional information on students' rights concerning educational records please see the academic catalog. Examinations and assignments are kept for one year from the date of administration.

DRESS CODE

Students are required to keep a neat appearance and dress in a professional manner when attending class and University activities. Students should wear Franciscan Missionaries of Our Lady University Nurse Anesthesia Program scrubs to lab and to and from the clinical setting. These will be purchased at the student's expense during the third semester of the program. Students will change into the scrubs mandated by the individual clinical sites and are prohibited from taking scrub attire from a clinical site.

RECORDINGS

Recordings of any kind to include classroom lectures, conferences, interactions with course or clinical faculty, clinical coordinators, or clinical preceptors, virtual or in-person, are strictly prohibited without permission. Failure to adhere to this policy may result in dismissal from the nurse anesthesia program.

TIME COMMITMENT

Students are expected to attend all clinical rotations, clinical conferences, program workshops, journal club meetings, Our Lady of the Lake Regional Medical Center Morbidity and Mortality conferences (when on rotation), and didactic lectures when applicable and as outlined in the course syllabi.

All students are required to complete off-shift and/or call rotations during the clinical portion of the program and must submit time logs as instructed.

In accordance with the Council on Accreditation for Nurse Anesthesia Educational Program standards, student time commitment should not exceed 64 hours per week averaged over four weeks. It is the student's responsibility to log time via Typhon. Refer to the Standards for Accreditation of Nurse Anesthesia Educational Programs definition of "Reasonable time commitment."

TARDINESS

It is the expectation of the DNP-NA Program that all students arrive to commitments on time. Responsibility and accountability for meeting course, clinical, and program obligations is a fundamental component of professionalism. Tardiness includes reporting late for classes, didactic commitments, journal club, clinical, and/or any other required program obligations. It also includes taking excessive time for lunch or breaks in the clinical area. Tardiness is documented in Typhon by the course faculty, program administrator, academic support coordinator, or DCE.

If a student knows that he/she will be late, he/she should make every effort to notify the course instructor. For clinical tardiness, the student must also notify the clinical site coordinator via phone. Students failing to report within one hour of the scheduled start time will receive an unexcused absence and will be charged one vacation day. Tardiness during the administration of an exam will be handled according to the testing policy. Tardiness is considered unprofessional behavior and will not be tolerated.

CONFERENCE REQUIREMENTS

Students are required to attend a minimum of one state and/or national anesthesia conference (i.e., LANA or AANA annual conference) and obtain a minimum of 25 conference hours prior to graduation. Students must accrue 75% of the offered CEUs (i.e. If 20 CEUs are offered, the student should accrue 15 CEUs) to count toward their state or national conference requirement. Conference hours must be documented in Typhon.

LEAVE POLICY

Vacation and Sick Leave: During the DNP-NA program, a total of 15 days of vacation will be allowed, this includes both scheduled vacation and sick days. Vacation will not be granted during the first five semesters of the DNP-NA Degree Program. All vacation must be requested as instructed by the Director of Clinical Education. Students should not schedule vacation or travel plans prior to approval. Vacation requests received after the published deadline may not be granted.
1. No more than five vacation days can be used in succession.
2. No vacation can be taken during October, November, and December during ANES 7750.
3. Vacation may not always be granted during enrichment site rotations and off-shift rotations.

4. Vacation will not be granted during scheduled didactic time and may not be granted during the last 30 days of the program.
5. Students exploring practice opportunities (e.g., interviews) must use vacation time for their absence(s).
6. Students calling in sick on a clinical day and/or a clinical lab day must notify the clinical coordinator of the site as soon as possible (via phone call or text messaging). Students should be respectful of the coordinator's personal time (i.e. Students should not call the coordinator at 12:00 am, please use your judgment and wait until a more appropriate time). The student should also log this day in the Typhon scheduling system as a Sick day. The student should send a notification email to the Director of Clinical Education and the graduate nursing academic support coordinator.
7. Any student missing clinical time due to illness may be required to provide the Office of Health and Wellness documentation prior to returning to the clinical area.
8. Students should refer to the DNP-NA Degree Program Handbook and the University's "Illness/Injury Policy" for absences exceeding three or more days. Excessive absences may result in disciplinary action.
9. Students that exceed the allotted 15 vacation days will be required to make up the clinical days during the final semester as scheduled by the Director of Clinical Education. Students may be held past graduation for make-up of absences exceeding 15.
10. If clinical case requirements are not obtained due to excessive absences, a student's graduation date may be deferred to obtain graduation requirements.
11. Students sent home from clinical for any reason will be charged a vacation day. Students must notify the Director of Clinical Education if he or she is sent home.
12. For additional information regarding vacation days, clinical makeup days, and clinical absences, see the specific clinical practicum syllabi.

Leave due to Inclement Weather: In case of severe weather (snow, ice, freezing rain, hurricane, tornado, etc.), the University may cancel classes. Please note that University closures do not impact clinical practicum courses due to the geographical diversity of the clinical sites. Hence, students are expected to attend clinical as originally scheduled while taking the necessary precautions for traveling. In consideration of student safety, the ultimate decision concerning personal safety during inclement weather is the responsibility of the student. If personal safety is threatened and the student does not attend clinical, the student must contact the clinical coordinator and the Director of Clinical Education. Missing clinical due to inclement weather will result in one clinical makeup day in which students will be allowed to make up that day on designated days in between semesters and may include weekends.

Additional Leave:
1. Holidays:
    a. The Program recognizes the following holidays during student clinical rotations (Labor Day, Thanksgiving, Christmas Day, New Year's Day, Good Friday, and Independence Day). When a holiday falls on a weekend or a non-clinical day, the student may or may not be granted a "day off" (*example: if New Year's day*

occurs on a Sunday, the student may not be granted the Friday before or the Monday after off). In addition, time off may not be given on the actual holiday.

    b. During student rotations to clinical sites, the clinical coordinator reserves the right to request that a student attend clinical on a designated holiday. If this occurs, the student should notify the Director of Clinical Education so that the student can be granted the holiday at a later date.

2. Educational Leave:
   a. Time used for educational purposes is granted at the discretion of the Program Administration.
   b. A maximum of 10 educational leave days will be granted.
   c. If approved, educational leave may be used to attend the AANA, LANA conferences, and/or other educational conferences or review courses.
   d. During these conferences, the student will be required to attend specified components of the conferences as designated by the Program Administration. Failure to attend the required components will result in the student being charged one vacation day for each missed component.
   e. Students are required to upload proof of attendance into the student tracking system (Typhon).

3. Jury Duty:
   a. Students are responsible for notifying the Program Administration upon notification of jury duty.

4. Military Leave:
   a. DNP-NA students who belong to the National Guard and reserves of the U.S. Armed Forces may be granted up to two weeks of military duty leave.
   b. To be granted military leave, the student must be in good standing with the program.
   c. The student is responsible for didactic course work while on leave.
   d. The student is required to coordinate their training so as not to interfere with their clinical commitment.
   e. The student is required to present official military orders to the program director at least 60 days prior to the assigned leave.

5. Bereavement Leave:
   a. Students are eligible for three (3) consecutive bereavement days to attend the funeral of an immediate family member. Immediate family is defined as parent or guardian, brother, sister, spouse, dependents (including stepchildren), parent-in-law (mother-in-law, father-in-law), grandchildren, grandparent, and great grandparent.
   b. Should a student wish to attend the funeral of a family member or a close friend not defined herein as "immediate family," the student must use vacation days.

6. Leave of Absence:
   a. A request for a leave of absence is subject to approval by the Program Director. The Program Director may set the conditions that the student must meet to remain enrolled. Every effort is made to assist the student. The Program's administration reserves the right to dismiss any nurse anesthesia student who requires an extended period of leave.

ILLNESS/INJURY POLICY

All students with health conditions (illnesses, infections, injury, etc.) which necessitate an absence from didactic or clinical assignment or an extended absence of 3 or more days must notify their instructors/faculty, Director of Clinical Education, Program Administration, and the Director of Campus Health and Wellness. The student may continue in the program with the written approval of his/her physician. Following the absence, the student may return to class and/or the clinical environment after obtaining a physician's written consent regarding the student's ability to participate in all activities to fulfill program requirements. The student must contact the Student Health & Wellness Office regarding how to obtain a Return to Class/Clinical form. If a student has been absent due to flu-like symptoms (fever, cough, sore throat, and body aches), the student must be cleared by their primary healthcare provider to return to class. The student must provide medical documentation to the Office of Health & Wellness for a return to class authorization.

An illness requiring an absence that prevents the completion of course work because of circumstances beyond the student's control may necessitate the process for "I" grade, withdrawal, or resignation. The student must initiate the appropriate process following established guidelines in the current catalog.

COVID-19 ILLNESS AND EXPOSURE

COVID-19 and other infectious disease protocols will be followed as dictated by the University regarding on campus activities and students will adhere to clinical facility policies when on clinical rotation. Each clinical facility may have different guidelines regarding return-to-work status and quarantine procedures, and the student will follow all hospital policies as long as developed with CDC guidance and the health and safety of the staff in mind.

CONTROLLED SUBSTANCES POLICY

Franciscan Missionaries of Our Lady University DNP-NA Program's controlled substance policy guides students in the safe and professional handling of all controlled substances while in the clinical setting. The purpose is to ensure patient care remains safe and students are protected against potential harm or allegations.

As a licensed Registered Nurse practicing in LA, students are bound by the Louisiana State Board of Nursing Nurse Practice Act regarding the handling and administration of narcotics and other controlled substances. These guidelines are designed to provide additional guidance and are not meant to replace the LSBN's regulations. Students are responsible for reviewing the LSBN Nurse Practice Act to clarify student responsibilities regarding these substances. Failure to follow these guidelines may result in dismissal from clinical and/or the program.
1. Students should access controlled substances only for their patients after discussing the anesthesia plan with their preceptor.
2. Students should only withdraw controlled substances in the presence of the CRNA or physician anesthesiologist assigned to the case.
3. Students may not "waste" or "witness" a waste of any controlled substance for, or with, another anesthesia student.

4. Students should label all medications appropriately and should not administer any medication not properly labeled unless the medication is to be administered immediately and in its entirety.
5. Students must create a "free text" or "quick note" in the electronic health record indicating how much medication is being left with the anesthesia provider prior to leaving each clinical day.
6. Students should report any suspicious activity related to controlled substances to the clinical coordinator and the Director of Clinical Education. Likewise, students are required to notify the clinical coordinator and the Director of Clinical Education if he/she is involved in a controlled substance discrepancy.
7. Students should verify that there are no controlled substance discrepancies after completion of each case and at the end of their clinical shift.

SUBSTANCE ABUSE POLICY

All students are required to perform in accordance with the professional standards and ethical codes as outlined by the AANA Code of Ethics and University Code of Conduct. Violations of these guidelines may be grounds for dismissal from the program.

Students are required to comply with random or scheduled substance testing. The DNP-NA program reserves the right to randomly test students for illicit substances. Should a student be considered high risk or if there are concerns expressed by clinical faculty over possible illicit substance or alcohol use, the program reserves the right to test the student in accordance with University policy. Positive test results may be grounds for immediate dismissal.

ACCIDENT & HEALTH INSURANCE

All DNP-NA students are required to carry health insurance while enrolled in the program. In addition, the university provides Accidental Injury Insurance for all students enrolled in a clinical program or science laboratory course. This insurance only covers injuries resulting from an accident occurring while participating in assigned laboratory or clinical activities. Expenses incurred from injuries resulting from such an accident that require medical care or treatment and are provided at an emergency room, hospital outpatient department, clinic, or doctor's office, will be payable at 100% of the Reasonable and Customary charges up to a maximum of $5,000 per accident. Please note that this is a secondary policy and will only pay claims after the student's primary insurance has paid. The student must submit an incident report to the Health and Safety Office within 24 hours of the accident. The Director of Campus Health & Safety will assist the student in filing a claim with the claims company for this secondary insurance.

CLINICAL INCIDENT REPORTING

Student Injury Reporting and Treatment: To ensure maximum protection for the student and Franciscan Missionaries of Our Lady University in the event of an accident resulting in injury while a student is on the University campus or any assigned Clinical agency, the following applies:
1. The student will immediately notify the clinical coordinator, the Director of Clinical Education, and the Director of Campus Health & Wellness.
2. If medical attention is required, the student will report to the Emergency Department as directed by the clinical coordinator, assistant program director, program director, or

Director of Campus Health & Wellness. In conjunction with the Director of Campus Health & Wellness, the student must submit a University Safety Report. The student must follow the clinical agency protocol as determined by the agency.

3. The student will present their primary insurance card to the health care provider.
4. The Director of Campus Health & Wellness will assist the student in filing a claim with the claims company for the secondary accident insurance.

Patient Incident Reports (University Safety Report): Any injury or unusual occurrence involving any persons (e.g. patient, patient family, visitors, etc.) in the clinical area, must be reported to the clinical coordinator immediately. The student will notify the Director of Clinical Education via telephone within 12 hours of occurrence. Failure to notify the Director of Clinical Education may result in dismissal from the program. A University Incident Report form must be completed and submitted in the online course learning system within 24 hours. The Director of Clinical Education will determine if a University Safety Report is required for submission. If the incident occurs during an outside clinical rotation, the protocol of the clinical agency must also be followed.

Blood and Body Fluid Exposure Protocol: Students are treated for exposure to blood and body fluids during clinical rotation according to the protocol of the clinical facility. The cost of treatment is paid for by the student's primary health insurance then by the secondary accident policy provided by the University. The full exposure protocol to be followed by Our Lady of the Lake Regional Medical Center (OLOLRMC) is in the Office of Health and Wellness Manual. Clinical coordinators at outside clinical rotation facilities should be contacted for individual facility protocols.

"Clean" Needle Stick & Laboratory Injury Protocol: In the event of a "clean" needle stick, or any other injury, in the Anesthesia Skills lab, first aid is to be rendered to the injured person and referral made to the OLOLRMC Emergency Care Unit or the student's personal physician. Details of the incident and the referral made must be documented on a college incident report and forwarded to the Director of the Office of Health and Wellness. Needle sticks in any other setting must follow the blood and bodily fluid exposure protocol.

TIME LOGS AND CLINICAL CASE DOCUMENTATION

Students are required by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) to maintain an accurate record of clinical experiences. Documentation in the electronic student tracking system is an important method to quantify and qualify the student's clinical experience, learning activities, and time commitment. The students are provided with an orientation to Typhon documentation during Clinical onboarding. The student is responsible to log their activity using Typhon Group's NAST Student Tracking System at https://www.typhongroup.net. This system enables the program administration to monitor the clinical and learning experiences of each student. Additionally, students will be provided the University DNP-NA Clinical Case Log Pocketbook to assist in maintaining accurate records. The student is responsible for accurately maintaining each record and for saving documentation in a manner protective of patient privacy for the verification of cases.

Revised 8.17.2025

It is imperative students maintain a current case and time log record. Students who fail to maintain accurate records in a timely manner may face an unsatisfactory clinical practicum grade, disciplinary action, and/or dismissal from the program. Falsification of the student's record is grounds for dismissal from the program. Case counts are used to ensure that each student will be eligible to graduate and sit for the National Certification Exam.

Time Log Definitions and Perioperative Descriptions:
1. Clinical Preparation Time:
   a. Time spent preparing to administer anesthesia care. This time includes preparation of care plans for daily case assignments and time spent preparing the clinical area for anesthesia care (e.g. room set up).
2. Preanesthesia visit time:
   a. Time spent performing preoperative anesthetic evaluations. The time spent discussing (in person or via telephone) your preanesthetic assessment/anesthesia plan with faculty is included.
3. Preoperative Visit
   a. The time spent assessing the patient preoperatively, communicating the anesthetic care plan to his/her supervising anesthesia provider(s), assuring perioperative comfort to the patient, and answering any questions the patient may have regarding the anesthetic. Upon completion, the student must consult with an anesthesiologist and/or CRNA before implementing the plan. *As required by the COA, without exception, the student nurse anesthetist must conduct a pre-anesthesia assessment on each patient that the student anesthetizes.*
4. Procedure Documentation:
   a. The time spent performing any technical skill related to anesthesia delivery (i.e. invasive line placement, ultrasound evaluation, regional anesthesia administration, etc.).
5. Postanesthesia visit time:
   a. Time spent performing postoperative anesthetic evaluations. The time spent discussing (in person or via telephone) your postanesthetic assessment/anesthesia plan with faculty is included. The student must complete a post-operative evaluation on every patient he/she is actively involved in anesthetic management. This visit is an evaluation in the immediate recovery phase and again in the post-recovery phase within twenty-four hours. It allows the student to evaluate his/her anesthetic technique and management. *As required by the COA, a student nurse anesthetist must conduct a post-anesthesia assessment on each patient that the student anesthetizes, except ambulatory care patients and early discharges.*
6. Class time:
   a. Time spent during scheduled lecture time. Time includes all scheduled classes, both face-to-face and remote instruction (i.e. Zoom meetings).
7. Conference Time:
   a. Time spent attending presentations, conferences, Morbidity & Mortality, or Grand Rounds meetings.
8. Study Time:
   a. Time spent reading and studying while at home.

9. Research Time
    a. Time spent on conducting research unrelated to the DNP project (i.e. Grand Rounds, Morbidity & Mortality presentations, etc.).
10. DNP Project Time:
    a. Time spent working on the DNP project.
11. Sick:
    a. Time absent from scheduled shift.
12. Vacation:
    a. Eight hours for each day of vacation you are granted.
13. Anesthesia Time
    a. Clinical hours in which the student delivers anesthesia.
    b. Defined by "Anesthesia Start" and "Anesthesia Stop" times.
14. Total Clinical Hours
    a. The total hours the student is present at the clinical site for an assigned clinical shift. The COA interprets total clinical hours as time spent in the actual administration of anesthesia (i.e. anesthesia time) and other time spent in the clinical area (i.e. in-house call, preanesthesia assessment, postanesthesia assessment, patient preparation, OR preparation, and time spent participating in clinical rounds. Since the total clinical hours are inclusive of total hours of anesthesia time, this number must be equal to or greater than the total number of hours of anesthesia time.
    b. Thirty minutes should be deducted daily for lunch.
    c. Reported separately from Anesthesia Time.

Guidelines for Counting Clinical Experiences:
Students are required to adhere to the COA Guidelines for Counting Clinical Experiences, which is available in each Clinical Practicum Moodle course page. Students can access the document published by the COA here. In order to count a case on the Cumulative Case Count Record the following conditions must occur:
1. The student has performed the induction or
2. The student has conducted the emergence or
3. The student has participated in the case for at least one hour

The student can only take credit for a case where they personally provide anesthesia for critical portions of the case. A student may only count a procedure (e.g., CVL placement, regional block, etc.) that he or she actually performs. Students can take credit for an anesthetic case only if they are personally involved with the implementation and management of the anesthetic. Please note the following for cases that cannot be counted by the student:
1. Observations cannot be counted as a clinical case.
2. The student shall not count coffee breaks or lunch relief as a case.
3. Two students may not count the same case unless both students meet the above criteria.
4. Likewise, two students should not be assigned to the same case, except when the case provides learning opportunities for 2 students due to the acuity of the case.

ANESTHESIA MANAGEMENT PLANS

Anesthesia Management Plans are an important part of providing safe patient care. The anesthesia management plan is a patient and case-specific plan for the anesthesia care of a patient that is designed to reinforce didactic and clinical knowledge. Each student is responsible for completing a management plan for each assigned case including cases that are assigned the day of surgery. The plan may be written or verbal (refer to clinical practicum syllabi for specific details). The management plans are to be submitted and/or discussed with the clinical preceptor before the case. Failure to do so may result in being sent home from clinical with faculty documentation as a clinical unsatisfactory. Management plan submission and grading are delineated in each practicum syllabus. Students should refer to their corresponding course syllabus for a more detailed description.

Management plans are not to be simply copied from one source. Doctoral education requires the synthesis of information from multiple sources to formulate comprehensive knowledge of anesthesia implications. Although collaboration is encouraged among students regarding anesthetic implications, each student is expected to provide original work on his/her management plan. Plagiarism, of any form, is not tolerated and may lead to program dismissal. Students should refer to the "Academic Dishonesty" policy located in the Franciscan Missionaries of Our Lady University Student Handbook.

Anesthesia management plans should be uploaded to Typhon and logged on the program tracking form. All required anesthesia management plans must be completed prior to program completion.

CLINICAL EDUCATION OVERVIEW

The Nurse Anesthesia Program seeks to enter partnerships with clinical sites that enhance student learning. Clinical sites are obtained to provide students with unique clinical experiences and are designated as a "Required" or "Enrichment" Clinical Site.

Required: A required site is a primary clinical site that meets one or both of the following criteria: An institution (1) where students receive 50% or more of their total clinical experience and/or (2) that is necessary to enable a program to meet the Council's standards.

Enrichment: An enrichment site is a non-primary clinical site that meets one or more of the following criteria: an institution (1) where students receive less than 50 percent of their total clinical experiences; (2) that is not necessary to enable a program to meet the Council's standards; (3) that is unlikely to have a significant impact on a program's ability to continue complying with accreditation standards and policy/procedural requirements; and/or (4) that is utilized solely as an enriching experience.

Student rotations are assigned by the Director of Clinical Education, in consultation with the Program administration, and centered on enhancing the student's clinical learning experience. Clinical sites and rotations are subject to change and without advanced notification due to unforeseen circumstances and matters related to the hospital, the student, and/or the anesthesia group. All students will not rotate to all sites. Out of state sites will require that the student acquire a nursing license in that state. Licensure costs, additional background checks, as well as

housing expenses, are at the student's expense. The varying clinical sites are necessary to fulfill the clinical requirements as set forth by the Council on Accreditation of Nurse Anesthesia Educational Programs and Franciscan Missionaries of Our Lady University program requirements. Rotations outside the city of Baton Rouge are required of each student. When a student's rotation schedule is altered due to the student's clinical performance, placement at another clinical site is not guaranteed and attainment of clinical case requirements may not be possible.

Clinical Shifts: The majority of clinical shifts are day shifts. However, students are also required to attend clinical during evening shifts, night shifts, weekends, and holidays (call experience). The COA denotes call experience as any clinical experience between 5 pm and 7 am M-F, and weekends. Every attempt is made to rotate off shifts and holidays in an equitable fashion. In order for students to not exceed allowable hours in a reasonable workweek, students asked to stay late for shifts should be compensated by earlier time off during the week upon approval of the clinical coordinator. Students must arrive at the clinical site with sufficient time to adequately prepare for their clinical cases. Student clinical hours are tracked daily in the electronic student tracking system as described above.

Clinical Hours: As mandated by the COA, student time commitment should not exceed 64 hours per week (averaged over 4 weeks) to ensure patient safety and student well-being. This time commitment includes the sum of hours spent in class and clinical. Although some students may be assigned to a 24-hour call shift, a student cannot provide direct patient care for longer than 16 continuous hours. Students are also required to have a minimum of 10 hours rest between scheduled clinical shifts.

Clinical Supervision: As mandated by the COA, students must be supervised at all times during the administration of an anesthetic. At no time should a certified registered nurse anesthetist or anesthesiologist supervise more than 2 students concurrently. A student is prohibited from supervision by a non-CRNA or non-anesthesiologist provider (i.e. anesthesiology assistant, non-anesthesia physician, etc.).

Clinical Coordinator: The Standards for Accreditation of Nurse Anesthesia Programs require that the Nurse Anesthesia Program appoint a CRNA coordinator for each clinical site who possesses a Master's degree (Doctoral preparation preferred) to guide student learning. The Program maintains communication with the coordinator and provides them with information pertaining to student expectations, rotations, schedules, and program level updates.

Falsification of Records/Information: Each DNP-NA student is expected to complete all University and patient care records with accuracy and honesty. This includes but is not limited to, the anesthesia record, Typhon case count, incident reports, and clinical case evaluations. Falsification of records may result in disciplinary action up to and including dismissal.

HIPAA REGULATIONS

HIPAA (Health Insurance Portability and Accountability Act) regulations are intended to protect patient privacy. Therefore, "any information that relates to the past, present, or future physical or mental health of an individual, or provides enough information that leads someone to believe the

information could be used to identify an individual must be kept in strictest confidence" (NCSBN, White Paper: A Nurse's Guide to the Use of Social Media, 2011, p. 1). All students must adhere to the HIPAA regulations to protect patient privacy. **The student must sign the HIPAA syllabi statement during orientation to the Nurse Anesthesia Program.** Breaches of patient confidentiality or privacy can be intentional or inadvertent and can occur in a variety of ways (via written or verbal communication, i.e. through clinical documentation or social media communications, or any other means referencing information pertaining to patient care). Failure to comply with the HIPAA regulations will result in dismissal of the student from the nurse anesthesia program. The Louisiana State Board of Nursing is notified in all cases of HIPAA violations.

STUDENT BEHAVIOR IN THE CLINICAL SETTING

DNP-NA students are expected to honor the University's Community Creed, Student Code of Conduct, and Honor Code. Clinical practicum courses within the anesthesia program are integral to completion of the academic process. At the discretion of course faculty and the Program Director, behavioral and conduct issues occurring within these courses will be handled according to the Academic Honesty section or the Student Code of Conduct section located within the student handbook. For more information, please see the Franciscan Missionaries of Our Lady University's Student Handbook.

Expectations Related to Student Behavior in the Clinical Setting: Clinical competency is an essential outcome of Franciscan Missionaries of Our Lady University Nurse Anesthesia Program. Graduates must meet the performance levels for the program's terminal objectives that are based on the entry requirements for safe practice as a nurse anesthetist. Each student is expected to meet the behavioral criteria outlined in the Program Core Performance Standards for Admission and Progression for the Nurse Anesthesia Program and the policies outlined in the DNP-NA Program Handbook. Behaviors inconsistent with the Core Performance Standards may result in disciplinary action, including unsatisfactory clinical or didactic evaluation, clinical remediation, clinical probation, or dismissal. Examples of behaviors that may warrant disciplinary action include, but are not limited to:

Inability to maintain the behaviors identified in the Core Performance Standards:
1. Failure to incorporate caring behaviors in patient care
2. Inappropriate behavior such as abusive language or disruptive behavior
3. Unprofessional and/or disrespectful behavior towards the clinical preceptors, anesthesiologists, anesthesia faculty, clinical coordinators, or other surgical team members (i.e. lacking respect, honesty, positivity, enthusiasm, punctuality, hygiene, organization, etc.)
4. Falsification of documents or medical records
5. Theft of hospital or University property
6. Violations of University and/or hospital social media policies

Behavior inconsistent with course requirements:
1. Failure to meet minimum criteria for clinical performance
2. Incomplete, inadequate, or falsification of anesthesia management plans
3. Falsification of clinical evaluations
4. Falsification of Typhon experiences

5. Inadequate preparation for an anesthetic
6. Failure to meet Dress Code (i.e. lack of name badge or proper OR attire)

Behavior inconsistent with clinical policies:
1. Failure to report to your assigned clinical area on time
2. Failure to report to your assigned clinical area in a timely manner that would allow for complete preparation for the case
3. Prolonged lunch (greater than 30 mins) or breaks (greater than 15 mins). Students must adhere to these times, unless otherwise identified by coordinator and/or preceptor.
4. Leaving clinical before the end of a scheduled shift without notifying the anesthesia faculty or clinical coordinator
5. Failure to make pre- or post-operative rounds when possible
6. Violation of institutional or departmental policies
7. A pattern of abusing leave (i.e. calling in before long weekends and holidays)
8. Inappropriate mobile device use

Unprofessional or uncaring behaviors:
1. Failure to follow-up on an anesthetic complication
2. Mistreatment of a patient
3. Failure to follow instructions or carry out assigned duties in clinical area
4. Behavior inconsistent with the "Community Creed"
5. Behavior inconsistent with the AANA's "Code of Ethics"
6. Behavior inconsistent with appropriate use of social media (i.e. posting information or digital media on social media sites related to any clinical matter)

Behaviors which may jeopardize patient safety:
1. Failure to perform machine check-out
2. Failure to notify supervisor of patient or equipment complication
3. Improper calculation of drug dose or fluid requirements
4. Failure to notify anesthesia faculty or course director of a clinical incident within the prescribed time period
5. Failure to obtain and report pertinent patient history or status to the preceptor.
6. Administering anesthesia without proper supervision in violation of COA supervision requirements
7. Failure to report a clinical incident or drug error
8. Medication error (selection/dosage/administration)
9. Administration of any drug without awareness or permission of a supervising clinical instructor
10. Failure to inform supervising clinical instructor of intra-operative changes or events
11. Failure to follow direct orders from clinical faculty in the clinical area except in instances where following those orders would clearly jeopardize patient safety.
12. Failure to demonstrate an acceptable level of clinical knowledge and program level specific skills in the clinical setting

Please note, this is not an exhaustive list of clinical infractions that can result in disciplinary action.

Revised 8.17.2025

CLINICAL EVALUATIONS

Evaluation is not negative; rather, it is an essential assessment of progress toward the achievement of an objective. A student's clinical performance is to be evaluated daily by the supervising anesthesia provider (nurse anesthetist or physician anesthesiologist). Students may not be evaluated by anesthesia assistants or other physicians. It is the student's responsibility to request an evaluation from the instructor. A student's clinical performance will be evaluated using the following clinical performance rankings: exemplary, satisfactory, borderline, unsatisfactory, or unsafe.

- **Exemplary** – Performing at an exceptional level in relation to the competency descriptor; consistently performs at a level near excellence; student exhibits exceptional clinical skills and knowledge in nurse anesthesia and delivers high quality anesthesia at all times
- **Satisfactory** – Demonstrates safe clinical performance in correspondence to the competency descriptors on the daily clinical evaluation tool; conforms to the competencies outlined on the clinical evaluation tool and clinical practicum course student learning outcomes; sufficiently completes all requirements and clinical expectations
- **Borderline** – Barely acceptable or marginal clinical performance in any of the any of the four major clinical domains or in any competency descriptor listed on the clinical evaluation tool
- **Unsatisfactory** – Unacceptable clinical performance in any of the four major clinical domains or in any competency descriptor listed on the clinical evaluation tool; deficient in delivering anesthesia as evident by substandard clinical performance.
- **Unsafe** – risky or dangerous clinical performance that likely poses a threat to patient safety; clinical performance that jeopardizes patient outcomes; actions that directly violate standards of care.

Clinical Evaluation Tool

The clinical evaluation tool is utilized to define clinical outcomes, validate behaviors, provide feedback, identify areas needing improvement, and improve patient quality and safety. The student's performance is evaluated based on course level expectations:

Course Level Expectations- Clinical Level of Proficiency:
1. ANES 7710- Novice: Needs constant guidance, relies on 'rules', disorganized, task-oriented
2. ANES 7720- Advanced Beginner: Needs help setting priorities, grasps basic flow of anesthetic, able to be left alone for short periods of time
3. ANES 7730- Competent: Organized, efficient, plans for problems, able to be left alone
4. ANES 7740- Proficient: Sees situation as a whole, requires minimal direction
5. ANES 7750- Experienced: Functions autonomously at the level of an entry level CRNA provider

The daily clinical evaluation tool contains FOUR major clinical domains defined as: Preoperative Evaluation and Preparation; Anesthetic Management; Technical Skills; and Professional Aspects. Each major clinical domain contains multiple competency descriptors that allow the student's performance to be measured using the described clinical performance rankings (Exemplary, Satisfactory, Borderline, Unsatisfactory, Unsafe) described above.

Critical competencies are delineated below. As time progresses in clinical training, certain skills are identified as CRITICAL COMPETENCIES. These critical competencies provide a blueprint for student progression and describe competencies expectations that are critical for that clinical practicum. The CRITICAL COMPETENCIES are marked with an asterisk (*) on the evaluation tool.

Clinical Practicum- Critical Competency Delineation:
ANES 7710:
- Selects and prepares indicated medications
- Performs anesthesia machine check
- Applies all needed monitors
- Recognizes limitations of knowledge & ability
- Demonstrates accountability, honesty and integrity

ANES 7720:
- Selects or administers appropriate preoperative medication & treatments
- Selects and prepares indicated medications
- Performs anesthesia machine check
- Applies all needed monitors
- Collaborates with other members of anesthesia & surgical team
- Exhibits a responsive attitude to teaching and learning
- Recognizes limitations of knowledge & ability
- Accepts and adjusts to constructive criticism
- Demonstrates accountability, honesty and integrity

ANES 7730:
- Performs an adequate preanesthetic patient interview & physical assessment
- Selects or administers appropriate preoperative medication & treatments
- Selects and prepares indicated medications
- Performs anesthesia machine check

- Correctly assembles & tests necessary equipment & monitors
- Provides correct rationale for management choices
- Intraoperative ventilatory management
- Applies all needed monitors
- Collaborates with other members of anesthesia & surgical team
- Exhibits a responsive attitude to teaching and learning
- Recognizes limitations of knowledge & ability
- Accepts and adjusts to constructive criticism
- Written & verbal communication is effective and appropriate to level
- Demonstrates accountability, honesty, and integrity
- Applies requisite knowledge to provide safe, ethical, evidence-based anesthesia care services

ANES 7740: Student in this practicum should be performing at the clinical level of Proficiency: "*Proficient: Sees situation as a whole, requires minimal direction.*" As such, all competency descriptors are critical and should be performed at the level of Proficient excluding advanced technical skills, such as insertion of CVP and PA catheters and regional and neural blockade.

ANES 7750: Student in this practicum should be performing the clinical level of Experienced: *"Experienced: Functions autonomously at the level of an entry level CRNA provider.*" As such, all competency descriptors are critical and should be performed at the level of Experienced.

PROCEDURAL GUIDELINES FOR CLINICAL INFRACTIONS

Student clinical progression is determined by the successful completion of each clinical practicum. Students are continuously evaluated using the clinical practicum course student learning outcomes, the clinical evaluation tool, student behaviors in the clinical setting, and program core performance standards. Student progression in each clinical practicum takes into account clinical performance, clinical evaluation scores, clinical preceptor feedback (verbal and written), faculty feedback (verbal and written), clinical site feedback, and Typhon log documentation.

It is the program's responsibility to uphold the integrity of the nurse anesthesia profession and protect patients from harm. The program reserves the right to immediately dismiss a student from clinical training to protect patient safety. The Program Director or the Assistant Program Director reserves the right to determine if the initial occurrence/event is significant enough to warrant immediate institution of probation or program dismissal (i.e., falsifying documents, violating code of ethics, under the influence, drug diversion, lacking accountability, more than one medication error, and any other actions that endangers patients).

In the event a student demonstrates unsatisfactory progress, the program may utilize the Clinical Decision-Making Guidelines to determine the type of intervention required. Events that may warrant intervention and/or disciplinary action include: Failure to comply with Handbook Policies (University, SON and/or DNP-NA), Failure to meet course student learning outcomes, Demonstrating behaviors inconsistent with the Program's Core Performance Standards, Suboptimal Clinical Performance (an adverse or undesirable clinical event; negative feedback on

clinical evaluation; borderline, unsatisfactory, or unsafe mark on the clinical evaluation; etc.), or Failure to meet clinical expectations as defined in the clinical practicum syllabi.

<u>Clinical Decision-Making Guidelines for Suboptimal Clinical Performance or Behavior</u>
1. <u>Awareness of negative feedback</u>- Negative feedback is considered verbal/written negative feedback from a preceptor or clinical coordinator via evaluation, text, phone, in-person communication, or email. It is the expectation of the program that students review daily evaluations every 48 hours. The student is required to notify the Director of Clinical Education (DCE) and the clinical coordinator of a borderline mark in any critical competency or an unsatisfactory or unsafe mark on any competency in the evaluation tool **within 12 hours of receipt or becoming aware of the mark**.
2. <u>Validation of the negative evaluation</u>- All negative feedback of clinical performance warrants validation to allow administrators to understand the student's perspective and to clarify the situation. The DCE or CRNA faculty may contact the clinical coordinator and/or clinical preceptor for further discussion involving the incident. Validation will be accomplished by discussing the student's performance with the student, the clinical preceptor, the clinical coordinator, the program faculty, clinical team members, and/or direct observation of the student in the clinical setting.
3. <u>Consultation with Program Administration-</u> Following validation, The DCE will consult with program administration, and the next plan of action will be determined. The next plan of action will include one of the following: return to clinical in good standing, verbal warning, counseling, remediation, probation, convening of a CEC, and/or any other actions deemed necessary, including program dismissal.
4. If the need for a CEC is determined, the student will be notified within 5 business days of the decision.

<u>Clinical Evaluation Committee (CEC)-</u> The following members will be invited and eligible to participate in the CEC: all program faculty, program administration, and clinical coordinator (if applicable). The voting members will consist of four people and must include the Director of Clinical Education, one program administrator, and a program faculty member. The final voting member will be elected by the voting members. The DCE will serve as the chair of the committee. In the event of a tie vote, another program faculty who is in attendance will be the tie-breaking vote. In the event that a voting member is unable to attend future meetings, he/she will elect another member to attend and vote in their place.

The student has the option to bring a representative to the CEC meeting. This person can be from the following: university faculty, CRNA preceptor or coordinator, or FRANU SRNA representative. The student can waive their right to bring a representative to the meeting. The student's representative cannot function as legal representation. The committee will make a reasonable attempt to accommodate the student's representative's schedule by notifying the student of the date and time of the meeting in advance and allowing for remote attendance if necessary.

The purpose of the CEC is to review the student's progression in the practicum. If the committee believes that the performance warrants intervention, the student may be placed on probation until an improvement in performance or failure to improve in performance is realized. Options

available to the CEC include written warning, clinical conferencing, remediation, requiring additional activities/assignments, placement on probation, determination of probation terms, removal from probation, extension of probation, or dismissal from the Program.

Clinical Probation

Probation can be initiated when recommended by the CEC or program administration. If a student is placed on clinical probation, the student's status may be made known to the clinical coordinator where the student is scheduled. Most details regarding the clinical remediation or probation are kept confidential; however, there may be situations where information is shared with clinical sites and preceptors on a need-to-know basis. When made aware, the clinical coordinator and selected preceptors may be better able to assist the student's progression. At any time, a student may be removed from the clinical rotation due to unsatisfactory and/or unsafe practice.

1. The probationary terms will outline the objectives that the student must meet to remove himself/herself from probation at the end of the 30 calendar day probationary period. Probation terms may include but are not limited to the following:
    a. Clinical training will be resumed at a clinical site decided by the DCE, CEC, and in coordination with the clinical site coordinators.
    b. Development of an individualized probation plan.
    c. A clearly defined timeframe.
    d. Objectives will be measurable and realistic.
    e. Probation plans may include weekly meetings, care plans, reading assignments, case studies, quizzes, faculty mentoring, increased supervision, designated preceptors, neuro-psychometric assessments (ex: fit for duty evaluation), or any other assignment to facilitate improvement in clinical performance.
    f. Adherence to all assignments as outlined on the probation plan including timely submission.
    g. Student and faculty-signed contract outlining the objectives of the probation along with the student's acknowledgment of their willingness to meet the terms. The student is informed of the personalized performance plan and understands adherence to this plan is required to return to good standing. This will also allow for some change or modification regarding dates and deadlines when in the best interest of all parties and after discussion and agreement with the student. The student will never have their deadline shortened or modified in a way that places the student at a disadvantage regarding preparation, unless requested by and or approved by the student. This is to allow for changes due to unforeseen circumstances related to clinical faculty availability, Acts of God (hurricanes, floods, COVID-19), or student life events. The well-being of the student along with the rehabilitative and formative nature of the probation should always be at the forefront of decisions made.
    h. Request at least one clinical evaluation every day.
    i. Limited clinical responsibilities as outlined in the probation terms which may include prohibition to:
        a. Rotate to off-site enrichment sites

b. Participate in off-shift rotations
c. Engage in 2:1 supervision
d. Assign self to preferred cases/preceptors

Students are expected to meet all objectives of the Probation Terms and demonstrate satisfactory clinical performance (as determined by the CEC) to return to good standing. Failure to meet the objectives during the probation may result in an extension of the probation terms and or program dismissal. Likewise, if the student's behavior/performance does not improve as a function of feedback, remedial efforts, and/or time, the student may be dismissed from the program as determined by the CEC and program administration.

2. Following completion of the probationary period, the CEC will determine the student's clinical standing. The student will be notified of the CEC's decision within 5 business days.
    a. Removal from Probation and Return to good standing is dependent on meeting objectives and evaluations demonstrating improved performance. At the end of the specified probationary period, the CEC will review the student's records and evaluations. The student will be allowed to address the committee. If the committee determines that the student has met the probation requirements, the student will be notified and removed from probationary status. The committee will vote with a quorum present. A simple majority rules.
    b. Probation Extension. At the end of the specified probationary period, the CEC will review the student's records and evaluations. The student will be allowed to address the committee. If the committee determines that the student has not met the probation requirements or that student fails to improve clinical performance, probation will be extended. The same probation process as described above will occur (i.e., Defining terms, expectations and time). The committee will vote with a quorum present. A simple majority rules.
    c. Dismissal from Program. At the end of the specified probationary period, The CEC may recommend dismissal from the Program. A student may be dismissed for a variety of reasons, including but not limited to failure to meet probationary objectives, failure to rectify clinical deficiencies, unacceptable clinical performance, or behavior unbecoming of a student in the clinical setting. If the Program Director dismisses the student, notification and justification will be made in writing. The Dean will be notified in writing and will be provided with all related documentation for his/her review. The student will be notified of the dismissal decision. Likewise, the program reserves the right to ask any student to withdraw from the program whose health, conduct, or clinical performance makes it inadvisable for him/her to remain in the program. The student may be suspended from clinical training for impending program dismissal. The student will be informed of clinical suspension through a formal process.
3. The maximum length of a continuous probation period will not exceed 90 days. At the completion of 90 days, the student will either be dismissed from the program or return to good standing.

GENERATIVE ARTIFICIAL INTELLIGENCE USE POLICY

Large Language Models, such as ChatGPT, CoPilot, Gemini, etc., are generative artificial intelligence (AI) tools that can be used to create new content, including audio, code, images, text, simulations, and videos. Generative AI relies on large language models that use advanced statistical techniques to analyze and understand natural language data and generate human-like responses. Because of these capabilities, generative AI has raised issues concerning academic integrity, authorship, and student engagement. The DNP-NA program has always embraced technological advances and believes generative AI can be a tool to help students in their academic endeavors.

The scientific community as a whole has had to adjust to the introduction of generative AI. Several publishers of well-respected peer-reviewed journals have published guidelines on the use of generative AI in publications. Consensus appears to have been reached on authorship. Most believe generative AI programs cannot be listed as authors since they cannot be held to account for the work. Many publishers have also embraced the use of generative AI to help construct manuscripts. Two examples of this include *JAMA* and its network of journals, which have a [Use of AI in Publication and Research Policy](#), and Nature journals, which have [Artificial Intelligence Guidelines](#). The use of these tools is allowed as long as they are used ethically, and full disclosure of their use is included in the manuscript. This either occurs in the Methods section (especially true if AI tools were used to help with conducting the study) or in the Acknowledgements section of the article.

The DNP-NA program has decided that the use of generative AI will be decided by the instructors of each course. Each instructor for each course will determine whether they will allow the use of generative AI. Instructors can decide to prohibit the use of generative AI, or they may permit the use of generative AI. Each course will include information on the course syllabus and Moodle page regarding the use of generative AI. Please note, it is a violation of academic integrity to submit work generated by AI and claim it to be your own original work. All written assignments for every course (including discussion forum posts) must also be submitted to a Turnitin submission link. Turnitin has a feature that can detect work it believes was generated using AI. Currently, submissions that return a 20% or lower AI score have a much higher likelihood of being a false positive. These scores are marked with an asterisk. According to Turnitin, the rate of false positives is less than 1% when the AI score is above 20%. Also, according to Turnitin, the algorithms used to detect AI-generated content err on the side of caution and can miss up to 15% of AI-generated content. This means a submission could have a score of 35% when up to 50% of the content was generated by AI.

There are some limits on what types of submissions can be accurately checked for AI-generated content. Currently, Turnitin's AI Detector only analyzes prose sentences or blocks of text that are written in standard grammatical sentences. It will not analyze other types of writing such as lists, bullet points, or other non-sentence structures. If a submission contains both, only the prose or blocks or text will be analyzed. Submissions also have to be Word documents, and they have to be at least 300 words long. If they are shorter, they will not be analyzed. Initially, there was an upper limit on the number of words in a submission (~25,000 words).

Syllabus Statements for Generative AI Use

If you are permitted to use generative AI in a course, the following statement will appear on the course syllabus within the Artificial Intelligence (AI) Use section and on the Welcome page within Moodle.

> Students are permitted to use generative AI to help complete assignments in [Course Number and Name]. When generative AI is used to help with an assignment, it must be documented. An in-text citation must be added to the sentences, sections, etc. where generative AI was used. At the end of every submitted assignment, a Generative AI Use Acknowledgement Statement must be included. In this statement, you will acknowledge whether or not you used generative AI to complete the assignment. If you used generative AI to help complete the assignment, you must include a description after the acknowledgement statement that documents the name of the generative AI tool used, the date and time when you used it, and outline how it was used including specific prompts used to generate content and specific content generated by the AI program for the prompts. If this information is not included and TurnItIn reports an AI percentage of 20% or higher, this will be considered a potential violation of academic integrity, and you will be subject to disciplinary action if it is determined that AI was used but not documented by the student. The majority (greater than 60%) of any coursework submitted must be your own original work. Generative AI should be used to augment your work and not to complete the assignment for you. No submissions should have an AI percentage of 40% or higher.

If you are prohibited from using generative AI in a course, the following statements will appear on the course syllabus within the Artificial Intelligence (AI) Use section and on the Welcome page within Moodle.

> Students are prohibited from using generative AI to help complete assignments in [Course Number and Name]. Every assignment submitted must include a Generative AI Use Acknowledgement Statement acknowledging that you did not use generative AI to complete the assignment. Any assignment submitted that receives an AI percentage of 20% or higher will be investigated as a violation of academic integrity, and disciplinary action will be taken if it is determined that AI was used to complete the assignment.

What Does and Does Not Constitute Generative AI Use

Generative AI can be a powerful tool that can help you in your educational journey. Some of these uses are not considered using generative AI to complete assignments and would not be required to have a citation when AI use is permitted in a class, or would not be considered a violation of this policy if generative AI use is prohibited in a class. This is not an exhaustive list, but it is meant to be a guide. When in doubt, contact the course faculty for guidance.

Not Considered Generative AI Use

- Using AI to brainstorm ideas for an assignment
- Using AI to find sources to help you complete an assignment or to better understand a topic
- Creating an outline for an assignment
- Creating an outline of course materials to help you focus your studies

Revised 8.17.2025

- Creating multiple-choice questions based on course content to help you master content
- Checking and correcting grammar, style, tone, and clarity

Uses such as these are considering using generative AI as a tool to help you learn and master course content. These are not considered violations of this policy and would not require a citation and explanation. If these are the only ways generative AI was used, the Generative AI Use Acknowledgement Statement would state you did not use generative AI to complete the assignment.

Considered Generative AI Use (Requires citation and explanation)
- Highlighting or imputing sentences, paragraphs, or sections of an assignment and prompting AI to rewrite
- Using AI to write drafts of sections of an assignment and then rewriting portions of them
- Using AI to write complete sentences or paragraphs

Uses such as these require an in-text citation, which includes the name of the generative AI used and the month, day, and year it was used (ChatGPT 5, June 26, 2025). In the Generative AI Use Acknowledgement, you will need to provide specific information about how the tool was used, including specific prompts. Screenshots of prompts and the output from the tool are a good idea. Remember, the majority of your submitted assignments must be your own work when you are permitted to use generative AI. If the majority of an assignment is AI-generated, that is a violation of this policy. If a course prohibits the use of generative AI, uses such as these are considered violations of this policy.

Prohibited Generative AI Use (All courses)
- Using AI to complete online quizzes and exams
- Using AI to write or complete entire assignments and submitting them as your own
- Using AI to write or complete entire assignments and reworking them and then submitting them (Remember, when AI use is permitted, the majority of every assignment must be your own work. If you have AI write or complete entire assignments and you only edit them, this is not your own work.)

Uses such as these are considered violations of this policy, whether AI use is permitted in a course or not. These examples are not using AI as a tool, but using it to do your coursework for you. There could be exceptions to the second and third bullet points since there are university faculty who require generative AI use to complete assignments. If a course assignment mandates the use of generative AI to complete it, the course faculty will dictate what constitutes acceptable and unacceptable use of generative AI in that specific course.

<div align="center">

Generative AI Use Acknowledgement Statement

</div>

All assignments submitted require the addition of a Generative AI Use Acknowledgement Statement on the last page of your submission. The statement acknowledges whether or not you used generative AI to complete the assignment. If you state that you used generative AI, underneath the statement, you need to provide details and specific prompts that show how you used it. This should include the name of the program used, date and time of use, specific prompts inputted in the program, specific outputs from the program, and how this was incorporated into your assignment.

If you did not use generative AI to complete an assignment, the statement should read:
I, [student's name], acknowledge that generative AI was not used to complete the assignment.

If you did use generative AI to complete an assignment, the statement should read:
I, [Student's Name], acknowledge that generative AI was used to complete the assignment. I attest that the majority of the submitted assignment is my own work.

<div align="center">

Potential Violations

</div>

If a student is suspected of violating this policy, the course faculty member, along with either the Program Director or Assistant Program Director, will meet with the student to discuss the suspected violation and provide the student an opportunity to provide an explanation and present any relevant information. The course faculty member and Program Director/Assistant Program Director will determine what the next step will be. If the course faculty member and Director believe the TurnItIn AI detector was incorrect, no actions will be taken. If they both still suspect the student violated this policy, a Student Conduct Reporting Form will be completed. The steps outlined in the Determination of Violations of Academic Integrity policy will then be followed.

The program will follow the university's Determination of Violations of Academic Integrity policy found in the Student Handbook. Examples of disciplinary action can include receiving a zero on the assignment up to dismissal from the program. Students are allowed to appeal the disciplinary action following the steps outlined in the Appeals Procedure section of the Determination of Violations of Academic Integrity policy.

Students are responsible for documenting specific information about how generative AI was used to help complete an assignment. This should include screenshots of specific prompts entered into the generative AI program and the specific content generated by the AI program for the prompts. A simple citation or reference to the generative AI webpage used does not constitute evidence. Citations need to be included in the assignment where generative AI was used. They should be formatted as (AI Tool Name, Month Day, Year it was used). If you use generative AI, it is your responsibility to ensure the accuracy of the information provided, especially if citations and references are provided by the generative AI program. Generative AI programs have been shown to produce inaccurate or completely false information at times.

Course faculty will need to review the Turnitin submissions for all written assignments to ensure coursework submitted does not exceed 20% when it is prohibited or 40% if generative AI is allowed in the course. This percentage is found on the Similarity Report generated by Turnitin when a student submits an assignment. Students do not see this percentage. If the percentage exceeds 40%, the student will be notified, provided information on what information was flagged as created by AI, and given an opportunity to resubmit the assignment with no penalty. After resubmission, if it still exceeds 40%, a meeting with the student and one member of the program administration will be scheduled to discuss the issue and determine what the next step will be. If generative AI is prohibited in your course and a submission exceeds 20%, a meeting with the student and one member of program administration should be scheduled to discuss the issue and determine what the next step will be. False positives have been seen with AI scores up into the 70s, especially when Grammarly has been used by the student.

These guidelines are designed to evolve as generative AI programs evolve. Changes to these guidelines will be communicated to all students and course faculty in the program via email and Moodle.

SEE EXAM POLICY AND COMPREHENSIVE EXAMINATION POLICY

Beginning September 1, 2016, the Self-Evaluation Exam (SEE), administered by the National Board of Certification and Recertification, has been proven to be predictive and reflective of the National Certification Exam (NCE). SEE scores provide an opportunity for students to analyze their strengths and weaknesses to help them prepare for the NCE. Comprehensive exams encompass subject matter taught throughout the nurse anesthesiology program as well as subject matter included on the National Certification Exam (NCE). An outline of NCE content can be found at: SEE Resources | NBCRNA. The DNP-NA Program passing score as determined by the program is minimum of 435. Pass and Passing will be understood as a score of 435 for the remainder of this policy.

- The SEE will serve as the DNP-NA Program's comprehensive exam.
- Students will begin taking the SEE during year three of the program, and the Program will cover the cost of the first two attempts on the SEE through course fees.
- Program administration will notify students when they can schedule their SEE.
- Students are encouraged to schedule their SEE as soon as possible as testing space and times are limited.
- Information regarding the SEE, including current cost can be found at: SEE Resources | NBCRNA.
- Students must pass the SEE with a minimum score of 435 to complete ANES 7230 successfully.
- If the student does not score a passing score (435) on any attempt, they will be counseled by anesthesia faculty and required to either test again until they pass or complete the Custom APEX 5-week remediation plan to satisfactorily complete ANES 7230.
- If the remediation plan is required, the student must complete it to complete ANES 7230 successfully or they may demonstrate a successful passing score on the SEE by taking the exam again. In this case, the student would not be required to complete the Custom APEX 5-week remediation plan in order to graduate; however, it is recommended that students complete the remediation as opposed to focusing on repeating the SEE multiple times. These subsequent attempts must be made more than 5 weeks prior to graduation as this will leave time to complete the Custom APEX 5-week remediation plan.
- The student will be required to pay for and schedule additional SEE Exam(s) if he/she decides to attempt the SEE more than twice. Students who are unsuccessful in passing the SEE or completing the Custom APEX 5-week remediation plan by the completion of ANES 7230 will receive an incomplete "I" in this course and will not be eligible to graduate. A student will receive a passing grade once he/she scores the minimum passing score on the SEE or satisfactorily completes the Custom APEX 5-week remediation plan.
- If a student achieves a 435 or higher on their first attempt but their score decreases below 435 on any subsequent attempt, they will be required to complete the Custom APEX 5-week remediation plan, unless the average of their two highest attempts is a 435 or greater.
- If the average is 435 or higher, the student will be allowed to continue with their plan of study. This policy prevents the lack of continued preparation and studying for subsequent SEE attempts and board exam preparation.

- The student will be eligible for graduation once the passing grade in ANES 7230 is recorded.
- ***Failure to achieve the minimum passing SEE score or complete the Custom APEX 5-week remediation plan prior to completion of ANES 7230 will delay or prohibit graduation.***

*Effective **January 1, 2026**, per the NBCRNA, all SEE examinees must wait **60 days** in between each SEE attempt, and new program enrollees will be limited to **four** total SEE attempts during the duration of their nurse anesthesia program.*

APPENDIX A
Franciscan Missionaries of Our Lady University
Nurse Anesthesia Program
Student Acknowledgement of Policies and Procedures

I have been informed of and will comply with the policies and procedures in the University Catalog, the University Student Handbook, the DNP-NA Program Handbook, and the Course Syllabi. I am aware that this information is subject to change at any time by authority of Franciscan Missionaries of Our Lady University and the School of Nursing. If changes are made, I will be informed of the changes via electronic communication modes (e. g., University Web site, e-mail, or Moodle).

Student's Printed Name: _____

Student's Signature: _____

Date: _____

APPENDIX B

Estimated Additional Program Expenditures

AANA Student Membership
Books
Uniforms
Laptop (for testing)
Laptop Privacy Screen
National or State Educational Conferences
Housing during Clinical Rotations
ACLS/BLS/PALS Certification
Louisiana RN License (optional multistate license)
Mississippi RN License (for students rotating to Mississippi)
Urine Drug Screen/Background Check
Annual TB Test/Flu Shot
Graduation Fee
NBCRNA Certification Exam Fee
ExamSoft software
<u>*this is not an all-inclusive list of program expenditures*</u>