Dear Clinical Preceptors and Clinical Coordinators:

Thank you for your continued support and willingness to precept the University of North Dakota (UND) College of Nursing Nurse Anesthesia Track students. Your expert guidance provides our students with the opportunity to apply their newly acquired clinical skills and knowledge in preparation for an advanced practice nursing role. As a busy professional with numerous demands and responsibilities, your commitment to this process is commendable and demonstrates your personal dedication to the continued development of qualified nurse anesthesia professionals and the nurse anesthesia profession, as a whole. Each student will gain confidence and validation through your exemplary teaching, coaching, and role modeling. It is difficult to imagine successfully preparing qualified professionals without the collaboration of our anesthesia colleagues!

The University of North Dakota Nurse Anesthesia Track Clinical Preceptor Guide contains documents to support the clinical affiliation between our program and your organization. This handbook is intended to be used with students who are enrolled for the 2011-2012 academic year. Please review the information enclosed in this handbook. This guide will be reviewed and updated on a regular basis, so please feel free to make comments for future improvement. Should you have any suggestions that will make the clinical experience more valuable for students, please contact any Nurse Anesthesia faculty member.

The UND Nurse Anesthesia faculty values your service as an excellent clinician, clinical preceptor, and or clinical coordinator and welcomes your recommendations for making this role more effective and satisfying. Please feel free to contact us if you have any questions or concerns.

Sincerely,

Darla J. Adams, PhD, CRNA
Program Administrator
(701) 777-4545
darla.adams@und.edu

Kevin C. Buettner, MS, CRNA
Assistant Program Administrator
(701) 777-4509
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<table>
<thead>
<tr>
<th>Name</th>
<th>Title &amp; Roles</th>
<th>Phone Numbers</th>
<th>Email Addresses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Darla Adams</td>
<td>PhD, CRNA Program Administrator</td>
<td>701-777-4545</td>
<td><a href="mailto:darla.adams@und.edu">darla.adams@und.edu</a></td>
</tr>
<tr>
<td>Kevin Buettner</td>
<td>MS, CRNA Assistant Administrator</td>
<td>701-777-4509</td>
<td><a href="mailto:kevin.buettner@und.edu">kevin.buettner@und.edu</a></td>
</tr>
<tr>
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<td>701-777-4521</td>
<td><a href="mailto:james.sperle@und.edu">james.sperle@und.edu</a></td>
</tr>
<tr>
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<td>PhD, WHNP-BC Associate Professor &amp; Associate Dean for Research</td>
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<td><a href="mailto:cindy.anderson@email.und.edu">cindy.anderson@email.und.edu</a></td>
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<td>Kevin Kern</td>
<td>PharmD Instructor</td>
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<td><a href="mailto:kevin.kern@und.edu">kevin.kern@und.edu</a>; <a href="mailto:kkern@altru.org">kkern@altru.org</a></td>
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University of North Dakota College of Nursing

Nurse Anesthesia Track

Accreditation
The University of North Dakota Nurse Anesthesia Track is fully accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) until 2021, which is recognized by the US Department of Education and the Council for Higher Education Accreditation (CHEA). The address is Council on Accreditation of Nurses Anesthesia Educational Programs, 222 South Prospect Avenue Suite 304, Park Ridge IL 60068-4001. Telephone (847) 692-7050 ext 1160. Fax (847) 692-7137. Email: accreditation@aana.com. The Master of Science (M.S.) Program in Nursing is accredited by the Commission on Collegiate Nursing Education (CCNE) until 2020 and approved by the North Dakota Board of Nursing through 2021.

History
The University of North Dakota (UND) Nurse Anesthesia Track is housed in the College of Nursing. The program was founded in 1986 at the Grand Forks campus, with the first students admitted to the twenty-four month program in August 1987. The Master of Science program has been accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs since its inception.

Philosophy
The faculty and students of the Nurse Anesthesia Track believe that:
1. Students enrolled in the nurse anesthesia program must be provided education of such quality that they are able to excel in the practice of anesthesia.
2. Nurse anesthetists provide a valued and definitive role in the delivery of anesthesia care.
3. It is the right of all individuals to receive high quality anesthesia care conducted according to recognized tenets of patient safety and respect.

The educational program for the preparation of nurse anesthetists is conducted as a shared responsibility between student and faculty. Students must be intensely committed to achieving their goals through a consistent demonstration of purpose, motivation, responsibility to patients and colleagues, independence of thought, creativity and professional demeanor. Faculty is committed to the responsibilities of serving as resources, facilitators of learning and professional role models. The program is committed to each student through individualized instruction and counsel.
University of North Dakota College of Nursing

Our primary goal is to provide the graduate student with an advanced scientific knowledge base and a comprehensive array of clinical skills that hallmark the standard of care in anesthesia practice.

Our obligation to graduates is to prepare them for full participation in the delivery of anesthesia care in concert with other members of the health care team. Graduates will be competent in independent judgment as professional nurses practicing in the field of anesthesia.

Our responsibility to the community is expressed in the provision of an educational program that will prepare the nurse anesthetist to meet the health care needs of the public in a competent and ethical manner.

Our obligation to the profession is to prepare a nurse anesthetist who will serve as a valuable resource in support of the goals of the American Association of Nurse Anesthetists and the advancement of the profession of nurse anesthesia.

The anesthesia program adopts the College of Nursing Mission Statement: The mission of the College of Nursing is to educate individuals for professional roles in nursing and nutrition. The College strives to enhance the health of people in the region by preparing leaders in nursing and nutrition through innovative, accessible programs, and significant faculty and student scholarship and service.

Organizational/Communication Chart

Department of Practice and Role Development Chair

Nurse Anesthesia Track
Program Administrator

Program Review & Evaluation Committee

Assistant Program Administrator
and Program Faculty

Advisory Council

Clinical Coordinators

Students
The broad-based objectives of the Nurse Anesthesia Track are to prepare nurses who are:

- Seekers of new knowledge by means of critical thinking, creative reasoning, and scientific investigation in anesthesia nursing practice and theory;
- Decision-makers who utilize advanced knowledge in anesthesia and ethical principles in serving the needs of individuals and society;
- Clinical specialists with expertise and advanced knowledge in anesthesia nursing who function independently and collaboratively with other health care team members;
- Leaders capable of determining strategies which stimulate change in nursing practice, the profession and the health care delivery system, and
- Effective communicators of anesthesia nursing knowledge in oral and written forms.

As such, graduates of the Track must be able to:

1. Perform a pre-anesthetic interview and physical assessment using patient history, physical examination, review of medical records, and appropriate laboratory data.
2. Develop an appropriate anesthesia care plan consistent with the overall medical and nursing regimen and established guidelines, utilizing appropriate principles of basic and behavioral sciences in protecting patients from iatrogenic complications.
3. Administer physiologically sound anesthetics to patients of all ages and physical status categories, utilizing universal precautions and the principles of general and regional anesthesia as they apply to the diagnostic, operative and physiologic condition of the patient.
4. Perform comprehensive and appropriate equipment checks and position or supervise positioning of patients to assure optimal physiologic function and patient safety.
5. Recognize and evaluate physiologic responses to the anesthetic, implementing appropriate action that reflects the use of sound physiologic and pharmacologic principles, referring to a physician those responses beyond the nurse anesthetist's ability to manage consistent with practice standards and policies.
6. Use and interpret a broad variety of monitoring modalities including electronic monitors, taking appropriate action based on sound principle of anesthesia management.
7. Evaluate the post-anesthetic course of the patient and recommend a course of action directed toward correcting any anesthesia-related complications.
University of North Dakota College of Nursing

8. Serve as a resource person, team leader or team member, in the areas of acute care, cardiopulmonary resuscitation, respiratory therapy and fluid management and assist others to expand their knowledge in these areas.

9. Perform within appropriate medical, legal, and ethical standards of anesthesia practice, accepting responsibility and accountability for own practice, recognizing personal and professional strengths and limitations, and taking appropriate actions consistent with valid self-awareness.

10. Demonstrate active professional commitment and involvement in the state organization for nurse anesthetists, and, active commitment and involvement in quality management activities.

Student clinical objectives for each year and semester are located in the UND Nurse Anesthesia Track Student and Faculty Handbook.
# University of North Dakota College of Nursing
## Nurse Anesthesia Track Curriculum Outline

### Semester I (Fall) – 15 credit hours
- N500 Theories & Concepts in Nursing (3)
- N504 Advanced Pharmacology I (3)
- N510 Advanced Physiology/Pathophysiology (3)
- N521 Foundations of Anesthesia Practice (3)
- N585 Advanced Health Assessment* (3)

### Semester II (Spring) – 13 credit hours
- N506 Advanced Pharmacology II (3)
- N507 Anesthesia Seminar & Clinical Practicum I (4)
- N511 Advanced Physiology/Pathophysiology II (3)
- BIMD 510 Basic Biomedical Statistics (2)
- ANAT 591 Anatomy for Anesthetists (1)

### Semester III (Summer) – 8 credit hours
- N517 Anesthesia Seminar & Clinical Practicum II (5)
- N520 Professional Rose Development for Nurse Anesthetists (3)

### Semester IV (Fall) – 10 credit hours
- N502 Evidence for Practice (3)
- N527 Anesthesia Seminar & Clinical Practicum III (5)
- N597 Advanced Clinical Practicum (2)

### Semester V (Spring) – 10 credit hours
- N597 Advanced Clinical Practicum (8)
- N997 Independent Study** (2)

### Semester VI (Summer) – 9 credit hours
- N597 Advanced Clinical Practicum (9)

### Semester VII (Fall) – 11 credit hours
- N508 Nurse Anesthesia Review Course (1)
- N597 Advanced Clinical Practicum (10)

**Total Credits: 76**

*Offered in online format with one week of campus learning

**Thesis option is available
Students receive their first summative clinical performance evaluation at the completion of their first Summer semester. Thereafter, as clinical participation increases students receive formative clinical evaluations at mid-term, followed by a summative clinical evaluation at the end of the semester.

Student self-evaluations are required each time a formative and summative clinical evaluation is completed by clinical faculty. Mid-term and end of semester clinical performance evaluations are based on clinical objectives consistent with the student’s level in the program and are prepared by members of the clinical faculty through review of daily formative evaluations and personal interactions with the student. Daily performance evaluation records are completed by CRNA preceptors and are kept on file in the clinical areas of all clinical affiliates. Students receive daily feedback on their clinical performance (i.e., written and/or oral).

Evaluations are forwarded by each student to the Assistant Administrator’s office at the end of each semester for review and filing. In order to track student’s clinical progress, photo copies of each mid-term and end-of-term evaluation from all clinical experiences must be retained in individual 3-ring binders. The evaluations should be made available by students to each clinical coordinator as students move from clinical site to clinical site. Students sign a consent form titled Intersite Communication Release permitting the sharing of student clinical evaluative information amongst clinical coordinators.

The original copy of these evaluations is forwarded to the Assistant Program Administrator from each clinical site for review and placement in the student’s permanent file. Information on the evaluations is reviewed by the clinical coordinator only and is used for assessment and planning purposes should the need for focusing on specific clinical concerns exist.

Students are provided with self-evaluation forms for completion prior to the mid-term formative and end-of-semester summative evaluation conferences and are intended to reflect the student’s perception of his/her progress. A photocopy of these evaluations must also be placed in the student’s three-ring binder. The original will be forwarded to the Assistant Program Administrator along with the original clinical coordinator evaluation form.

The self-evaluation and faculty evaluation are discussed simultaneously at the evaluation conference. Specific examples of clinical performance are cited in each evaluation, along with strengths, weaknesses, and suggestions and goals for improvement during the next evaluation period. Students are required to sign their evaluations after reading them, and are free to make written comments. These evaluations become a permanent part of the student’s record.
University of North Dakota College of Nursing
Student Responsibilities

Professionalism and Integrity

Patient rounds, case preparation, reading, meeting attendance and other types of inquiry often have to be performed on the student's own time. Students shall also conduct themselves in a professional and respectable manner during class time, clinical time and during professional meetings and seminars. All students should be dressed neatly and appropriately when on hospital property (no shorts, sweat suits, etc.) See the various hospitals' dress code policy.

Professional Decorum

The Student Registered Nurse Anesthetist (SRNA) is a representative of the specialty, the profession, the University, and the clinical affiliates. The maintenance of a professional appearance and demeanor facilitates the acceptance of the profession and the individual by patients and other health professionals. It is expected that students will assume responsibility for observing the following guidelines on professional attire and demeanor. While attending classes or laboratory sessions on the University of North Dakota campus, students may express their personal choice in dress. Choices should be tasteful and neat.

While participating in any Program activity outside of the University of North Dakota campus, such as the clinical sites, students should present a professional appearance. Lab coats, program identification/name tags MUST be worn while on the hospital grounds and at all clinical training sites. The hospital or university issued identification badge must also be worn at all times while on those sites. All SRNAS must be clearly and continuously identified as students during clinical experiences. No other credentials will be displayed on the student I.D. badge.

Professional attire should be observed whenever students are on hospital or institutional sites. This includes visits to study in the hospital library, didactic examinations administered in the hospital facility, major group meetings etc. Jeans, sweat pants and shirts, sandals and casual accessories are not considered appropriate in these settings. During clinical experiences, students are expected to follow policies and procedures put forth by each clinical site. Students may not wear artificial nails or dangly jewelry in the operating room or while caring for patients.

Guidelines for Clinical Conduct

As the program offers new clinical challenges, the developing professional bears the responsibility of representing the profession to patients, the public, and other members of the health care team. The following guidelines should be observed in representing the profession:

- Consistently demonstrate your concern for the welfare of the patient.
- Be thoughtful and professional when obtaining the history and performing the physical exam.
University of North Dakota College of Nursing

- Treat patients with respect and dignity, both in your interactions with them, and in your patient related discussions with other professionals.
- Demonstrate your concern not only for the medical problem but also for the total patient.
- Conscientiously respect the rights of your colleagues.
- Characterize all of your professional encounters with cooperation and consideration.
- Strive to assume an appropriate and equitable share of patient care duties.
- Approach your responsibilities with dedication.
- Be truthful in all professional communications.
- When meeting multiple demands, establish patient-centered priorities to guide you in completion of such work.
University of North Dakota College of Nursing

University of North Dakota Nurse Anesthesia Track
Position Description

**Position Title:** Clinical Coordinator

**Description:** A Certified Registered Nurse Anesthetist (CRNA) who coordinates the clinical education of students enrolled in the UND Nurse Anesthesia Track.

**Qualifications:**
1. CRNAs must maintain Registered Professional Nurse and Advanced Practice Nurse Licensure with the applicable State Board of Nursing where the clinical site is located. Evidence of current licensure will be kept on file with the UND Nurse Anesthesia Track.
2. CRNAs must be certified by the Council on Certification of Nurse Anesthetists and maintain that certification as required by the Council on Recertification of Nurse Anesthetists.
3. Copies of current CV/resume, certification, and licensure will be on file with the UND Nurse Anesthesia Track. Upon renewal of certification and licensure, copies will need to be furnished to the program.
4. Minimum of one (1) year of experience as a CRNA.
5. Currently active in clinical practice.
6. Managerial skills and experience necessary to coordinate student clinical activities.
7. Effective interpersonal and leadership skills necessary to foster productive working relationships.
8. Effective oral and written communications skills.

**Position Summary:**
1. Assist the Nurse Anesthesia Faculty in the coordination of clinical education of students enrolled in the nurse anesthesia program.
2. Directs and participates in the clinical education of the students scheduled at the institution.
3. Continually maintains communication regarding student education and/or issues with the Nurse Anesthesia Faculty.
4. Oversees the quality of education that students are receiving in the clinical area.
5. Responsible for communicating student issues with clinical preceptors at the site.
6. Provides or appoints another to provide the student with an overall performance summary at the conclusion of their clinical experience.

**Position Responsibilities:**
A CRNA clinical coordinator is assigned at each clinical affiliation to serve as the primary student contact person and student resource. They have several duties, which include but are not limited to:
1. Serve as a liaison between the affiliate site and the UND Nurse Anesthesia Program.

2. Convey suggestions from their clinical site for program improvement or enrichment.

3. Sit on the Nurse Anesthesia Admissions Sub-Committee.

4. Provide on-going communication, guidelines and feedback to students assigned to clinical site.

5. Sit on the Nurse Anesthesia Track Advisory Committee.

6. Provide case assignments to students.


8. Inform program faculty of any student performance that is below average, unsatisfactory, or unprofessional.

9. Function as second-line problem resolution if dispute arises between student and clinical faculty.
Position Title: Clinical Preceptor

Description: A Certified Registered Nurse Anesthetist (CRNA) or Anesthesiologist who supervises the student registered nurse anesthetist (SRNA) during the administration of anesthesia.

Qualifications:
1. Current certification by the Council on Certification of Nurse Anesthetists or licensed in medicine holding anesthesia specialty training. Evidence of current certification will be available upon request.
2. Current and appropriate professional nursing/physician licensure with State in which the affiliate site is located and anesthesia services are provided. Evidence of current licensure will be available on request.
3. Participates in continuing education and faculty development activities which enhance their role as clinical educators of nurse anesthesia students.
4. Consistently demonstrate competency in their area of responsibility and be knowledgeable in the teaching and learning process.

Position Summary and Responsibilities:
1. Supervises the SRNA during the administration of anesthesia.
2. Recognizes pathophysiological states of the patient that are pertinent to the anesthetic.
3. Discuss the patient’s status and rationale for the anesthetic management with the SRNA and the anesthesiologist (if applicable).
4. Evaluates the SRNA’s clinical performance and constructively discusses this performance with the SRNA and Nurse Anesthesia Program Administration.
5. Provides the SRNA with learning opportunities that are enhanced through discussion and demonstration.
6. Informs the Program Director, Associate Program Director, or Affiliate Clinical Coordinator at the site of pertinent SRNA performances.
7. Supervises the SRNA in the immediate post-operative care and evaluation of the patient.
8. Encourages the SRNA to ask questions and think critically.
Nurse Anesthesia Track Forms

Student Daily Care Plan
Student Weekly Clinical Evaluation
Clinical Evaluation of Student Performance
Clinical Instructor Self Evaluation
Clinical Release Time
## DAILY CARE PLAN

<table>
<thead>
<tr>
<th>Date</th>
<th>Pre-operative Diagnosis</th>
<th>Age</th>
<th>Gender</th>
<th>Allergies</th>
<th>Proposed Surgery</th>
<th>Anatomic Position</th>
<th>NPO</th>
<th>ASA</th>
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<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
<td>Elective / Urgent</td>
<td>Emergent</td>
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| Physical Exam: |  HT _____ WT _____ kg | BP _____ HR _____ RR _____ T _____ SaO2 _____ |

| Airway Class: | Neck Movement: | Dental: |

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<th>Review of Systems:</th>
<th>Laboratory and Diagnostic Studies:</th>
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<td>RESP:</td>
<td>HGB _____ HCT _____ PLTS _____</td>
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<tr>
<td>CV:</td>
<td>Electrolytes: BUN _____ Cl _____ CO2 _____</td>
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<tr>
<td>NEURO:</td>
<td>Na _____ GLUC _____</td>
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<tr>
<td>HEP/ GI:</td>
<td>K _____ Creat _____</td>
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<td>Coag: PT _____ PTT _____ INR _____</td>
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<tr>
<td>RENAL:</td>
<td>Other:</td>
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<tr>
<td>OTHER:</td>
<td>Blood Type: Type and Cross _____</td>
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| Medications: | Previous Anesthesia History: |

### ANESTHESIA IMPLICATIONS

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### Surgical Implications:

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<td>MAC</td>
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### Other Concerns:

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### PHARMACOLOGIC PLAN

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<td>Emergence:</td>
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<td>Secondary Medications:</td>
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### FLUID MANAGEMENT

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<th>MAINT</th>
<th>DEFICIT</th>
<th>3rd SPACE</th>
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*Aug 2011*
**CASE MANAGEMENT**

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<th>EBL</th>
<th>FLUIDS</th>
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**CHALLENGES ENCOUNTERED**

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<tr>
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<th>Solution / Reasoning</th>
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<td>2.</td>
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Post-op Problems / Concerns

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Student ___________________________ Preceptor ___________________________ Date ____________

Aug 2011
College of Nursing  
Nurse Anesthesia Track  
WEEKLY CLINICAL EVALUATION

| Student Name: | Clinical Coordinator: | Clinical Site: |

<table>
<thead>
<tr>
<th>Evaluation Criteria</th>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
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<tr>
<td>DATE</td>
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<tr>
<td>Shift Hrs</td>
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<td>Preparations:</td>
<td></td>
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</tr>
<tr>
<td>1. Familiar with patient history (complete review of pt. records)</td>
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<td>1 2 3 4</td>
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<tr>
<td>2. Care Plan appropriate</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
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<tr>
<td>3. Knowledge about surgical procedure, anesthesia implications, airway implications, positioning</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
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<td>4. Secondary drug plan (Rx, low BP, high BP, arrhythmias, etc)</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
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<tr>
<td>5. Comprehensive equipment check &amp; report of problems</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
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<tr>
<td>Induction:</td>
<td></td>
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<tr>
<td>6. Starting IV’s, A-Lines</td>
<td>1 2 3 4</td>
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<tr>
<td>7. Administration of spinal or regional blocks</td>
<td>1 2 3 4</td>
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<td>1 2 3 4</td>
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<tr>
<td>8. Airway management/intubation skills</td>
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<td>9. Patient safety, including use of universal precautions, infection control measures, and protection from iatrogenic complications</td>
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<tr>
<td>Maintenance:</td>
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<tr>
<td>10. Integrates knowledge of surgical procedure with anatomy, physiology, pathophys, &amp; pharmacology</td>
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<td>1 2 3 4</td>
<td>1 2 3 4</td>
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<tr>
<td>11. Patient safety–monitors patient, interprets and utilizes noninvasive and invasive monitoring modalities. Recognizes and responds to problems appropriately</td>
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<td>1 2 3 4</td>
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<tr>
<td>12. Adjusts/administers anesthetic in accordance with patient needs</td>
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<tr>
<td>13. Appropriate fluid/blood component management</td>
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<tr>
<td>14. Common sense/independence in practice skills</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
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<td>Emergence</td>
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<td>15. Shows good judgment in discontinuing anesthetic, extubating, etc</td>
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<td>16. Monitors patient through admit to PACU</td>
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<td>17. Professional attitude/communication with instructor, surgeons, and peers. Accepts responsibility for own practice</td>
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<td>18. Demonstrates flexibility in dealing with change in patient caseload, assignments, or change in anesthetic plan/technique</td>
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Preceptor Signature:

June 2011
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### PERFORMANCE SKILLS SUPPORTING CLINICAL OBJECTIVES

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<tr>
<th>Unmet</th>
<th>Needs Improvement</th>
<th>Met</th>
<th>Excellent</th>
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#### PREPARATION

1. Familiar with patient history - appropriate anesthesia care plan

2. Comprehensive anesthesia equipment check & appropriate reporting of problems or malfunctions

3. Knowledgeable about surgical procedure and anesthesia implications - airway implications - positioning

4. Secondary drug plan developed (Rx, low BP, HTN, arrhythmia, etc.)

#### INDUCTION

5. Starting IVs, A-lines, etc.

6. Administration of spinal or regional blocks

7. Airway management/intubation

8. Patient safety, including use of universal precautions, infection control measures, and protection from iatrogenic complications

#### MAINTENANCE

9. Integrates knowledge of surgical procedure with anatomy & pharmacology


11. Adjusts/administers anesthetic in accordance with patient requirements

12. Appropriate fluid/blood component therapy (calculations, initiation of)

13. Common sense/independence in practice skills

#### EMERGENCE

14. Good judgment discontinuing anesthetic, extubating, etc.

15. Monitors patient through admit to PACU

#### COMMUNICATION & PROFESSIONALISM

16. Professional attitude/communication with instructor, surgeons, peers. Accepts responsibility and accountability for own practice

17. Demonstrates flexibility with changes in caseload, assignments, anesthesia plan/technique

*If a rating of “Unmet” or “Needs Improvement” is given, an accompanying statement must be included in the narrative and a plan for resolution incorporated into the goals for the next rating period.*
IN TERMS OF THE STUDENTS BASIC SKILLS, PLEASE COMMENT ON ANY OF THE FOLLOWING.

1. Readiness/Preparation for Clinical

2. Induction

3. Maintenance

4. Emergence

5. Communication & professionalism

6. Additional Comments/recommendations

7. Goal Setting

---

Overall Evaluation of Student’s Clinical Performance at this time is:
☐ Satisfactory ☐ Unsatisfactory (include comments and improvement plan)

HAS STUDENT PARTICIPATED IN THE FOLLOWING?

1. Airway and ventilatory management resource person
   If yes, in what patient care areas? ☐ PACU ☐ ER ☐ ICU ☐ Other
   ☐ Yes ☐ No

2. Cardiopulmonary resuscitation leader or team member
   ☐ Yes ☐ No

3. Quality management activities, i.e.; QA meetings, product trials, case conferences, journal club, etc.
   ☐ Yes ☐ No
   Examples:

4. Anesthesia outside the operating room, i.e.: MRI, cardio versions, Interventional radiology, etc.
   ☐ Yes ☐ No
   Examples:

   Number of Days Absent ___________ Date of Evaluation Conference ___________

SIGNATURES:

Clinical Coordinator

Student

Additional Signatures

Aug 2011
UND Nurse Anesthesia Specialization  
Clinical Instructor Self-Evaluation

Thank you for taking the time to answer the following questions and for returning to them to the clinical coordinator at your institution. On-going clinical instructor self evaluation promotes student learning and improves teaching effectiveness and professional accountability. Additionally, faculty self-evaluation is a requirement for accreditation with the COA. The data received will be used as a component of program evaluation and a determination of program quality. Ideally, clinical instructors will use the evaluation tool and individual data to reflect on their own teaching effectiveness. Thank you.

Clinical Instructor ____________________________________________________________________
Date: __________________________________________

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<tr>
<th>KEY:</th>
<th>1= Never 2= Seldom 3=Sometimes 4= Usually 5= Always</th>
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<tr>
<td>1. As a clinical instructor I review the student’s Care Plan and offer suggestions.</td>
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<td>2. As a clinical instructor I am available if help is needed in preparing the room for the day.</td>
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<td>3. As a clinical instructor I provide direction and rationale for interventions which occur during the course of the anesthetic</td>
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<td>4. As a clinical instructor I respond to student questions in a timely and appropriate manner.</td>
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<td>5. As a clinical instructor I give the student constructive criticism in private as opposed to criticism in front of other personnel.</td>
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<td>6. As a clinical instructor I seek input from the student concerning the anesthetic and after discussion allow the student to implement appropriate suggested changes.</td>
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<td>7. As a clinical instructor I encourage the student to grow in the field of anesthesia. I do this through constructive criticism, timely feedback, appropriate supervision, and praise for work well done.</td>
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Comments:
Nurse Anesthesia Track

CLINICAL RELEASE TIME REQUEST

DATE: ____________________________

STUDENT NAME: ____________________________

CLINICAL SITE: ____________________________

REQUEST # ______________

CLINICAL RELEASE TIME REQUESTED/REPORTED:

DATE(S): _______________ TIME/HOURS: _______________

PURPOSE FOR REQUESTING/REPORTING CLINICAL RELEASE TIME:

________________________________________________________________________

PROGRAM FACULTY COMMENTS:

________________________________________________________________________

☐ APPROVED ☐ NOT APPROVED

________________________________________________________________________

STUDENT SIGNATURE ____________________________ DATE _______________

________________________________________________________________________

CLINICAL COORDINATOR SIGNATURE ____________________________ DATE _______________

________________________________________________________________________

PROGRAM FACULTY SIGNATURE ____________________________ DATE _______________

UND is an equal opportunity/affirmative action institution

June 2011