Master of Science in Nursing
Family Nurse Practitioner Program
(MSN/FNP)

Family Nurse Practitioner Track
(Post Masters FNP)

Clinical Preceptor Guide
2016-2017

Western University of Health Sciences
College of Graduate Nursing
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Revised 7/2016
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Clinical Preceptor Information Overview

The Family Nurse Practitioner program is a graduate program that prepares Registered Nurses to provide community-oriented, family-centered primary care. It is expected that program graduates will meet the primary care needs of communities through collaborative practice with other health professionals. Family Nurse Practitioners offer a wide range of essential health services including:

- Health maintenance and promotion
- Prevention of illness and disability
- Primary care during the acute and chronic stages of illness
- Guidance and counseling of individuals and families
- Referral to other health providers and community resources as appropriate

The curriculum consists of 3 to 9 semesters depending upon whether the student is enrolled in the Post Masters FNP or MSN/FNP program and whether the student chooses the full-time or extended curriculum track. Clinical experience is integrated into all semesters. The clinical preceptor is a critical part of the nurse practitioner curriculum. Nurse Practitioner faculty from Western University will be assigned to follow the clinical progress of each student. A faculty member or contracted site visitor will make periodic visits to the student in the clinical setting and welcomes calls, e-mail, and other correspondence from the preceptor. This packet contains information that will assist you in understanding the role of the clinical preceptor and includes:

- Student, preceptor, and College of Graduate Nursing responsibilities
- Course curriculum overview
- Learning objectives
- Student evaluation sample forms (due each semester)
- Example Preceptor and Clinical Site Information Form

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Curriculum Overview

The curriculum consists of computer-based didactic courses, clinical experience, and intensive weekend seminars. The students attend these intensive weekends in Pomona, California, twice during each semester. During these seminars, the students participate in examinations, lectures, presentations, and skills demonstrations.

It is expected that a graduate of the Western University Family Nurse Practitioner program will:

- Be prepared to practice in under-served areas, if desired.
- Demonstrate cultural and ethnic sensitivity.
- Analyze the outcomes of care within the family and the community.
- Implement relevant theory and research in providing primary care.
- Demonstrate the family nurse practitioner role in primary care settings.
- Facilitate quality improvements and delivery of cost-effective health care.

Pre-Clinical Preparation:
Introduction to Advanced Physical Assessment is completed prior to students beginning their preceptored clinical practicum. During this class, students refine their history taking, physical assessment, problem focused exams, and documentation skills. They must pass all written examinations and demonstrate physical examination competency before proceeding on to clinical rotation sites.

Clinical Course Work:
Clinical course work in practice sites spans all semesters. The curriculum is designed to provide learning activities that require the student to acquire critical thinking and analytical skills. The didactic classes are divided into common and acute problems in the first semester and complex and chronic problems in the next two semesters. Focus is given to pediatric, geriatric, and women’s health issues in the third semester.
Outcome Competencies for Graduates

Graduates of the Western University of Health Sciences College of Graduate Nursing, as candidates for state and national certification will:

a) Critically analyze literature for the purpose of evidence-based advanced nursing practice, education and life-long scholarship.

b) Participate in the development of new nursing knowledge through the application and development of theory and research.

c) Apply knowledge from the humanities and physical, social, psychological, nursing, medical, and pharmacological sciences to professional decision-making to assess, provide, manage and evaluate quality health care within the professional and legal parameters of the role of the master’s prepared advanced practice nurse.

d) Provide individualized client and family-centered health care that demonstrates recognition of environmental interaction, life cycle requirements, diversity of socio-cultural values and beliefs among members of a dynamic society, and recognizing emerging societal needs for care of older adults.

e) Apply knowledge of changing national and local public policy related to health care standards, health care systems and financing when planning and providing health care for individuals, families, and communities.

f) Empower clients for collaborative decision-making to achieve desired health care outcomes and quality of life through advocacy, caring, and the application of critical thinking skills, theories of learning and communication, and ethical principles.

g) Integrate health promotion, illness prevention, and health maintenance strategies into holistic health care provided for diverse individuals, families, and communities.

h) Exhibit leadership through participation in health care teams, professional and community development activities and advocacy of the master’s prepared nurse role.

i) Show commitment to professional values through exhibiting caring, altruism, autonomy, respect for human dignity, and upholding social justice in professional nursing practice.

j) Demonstrate mastery of traditional and electronic access to information resources for research, study, and practice.
FNP Clinical Experience Faculty and Staff
Roles and Responsibilities

Program Director (Diana Lithgow) & Assistant Program Director
- Responsible for overall structure and oversight of FNP program and clinical rotations
- Set learning objectives & expectations with all faculty
- Maintain communication with students and faculty /resolve issues

Clinical Coordinator
- Oversees all FNP student clinical rotations
- Works in conjunction with clinical instructors to ensure student progress in clinical rotations

Clinical Instructors (Professors, Swanson, Ponsford, Andre, Emanuele, Imai, Tuason, Edwards, Ito, Lithgow)
- Responsible for student’s clinical learning experience
- Weekly student email communication and gives guidance for learning outcomes
- Monitors student progress/ hours and percentages
- Performs clinical site visits and evaluations with student, faculty and preceptor
- Assures submission of key documentation to Clinical course Blackboard

Manager of Clinical Affiliations (Jenny Castro)
- Responsible for initiation and maintenance of affiliation agreements with clinical sites
- Contact clinical sites to determine affiliation needs
- Check Preceptor licensure
- Enter preceptor/site information into electronic log system
- Share insurance verification with clinical sites as requested
- Facilitate and confirm background checks, immunizations, drug testing etc.
- Alert student/faculty/clinical instructors when all paperwork is in place

FNP Program Administrator (Jenny Castro)
- Responsible for logistics of student clinical rotations and evaluations
- Monitor student submitted "logs" of hours
- Maintain student files
- Assist director, clinical coordinator and instructors

Typhon/Electronic Clinical Log Evaluator (Terrance Ito)
- Responsible for reporting data of clinical rotations
- Submits weekly reports to Clinical Instructors

Preceptors
- Responsible for mentoring the student in the clinical setting.
- Determine student’s critical thinking and skills to be able to advance their learning

Revised 5/2016
• Evaluate student competency during each term

Students

• **Responsible for clinical learning & competency**
• Completes all beginning and end of semester paperwork including clinical schedule, action plan & evaluations
• Maintain active licensure, immunizations, background checks, CPR etc.
• Log hours in Typhon or other designated tracking system
Student Guidelines and Responsibilities

As a Learner the Student will:

a) Meet required health standards, obtain required immunizations, and have an approved clearance from the Clinical Administrator prior to mentorship in the clinical setting.

b) **Complete all scheduled clinical hours.** Notify clinical preceptor/facility before the scheduled session if ill or unable to attend.

c) Follow policies and procedures established in the clinical site at all times.

d) Provide the clinical faculty and preceptor with information regarding level of experience, physical exam skills, concerns and limitations. Discuss with the clinical faculty and preceptor expectations regarding learning experience, learning objectives, and level of responsibility.

e) Each semester formulate and submit a written action plan including measurable outcomes to clinical faculty and preceptor. At the end of each semester, evaluate progress and attainment of action plan and objectives. Discuss these objectives and outcomes with preceptor and elicit discussion for a summative evaluation.

f) Submit evaluation of action plan with a verification/summary of clinical hours signed by your preceptor at the end of each semester.

g) Participate in ongoing dialogue with the preceptor and clinical faculty to discuss/evaluate progress, problems, and learning objectives.

h) Keep accurate and complete electronic clinical logs of clinical hours and all patients seen.

i) Participate in self-evaluation and actively seek consultation/validation from clinical preceptor.

j) Provide feedback about the preceptor to the clinical instructor regarding effectiveness as teacher and role model.
As a Member of the Clinical Agency:

a) Arrive on time and be equipped for practice, including site-appropriate dress, nametag and appropriate tools for examination, and educational resources.

b) Determine realities of practice setting regarding pressures, time commitments, client load, etc. before making demands on preceptor. Attend scheduled meetings if appropriate.

c) Develop cooperative and considerate working relationships with other staff in practice setting.

d) Remember that clients’ and families’ rights come before student learning needs.
Clinical Preceptor Guidelines and Responsibilities

The Preceptor will:

a) Provide an orientation for the student to the facility or office, staff, policies and protocols (including Nurse Practitioner Standardized Procedures and Protocols in states where this is legally required). Introduce other members of the practice to the student and discuss team relationships.

b) Provide appropriate clients and a setting in which the student may see patients and gain clinical experience.

c) Assist the student in the selection of appropriate patient assignment.

d) Discuss expectations with the student regarding the learning experience.

e) Be physically present in the clinical setting at all times while student is seeing patients.

f) Review all patients with the student through intermittent observation, and discussion. Be readily available to the student for consultation and presentation of each client.

g) All medical record documentation must be co-signed by preceptor.

h) Review course and individual objectives with the student. Participate in ongoing conferences with the student and clinical faculty to discuss progress, problems, and learning objectives. Plan learning experiences with the student that will facilitate achieving these objectives.

i) Provide formal and informal feedback to the student. Identify strengths and areas for improvement. Assist the clinical faculty in grading the student through ongoing communication regarding the student’s progress with completion of a written evaluation or on-line form before the end of each semester.

j) Reinforce students' self-initiated inquiry and create conditions conducive to self-evaluation.
Ways in which the preceptor can facilitate the student's progress:

a) Realizing that the students come into their rotations with a significant background in nursing and encouraging them to draw upon it in understanding and managing client problems.

b) Allowing teaching time each clinical session.

c) Encouraging the student to say, "I don't know" or "I need help." Being approachable.

d) Modeling use of resources -- textbooks, colleagues, consultants, etc.

e) Requiring the student to present clients formally using SOAP format.

f) Query students on the possibilities in the differential diagnosis and plan of treatment.

g) Being willing to recheck findings and demonstrate special techniques: a knee exam, back exam, etc.

h) Allowing the student to do her/his own closure with patient, after consultation with you.

i) Allowing time for discussion of clients, the clinical session, and the progress of your mutual collaborative efforts.
Student Clinical Performance Requirements

1. **Required Number of Clinical Hours**

Fifteen (15) semester units of clinical experience are required to complete the Program. Because each unit is equivalent to 45 clinical hours, this translates into a total of 675 clinical hours required for program completion.

To complete the required clinical hours in the allotted time, students will need to plan at least 1-2 days per week in direct patient care with an approved preceptor if they are in a 2 year track, and 3-4 days per week if they are in a 1 year track.

2. **Required Number of Patients**

Students are asked to see approximately **800 patients**. The goal for patient population mix is shown below:

<table>
<thead>
<tr>
<th>Population Type</th>
<th>Percentage</th>
<th>Number of Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pediatric/Adolescent (0-17)</td>
<td>15%</td>
<td>120</td>
</tr>
<tr>
<td>Adult (18-64)</td>
<td>40%</td>
<td>320</td>
</tr>
<tr>
<td>Non-OB, Non-GYN patients</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gynecological</td>
<td>15%</td>
<td>120</td>
</tr>
<tr>
<td>Students will not receive credit for patient counts over 120 for GYN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Obstetric</td>
<td>10%</td>
<td>80</td>
</tr>
<tr>
<td>Students will not receive credit for patient counts over 80 for OB</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Geriatric (65+)</td>
<td>20%</td>
<td>160</td>
</tr>
</tbody>
</table>

Student productivity in terms of the number of patients seen is expected to increase each semester. The number of patients seen will depend upon the complexity of each patient’s problem and familiarity with the condition. At all times, students are expected to be thorough and complete. **Keep in mind that the quality of work is considered more important than the quantity of patients seen.**

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3. **Required Clinical Behaviors**

In addition to the requirements for clinical hours and number of patients seen, students are required to demonstrate specific clinical behaviors over the course of the program. **Beginning in the first semester of clinical experience, students are expected to gather complete subjective and objective data on any patient**, even though they may not yet be able to fully assess the problem or to develop a complete management plan. As students progress through the curriculum, it is expected that a thorough and detailed plan of care be developed.
Clinical Objectives – First Year
MSN/FNP & Post-Masters FNP

Curriculum: Students enrolled

<table>
<thead>
<tr>
<th>Semester 1 (Fall)</th>
<th>Semester 2 (Spring)</th>
<th>Semester 3 (Summer)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CGN 5401: Primary Care Mgmt I (2 units)</td>
<td>CGN 5402: Primary Care Mgmt II (2 units)</td>
<td>CGN 5403: Primary Care Mgmt III (2 units)</td>
</tr>
<tr>
<td>CGN 5601: Adv Phys Assess (3 units)</td>
<td>CGN 5501: Pharmacology I (2 units)</td>
<td>CGN 5502: Pharmacology II (2 units)</td>
</tr>
<tr>
<td>CGN 5641: Clinical Apps I (2 units)</td>
<td>CGN 5602: Hlth Promo &amp; Disease Prevention</td>
<td>CGN 5606: Compl &amp; Alt Medicine (1 unit)</td>
</tr>
<tr>
<td>CGN 5631: Adv. Pathophysiology I (1 unit)</td>
<td>CGN 5603: Societal &amp; Ethical Issues (1 unit)</td>
<td>CGN 5643: Clinical Apps III (2 units)</td>
</tr>
<tr>
<td>CGN 7570: Clinical Experience* (1 unit)</td>
<td>CGN 5642: Clinical Apps II (2 units)</td>
<td>CGN 5690: Clinical Comps I (1 unit)</td>
</tr>
<tr>
<td></td>
<td>CGN 7570: Clinical Experience* (2 units)</td>
<td>CGN 7570: Clinical Experience* (2 units)</td>
</tr>
</tbody>
</table>

Student Clinical Objectives:

1) Demonstrate appropriate focused history and physical examinations with increasing complexity.
2) Begin development of assessments and management plans.
3) Demonstrate sensitive communication skills with awareness of psychosocial issues in working with individuals and families.
4) Assess and direct health maintenance and promotion for all age groups.
5) Prioritize client issues and problems.
6) Give rationale for decisions.
7) Understand the limitations of his/her knowledge base and communicate need for assistance.
8) Record client visits in a problem-oriented format that demonstrates clarity of thinking.
9) Present succinct, concise oral presentations to the preceptor.
10) Utilize research and other resources to establish management plans.
11) Utilize community outreach and support services.

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Preceptor Involvement:

The student must spend between eight to sixteen hours a week in the clinical setting. Initially, the student may observe the preceptor with gradually increasing responsibility as the preceptor verifies the student’s competency. The preceptor is responsible for checking any part of the exam and will assist the student in assessment and/or management plan decisions. Episodic care may be provided as the student progresses but, in any complex situation, the preceptor should be involved in the diagnosis and management plan.

*Students may not complete clinical hours with any relative. NO EXCEPTIONS.*

Documentation and Record Keeping:

A daily clinical log of all patient visits must be maintained by the student. An abundance of student-observed encounters will occur in the beginning but the student should advance to team (preceptor assisting) and finally to preceptor-as-consultant encounters over the course of the program. The preceptor always has the ultimate responsibility for providing appropriate patient care.

Typhon Data Entry

Students are expected to maintain their Typhon data entry and have 15 days to enter any and all data before it is lost. Any data entered or modified after the 15 day window will be considered fraudulent and may result in punitive action including but not limited to review by the Student Performance Committee and/or dismissal from the program.

Time Expectations and Documentation:

Students are expected to spend eight to sixteen hours a week in a clinical setting. A daily clinical log of all patient visits must be maintained. Confidential patient information is not included in the logs. Time may be spent in specialized areas.
Clinical Objectives – Second Year
MSN/FNP
Curriculum: Students enrolled

<table>
<thead>
<tr>
<th>Semester 4 (Fall)</th>
<th>Semester 5 (Spring)</th>
<th>Semester 6 (Summer)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CGN 5200: Nursing Theory (3 units)</td>
<td>CGN 5103: Adv. Health Systems II (2 units)</td>
<td></td>
</tr>
<tr>
<td>CGN 5304: Nursing Research I (3 units)</td>
<td>CGN 5305: Nursing Research II (1 unit)</td>
<td></td>
</tr>
<tr>
<td>CGN 5605: Human Diversity (1 unit)</td>
<td>CGN 5820: Prof Practice Issues (2 units)</td>
<td></td>
</tr>
<tr>
<td>CGN 5810: Mgmt Practice Issues (2 units)</td>
<td>CGN 5900: Collaborative Project (2 units)</td>
<td></td>
</tr>
<tr>
<td>CGN 7570: Clinical Experience* (3 units)</td>
<td>CGN 7570: Clinical Experience* (4 units)</td>
<td></td>
</tr>
</tbody>
</table>

Student Clinical Objectives:

1) Construct a thorough problem list based on collection of a comprehensive database on all age groups including psychosocial and family status.

2) Assess patients in all categories of conditions with primary focus on the more chronic and complex patients.

3) Demonstrate progressively more difficult clinical decision making skills.

4) Establish management plans for health maintenance, disease detection and prevention, and patient education for clients of all ages with rationale for such plans.

5) Communicate sensitivity when addressing psychosocial issues of individuals and families (i.e., substance abuse, family violence, or financial issues).

6) Collaborate with clinical preceptors in team problem solving.

7) Understand the limitations of his/her knowledge base and communicate need for assistance.

8) Demonstrate ability to prioritize problems and issues presented during a client visit.

9) Record client visits in a problem-oriented format that demonstrates clarity of thinking.

10) Present succinct, concise oral presentations to the preceptor.

11) Utilize research and other resources to establish evidence-based management plans.

12) Utilize community outreach and support services.

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Preceptor Involvement:

As the student demonstrates competence in history taking, physical exam, diagnostic and management skills, the preceptor may feel comfortable in meeting the patient then allowing the student to assess the patient alone. The student would discuss his/her findings and the plan with the preceptor and receive feedback before discharging the patient. The preceptor is responsible for checking any part of the exam and provide assistance where needed. During these semesters, students are encouraged to do clinical rotations in specialty areas; such as pediatrics, OB/GYN, or geriatrics; and in areas of personal interest to the student (i.e., HIV clinics, care of the homeless, emergency, or acute in-hospital rotations). The student must receive approval for these areas of special interest.

Time Expectations and Documentation:

Students are expected to spend eight to sixteen hours a week in a clinical setting. A daily clinical log of all patient visits must be maintained. Confidential patient information is not included in the logs. Time may be spent in specialized areas.
Clinical Site Visits

Clinical Site Visits play a major role in the success of this program and the students. Clinical Site Visits are an opportunity for the Clinical Faculty to evaluate each student’s progress and speak with their Clinical Preceptors. Some form of a Clinical Site Visit must be completed for each student, each semester. There are three types of Clinical Site Visits and students will be assigned one of the three each semester. Clinical Site Visits are scheduled during each semester and students will receive emails regarding the process and available dates. These Visits will be conducted by the Clinical Faculty.

- Clinical Site Visit Types
  - On-Site Visits (OSV) – Clinical Faculty will visit student at clinical site: Clinical Preceptor will meet with Clinical Faculty.
  - Virtual Site Visit (VSV) – Clinical Faculty will conduct visit via Internet, using Skype (via a webcam): Student and Clinical Preceptor will attend meeting.
  - Virtual Phone Visit (VPV) – Clinical Faculty will conduct an interview with Preceptor only via telephone.

- Expectations
  - Students will complete one of the three Clinical Site Visits each semester
  - Students will complete a 5-10 minute clinical video of the clinical site the Virtual Site Visit (VSV) was performed at.
  - Students will participate in Spring Seminar Weekend Day in the Clinic OSCE rotation on WesternU Campus.
  - Students will complete all clinical paperwork associated with Clinical Site Visit:
    - Clinical Site Information Form
    - Respond to confirmation emails
    - Evaluation of Clinical Site and Preceptor (explained in documentation)
  - Students will provide their Clinical Preceptors with all the important information regarding Clinical Site Visits and provide them with the evaluation tools that will be used during Clinical Site Visits.
Glossary

These definitions hold true for the State of California, however a student working in another state must adhere to that state’s definitions and regulations. These definitions will only serve as a guide for all students.

**Nurse Practitioner** – A Registered Nurse who possesses additional preparation and skills in physical diagnosis, psycho-social assessment, and management of health-illness needs in primary health care, and who has been prepared in a program that conforms to State Board of Nursing standards. (Article 8. 1480, a. California Nurse Practice Act)

**Primary Health Care** – Care which occurs when a consumer makes contact with a health care provider who assumes responsibility and accountability for the continuity of health care regardless of the presence or absence of disease. (Article 8, 1480, b. California Nurse Practice Act)

**Clinically competent** – Possession and demonstration of a high degree of learning, skill care and experience ordinarily possessed and exercised by a member of the appropriate discipline in clinical practice. (Article 8, 1840, c. California Nurse Practice Act)

**Standardized Procedures** – Together with the scope of practice for the Registered Nurse as well as the Advanced Practice Nurse (including Nurse Practitioner), a means designated to authorize performance of a medical function developed through collaboration with the nurse, physicians and administrator in the organized health system in which it is to be used. There are specific guidelines for disease-specific and/or process-specific protocols as outlined by the California Board of Registered Nursing materials.

**Information on Prescribing:**

In California, Nurse Practitioners are authorized to obtain and use a “furnishing number” to furnish drugs and/or devices. Furnishing is defined as the act of making a pharmaceutical agent or agents available to the patient in strict accordance with standardized procedures. Effective January 1, 1997 this definition was extended to Schedule III-V controlled substances. (California State Business & Professionals Code, Section 2836.1, amended AB1077, 1997) Effective January 1, 2004, this definition was extended to Schedule II-V controlled substances.

The student will learn the skills of medication prescribing including selection, labeling, and patient education. The student may fill out the top of the prescription including medication and directions. However, the preceptor must evaluate and approve with signature. The preceptor may not pre-sign blank prescriptions. Prescribing by protocols is not authorized for nurse practitioner students.

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FALL 2016
DNP, FNP, MSN Pre-program Begins – Incoming Students July 25, 2016
All Incoming Students – Welcome Week (Mandatory) August 3-6, 2016
Pre-program Ends – Incoming Students August 19, 2016
Fall Semester Begins MSNE 1st Year – Incoming Students August 15, 2016
Fall Semester CLASSES Begin – All other Students August 22, 2016
Seminar Weekend #1 – FNP 1st Yr Core Courses (week 2) Sept 2-4, 2016
Seminar Weekend #1 – MSN Distance Courses (week 2) Sept 3, 2016
Seminar Weekend #1 – DNP 1st Yr Courses (week 2) Sept 3-4, 2016
Seminar Weekend #1 – DNP 2nd Yr Courses (week 2) Sept 4, 2016
Seminar Weekend #2 – FNP 1st Yr Core Courses (week 9) Oct 21-23, 2016
Seminar Weekend #2 – MSN Distance Courses (week 9) Oct 22, 2016
Seminar Weekend #2 – DNP 1st Yr Courses (week 9) Oct 22-23, 2016
Seminar Weekend #2 – DNP 2nd Yr Courses (week 9) Oct 23, 2016
Fall Semester Ends (All Distance Students) Nov 18, 2016
Fall Break Nov 21-27, 2016
Fall Semester Ends (MSNE Students) Dec 2, 2016
INTERSESSION Dec 5, 2016-Jan 3, 2017

SPRING 2017
Spring Semester Begins for ALL Students (Wednesday) Jan 4, 2017
Seminar Weekend #1 – FNP 1st Yr Core Courses (week 4) Jan 27-29, 2017
Seminar Weekend #1 – MSN Distance Courses (week 4) Jan 28, 2017
Seminar Weekend #1 – DNP Courses (week 4) Jan 29, 2017
Seminar Weekend #2 – FNP 1st Yr Core Courses (week 9) March 3-5, 2017
Seminar Weekend #2 – MSN Distance Courses (week 9) March 4, 2017
Seminar Weekend #2 – DNP Courses (week 9) March 5, 2017
Spring Semester Ends (Distance Students) March 31, 2017
Spring Semester Ends (MSN-E Students) April 7, 2017
INTERSESSION April 8-21, 2017

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Summer Semester Begins for ALL Students

Commencement – Graduating Students

Seminar Weekend #1 – ALL Graduates (week 4)

Seminar Weekend #1 – FNP 1st Yr Core Courses (week 4)

Seminar Weekend #1 – Non-Grads: MSN Distance Courses (week 4)

Seminar Weekend #1 – Non-Grads: DNP Courses (week 4)

Summer Break

Seminar Weekend #2 – “FNP Review” (Mandatory ALL FNP Students)

Seminar Weekend #2 – FNP 1st Yr Core Courses (week 11)

Seminar Weekend #2 – MSN Distance Courses (week 11)

Seminar Weekend #2 – DNP Courses (week 11)

Summer Semester Ends (Distance Students)

Summer Semester Ends (MSNE Students)

DNP, FNP, MSN Pre-program Begins – Incoming Students

All Incoming Students – Welcome Week (Mandatory)

Pre-program Ends – Incoming Students

April 24, 2017

Thurs, May 18, 2017

Fri, May 19, 2017

Fri/Sat, May 19-20, 2017

Sat, May 20, 2017

Fri, May 19, 2017

June 12-18, 2017

Wed/Thurs/Fri, July 12-14, 2017

Fri/Sat, July 14-15, 2017

July 15, 2017

July 16, 2017

July 28, 2017

August 4, 2017

July 31, 2017

August 9-12, 2017

August 25, 2017
Family Nurse Practitioner Clinical Contacts for Preceptors

Contact For: Affiliation Agreements, Processing of Preceptor and Clinical Site Information forms, Insurance Information
Manager of Clinical Affiliations/FNP Program Administrator
Jenny Castro
Manager of Clinical Affiliations
E-mail: jcastro@westernu.edu
Phone: 909.469.8268
Fax: 909.469.5521

Contact For: Clinical Questions, Student Issues, Issues with Rotation, Specific Clinical Skills and Questions, Clinical Site Visits, Clinical Site Visits, Student Progress, Preceptor evaluation, Student evaluations, Verification of Hours, Preceptor Letters
Clinical Education Coordinator MSN/FNP Program
Mandy Imai, MSN, FNP-BC
Assistant Professor
E-mail: aimai@westernu.edu
Phone: 909.469.5523
Fax: 909.469.5521

Contact For: Programmatic questions or issues about a student that are of a concern regarding their performance in the program in general.
Program Director of MSN/FNP Program, Assistant Dean of Distance Program
Professor Diana Lithgow, PhD, FNP-C, RN
E-mail: dlithgow@westernu.edu
Phone: 909.469.5523
Fax: 909.469.5521