Welcome to Great Basin College’s Associate Degree Nursing Program. Nursing is a dynamic profession that offers almost unlimited opportunities and challenges. They play a key role in the delivery of health care. The roles for nurses continually diversify and the need for more nurses will be greater than ever in the coming decade. You will be joining more than 400 GBC graduates who are making a difference in the health of their patients and in the dramatic changes taking place within the health care system! The nursing faculty support the Mission of Great Basin College to enrich lives through student-centered educational programs. We are committed to enriching your life and those you care for in the future by preparing you to provide high quality nursing care and to engage in life-long learning.”

Tamara Mette, DNP, RN
Nursing Programs Director

Purpose of the Student Handbook

The purpose of this handbook is to assist you in understanding more fully the policies, practices, and procedures of the Associate of Applied Science Degree Nursing (AAS) Program of Great Basin College. This handbook serves as the source of information about the policies and procedures in the nursing program. You are required to sign an attestation statement indicating you understand and agree to abide by these policies and guidelines each year that you are in the nursing program. Because policies and procedures are continuously subject to change by external and internal sources, the nursing faculty reviews and modifies these policies and practices as necessary. Students will be notified in writing of any changes made during the academic year.

This handbook is not all-inclusive, nor does it replace the Great Basin College General Catalog 2023-2024 or the Nevada System of Higher Education (NSHE) Board of Regents Code Title 2, Chapter 6 which addresses misconduct. The provisions of this document are not to be regarded as an irrevocable contract between the student and the GBC nursing programs.

IMPORTANT NOTE: In most cases where a conflict may exist between the guidance in this handbook and the GBC Catalog, the GBC Catalog shall take precedence. However, some unique aspects of nursing education require policies different from those for other GBC students, for example, student health requirements.

Nondiscrimination for Disability

Great Basin College is committed to providing equal educational opportunities to qualified students with disabilities in accordance with state and federal laws and regulations, including the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973. A qualified student must furnish current verification of disability. The Students with Disabilities Office, located in Berg Hall, will assist qualified students with disabilities in securing the appropriate and reasonable accommodations, auxiliary aids, and services. For more information or further assistance, please call 775.327.2336.
## Contact Information

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**Help Desk**  
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**Registrar**  
775-327-2059

**Bookstore**  
775-753-2270

**Student Financial Services**  
775-327-2095
Great Basin Nursing Organizational Chart

Board of Regents Nevada System of Higher Education

Great Basin College President, Joyce Helens

Vice President of Academic and Student Affairs, Jake Hinton-Rivera

Associate Vice President of Faculty Success, Amber Donnelli, PhD, RN, CNE

Director of Nursing, Tamara Mette, DNP, RN

Nursing Professor
Michelle Husbands, DNP, FNP -BC

Nursing Professor
Jessica Lynch, MSN, RN

Nursing Professor
Brian Dankowski, DNP, RN

Practice Lab Manager
Melissa Gerber, MSN, RN

Certified Nursing Assistant Coordinator
Gina Johnson

Part-time Nursing Clinical Instructor
Jessica Dullum, RN, BSN

Part-time Nursing Faculty
Heidi Johnston, DNP, RN, CNE

Administrative Assistant IV
Elizabeth Stanley

Nursing Professor,
Staci Warnert, PhD, RN, CNE

Nursing Professor,
Stacy Crouch, DNP, RN, CNE, CHSE

Nursing Professor,
Dorothy Callander, MSN, RN

Nursing Professor,
Malia Keep, MSN, RN

Nursing Professor,
Jessica Bellander, RN, BSN

Part-time Nursing Faculty
Diane Elmore, PhD, RN, CNE

Administrative Assistant II
Summer Sutter
GREAT BASIN COLLEGE  
ASSOCIATE OF APPLIED SCIENCE NURSING PROGRAM  
STUDENT AGREEMENT FOR THE 2023-2024 ACADEMIC YEAR

[Signature] (initial)  
I have read, understand, and agree to abide by the policies and guidelines stated in the Great Basin College Associate of Applied Science Degree Nursing Program 2023-2024 Student Handbook.

[Signature] (initial)  
I understand that as a condition of enrollment in Great Basin College’s Associate of Applied Science Degree Nursing Program, I agree that a clinical facility/agency may, at any time, require a “for cause” drug and/or alcohol screen. I agree to execute a consent for release of the results of the drug and/or alcohol screening information to the clinical facility/agency should they request such information.

[Signature] (initial)  
I understand and acknowledge that once admitted to the Great Basin College’s Associate of Applied Science Degree Nursing Program, failure to maintain the professional and/or ethical standards of the program may result in dismissal from the program. I also understand that the Health Science and Human Services Department Admission and Progression Committee may at any time request information from the Administrative Officer of Great Basin College to determine whether I have ever violated NSHE (Nevada System of Higher Education) Code.

[Signature] (initial)  
I understand and acknowledge that no resources or information from any nursing course can be shared outside the classroom or lab.

My emergency contact person(s) are listed below. I understand that this individual or individuals are responsible for ensuring that I am transported home in the event one of my faculty or the Associate of Applied Science Degree Nursing Director determines that I am not able to continue being present in the classroom, lab, or clinical setting.

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Printed Name  
Student Signature  
Date

[Signature]  
Keep this copy in this handbook for future reference. The Agreement at the back of this handbook should be signed and returned to the GBC Health Science and Human Services Department.
GREAT BASIN COLLEGE
ASSOCIATE OF APPLIED SCIENCE NURSING PROGRAM
Agreement to Participate in Practice Lab Procedures
For the 2023-2024 Academic Year

During my enrollment in the Associate of Applied Science Degree in Nursing Program and under the direct supervision of a nursing faculty member, I agree to allow a nursing student classmate to perform the following procedures on my person:

1. Subcutaneous injection
2. Intradermal injection
3. Intramuscular injection
4. Intravenous catheterization (peripheral)

I agree to hold harmless and waive the liability of the student and/or students performing the procedure(s), the supervising instructor and Great Basin College for any injuries incurred as a result of my agreeing to have these procedures performed on my person.

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<th>Printed Name</th>
<th>Student Signature</th>
<th>Date</th>
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*Keep this copy in this handbook for future reference. The Agreement at the back of this handbook should be signed and returned to the GBC Health Science and Human Services Department.*
During your participation at the Great Basin College Practice Lab, you will be an active participant and observer of the performance of other individuals in the management of acute medical, surgical, and other health care events in simulated experiences.

The objective of the simulation experience program is to educate pre-licensed and licensed health care practitioners to better assess and improve their performance in evolving health care situations. Simulations are designed to challenge a healthcare professional’s response and judgment in stress environments.

Due to the unique aspects of this form of training, you are required to maintain and hold confidential all information regarding the performance of specific individuals and the details of the scenarios.

There is continuous audiovisual digital recording during all simulations which will be used for educational purposes. This video recording is considered a QUALITY ASSURANCE TOOL and is protected by Federal Law.

By signing this agreement, you agree to maintain strict confidentiality regarding both your and others' performance, whether seen in real time, on video, or otherwise communicated to you. Failure to maintain confidentiality may result in unwarranted and unfair defamation of character of the participants.

To maintain optimal simulation experiences for other learners who will be following you in the center, you are to maintain strict confidentiality regarding the specifics of the scenarios. A breach of confidentiality may result in loss of privileges in the Practice Lab.

By signing below, you acknowledge you have read and understand this statement and agree to maintain the strictest confidentiality about the performance of individuals and the simulation scenarios you observe.

I agree to maintain strict confidentiality about the details of the scenarios and the performance of other participants during scenarios at Great Basin College Practice Lab.

I authorize the Great Basin College Practice Lab to use the video recording(s) and photographs made in the Practice Lab for the following purposes:

1. Debriefing scenario participants,
2. Administrative review,
3. Educational research,
4. Commercial purposes, which can include public relations, promotional advertisements, and/or fund-raising activities. I understand that, unless otherwise approved by me, I will not be specifically identified.

Last Name, First Name
(Please Print)
Date

Keep this copy in this handbook for future reference. The Agreement at the back of this handbook should be signed and returned to the GBC Health Science and Human Services Department.
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Great Basin College Mission Statement

Great Basin College enriches people's lives by providing student-centered, post-secondary education to rural Nevada. Educational, cultural, and related economic needs of the multicounty service area are met through programs of university transfer, applied science and technology, business and industry partnerships, developmental education, community service, and student support services in conjunction with certificates and associate and select baccalaureate degrees.

Mission of the Associate of Applied Science in Nursing Program

To provide an accessible, student-centered, post-secondary nursing education that prepares graduates for entry level nursing practice in a variety of structured healthcare settings.

Philosophical and Conceptual Basis for Achievement of College and AAS Missions

Nursing faculty endorse the mission, goals, and outcomes of Great Basin College. The nursing faculty act on the college mission and values through the pursuit of excellence in teaching, promoting student success, and providing service to rural Nevada citizens to enhance their health and quality of life. The philosophy of the nursing faculty is rooted in the core values of holism, caring, diversity, advocacy, integrity, and excellence. Student learning outcomes of the Associate of Applied Science (AAS) Degree Nursing Program curriculum are based on competencies determined by the faculty to be necessary for safe and effective nursing care.

The faculty designed the associate degree nursing education program to prepare graduates as providers of basic nursing care in structured settings for individuals and families experiencing common, acute, and chronic health problems. As an entry level nurse, the AAS graduate can apply best evidence, available resources, and information technology to assure high quality and safe nursing care. The AAS graduate can manage direct care for small groups of patients and participate as a member of nursing and interprofessional teams to achieve positive health outcomes for patients. Standards of practice and professional nursing values are used to guide practice by the AAS graduate.

The AAS Nursing program is built on competencies derived from the major concepts the nursing faculty consider to be central to associate degree nursing practice. Those concepts are:

<table>
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<tr>
<th>Patient-centered care</th>
<th>Professionalism</th>
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<td>Teamwork</td>
<td>Environment and context</td>
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<td>Evidence-based practice</td>
<td>Clinical reasoning</td>
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<td>Quality improvement</td>
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The faculty value nursing education as a life-long dynamic process in which the learner is an active participant, and in which education is the responsibility of both the learner and the nursing faculty. The faculty provide a learning environment that is responsive to a range of individual learning styles, needs, rates of learning, and abilities. The curriculum, teaching strategies, and educational experiences are evidence-based and support the development of critical thinking, problem solving, and analytical reasoning. The faculty value open, honest communication with students and strive to provide a culture of learning in which guidance and evaluation promote self-esteem and confidence in the student. The faculty based the curriculum on the guidelines that learning best occurs when instruction is organized in a manner that leads the learner from simple to complex concepts and skills with experiential opportunities to apply learning throughout the process.
Nursing faculty have considered professional standards, best practices, guidelines, and competencies in developing an evidence-based curriculum to prepare graduates of the Great Basin College AAS Nursing program as entry-level Registered Nurses. The curriculum is designed and organized using the program student learning outcomes listed below as the basis for all activities related to the teaching/learning process, including delivery of instruction, learning activities, and evaluation of student progress.

**AAS Nursing Program Student Learning Outcomes**

Upon completion of the AAS Nursing Program the graduate will have accomplished the following six program student learning outcomes:

1. Provide safe, quality, evidence-based, patient-centered nursing care in a variety of healthcare environments to diverse patient populations across the lifespan.
2. Use clinical reasoning when engaged in the work of a professional nurse.
3. Participate in quality improvement processes to improve patient care.
4. Engage in teamwork with members of the interprofessional team, the patient, and the patient’s support persons when managing patient care.
5. Apply management, legal, ethical, and professional guidelines in practice as a professional nurse.
6. Use information management principles, techniques, and systems, and patient care technology to communicate, manage knowledge, mitigate error, and support decision-making.

Student achievement of the program learning outcomes is demonstrated through competencies that are comprised of the knowledge, skills, and attitudes students must attain for each student learning outcome. Competency statements at both the program and course level are used to evaluate students’ achievement of course and program student learning outcomes. Competencies required for each Program Student Learning Outcome are listed below.

**Program Student Learning Outcomes and Competencies**

The six program student learning outcomes along with their related competencies are:

1. Provide safe, quality, evidence-based, patient-centered nursing care in a variety of healthcare environments to diverse patient populations across the lifespan.
   a. Conduct comprehensive and focused physical, behavioral, psychological, and spiritual assessment of health and illness parameters in patients, using developmentally and culturally appropriate approaches.
   b. Identify patient needs based on the assessment findings.
   c. Develop an individualized plan of care implementing evidence-based and best practice standards.
   d. Implement patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, nutrition, medical management, and nursing management across the lifespan, and in a variety of healthcare settings.
   e. Promote factors that create a culture of safety.
   f. Provide patient teaching that reflects patient-centered concepts including developmental stage, age, culture, patient preferences, and health literacy consideration.
   g. Implement nursing interventions directed at the attainment, intervention, and maintenance of physical and mental health and the prevention of illness across the life span in a variety of clinical settings.
   h. Monitor patient outcomes to evaluate the effectiveness and impact of nursing care.
   i. Deliver care within expected timeframe.
   j. Provide patient-centered transitions of care and hand-off communications, including discharge planning, to ensure safe, uninterrupted nursing care.
   k. Revise the plan of care based on an ongoing evaluation of patient outcomes including recognition of alterations to previous patient conditions.
   l. Demonstrate safe performance of psychomotor skills for efficient, safe, and compassionate patient
2. Use clinical reasoning when engaged in the work of a professional nurse.
   a. Use clinical reasoning to make management decisions to ensure accurate and safe care in all nursing actions, including addressing anticipated changes in the patient’s condition.
   b. Anticipate risks and predict and manage potential complications.
   c. Prioritize patient care.
   d. Analyze the clinical microsystem and its impact on the nurse’s ability to provide safe, quality care.
3. Participate in quality improvement processes to improve patient care.
   a. Interpret information about outcomes of care for populations served in a variety of healthcare systems.
   b. Provide recommendations to close identified gaps between local and best practice.
   c. Apply quality improvement processes to effectively implement patient safety initiatives and monitor performance measures, including nursing-sensitive indicators in the microsystem of care.
   d. Implement National Patient Safety Goals in all applicable patient care settings.
4. Engage in teamwork with members of the team, the patient, and the patient’s support persons when managing patient care.
   a. Communicate effectively with all members of the health care team, including the patient and the patient’s support network when making decisions and planning care.
   b. Identify to which interprofessional healthcare professional, and when, to communicate patient assessment data collected.
   c. Evaluate inter and intra professional communication and teamwork for the purpose of delivering safe, evidence-based, patient-centered care.
   d. Implement conflict resolution principles as needed.
5. Apply management, legal, ethical, and professional guidelines in practice as a professional nurse.
   a. Apply management skills and knowledge of the rules and principles of delegation when working with other health care team members.
   b. Apply management and supervisory skills to the care of diverse patients in a variety of healthcare settings.
   c. Practice within the legal and ethical frameworks of nursing practice.
   d. Analyze planned patient care within the context of the ANA Standards of Practice.
   e. Serve as a patient advocate.
   f. Initiate a plan for ongoing professional development and lifelong learning.
6. Use information management principles, techniques, and systems, and patient care technology to communicate, manage knowledge, mitigate error, and support decision-making.
   a. Use patient care technologies, information systems/technologies, and communication devices to support safe nursing practice.
   b. Apply patient care technologies as appropriate to address the needs of a diverse patient population.

Definitions of Major Concepts Used in the Program Student Learning Outcomes and Competencies

Caring: In nursing, those values, attitudes, and behaviors that engender feeling cared for. (Duffy, 2010). Also, “promoting health, healing, and hope in response to the human condition” (NLN, 2010, p. 65).

Clinical judgment: A process of observing, interpreting, responding, and reflecting situated within and emerging from the nurse’s knowledge and perspective (Tanner, 2006). Involves ways in which nurses come to understand the problems, issues, or concerns of clients and patients, to attend to salient information, and to respond in concerned and involved ways (Benner, Tanner, & Chesla, 2009).

Clinical microsystem: A small group of people who work together on a regular basis – or as needed – to provide care and the individuals who receive that care (who can also be recognized as members of a discrete subpopulation of patients) (Trustees of Dartmouth College, 2004, p. 5).
Clinical reasoning: An iterative process of noticing, interpreting, and responding – reasoning in transition, with a fine attunement to the patient and how the patient responds to the nurse’s actions. (Benner, Tanner, & Chesla, 2009, p. 230).

Collaboration: “Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.” (Quality and Safety Education for Nurses [QSEN], 2007). Collaboration also includes communication and partnerships with providers, patients, families, and stakeholders.

Cultural competence: Cultural competence is the ability to respect the beliefs, language, interpersonal styles, and behaviors of individuals, families and communities receiving services as well as the health care professionals who provide the services. Culture is the integrated patterns of human behavior that include the language, thoughts, actions, customs, beliefs, and the institutions of racial, ethnic, social, or religious groups (www.cultural-competence-project.org/en/faq.htm, retrieved February 17, 2011).

Diversity: “Recognizing differences among persons, ideas, values, and ethnicities, while affirming the uniqueness of each (NLN, 2010, p. 12).

Ethics: “Involves reflective consideration of personal, societal, and professional values, principles, and codes that shape nursing practice. Ethical decision making requires applying an inclusive, holistic, systematic process for identifying and synthesizing moral issues in health care and nursing practice, and for acting as moral agents in caring for patients, families, communities, societies, populations, and organizations. Ethics in nursing integrates knowledge with human caring and compassion, while respecting the dignity, self-determination, and worth of all persons” (NLN, 2010, p. 13).

Evidence-based care: Care that integrates the best research with clinical expertise and patient values for optimum care (IOM, 2003).

Excellence: creating and implementing transformative strategies with daring ingenuity. A culture of excellence reflects a commitment to continuous growth improvement and understanding. It is a culture where transformation is embraced, and the status quo and mediocrity are not tolerated (NLN, 2010).

Informatics: The use of information and technology to communicate, manage knowledge, mitigate error, and support decision making (Quality and Safety Education for Nurses [QSEN], 2007).

Information management: Refers to “the processes whereby nursing data, information, knowledge, and wisdom are collected, stored, processed, communicated, and used to support the delivery of health care” (Nelson, 2010, p. 653).

Integrity: “Representing the dignity and moral wholeness of every person without conditions or limitation” (NLN, 2010, p. 13).

Nursing: Nursing is the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities, and populations (ANA, 2010, p. 10).

Nursing-sensitive indicators: Nursing-sensitive indicators reflect the structure, process, and outcomes of nursing care. The structure of nursing care is indicated by the supply of nursing staff, the skill level of the nursing staff, and the education/certification of nursing staff. Process indicators measure aspects of nursing care such as assessment, intervention, and RN job satisfaction. Patient outcomes that are determined to be nursing sensitive are those that improve if there is a greater quantity or quality of nursing care (e.g., pressure ulcers, falls, and intravenous infiltrations). Some patient outcomes are more highly related to other aspects of institutional care, such as medical decisions and institutional policies (e.g., frequency of primary C-sections, cardiac failure) and are not considered "nursing-sensitive". (ANA’s Nursing World: http://www.nursingworld.org/MainMenuCategories/ThePracticeofProfessional Nursing/PatientSafety/Quality/Research-Measurement/The-National-Database/Nursing-Sensitive-Indicators_1.aspx, Retrieved February 17, 2011).
**Patient:** The recipient of nursing care or services. Patients may be individuals, families, groups, communities, or populations (American Association of Colleges of Nursing [AACN], 2008, p. 38).

**Patient-centered care:** Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient’s preferences, values, and needs (Quality and Safety Education for Nurses [QSEN], 2007).

**Personal and professional development:** “A lifelong process of learning, refining, and integrating values and behaviors that (a) are consistent with the profession’s history, goals, and codes of ethics; (b) serve to distinguish the practice of nurses from that of other health care providers; and (c) give nurses the courage needed to continually improve the care of patients, families, and communities and to ensure the profession’s ongoing viability” (NLN, 2010, p. 68).

**Quality improvement:** “Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems” (Quality and Safety Education for Nurses [QSEN], 2007). Also relates to the improvement of healthcare processes and at the local, state, and federal levels to affect positive outcomes from the impact of economics on healthcare quality.

**Safety:** Minimizes risk of harm to patients and providers through both system effectiveness and individual performance (Quality and Safety Education for Nurses [QSEN], 2007).

**References**


Cell Phones

Cell phones and other handheld devices are not to be used for texting and email functions during class or clinical time. Sound should be turned off on all personal electronic devices carried in classrooms, clinical, or the practice lab. Smart phones, IPADS®, Kindles®, Skyscape®, etc. can be used to access relevant resources for selected classroom, clinical, and practice lab activities.

E-mail

Students are required to check their e-mail at least two (2) times a week because it is the primary route used for official departmental and course communications. Changes to email addresses must be reported to Admissions and Records immediately.

- Always include a subject line when emailing faculty.
- Remember some comments may be taken the wrong way be specific when creating a message.
- Be respectful to your faculty and fellow students when sending email.

In Course Announcements

Students are required to check course announcements for communications or changes specifically to the course or program on a daily basis.

Classroom Taping

No classroom content of any type may be videotaped, audiotaped, recorded, or transmitted in any manner without the written permission of the instructor and each member of the class. Any content recorded becomes the property of the course instructor. This is for the protection of the confidentiality of patients, students, instructors, and GBC staff. Students in the class will be required to sign a release form to allow recording in the course. Recordings must be destroyed at the end of the semester.

Social Media and Online Communication - Ethics and Legal Liability

*The Code of Ethics for Nurses* (American Nurses Association, 2015) addresses your responsibility to behave in a manner consistent with professional ethics and values in relation to human dignity and maintaining health care and work environments conducive to health care quality. The nursing faculty expects students to adhere to that code in all matters related to their classroom and clinical experiences, as well as working relationships, both in person and through social media and online communications.

Students are reminded that they are legally liable for anything they write or present online. Students can be disciplined by GBC for commentary, content, or images that are defamatory, pornographic, proprietary, harassing, libelous, or that can create a hostile work environment. Students can also be sued by GBC employees, clinical agencies, and any individual or company that views their commentary, content, or images as defamatory, pornographic, proprietary, harassing, libelous or creating a hostile work environment.

To avoid negative impacts resulting from unwise or inappropriate use of social media, be aware of the following:

- If you post anything about GBC or the nursing programs, make it clear that you do not represent the college or nursing programs, nor their views.
- Be aware not only of the content you post, but of any content that you host (e.g. comments others post on your site). Content you host can have the same effect as content you post.
• Potential employers may use social media to evaluate applicants. Inappropriate content may eliminate job opportunities.
• Once you have posted via social media, it is out of your control. Others may forward it, save it, repost it, etc. It is almost impossible to retract after it is posted.
• If you disclose confidential information about patients, other health care providers, fellow students, or faculty, the college and/or health care facility may take legal action against you. Disclosing patient confidential health information is a violation of HIPAA and can result in severe fines.

The nursing faculty recognizes that social media sites – Facebook, Twitter and others offer alternative ways to reach and communicate with friends and other students. The responsible use of social media strengthens our nursing programs’ reputation within the community and expands public awareness of our varied educational options.

The following policies and procedures must be adhered to in all use of social media that in anyway relates to or mentions GBC and/or the nursing programs:

1. The social media site content must not replicate information that is available on the college web page.
2. Material and content from classes may not be copied and placed on social media sites, including personal information regarding patients, students, instructors, or other GBC staff.
3. Personal blogs should have a clear disclaimer that the views expressed by the author in the blog is the author’s alone and do not represent the views of GBC nursing programs or the Health Science and Human Services Department.
4. Information with GBC affiliation should only be information that could be contained in a resume.
5. Information published on a blog should comply with HIPPA, FERPA, and GBC confidentiality policies.
6. Students must be respectful of all persons and their right to privacy.
7. Do not reference GBC faculty, staff, or students without their written consent. Do not use their images or likeness without consent.
8. Respect copyright laws and site sources appropriately. Plagiarism still applies to online content. GBC logos may not be used without written consent from Department Chair.
9. Any press or media contacts should be referred to Dean of Health Science and Human Services.
10. All requests for social media development should include its purpose and objectives, name of the social media site, and the name of the moderator, with request forwarded to the Dean of the Health Science and Human Services Department at 775-327-2317.
11. Student must not be friends with faculty on Facebook until such time as the student has graduated or left the college.

Mailboxes

Each student has a student mailbox that is required to be checked and cleaned out weekly. These mailboxes are private and only the student or students assigned to the mailbox should remove items. If a classmate is sent to get something from a student’s mailbox, a faculty member or the Administrative Assistant must be the one to do this. **Putting school related items into another student’s mailbox is appropriate, but removing anything, even just to look at and replace it, will be considered a violation of the GBC Student Conduct Policy.** All alleged violations of the Student Conduct Policy will be handled according to the procedures outlined in the GBC Catalog.

*All other areas within the Health Sciences and Human Service Department office suite are off limits to students, including cabinets, drawers, coffee maker, microwave, copy and fax machines.*

Bulletin Boards

A nursing student bulletin board is posted in the hallway near the office suite in the Health Science building. The purpose of the board is to share official college and departmental notices of importance to students and information about educational and job opportunities. Nothing should be posted on the bulletin board without permission from the Administrative Assistant or Dean, Health Science and Human Services Department.
Address, Name, and Phone Changes

Students must notify the HSHS Administrative Assistant when any changes are made in name, address, email address, or phone numbers so that contact information is updated, and emergency messages can be delivered. Students are to update their contact information into My GBC themselves.

Inclement Weather

If classes are cancelled at Great Basin College, clinical will also be cancelled. This information will be posted on the Great Basin College website.

Student Messages – General Emergency

Great Basin College, in compliance with the Clery Act, will issue timely warning notices in the event a situation occurs on one of our centers or in the areas adjacent to our centers that constitutes a potential ongoing or continued threat to students, faculty and staff. Timely warning notices will be issued upon the recommendation of the Director of Environmental Health, Safety & Security (EHS&S), the Center Director or the local Police agency. Timely warnings will be issued on a case-by-case basis when approved by the GBC Executive Administrators based on the available facts, the risk to the center community, and the risk of compromising law enforcement efforts.

Timely warnings will be issued via the GBC email system, posted on the home page of the GBC web site, posted via video signage, printed notices and personal contact. Warnings will include the date, time and reported location of an incident, a brief summary of the incident, a description of the suspect(s) and vehicles if known. Warnings will include safety information specific to the type of incident and contact information to obtain additional information.

Terrorist Attack

If the State of Nevada’s Office of Homeland Security places the Elko area in a level red alert, students in the clinical education sites will be released from clinical until the red alert has been lifted. GBC faculty or staff approval to leave the clinical education site is not required.

Student Records

The Admission and Records Office maintains official GBC files for all students who apply to the college. A cumulative, confidential file of nursing program documents is kept for each student in the Health Science and Human Services Department. The confidential file contents may include: nursing application materials, immunization records, copies of the CPR card, transcripts, student agreements, test scores, clinical assignment and performance forms, skills checklists, Notification of Unsatisfactory Progression forms, Practice Lab Remediation forms, and action plans (if applicable). Class work, tests, quizzes, and projects may also be included in this file. Records of individual student conferences will be read and signed by the student and faculty prior to becoming a part of the student’s cumulative record. Records are retained and stored in the Health Science and Human Services Department for five years and are then shredded.

Students will need to provide documentation regarding the completion of their immunization, annual background check, annual drug screen, required training and related compliance records as requested by clinical facility. GBC uses a vendor called Complio by American DataBank to help students track, access, and maintain their compliance records through their academic program. Students will need to complete the Clinical Rotation Package, Background Check, Drug Screening and Immunization Tracking. Students are required to maintain compliance before enrollment is granted. The required immunizations are MMR series, Hepatitis B series, negative two step TB test within last 12 months, Tdap, and Influenza. Students are also required to upload a CPR card from American Heart Association, and Health Insurance.
All student files are maintained in designated, locked file cabinets. Student files are protected under the Family Educational Rights and Privacy Act of 1974 (FERPA). For further information, refer to the section on Family Educational Rights and Privacy Act in the GBC catalog.

CLINICAL RADIOS

Communication radios are provided to students for interpersonal communication within specific clinical facilities. Nursing students are assigned use of portable radios as an important means of communication during their clinical shift. Students are expected to use their radios appropriately as part of their daily work duties and maintain their radios to ensure good working conditions.

EXPECTATIONS

Radios need to be worn and turned on at the beginning of each clinical at NNRH and used in accordance with GBC regulations. Radios are to remain in your possession throughout the semester. Radios are to be maintained as outlined in the Procedures.

PROCEDURES & INSTRUCTIONS FOR USE OF RADIO

1. Turn the radio on – this also controls the volume so you can adjust it.
2. Always keep the channel set as directed by your clinical instructor.
3. Before speaking, listen to determine if the radio is currently in use by another user.
4. If channel is clear, press the side button and hold it while talking.
5. Release the button when finished talking so you can hear the response.
6. You must always have your radio turned on and with you during clinical.

PROPER ETIQUETTE FOR RADIO USE

- Understand all radios are regulated by the Federal Communication Commission (FCC) and can be heard throughout the clinical setting.
- Use the portables for clinical related conversation only. Non-clinical related radio use such as casual conversations, profanity, inappropriate remarks, and outbursts of music is prohibited, and violators are subject to disciplinary measures.
- Restrict all transmissions to minimum necessary to get the message across.
- Use your assigned radio number or name, known as your call sign.
- Interrupt an in-progress transmission only in case of an emergency.

LOSS, THEFT & DAMAGE RESPONSIBILITIES

The student is responsible for taking care of assigned radio to ensure they are not damaged, lost, or stolen. In case of loss, the student will be responsible for the replacement at current cost of the radio. Current estimated cost as of August 2021: $366.00

RADIO ASSIGNMENT TERMS AND CONDITIONS OF USE

1. I agree that the assigned radio at all times remains the property of Great Basin College and provided to me for communication in performance of my duties.
2. I will do my part to keep the radio in good working order and will notify GBC’s administrative assistant or clinical instructor immediately of any defect or malfunction.
3. I will use the assigned radio lawfully and in accordance with the use policy.
4. I will not sell, assign, transfer, or otherwise dispose of the assigned radio.
5. In the event that I discontinue my education with Great Basin College, or if my enrollment changes in such a way that I am no longer eligible for a radio assignment, I will return the assigned radio to Great Basin College – Health Sciences in good working order, on or before my last day of enrollment.

6. I will take good care of the radio assignment at all times, and I will not leave the radio unattended or unsecured in a public place.

7. If the radio is lost, stolen, or damaged, I will contact Great Basin College – Health Sciences as soon as possible.

Portable Radio Use Policy and Assignment Agreement Form

- I confirm that I have read and fully understand the Portable Radio Use and Assignment Policy and Agreement Form. I also agree to the related Terms and Conditions of Use and willing to receive a radio assignment subject to those Terms and Conditions.
- By signing this Portable Radio Use and Assignment Agreement Form, I agree to the terms and conditions and accept the radio.
- It is your responsibility to ensure that the radio is fully charged for each clinical day, coming to clinical without your radio or uncharged, will result in being sent home and clinical instructor will go over exceptions in student counsel form. If it is the students second occurrence, you will be sent home and a notice of unsatisfactory progress.
- Radios must be turned in at the end of each Spring Semester.
- Keep your radio in a secured location where it cannot be accessed by children.
- Radios must be wiped down with an alcohol wipe after use after each attended clinical. Under no circumstances, the radio will be near or in contact with water.
- Use of the radio outside of the clinical setting may result in a notice of unsatisfactory progress or dismissal from the program.

Adopted: ________________

Date
*This Portion to be filled out by the student Receiving Portable Radio Assignment*

Date: __________________________

Radio Model: __________________________

Serial Number: __________________________
Radio ID: __________________________

Student Name: __________________________

Student Signature: __________________________
School Assignment: __________________________

*This Portion to be filled out by Administrator Assigning Portable Radio and verifying above Information*

Name: __________________________

Title: __________________________

Signature: __________________________
Physical Examination

All AAS students must provide evidence of a satisfactory physical examination within six weeks of the start of the fall semester (between July 1 and August 18), validating that they are able to meet the demands of the program without compromising the patient or themselves. In addition, the following psychomotor requirements must be validated:

1. Assess clients through auscultation, percussion, palpation, and other diagnostic maneuvers.
2. Manipulate equipment necessary to assist the individual, family and/or group to desired outcomes.
3. Lift and move individuals and/or groups of individuals to provide safe care and emergency treatment.
4. Perform cardiopulmonary resuscitation.
5. Perform independently of others.
6. Possess cognitive abilities to measure, calculate dosages, reason, analyze and synthesize.

Immunizations

The following immunizations must be current. You can obtain any required immunizations from your physician/physician’s assistant or nurse practitioner. Any immunizations that are still current do not have to be repeated.

1. Two-step tuberculosis (TB) skin test:
   Be sure you receive the two-step Mantoux or PPD. (This baseline is valid for 12 months. One-step renewals can then be done each 12 months thereafter.)

   **Step One:** Go to your physician’s/physician assistant’s/nurse practitioner’s office or a clinic and have the skin test done; return 48-72 hours later to have it read.

   **Step Two:** One week later, go back and have the skin test done again; return 48-72 hours later to have it read. A tine test is not acceptable, and the one-step TB test is not acceptable. If you have had a positive skin test in the past, you must have documentation of a negative chest x-ray.

2. Measles/mumps/rubella (MMR):
   (Series only to be done once in a lifetime.)
   a. If you were born in 1957 or after and have no serological evidence of immunity, no physician-diagnosed measles or mumps disease, or prior vaccination evidence, obtain two doses of MMR vaccinations.
   
   b. If you were born before 1957, show proof of one of the following:
      • history of physician-diagnosed measles and mumps disease
      • laboratory evidence of measles and mumps immunity
      • laboratory evidence of rubella immunity
      • MMR or Rubella vaccination evidence

3. Tetanus, diphtheria, pertussis:
   A Td booster is required every 10 years following the completion of the primary 3-dose series. A 1-time dose of Tdap to those younger than 65 years of age who have direct patient contact is required.

4. Hepatitis B series:
   The Hepatitis B series is a series of three immunizations. If you have not been previously immunized, the first immunization must be completed by the end of July, the second completed one month after the first, and the third immunization completed five months after dose #2. Check with your health care provider if you have questions.

(Note: Hepatitis A series: Currently, only Pahrump clinical facilities require immunization for hepatitis A. This is a series of two immunizations. If you have not been previously immunized, the second dose should be completed 12-18 months after the first. If the combined hepatitis A and hepatitis B vaccine (Twinrix) is used,
3 doses at 0, 1, and 6 months; alternatively, a 4-dose schedule may be used, administered on days 0, 7, and 21-30 followed by a booster dose at month 12.)

5. **Influenza:**
   Proof of immunization with vaccine(s) recommended for health care providers by CDC for the current year.

**It is the student's responsibility to ensure that all requirements are up to date. Failure to complete the requirements by the established due dates will result in the inability for the student to attend scheduled clinical activities and may result in a delay in completing the nursing program or dismissal from the nursing program.**

*The clinical site reserves the right to restrict clinical placements of students who are not fully immunized for any reason.*

**Insurance**

**Health Insurance:** Students are required to have health insurance throughout their tenure in the nursing program.

**Liability Insurance:** Nursing students are covered by the Nevada System of Higher Education’s liability insurance. Nursing students may purchase their own liability through various companies on an annual renewal basis.

**CLINICAL AGENCY DISCLAIMER**

While assigned to clinical agencies, students are not considered employees of the agency and will not be covered by Workman's Compensation, or malpractice insurance policies of the agency. Students must abide by existing rules and regulations of the Clinical Agency during their clinical assignments.

**Background Reports and Drug Testing**

Clinical affiliation agreements require that Great Basin College must assure that its students participating in all clinical/practicum rotations shall have a background and drug screening report completed. These reports will be done prior to admission to the Nursing Program with results disclosed to the participating clinical facility/agencies. If requested by the clinical facility/agency, Great Basin College students may be asked to submit to “for cause” drug and/or alcohol screening in a similar manner and under policies similar to those affecting employees of the participating clinical facility/agency. The results of the drug and/or alcohol screening may be disclosed in the event of a claim against the clinical facility/agency arising out of the acts of the student.

**Substance Abuse**

Great Basin College maintains a zero-tolerance position with regard to the use, sale, and possession of any illegal drug. Violation of any state or federal drug laws will subject the student to disciplinary action, which may include legal action concurrently. Illegal use or abuse of legal and/or prescription drugs will subject the student to similar disciplinary action.

**Philosophy:** Faculty believe safety for the student and patient is of the utmost concern. Faculty believe personal and health problems arising from substance use can affect academic and clinical performance, making students a danger to self and patients. Faculty are committed to confidential handling of recognition and treatment of substance use/abuse.

**Illegal Drugs:** For purposes of this policy, ‘illegal drugs’ means illegal use of controlled or illegal (i.e. prohibited) substances: any drug defined as such under the regulations adopted pursuant to Nevada Revised Statutes 453.146. Many of these drugs have a high potential for abuse. Such drugs include, but are not limited to, heroin, marijuana, cocaine, PCP, and "crack." They also include "legal drugs" which are not prescribed by a licensed physician. The definition of illegal drugs does not mean prescription drugs that are lawfully being taken by a student as prescribed by a licensed health care professional; the student must be under the direct medical care of the licensed health care professional. Although marijuana is legal in the State of Nevada, marijuana is a Schedule 1 substance under federal law and continues to be an illegal substance for purposes of this policy; thus, its use is prohibited. In addition to other illegal drugs as described above, the overuse and/or abuse of alcohol is also prohibited under this policy.
**For Cause/Reasonable Suspicion Testing:** If requested by the clinical facility/agency, Great Basin College students may be asked to submit to “for cause” drug and/or alcohol screening in a similar manner and under policies similar to those affecting employees of the participating clinical facility/agency. The results of the drug and/or alcohol screening may be disclosed in the event of a claim against the clinical facility/agency arising out of the acts of the student.

If faculty has a reasonable suspicion that a student is using illegal drugs or is demonstrating signs of impairment while engaged in college-related activities, faculty must immediately remove the student from the classroom, laboratory, or clinical environment. If reasonable suspicion exists faculty may ask the student to submit to “for cause” drug and/or alcohol screening at the student’s expense. Great Basin College is responsible for identifying and providing safe travel to and from a designated vendor for the testing/screening. If a student refuses to submit to a reasonable suspicion drug and alcohol screening test, the refusal will be considered a presumptive positive/admission of impairment, which poses a risk of harm to self and patients.

**Impairment:** To determine reasonable suspicion, the following factors may be considered, but are not an exclusive list of factors justifying a drug or alcohol screening:

1. The physical symptoms or manifestations of drugs or alcohol use and impairment such as altered or slurred speech or repeated incoherent statements, disorientation, chronic drowsiness and/or sleepiness, dilated or constricted pupils, flushed skin, excessive sweating, tremors of the hands, excessive drowsiness or loss of consciousness;
2. Unexplained, abrupt, or radical changes in behavior such as violent outbursts, hyperactivity, extreme suspiciousness, frequent and/or extreme fluctuations of mood swings without explanation, deteriorating hygiene/appearance;
3. Inability to walk steadily or in a straight line, or perform normal manual functions essential to clinical treatment without reasonable explanation;
4. Accident or “near misses” in a clinical environment that appear related to unexplained sensory or motor skill malfunctions;
5. Perceived odor of alcoholic beverages or marijuana
6. The direct observation of drug use or alcohol use immediately prior or during program related activities

Students who have a medical condition, injured, or taking any substance that impairs judgment (including prescription medications, medical marijuana, and alcohol) are not suitable for and cannot be present in the clinical environment where patient safety is the topmost concern.

*Faculty must document student characteristics that warrant reasonable suspicion.

**Positive Drug Test Results/Sanctions:** All students must satisfactorily pass any required drug test at the time of admission as well as when requested by program for cause” reasonable suspicion”. A refusal to undergo a drug screening test will be considered a presumptive positive.

Students who do not pass a required drug test will face disciplinary action, including rescinding of their admission, administrative withdrawal from courses, placement on a leave of absence, or dismissal from the academic program. Students should be provided with resources for counseling services for evaluation and treatment. Any costs incurred or required as part of a treatment program or ongoing monitoring are the responsibility of the student.

**Program Re-Entry:** Students re-entering the program after receiving disciplinary action for a positive drug and/or alcohol screening test will be required to submit to a drug screening test prior to re-entry. Documentation or counseling and/or physician acknowledgement of prescribed medications and presumed safety in the clinical setting may also be required.

References
Bloodborne Pathogen Exposure and Prevention Policy

Standard Precautions must always be used by students and faculty in all clinical facilities and the Practice Lab. Current CDC Recommendations for Application of Standard Precautions for the Care of All Patients in All Healthcare Setting are available at:

https://www.cdc.gov/sars/guidance/i-infection/app1.html

The nursing program has developed a Bloodborne Pathogen Exposure and Prevention Policy to be in compliance with the Occupational Safety and Health Administration (OSHA) Standards. The policy is intended to provide direction to students and faculty to help prevent exposure to blood-borne pathogens and guidance should such exposure occur. (See Appendices Section for policy and form).

Health and Injury Policies

**First Aid, Accidents, and Injuries:**

1. A student who is injured in a clinical facility during a clinical course must report the incident to their instructor immediately. If indicated, the student will be seen in the hospital emergency room at no expense to the clinical site. The decision to send the student to the emergency room will be made by the faculty, student, and AAS Nursing Director, if indicated.

2. In the event of a student injury in a nursing classroom, the Practice Lab, or in a clinical agency, the student and faculty must also complete the Associate Degree Nursing Program Injury Report form (see Appendices Section) and submit it to the AAS Nursing Director. If an injury occurs in a clinical agency, the student and faculty must also adhere to the agency’s injury policies and complete any reports or forms required by the facility.

3. All Elko site safety and security officers are CPR and first responder trained. The security patrol vehicles contain first response/emergency accident response equipment. For minor injuries each building is equipped with a first aid kit, which the responding staff may use to take care of the injury.

4. An Automatic External Defibrillator (AED) is located at all GBC locations: Elko: in the Health Science building hallway by the front offices; Pahrump: in the main office; Winnemucca: in the main office.

Other Health Policies and Information

1. The nursing program requires clinical work performed in hospitals and other facilities that involves providing direct care or exposure to clients with a variety of illnesses and diseases, including the handling of and/or contact with human body fluids. Therefore, students should understand that they may or will be exposed to disease-carrying bacteria and microorganisms and come in contact with patient situations that could be hazardous to individuals who are pregnant or immune compromised.

2. Students who have a latex allergy must inform their instructor at the beginning of each semester so arrangements can be made to protect the student from exposure.

3. After hospitalization, surgery, serious illness, injury, childbirth, etc. a student must submit a release statement from a health care provider indicating their medical clearance to return to full time status to the nursing program. A copy of this medical release statement will be placed in the student’s file.
Essential Eligibility Guidelines for Participation in the AAS Nursing Program

The functional abilities adopted by Great Basin College’s AAS Nursing Program are defined by the National Council of State Boards of Nursing and related to the behavioral components of competence, which has been defined by the National Council of State Boards of Nursing as “the application of knowledge and the interpersonal, decision-making, and psychomotor skills expected for the nurse’s practice role, within the context of public health, safety and welfare” (1966).

The functional abilities refer to those physical, cognitive, and behavioral abilities and competencies required for satisfactory completion of all aspects of the nursing program. These functional abilities are non-domain specific (i.e., physical and mental activities and attributes needed by a nurse to practice safely in terms of essential nursing functions, with or without accommodations). Applicants to the AAS Nursing Program and students continuing through the nursing program must demonstrate competence in the following categories of behavior in order to successfully meet program learning objectives:

**Physical Abilities:**
- Gross motor skills
- Fine motor skills
- Physical endurance
- Physical strength
- Mobility

**Sensory Abilities:**
- Visual
- Tactile
- Olfactory (smell)
- Hearing

**Cognitive Abilities:**
- Reading

**Arithmetic:**
- Emotional stability

**Analytical thinking:**
- Critical thinking

**Interactive Abilities:**
- Interpersonal skills
- Communication skills

**Integrity:**

Policies and Guidelines for Nondiscrimination for Disability

Great Basin College is committed to providing equal educational opportunities to qualified students with disabilities in accordance with state and federal laws and regulations, including the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973. A qualified student must furnish current verification of disability. The Students with Disabilities Office, located in Berg Hall, will assist qualified students with disabilities in securing the appropriate and reasonable accommodations, auxiliary aids, and services. For more information or further assistance, please call 775.327-2336.

Procedure for Accommodation on the Basis of Disability

The ADA Officer will assist qualified students with disabilities in securing the appropriate and reasonable accommodations, auxiliary aids, and services.

Questions regarding appropriate accommodations should be directed to the GBC’s ADA Officer in Elko at 775.327-2336.

Sexual Harassment

The Nevada System of Higher Education (NSHE) is committed to providing a place of work and learning free of sexual harassment. Where sexual harassment is found to have occurred, the NSHE will act to stop the harassment, to prevent its recurrence, and to discipline those responsible in accordance with the NSHE Code or, in the case of classified employees, the Nevada Administrative Code. Sexual harassment is a form of discrimination; it is illegal.

It is expected that students, faculty, and staff will treat one another with respect. Refer to the GBC general catalog for the entire policy. Each case of accused sexual harassment will be reviewed on a case-by-case basis.
GBC Academic Regulations

All faculty and students are responsible for following the Great Basin College regulations and guidelines as printed in the Great Basin College Catalog 2023-2024.

Academic and Professional Dishonesty

Academic dishonesty (“cheating”) involves all methods or techniques that enable a student to gain unfair advantage in the clinical or classroom setting (see the Great Basin College Catalog for the definition of cheating in the Academic Honesty section). Cases of academic dishonesty ordinarily result in a grade of “F” for the assignment and/or the course, in accordance with published course policies. The violation may lead to the student’s dismissal from the Great Basin College Nursing Program and, in some cases, dismissal from Great Basin College. GBC and NSHE policies and procedures related to student conduct and academic honesty will be followed. Academic and/or professional dishonesty may occur in a variety of situations, including but not limited to the following:

**Individual Assignments, Quizzes, Tests, and Examinations:** Copying from a neighbor’s paper during the exam (quiz or test); talking or sharing information during an exam; using crib notes when taking a closed book examination; arranging for another person to substitute in taking an examination; giving or receiving unauthorized information when taking an examination.

**Plagiarism:** Plagiarism is knowingly representing the work of another as one’s own, without proper acknowledgement of the source. The only exceptions to the requirement that sources be acknowledged occur when the information, ideas, etc., are common knowledge. Plagiarism includes, but is not limited to, submitting as one’s own work the work of another person or work obtained from a commercial writing service; quoting directly or paraphrasing closely from a source *(including the Internet)* without giving proper credit; using figures, graphs, charts, or other such material without identifying the sources.

Faculty expects that students will demonstrate professional and academic integrity at all times. Faculty will explain their course expectations and students are expected to ask questions when clarification is needed.

Essential Skills

**Effective communication** involves the ability to employ therapeutic communication techniques and appropriate interpersonal relationship skills during interactions with instructors, clients, family members, and groups of individuals including health care team members, peers, and supervisors.

**Critical thinking** is a reasoned, interactive, and reflective process focused on deciding what to believe or do. Critical thinking involves the ability to identify and challenge assumptions, the ability to explore and imagine alternatives, as well as the ability to make judgments based on evidence (i.e., fact) rather than conjecture (i.e., guesswork).

Critical Behaviors

**Accountability** is the state of being responsible for one’s individual behaviors and their outcomes when assuming the professional role. Accountable means being attentive and responsible for the health care needs of the individual, family, or group. The faculty believe the initial groundwork for accountability is laid during the first semester and continues throughout the student’s professional career. Ideally, continued education experiences strengthen the student’s ability to further explore, analyze, and test one’s functioning relative to accountability.

**Collaboration** is defined as the intentional act of a professional’s background and commitment to respond to problems as a whole are essential. Fundamental to the concept of collaboration is the ability to independently communicate and make decisions in support of the individual, family, or group.

**Self-leadership** can be described in terms of an individual having a positive self-regard which consists of knowing one’s strengths and weaknesses, allowing oneself to be challenged and strengthened through goal setting, and understanding the fit between one’s ability to contribute to the organization and the organization’s needs. Self-leadership is also the influence that individuals have over themselves to regulate, manage, direct, and/or control their own behavior.
Great Basin College Student Conduct Policy

All students are held accountable for their behavior under GBC’s Standards of Conduct for Students located in the college catalog and NSHE Code, Title 2, Chapter 6. Section 6.2.2 regarding misconduct. Nursing students are also responsible for additional standards of conduct for nursing professionals (see Appendices Section).

Written Paper Expectations and Format

The American Psychological Association format is required for written papers. Citations and references used in any assignment should be written in APA format.

Faculty expect papers and other written assignments to be written at a college level and to reflect professional communication. Detailed written expectations can be found in the document titled Writing Expectations for Great Basin Nursing Students in the Appendices Section.

Textbooks and Other Course Materials

Textbooks may be purchased at the Great Basin Book Store, 1500 College Parkway. Elko, NV 89801 (775) 753-2270. Students may purchase through the website at https://www.bkstr.com/greatbasinstore/home Students also have the option to purchase books through outside sources. Syllabi are available online on individual WebCampus course web sites the day the course starts.

Grading

The following grading scale will be applied to all nursing coursework:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage Range</th>
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</thead>
<tbody>
<tr>
<td>A</td>
<td>100 - 94.00</td>
</tr>
<tr>
<td>A-</td>
<td>93.99 - 90.00</td>
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<td>B+</td>
<td>89.99 - 87.00</td>
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<td>B</td>
<td>86.99 - 84.00</td>
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<td>B-</td>
<td>83.99 - 80.00</td>
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<td>66.99 - 64.00</td>
</tr>
<tr>
<td>D-</td>
<td>63.99 - 60.00</td>
</tr>
<tr>
<td>F</td>
<td>Below 60.00</td>
</tr>
</tbody>
</table>

Note: Student grades will be calculated out to two decimal places (to the hundredth). There will be no rounding up of scores. Criteria for grading will be given to the student in writing at the beginning of each course. It is the student’s responsibility to know his/her grade point average throughout the course.

- Students are responsible for all written/verbal information that is shared in scheduled classes.
- Students must submit all theory or clinical written assignments on or before the day they are due. Students are responsible for complying with assignment submission guidelines as outlined in each nursing course syllabus.
- It is the policy of the GBC Nursing Department not to pre-grade any submitted assignment. Once an assignment is submitted, the Nursing Faculty will review for only a final grade not for re-submission.

Drop/Withdraw Policy

According to GBC policy, if you do not complete the course and/or do not formally withdraw by the set drop deadline, your instructors will automatically assign you a grade of “F” for the course. The drop deadline for each course will be stated in the course syllabus.

Testing Policy

Course Exams

Exams will be taken during prearranged times and dates. Specific information will be provided to students by the faculty member responsible for a particular course. Unless otherwise indicated, all exams will be closed book, timed, and monitored.
**Testing Procedures**

1. All student possessions (backpacks, cellphones, water bottles, hats, etc.) must be left at the front of the room.
2. Students are not permitted to sit at their desk with notes prior to the test. Any last-minute studying must be conducted outside the classroom.
3. The procedure for proctored tests should be as follows:
   a. Students take the test and submit it online.
   b. If Cooperative Testing is utilized, it will be carried out as follows:
4. Students will work in groups of 3-6 to take a Cooperative Test.
5. Students who received less than a 76% on the individual test, will not receive any Cooperative testing points.
6. The time allowed for the Cooperative test will be half the time that was provided for the individual test.
7. Students earning an A on the group test will have 3% added to their individual grade; those earning a B on the group test will have 2% added to their individual grade; those earning a C on the group test will have 1% added to their individual grade. A grade less than 76% on the group test will earn no points.
8. Answers and rationales will only be provided after the Cooperative test and may require you to schedule a meeting with your instructor.
   a. Students who disagree with the correct answer may complete a Student Test Query Form (see Appendix H-3) to explain their rationale for their chosen answer. These forms will be submitted to the faculty within 72 hrs. Only the student submitting the query may or may not receive credit based on the discretion of the instructor.
   b. There will be no discussion of test items between students and faculty on the day of the test, during the test, or after the test is completed.
   c. If a student is absent from a test, it will be up to the discretion of the instructor as to whether the same test may be used to make-up the test or a different test will need to be administered. A different test may be of a different format as well (essay, short answer, etc.).
   d. Simple, non-graphing, calculators without memory can be used for dosage calculations if necessary. No cell phones are permitted.

**Reviewing Tests with Faculty**

1. It is at the faculty’s discretion if a group review is conducted. If so, the students will not be allowed to take any notes; they can only review the exam and discuss questions with other students or faculty.
2. All students earning less than 76% on any exam at any time during a course (or two exams if so, indicated in the course syllabus) must make an appointment with the faculty to complete a Notification of Unsatisfactory Student Progress form.
3. The faculty will discuss with the student the results of the test and assist the student with strategies for improvement on the next test.
4. Students who do not follow this policy will be contacted by the faculty for a discussion of the importance of remediation for success in the nursing program.
5. Once a student has received three Notifications of Unsatisfactory Student Progress forms within one semester or a total of four over the course of the AAS Nursing program, they will be required to appear before the Admissions and Progressions committee to determine progression in the program and discuss an individual plan for progression.

**Medication Dosage Exam Process**

Simple, non-graphing calculators will be permitted during the exam. Use of calculators on cell phones or PDAs is NOT permitted. Using these types of calculators will cause the student to forfeit the exam. Faculty provided conversion tables may be used for the dosage exam in the first semester only. Students may miss one question on this exam. Students will have three chances to pass this exam. After the second failed exam, the student will receive a Notification of Unsatisfactory Student Progress and will be required to repeat the ATI modules and corresponding post-tests before their third attempt. If the student fails their third attempt, they will be dismissed from the nursing program with opportunity for readmission or re-entry per the Nursing Program policy.
Medication Dosage Calculations Testing

Students will be required to pass a dosage calculation exam each semester. These will be short exams that will be scheduled by the instructor. Students will take the dosage calculation exam after completing the required ATI Modules and corresponding module post-tests listed below.

1. **Semester One:**
   a. Safe Dosage
   b. Medication Administration
   c. Oral Medications
   d. Injectable Medications

2. **Semester Two:**
   a. Safe Dosage
   b. Parenteral (IV) medications
   c. Powdered medications
      - Review all modules from semester one

3. **Semester Three:**
   a. Safe Dosage
   b. Critical Care Medications
   c. Dosage by Weight
   d. Pediatric Medications
      - Review all modules from semesters one and two

4. **Semester Four:**
   a. Safe Dosage
      - Review all modules from semesters one, two, and three.

Each semester students must pass the ATI Safe Dosage module post-test with a 100%. Additional ATI module post-tests listed will require a 90% pass rate. Transcripts are required prior to taking the dosage calculation exam. Students will submit transcripts of module (lesson and test) on date indicated by instructor.
<table>
<thead>
<tr>
<th>Dosage Category</th>
<th>1st Semester</th>
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<th>3rd Semester</th>
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<td>Fundamentals</td>
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<td>Medical-Surgical Obstetrics Pediatrics</td>
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<td>Semester 1 &amp; 2 materials plus: mg/min ml/hr mg/g mcg/kg/min kg/lb units/kg/hr mcg/min g/hr mcg/kg/day mg/kg/day mg/ml mEq/kg mEq/ml mg/kg units/kg ml/kg ml/day mg/kg/dose lb oz kg</td>
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<td>Semester 1, 2, &amp; 3 materials.</td>
<td></td>
</tr>
</tbody>
</table>

**Table of Conversions by Semester**

**Clinical Grading**

1. A mid-term evaluation will be completed for fundamentals and med/surgical base courses for clinical performance. If there are areas of clinical performance that are identified as not meeting satisfactory, a remediation plan will be developed for each individual student.

2. A final clinical evaluation will be done collaboratively by faculty and student. The student must achieve an average of 2.85 (based on a scale of 1-4 with no level 1 ratings) for semesters one-three; semester four students must achieve an average of 3 (based on a scale of 1-4 with no level 1 ratings) in all competencies on the final clinical evaluation to pass any course with a clinical component.

3. Students also complete varied clinical assignments, a final clinical grade for each course must be a 76% or greater.

**Class Attendance**

Attending class is an integral part of the program and critical in successful completion of each course. Whether the class is traditional or virtual in its delivery, it is EXPECTED that each student ATTEND ALL CLASSES and arrive for class ON TIME. In the event of an absence, it is the student’s responsibility to obtain the announcements, information and any handouts provided by the instructor. Except for emergencies, missed tests, quizzes, or class work (random or scheduled) may NOT be made up. Students with a pattern of absences from class or tardiness (i.e., emergency or otherwise), will receive a behavioral counseling from the instructor. Any subsequent absences may be referred to the Director.
**Classroom Etiquette**

Successful learning experiences require mutual respect. The faculty has primary responsibility for and control over classroom/clinical behavior and maintenance of academic integrity. Student behaviors that demonstrate appropriate classroom etiquette include:

1. Arriving for class/clinical early and/or on time.
2. Treating everyone in class or clinical with courtesy and respect.
3. Refraining from packing up belongings before class/clinical ends.
4. Turning off all electric devices that could cause disruption to the class or clinical area.
5. Being quiet and giving full, respectful attention while the faculty or another student is speaking.
6. When speaking, using courteous, respectful language, and keeping comments and questions relevant to the topic.
7. Following any additional classroom rules established by individual faculty.

Great Basin College states: “messages, attitudes, or any other form of communication deemed outside the bounds of common decency/civility as judged by common standards of classroom behavior (determined as they would in a regular classroom by the instructor) will not be tolerated.”

At GBC, students are expected to assist in maintaining a class environment that is conducive to learning. It is required that students conduct themselves in a manner that does not disrupt the teaching or learning atmosphere. All classroom participants have the responsibility to maintain classroom and online discussions that are professional and not disruptive by being courteous and using respectful language. This courteous behavior continues beyond the classroom to any community interactions as a GBC nursing student.

Be an engaged learner and encourage your fellow students to do so as well.

**Informal Academic and Behavioral Counseling Forms**

This informal counseling process allows for faculty and students to discuss any concerns in relation to a student’s academic, clinical, professionalism and or behavioral performance. This provides faculty and students an opportunity to make suggestions for issues of concern to help improve performance and is not punitive. The forms serve as documentation that the faculty has met with the student and includes recommendations and feedback. A copy of the form is given to the student and placed in the student’s file for documentation. If there is ongoing concern or if a pattern of academic, clinical, professional and/or behavioral misconduct continues, a Notification of Unsatisfactory Progress will be warranted.

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ANY STUDENT ENGAGING IN INAPPROPRIATE BEHAVIOR WILL BE REMOVED FROM THE CLASSROOM. COUNSELING MAY OCCUR WITH THE FACULTY AND OTHER DEPARTMENT OR GBC PERSONNEL. REFER TO STUDENT CONDUCT POLICIES IN GBC GENERAL CATALOG.
Unsatisfactory Student Progress Policy

Students who are admitted to the AAS Nursing Program must maintain their status as a student in good standing in both academic and academic-related areas based on the following criteria. Failure to do so may result in dismissal from the program.

Unsatisfactory Progress for Academic Reasons

Students must meet with faculty member(s) to complete a Notification of Unsatisfactory Student Progress form based on the following:

1. who earn less than 76% on a clinical assignment or two clinical assignments if so, indicated in the course syllabus.
2. who earn less than 76% on a theory assignment or two theory assignments if so, indicated in the course syllabus.
3. who earn less than 76% on any exam at any time during a course or two exams if so, indicated in the course syllabus.
4. who do not earn a Level 2 after two attempts for an ATI Proctored Assessment
5. who earn less than 76% on one to three course quizzes or as indicated in course syllabus.
6. who do not pass a skills checkoff after two attempts (see laboratory policy)
7. who have not met expected performance, safety, or conduct standards.
8. who at the end of the course do not meet the final clinical evaluation competencies (this will also result in a student not passing the course).

Unsatisfactory Progress for Academic-Related Reasons

Conduct consistent with professional standards of ethical, academic, and clinical behaviors must be exhibited at all times, including within classrooms.

1. In a clinical course, if a student’s performance is determined by nursing faculty to be unsafe, the student may be removed from the clinical setting which will result in a Notification of Unsatisfactory Progress for unsafe practice.
2. If at any time a student’s observed behavior or performance raises any questions on the part of nursing faculty about the student’s physical, emotional, cognitive, and/or emotional status and/or ability to perform or behave safely and/or appropriately, the faculty will meet immediately with the student, document their observations, and notify the Director. A student may be asked to leave a clinical or classroom setting, if the nursing faculty member determines it is warranted. When appropriate, site security or its equivalent in clinical settings may be called, in addition.
3. If the student is determined to be unable or unwilling to perform or behave appropriately, the student’s emergency contact will be notified. The student’s emergency contact is responsible for taking the student home.

Unsatisfactory Progress Procedure

1. Students failing to meet any of the criteria above will receive a written Notification of Unsatisfactory Student Progress (See Appendices Section).
2. Faculty will identify area(s) of performance needing improvement in either academic or academic-related (clinical/skill performance) areas and outline recommendations and suggest an action plan for improvement. Students will also provide input for an action plan. Documentation of poor performance must be included with the unsatisfactory student progress form.
3. Faculty should review the tracking worksheet to determine if the student is required to meet with the Admission and Progression Committee. If so, the instructor should immediately contact the Admission and Progression Committee Chair, to obtain next meeting information and request that a letter from the Chair be prepared for the student to appear at the next meeting.
4. The completed form will be signed by faculty member(s) and student.
5. Completed Unsatisfactory forms will be given to the Administrative Assistant.
6. The Administrative Assistant will then document on the tracking worksheet and in the student file. If the form has
been issued for a student in Winnemucca, Pahrump, or Ely, one of the issuing faculty members will scan the form and place in the student’s file and notify the Administrative Assistant.

7. Faculty will be responsible for copying the completed form for the student.
8. The Administrative Assistant will file the completed form in the student file.
9. The Administrative Assistant will ensure that a letter has been mailed/delivered to the student if Committee appearance is required.
10. The Administrative Assistant will also add the student’s appearance to the next Committee meeting agenda, if required.

The Admission and Progression Committee will review student’s academic or clinical performance to determine if the student can continue progression in the program or is dismissed from the program. Students may at any time be referred to the Admission and Progression Committee for serious infractions of professional, academic, or academic-related performance.

1. Students who receive three (3) Notifications of Unsatisfactory Student Progress forms within one-semester must meet with the Admission and Progression Committee.
2. Students who receive a total of four (4) Notification of Unsatisfactory Student Progress forms over the course of the AAS nursing program must meet with the Admission and Progression Committee.
3. Upon receiving the sixth (6) Notification of Unsatisfactory Student Progress at any time during the nursing program, the student will be dismissed from the program without appearing before the Committee. Students who are reentering the program at any point in the semester will only be able to receive five Notifications of Unsatisfactory Student Progress. See below (pg. 41) for Notification of Unsatisfactory Student Progress limitations for readmitted students.

Process for Admission and Progression Committee Review

One of the responsibilities of the Admission and Progression Committee is to review student academic problems referred by faculty and on matters related to progression, dismissal, or reinstatement of students. The purpose and functions of the Admission and Progression Committee can be found in the Appendices Section.

1. All students undergoing review by the Admission and Progression Committee must submit a one-page study plan to the Committee outlining their plan of action for improvement. The plan must be received by the Administrative Assistant at least one (1) day prior to the next scheduled meeting of the Admission and Progression Committee. Study plans will not be accepted the day of the committee meeting.
2. The committee will review the student’s course grades and overall academic and academic-related (clinical/skill performance) record, the course faculty’s evaluation, and the student’s written plan for improvement. Course faculty whose students are undergoing review by the Admission and Progression Committee are requested to be available to consult with the committee if needed during the review.
3. The Admission and Progression Committee reviews all the information received and recommends to the Chair that:
   a. The student shall implement their plan for improvement and be allowed to continue in the program. The Committee may require additional steps or conditions the student must meet after reviewing the student’s plan for improvement.
   b. Or, to the Director if: The student should be dismissed from the program.
4. A student who is requesting to voluntarily withdraw must submit a letter to the Admission and Progressions Committee. The Admissions and Progressions committee will make a recommendation for the student’s progress to be readmitted back into the program if the student files a request to do so.

Voluntary Withdrawal

Students who for personal reasons need to voluntarily withdraw from the program must immediately notify their instructor(s) and the Director of the nursing program. This should be in the form of an email or letter stating the student’s request to withdraw. It is the student’s responsibility to formally withdraw at the Registrar’s office from their nursing courses. If the courses are dropped after the course official drop date, a grade of “F” will automatically be assigned as per Great Basin College 2023-2024 catalog, under the Academic Standards section.

Transferring to a Different Site

Transfer to a different clinical site will be allowed after the successful completion of the first year of the nursing program. This request must be submitted to the Nursing Department by the last Friday in the spring semester. Granting a transfer will be based upon the availability of a student spot at the desired site. The transferring
student must complete the required orientation to the health care facility where medical/surgical clinicals take place and submit all documentation of this requirement to the Health Sciences and Human Services Administrative Assistant no later than August 1st prior to the start of the fall semester. If these requirements are not met, the transfer will be forfeited.

Dismissal and Readmission/Re-Entry to the Program

1. Students who have failed either the theory or clinical component of a nursing course, which results in a grade less than 76% or have not met final clinical evaluation competencies, will be dismissed from the program, and may not continue with other nursing courses for the semester.
2. Students will be dismissed for six Notifications of Unsatisfactory Progress. Students who re-enter the program after the first semester will be dismissed for the number of Notifications of Unsatisfactory Progress limitations stated below on page 41.
3. Students who are dismissed will receive an administrative withdrawal (W) for all current nursing courses in the semester of withdrawal. Refunds are dependent upon GBC policy and course drop dates.
4. Students returning to the program at any time are expected to submit all newly developed assignments. Using previously submitted work is considered plagiarism and may result in a Notification of Unsatisfactory Progress or dismissal from the nursing program.

Students who have been dismissed from the program may apply only once to return to the program. Readmission is defined as re-starting the program from the first semester and re-entry is returning to the program in any other semester but the first. The student must indicate in writing through email or a letter sent to the Health Science Department attention to the Director their desire to be considered for return to the program no later than May 1st for readmission to the program or re-entry to second or fourth semester and January 2nd for re-entry to third semester. The student must meet all required specifications for return to the program as stated below along with any additional remediation recommendations made by the Admission and Progression committee upon dismissal from the program. All requirements and recommendations must be completed by the date specified by the Admission and Progressions committee.

Students who have been out of the program for more than one academic year must re-apply to the nursing program. Students who have been out of the program for less than one year and are completing the re-entry process will be accepted upon successful completion of the re-entry criteria. Students have the option to restart the program in the first semester (readmission) if they chose not to participate in the re-entry testing process to be placed beyond the first semester. A student must have successfully completed first semester to request readmission.

Readmission to First Semester Criteria

1. Exit interview with Director of Nursing
2. Admission application
3. Readmission Essay: This should include information regarding changes you have made that will help you to be successful in the program. This should be no more than 1 page, double spaced.
4. Number of remediation hours completed. Minimum of 20 hours prior to the first day of class.
   a. Nurses Touch (soft skills modules focusing on communication and self-care and professionalism) pre and post tests
   b. Complete Nurse Logic (study skills and critical thinking) all pretests, post-tests, and lessons-(Beginning pre and posttests)

Students are not guaranteed readmission to the program.

Additional Requirements for Re-entry to Second, Third, or Fourth Semesters

Please see the requirements below for each semester.

1. Exit interview with Director of Nursing
2. Re-entry application
3. Re-entry Essay: This should include information and changes you have made that will help you to be successful in the
program. This should be no more than 1 page, double spaced. Completed ATI remediation modules assigned
4. Number of remediation hours completed. Minimum of 20 hours/month. It is the student’s responsibility to track and
   maintain remediation hours that have been submitted each month. In the event that any technical issues should arise
during remediation, student shall contact ATI Testing (atitesting.com) for assistance.
   a. Nurses Touch (soft skills modules focusing on communication and self-care and professionalism) pre
      and post tests
   b. Complete Nurse Logic (study skills and critical thinking) all pretests, post-tests, and
      lessons-(Beginning pre and posttests, if returning 4th semester advanced pre and posttest)
   c. Review skills modules.
5. Re-entry students will be required to audit the Medical/Surgical courses prior to the re-entry semester. If
   students successfully pass re-entry testing for courses other than the Medical/Surgical courses, they will have
   the option of auditing those courses, it will not be required. Register for 1-3 credits and 1 -2 nursing audit
   courses (NURS 285: Special Topics) during the semester prior to the semester of re-entry. Number of credits
   in audit courses is dependent upon circumstances related to dismissal. In this course, students will be required
   to participate in all Medical/Surgical simulations, Medical/Surgical clinical days, and attend theory class. The
   auditing student will be required to take and pass the Dosage Calculation exam that is designated for that
   semester. Written submissions for Medical/Surgical clinicals will be required, but no grade will be awarded,
   only feedback from the instructor. Skills lab will be optional with skills checkoffs not being required. Students
   will receive a Satisfactory/Unsatisfactory grade for this course. If a grade of “Unsatisfactory” is earned in the
   audit course, the student may not be allowed to move forward in the program depending upon the discretion of
   the nursing faculty and Director.
6. Auditing students will receive scores on the mid-term and final clinical evaluations. If the student receives an
   “unsatisfactory” score (less than 2.85 with no level 1 ratings) on their final clinical evaluation, they will not be
   allowed to proceed in the program.
7. All submitted work must be original and cannot be resubmitted from previous nursing courses.
8. Testing requirements (dependent upon semester re-entry see below)
   a. Complete online practice assessments that correlate with the required ATI proctored exams: assigned
      based upon the semester the student exited the program. Review rationales for the questions missed.
      Focused review transcripts will count as part of monthly time spent requirement.
   b. Retake Proctored ATI exams with required score of level 2 based upon semester of return.

Second Semester:

Testing requirements:
1. Obtain a Level 2 or higher competency rating on ATI RN Fundamentals Proctored Assessment

Third Semester:

Testing requirements:
1. Obtain a Level 2 or higher competency rating on ATI RN Mental Health Proctored Assessment
2. Pass with no less than a 76% on comprehensive final exam for NURS 158 - Nursing Care of Adults in Health
   and Illness

Fourth Semester:

Testing requirements:
1. Obtain a Level 2 or higher competency rating on ATI RN Maternal Newborn Proctored Assessment
2. Obtain a Level 2 or higher competency rating on ATI RN Nursing Care of Children Proctored Assessment
3. Obtain a Level 2 or higher competency rating on ATI RN Pharmacology Proctored Assessment
4. Pass with no less than a 76% on comprehensive final exam for NURS 257 - Nursing Care of Adults with
   Acute and Chronic Illness

Scheduling for testing will be arranged after the application deadlines
Unsatisfactory Progress after Readmission Limitations

Students being readmitted to the program in the first semester will be accountable to the same Notification of Unsatisfactory Student Progress as new nursing students. Students re-entering the program in the second, third, or fourth semester will begin the semester with no (0) previous Notifications of Unsatisfactory Progress.

- **Second semester** – re-entry students will be dismissed from the program upon receiving the fifth (5) Notification of Unsatisfactory Student Progress without an option for readmission.

- **Third semester** – re-entry students will be dismissed from the program upon receiving the fourth (4) Notification of Unsatisfactory Student Progress without an option for readmission.

- **Fourth semester** – re-entry students will be dismissed from the program upon receiving the third (3) Notification of Unsatisfactory Student Progress without an option for readmission.

- Returning students will present before the Admission and Progression committee upon receiving two (2) Notifications of Unsatisfactory Student Progress in one semester or a total of three (3) throughout the remainder of the program.

Student Appeal of Admission and Progression Committee Decision

Decisions of the Admission and Progression Committee may be appealed directly to the Dean in writing within seven (7) working days after written notification of the decision is received. If the issue is not resolved after appealing to the Dean, the student may proceed to Step III of the Grievance Procedure described in the next section.

Grievance Procedure

The procedure described here differs from and supersedes the GBC procedure described in the college Catalog. The divergence from GBC policy is justified by the sequential nature of the nursing program curriculum and the safety and well-being of patients a student may care for.

Students who wish to explore problems that have not been resolved to their satisfaction can initiate the appeal process described below. Because nursing faculty have an obligation to safeguard individuals, a student in the appeal process might not be allowed to continue in the clinical component of a course until the issue is resolved.

Grievance Procedure Steps

**Step I:**
Schedule an appointment and discuss issue with faculty member(s) within seven (7) working days of the alleged occurrence. Within seven (7) working days of the scheduled meeting, the faculty member(s) shall issue a written decision. The decision may be delivered to the student by email, U.S. mail, or personally delivered.

↓

Resolution ➔ Stop

No resolution ➔ Proceed to Step II
Step II:
If the student is aggrieved by the resolution made in Step I, the student may file a written appeal with the Dean within seven (7) working days of receiving the written decision in Step I. The Dean shall meet with the student within seven (7) working days of receiving the appeal unless the student requests more time and this request is approved by the Dean. The Dean may invite the faculty member(s) to this meeting. The Dean may permit the student to bring someone to advise the student at this meeting. The Dean shall issue a written decision within seven (7) working days of the meeting. The decision may be delivered to the student by email, U.S. mail, or personally delivered.

Resolution ➔ Stop

No resolution ➔ Proceed to Step III

Step III:
If the student is aggrieved by the resolution made in Step II, then the student may file a written appeal with the Vice President for Academic and Student Affairs. The Vice President shall schedule a meeting with the student within ten (10) working days of receiving the appeal unless the student request more time and this request is approved by the Vice President. The Vice President may invite the Dean and the faculty members to this meeting. The Vice President may permit the student to bring someone to advise the student at the meeting. The Vice President shall issue a written decision within ten (10) working days. The decision may be delivered to the student by email, U.S.

Resolution

(Note: Dates given in this procedure may be adjusted if the Dean is not available due to absence or semester break.)

Student Evaluations of Faculty and Learning Outcomes
Toward the end of each nursing course, students will be asked to complete evaluation instruments. An analysis of the student responses is sent to faculty members after the completion of the term and the recording of grades. This data assists the faculty in self-improvement of their teaching and helps future students achieve course learning outcomes. The information is also used as part of the determination of the faculty member’s tenure and salary increases. Students are expected to carefully weigh their assessments and evaluate the faculty member fairly and accurately.

Gifts
It is the faculty policy that students shall not purchase gifts for them at the end of a particular course. Please adhere to this policy when thanking faculty for their support and guidance.
All nursing courses must be taken in required sequence. Because of the critical relationship between time and learning, the nursing faculty believes students must make full use of classroom, lab, and clinical experiences. Students are expected to meet all class, lab, and clinical requirements. Course work not completed will negatively impact student grades. Students are required to seek assistance promptly from the nursing faculty when and if they experience any degree of academic or clinical difficulty. If personal matters are interfering with academic or clinical efforts, the classroom and/or clinical instructor should be kept informed.

The faculty reserves the right to change certain aspects of the course syllabus, such as the schedule of assignments, grading procedures, or course materials. However, no changes will be made without informing students in a timely and clear manner. It is not anticipated there will be major changes in the content of a syllabus once a course begins.

### Four Semester Curriculum Pattern – All Courses

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<td>NURS 158</td>
<td>Nursing Care of Adults in Health &amp; Illness</td>
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<td>NURS 159</td>
<td>Nursing Care in Mental Health and Illness</td>
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<td>ENG 102</td>
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#### THIRD SEMESTER

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<td>NURS 257</td>
<td>Nursing Care of Adults with Acute and Chronic Illness</td>
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<td>NURS 273</td>
<td>Professional Development and Transition to Practice</td>
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**HUMANITIES or FINE ARTS**  
(Recommended: PHIL 102 – Critical Thinking and Reasoning)  
3

The total prerequisite general education and nursing courses is 70.5 credits. Of that total, 37 credits are in nursing course credits. The total number of clinical credit hours included in the nursing credits is 13. The program clinical hours total 585 contact hours in clinical settings.

¹ Science department prerequisite of BIOL 190.
### Curriculum Pattern – Nursing Courses Only

**Four Semesters**

<table>
<thead>
<tr>
<th>First Semester</th>
<th>Credits</th>
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<tbody>
<tr>
<td>NURS 135</td>
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<tr>
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<tr>
<td>NURS 154</td>
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<td>Introduction to Pharmacology</td>
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<td>NURS 158</td>
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<td>Nursing Care in Mental Health and Illness</td>
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**Description of Required AAS Nursing Courses**

**NURS 135 Fundamental Concepts in Nursing (8 credits)**
Introduction to basic concepts and competencies for the application of the nursing process in the care of diverse patients with common health alterations and to promote the health of individuals. Introduction to basic concepts of safe, patient-centered, evidence-based nursing care considering legal and ethical responsibilities of the nurse. Also introduces caring, clinical reasoning, quality improvement, communication, and teamwork when interacting with patients and members of the interprofessional team. Emphasis on essential psychomotor skills and obtaining patient information relevant to care planning.

**NURS 154 Introduction to Pharmacology (1 credit)**
Basic principles of safe and effective medication administration and pharmacology of major drug classifications. Principles of medication administration including aspects of best practice for safe, quality, patient-centered care. Includes the use of informatics and media to obtain evidence-based drug information.

**NURS 155 Clinical Decision Making in Drug Therapy (1 credit)**
Common drug therapy regimen and application of clinical reasoning in management and monitoring of drug effects in acutely ill patients for safe, quality, evidence-based nursing care. Focuses on patient teaching and the nurse as a member of the interprofessional team when providing pharmacological interventions.

**NURS 158 Nursing Care of Adults in Health and Illness (5 credits)**
Building on fundamentals of nursing, this course provides for the acquisition and application of basic adult health nursing theory by applying clinical reasoning and safe, evidence-based, patient-centered,
holistic nursing care to diverse patients with common acute health problems. Incorporates a focus on health promotion. Includes the application of the concepts of caring, clinical reasoning, quality improvement, communication, and teamwork, considering legal and ethical responsibilities of the nurse when caring for adults.

**NURS 159 Nursing Care in Mental Health and Illness (3 credits)**
Provides for the acquisition and application of mental health nursing theory for safe, evidence-based, patient-centered, holistic nursing care for diverse patients experiencing common acute and chronic mental health disorders and treatment modalities. Includes the application of the concepts of caring, clinical reasoning, quality improvement, communication, and teamwork, considering legal and ethical responsibilities of the nurse when working with patients with mental health disorders.

**NURS 252 Nursing Care of the Childbearing Family (3 credits)**
Provides for the acquisition and application of maternal/child nursing theory for safe, evidence-based, family-centered nursing care for diverse patients. Includes a focus on health promotion and the application of the concepts of caring, clinical reasoning, quality improvement, communication, and teamwork, considering legal and ethical responsibilities of the nurse when working with the childbearing family.

**NURS 253 Nursing Care of Children and Adolescents (3 credits)**
Provides for the acquisition and application of pediatric nursing theory by applying clinical reasoning and safe, evidence-based, family-centered, holistic nursing care to diverse children and adolescents with acute and chronic health problems. Includes a focus on health promotion, and the application of the concepts of caring, clinical reasoning, quality improvement, communication, and teamwork, considering legal and ethical responsibilities of the nurse when caring for children and adolescents.

**NURS 257 Nursing Care of Adults with Acute and Chronic Illness (5 credits)**
Provides for the acquisition and application of adult health nursing theory by applying clinical reasoning and safe, evidence-based, patient-centered, holistic nursing care to diverse adults with acute illnesses and long-term management of chronic illnesses. Includes a focus on health promotion and the application of the concepts of caring, clinical reasoning, quality improvement, communication, and teamwork, considering legal and ethical responsibilities of the nurse when working with adults.

**NURS 258 Patients with Complex Health Problems (5 credits)**
Provides for the acquisition and application of nursing theory for patients experiencing physiological crisis and end of life. Applies clinical reasoning and safe, evidence-based, patient-centered, holistic nursing care to diverse patients with complex health problems. Includes a focus on collaboration and care management, and the application of the concepts of caring, clinical reasoning, quality improvement, communication, and teamwork, considering legal and ethical responsibilities of the nurse in the management of patients in crisis and at the end of life.

**NURS 273 Professional Development and Transition to Practice (3 credits)**
Provides for an examination of the impact of clinical microsystems and organizational culture on patient care delivery and nursing practice. Incorporates an analysis of professional development resources for nurses upon entry into practice to facilitate progress from novice to expert.

**NURS 312 Health Assessment and Health Promotion (optional RN to BSN course) (3 credits)**
Explores assessment of the healthcare needs of diverse and underserved populations. The importance of the nurse in identifying health promotion and disease prevention issues for individuals and commands the nurse’s perspective on health assessment through integration of an expanded knowledge base in ethnic and cultural variations, risk behaviors, and common health deviations of populations.
NURS 417  Information Systems and Quality Management *(optional RN to BSN course)* (4 credits)
This course examines the role of information systems and quality improvement processes used to monitor and improve healthcare outcomes. Covers the use of information management to impact cost, safety, and coordination of care. Includes adaptations of information access and management in rural environments.

NURS 337  Pathophysiology *(optional RN to BSN course)* (3 credits)
Explores the pathophysiology processes associated with common chronic and acute health problems across the lifespan. Incorporates the influence of age, ethnicity, and cultural patterns on illness development and resolution. The evidence base supporting current knowledge of disease processes and common health problems is explored.

NURS 437  Diversity and Healthcare Policy in Environments *(optional RN to BSN course)* (3 credits)
Students explore the influence of diversity and healthcare policy on local, national and global issues of healthcare equity, access, affordability, and social justice. Incorporates an analysis of nursing practices that increase cultural competence, affect health policy resulting in improved healthcare access, and reduced health disparities. Instructor permission required.
HIPAA

The National HIPAA regulations apply in all school settings and students must demonstrate knowledge of the regulations prior to entering the clinical setting. HIPAA training will be maintained with documentation in each student file.

Clinical Assignments

Site Selection:
In planning clinical learning experiences for nursing courses, the faculty tries to assure that each student is scheduled for the clinical facilities that are most likely to provide a variety of learning situations appropriate to the unit or course content currently being studied. With this in mind, please note that travel to attend a clinical rotation may be required of some students. Clinical site selection is based on the following criteria:

- Type of facility/agency and accreditation status
- Type of experiences available
- Adequacy of staffing and staff preparation for their roles
- Average daily census or clients
- Available equipment, supplies, learning resources, etc.
- Receptiveness to students and faculty
- Number of students who can be accommodated at one time
- Number of faculty to accommodate an additional clinical site

Scheduling and Transportation:

- Scheduling students to be in the right place at the right time for the best possible experiences is a priority for faculty. As a result, there will be occasions when temporary irregularities in a student’s schedule are necessary. Every attempt will be made to notify students of these changes so that they can make necessary plans and adjustments in their personal schedules.
- Nursing students may be assigned day, evening, or weekend clinical experiences.
- Transportation to clinical facilities is the responsibility of the student this includes driving your own vehicle to home health clinical rotations.

Attendance:

Clinical attendance is mandatory. Students are required to attend every clinical rotation on the scheduled date and time.

1. Students are expected to report on time for scheduled clinical experiences and be willing, capable, and prepared to participate in assignments. Tardiness is defined as one minute or more past the designated start time. Arriving late for a clinical will result in student being sent home at the discretion of the instructor.
2. If a student comes to clinical/simulation/lab unprepared or late, are sent home from clinical/simulation/lab by their clinical instructor or fail to attend a scheduled clinical/simulation/lab the student will be required to complete a make-up assignment worth 50% of the total points of the original assignment that was attached to the missed clinical/simulation/lab.
3. Absences due to illness or other emergencies based on approval may be rescheduled if able or an alternative assignment may be given if rescheduling is not an option. There, is no guarantee that a clinical day can be made up.
4. If clinical is to be missed for any reason, you will need to contact the nursing department and the clinical area one hour prior, if possible, to report time. First, notify the clinical location you will not be in attendance and then send an email to your clinical instructor for the day in addition telephone the nursing office at 775-327-2317. If this is before business hours leave a message this should include your name, course you are in, clinical location, and instructor you are leaving the message for. It is the student’s
responsibility to notify the faculty and the clinical area of expected absence.

5. Due to concerns of unsafe patient care in a practice setting, a student who works a night shift or the previous eight hours prior to a scheduled clinical experience will be sent home from the clinical site. This will result in a clinical absence. Please see number 2 above.

**Dress Code and Personal Appearance Standards:**

Students are expected to maintain a professional, well-groomed, non-revealing appearance in representation of GBC’s AAS Nursing Program. Safety and cultural awareness are extremely important considerations in appearance standards. The standards below must be followed by both students and faculty. Students must adhere to any additional standards that may be required by some clinical agencies or faculty.

1. Fingernails are to be cleaned and trimmed to a moderate length not to exceed 1/8” length from the tip of the finger. Neutral nail polish and gel polish will be allowed, and if worn, must be in good repair without cracks or chips. No artificial nails will be allowed, including wraps, fillers, acrylics, tips, tapes, varnish, overlays, nail jewelry and any appliqués other than those made of nail polish are not permitted in clinical. Certain clinical sites may have a stricter policy that supersedes this policy. An immediate compliance with nail length is required.

2. Makeup and jewelry may be worn in moderation unless the department has specific regulations for safety purposes. No gauged ears. No visible body piercing, tongue piercing, facial piercing or ornamentation is allowed other than moderate (not excessive) ear piercings. Excessive size hoops (greater than 2 inches) are not acceptable. Jewelry may be limited or prohibited in certain patient care areas for safety and infection control reasons. Additional jewelry must be minimal. A watch and one or two small rings are acceptable. Students may be asked to remove rings that may scratch or injure patients, or if it may harbor bacteria.

3. In the interest of providing a professional atmosphere to our patients, tattoos are to be covered to the best of your ability during working hours. This would include covering of arm “sleeves” with long sleeve attire etc. Your clinical site can assist you in addressing particular or special needs.

4. Hair should be clean and neat for both men and women. Hair should be secured so that it does not fall forward over the face or shoulders. Hair longer than shoulder length should be contained with a clip or elastic band. Only natural hair color and conventional hair styles are permitted. Facial hair must be neatly trimmed and kept short (3/4 inch long or less).

5. Perfumes, after-shaves should not be worn. Lotions should be used in moderation in order to be considerate of sensitivities, allergies, and illnesses of patients, visitors, and clinical employees.

6. Good personal hygiene, to include baths and deodorant, is a common courtesy in health care facilities. Clothing should not smell of smoke or other strong odors.

7. Special care should be taken to avoid body odor and bad breath. Students who smoke should have no detectable order of smoke on their person in clinical settings.

8. The following are prohibited and cannot be worn to clinical:
   - Sweats, shorts, cargo pants, jogging suits or other athletic apparel.
   - Revealing clothing such as low-cut tops, midriff tops, low riding pants, or see-through clothing (i.e., no visible cleavage, backsides, midriffs, etc.). Tops must be long enough to cover the wearer’s midriff when arms are raised and the backside when bending over.

**Student Uniform:**

1. The **uniform and college name badge** are to be worn in every clinical setting unless otherwise state in course syllabus uniform requirements.

2. The **student uniform consists of a scrub top and pants.** Color and design may change from year to year, so be sure to verify what is required for your class. A plain white, cotton knit, short or long-sleeved tee may be worn underneath the scrub top. The white lab coat may be worn for warmth. Absolutely no sweatshirts or hoodies may be worn in the clinical setting.

3. For community-based clinical settings a **GBC nursing polo shirt with khaki-colored slacks** should be worn along with the college name pin. Jeans or leggings are not allowed.

4. A **white lab coat** is to be worn over the community uniform with the GBC name pin when students are
in the clinical area collecting information for patient assignments.

5. All scrub tops and white lab coats must have the GBC nursing program patch attached to the shoulder area of the left sleeve.

6. **White or flesh colored hose or socks** are to be worn with the nursing uniform (scrubs). **Nursing shoes are to be clean and white** with white shoelaces. White, clean athletic nursing shoes, with minimal colored decorations, are acceptable. Canvas or open toed shoes are not acceptable. **Black, brown, or white shoes** are required while wearing the community uniform.

7. The uniform should be washed daily to prevent cross infection/contamination and to control odors. No head gear or hats are allowed. Clothes should be pressed and in good repair. Do not wear your GBC uniform as your work uniform.

8. It is essential that uniforms and other attire fit well so it allows effective functioning in the clinical areas. Appropriate underwear is mandatory and at no time should breast or gluteal cleavage be visible.

9. Students are required to have the following equipment for Practice Lab and clinical use:
   a. black ink pen
   b. bandage scissors
   c. wristwatch with a second hand
   d. safety goggles
   e. pen light
   f. stethoscope
   g. hemostat

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**Student Identification Badges**

The student identification badge is a required part of the uniform. It is to be worn for every clinical rotation unless otherwise stated on the uniform requirements. Two badges are given to the student prior to clinical rotations in NURS 135. If the badge is lost, make arrangements for replacement with the HSHS Administrative Assistants. A student will be assessed for the cost of the replacement.

A photograph is required as part of the student identification badge. Arrangements will be made for students to have these pictures taken on site at the beginning of each academic year. Only first name and last initial of the student will appear on their badge. If a student is dismissed from the program, they must return all badges to the HSHS department.

**Dress Code and Personal Appearance Enforcement:**

- Clinical sites and clinical instructors are responsible for monitoring and enforcing this policy. This includes explaining the dress code to students during orientation, counseling students who are inappropriately dressed and setting a good example for students with a clean, neat, and professional appearance. In the event of questions regarding suitability of a particular garment, the AAS Nursing Director may be consulted.

**Authority and Responsibility in Clinical Settings**

- Students are legally responsible for their actions as a student nurse in clinical settings. The nurse working with a student is legally responsible for the patient.
- Clinical faculty are responsible for assigning duties, providing opportunities for demonstration of progression, and
serving as a guide in achieving objectives. It is necessary that the instructors be used as a guide to facilitate learning.

Students are subject to the rules and regulations defined in the personnel policies of the facilities with which the GBC AAS Nursing Program affiliates and the ANA Code of Ethics. It is the student’s responsibility to be aware of the facilities’ policies. If policies are not followed clinical rotation experiences will be discontinued until there is evidence that the student’s progress meets the criteria for competent clinical performance.

Communication in Clinical Settings

Communication in health care facilities must be on-going. Although students assume responsibility for their assigned patient while in clinical settings, the facility staff nurse does not relinquish total patient responsibility. The student is required to obtain information from the staff nurse regarding a patient before giving care. Ongoing communication is done with the primary nurse for any given patient during the rotation and in some cases, students are provided handheld radios in which they communicate with the nursing faculty and the primary nurse. Prior to leaving the facility or the assigned unit, the student is required to give a report on each patient to the staff/charge nurse or team leader who is responsible for the coordination of care.

Preparation for Clinical Experiences

Some clinical rotations require students to prepare and research information about their assigned patient on site in the clinical facility prior to the clinical date. Students will be notified of their assignment and must review patient information only during the hours specified by the faculty. While doing clinical site patient preparation the student must wear the nursing scrub jacket or white lab coat over the specified community uniform. A student name tag is required. The student must identify him/herself to the facility staff and state the purpose for being there. Students must have completed the HIPAA certification and signed the confidentiality agreement prior to reviewing any charts at any facility.

Performance of a New Skills

Students must be supervised by their clinical instructor when performing a procedure in a clinical setting that has not been performed outside of the Practice Laboratory. If the instructor is not available, the RN assigned to care for the patient may supervise a student with the instructor’s permission.

Students are required to review facility policy/procedures prior to performing any new skill and must be prepared to answer any questions from the instructor and the RN assigned to care for the patient. Students must plan their work carefully before they begin.

The student is expected to verbalize his/her plan to the instructor and/or RN assigned to care for the patient.

Students must document skills performed in clinical at the end of every clinical day. This will create a skills list have their skills book at clinical at all times and will be required to turn in the checklist at the end of the program.

Safe Practice Policy

1. Safe practice in a clinical setting includes those patterns of professional behavior that follow legal and ethical codes of nursing and promote well-being of clients and self. This will be demonstrated through accountability in preparation, documentation, and continuity of care, as well as in showing respect for the rights of individuals.
2. Unsafe practice includes those behaviors which may endanger a patient, family member, staff, peer, or faculty in the physiological, psychological, spiritual, or cultural realm. Specific behaviors of endangerment may include acts of commission or omission in the clinical agency and/or behavior that causes the faculty to question the student’s potential for safe practice.
3. The student whose actions or omissions endanger a patient, family, peer, staff member, or faculty will receive verbal and written documentation of the event. The student may be removed from the clinical setting.
4. Based on the severity and nature of the unsafe practice, the student may receive a failure for that clinical experience, for the course or be dismissed from the AAS Nursing Program.
5. Documented evidence from faculty, staff, clients, families, or peers may be used in the decision process.

Unsafe Practice Policy

If a student is deemed to be unsafe by clinical faculty, the student will be excluded from clinical rotation, this will result in being dropped from the course and with an assigned grade of “F”. This is applicable at any time during a semester. Behaviors that may result in immediate dismissal include, but are not limited to:
1. Performing acts beyond the scope of nursing practice
2. Unauthorized use or distribution of equipment or drugs
3. Falsification or alteration of agency documents
4. Patient abuse, neglect, or abandonment
5. Engaging in criminal activities
6. Violation of ethical principles
7. Violation of the GBC AAS Nursing Standards of Conduct policy

If an agency refuses to allow a student to continue in clinical rotation, the student will be assigned a grade of “F” and will fail the course.

Incident and Quality Assurance Reports

- For incidents that occur in clinical facilities and/or on the GBC site an incident report must be completed per facility policy. Incidents include injuries to a patient, visitor, or staff, and errors in treatment or medication. Facility regulations usually require students to fill out a quality assurance form (incident report) for any untoward happening. Completing the form does not automatically mean a person is responsible for the incident.
- Instructors will refer the student to the appropriate facility or department for incidents that result in exposure or injury. Documentation of the incident will also be recorded by the clinical faculty and kept at GBC.
- Most facility incident reports have a section on follow-up that should be regarded as protection for both the patient and the student. Clinical faculty must see all reports prior to being turned in by students.
- Failure to report an incident of which the student is aware is a serious error in judgment and a breach of student conduct subject to the faculty issuing a Notice of Counseling.
- The policy for reporting medication errors will be strictly followed by any student who has made a medication error.

Skill Remediation

Students who are unprepared when completing a required nursing skill/procedure in the clinical area will need to return to the Practice Lab for practice and remediation. The clinical instructor will give the student a remediation request slip. If remediation is required, the student must set up an appointment with the Practice lab instructor who will assist in correcting the skill. Students are responsible for having the remediation slip completed prior to the next clinical rotation, and to bring the completed remediation slip to clinical. Failure to complete the remediation prior to the next assigned clinical rotation will result in an unexcused absence from clinical.

Dishonesty in the Clinical Setting

If the faculty determines that a student has been dishonest in representing the facts regarding their clinical assignment, the student may receive a failure for that day, for the entire clinical rotation and/or be dismissed from the AAS Nursing Program. Examples of dishonesty during clinical instruction include but are not limited to: charting observations or interventions in a client record that, in fact, were not made (i.e., charting vital signs that were not taken); failing to report an error in medication or treatment.

Telephone and Verbal Orders by Second Year Students

Nursing students may take TELEPHONE or VERBAL ORDERS from physicians if the following conditions are met:

- **Must be a 2nd year student.**
- Student must have been caring for that patient and know the situation.
- For a telephone order, primary nurse or faculty must be on extension phone or with the student to verify order.
- For verbal order, primary nurse or faculty must hear the physician’s verbal order.
- Student will repeat “read back” the orders to physician to verify correctness.
- Student will write orders on order form and faculty/primary nurse will countersign the order.

Medication Error Policy and Procedure

1. All medication errors must be reported to the nursing instructor and staff nurse responsible for the patient immediately on discovery of the error. After the patient is assessed, the error will be reported to the charge nurse...
or unit manager and to the physician.

2. Documentation of what medication was or was not given must be properly recorded in the patient’s medical record. Seek guidance from your clinical instructor before documenting in the medical record. This documentation includes the name of the drug, the patient’s response, and any interventions.

3. All medication errors should also be documented on the appropriate quality assurance form or equivalent per facility protocol where the error occurred.

**Definition of medication errors:**

a. Medication given to the wrong patient
b. Wrong medication given to patient
c. Medication given at the wrong time
d. Medication given via the wrong route
e. Medication given in the wrong dose
f. Medication omitted
g. Administration of medication not documented properly
h. Medication administered after patient refusal
i. Administration of a medication that has already been given
j. Giving a medication that has been discontinued
k. Medication left at the bedside without an order to do so
l. Failure to check physician’s orders or complete necessary assessment interventions prior to administering the medication; For example, failure to: take an apical pulse, take a blood pressure, or check appropriate lab levels
m. Failure to calculate correct dosages.
n. Administering medication prior to skills check-off.

4. Medication errors that endanger the patient’s life or cause the patient harm can be grounds for immediate termination from the program.

5. Documentation of medication errors will be maintained in the student’s file.

6. Students giving medications under the supervision of an instructor will still be held accountable for medications errors even if the instructor prevents the error from occurring.
The purpose of the Practice Lab is to provide students with the appropriate environments and equipment to engage in safe, high quality, structured clinical experiences. The lab is designed to:

- Provide a **safe and supportive** learning environment in which students can become competent in psychomotor and clinical reasoning skills in realistic situations before those skills are applied with patients in actual clinical settings.
- Provide simulated clinical experiences with situations and patients problems not usually available in students’ regular practice sites.
- Model quality and safety in clinical environments reflecting current evidence and best practices.
- Enable reflective practice free from the distractions of normal clinical environments.
- Allow participation in situations and scenarios that are dependent upon interdisciplinary collaboration.
- Provide clinical experiences structured to build confidence and development of increasing complex skills and clinical reasoning competency.

The Practice Lab is a single location but provides two separate areas in which clinical learning occurs. Those are the Practice Lab itself, and the simulation area, a small portion of the Practice Lab. The Practice Lab is used for learning a wide range of focused clinical tasks requiring specialized procedure and/or equipment. It is considered “low” or “medium” fidelity and provides learning opportunities focused primarily on psychomotor skills.

The simulation area is comprised of highly specialized, high-fidelity equipment (simulators) that closely resemble actual patients and patient situations. The simulators (such as SimMan®) are very expensive computer operated, complex electronic equipment that must be programmed and controlled by specially trained faculty or Practice Lab personnel.

**Practice Lab Policies**

Each student will be asked to sign a form documenting their agreement to allow nursing student classmates to perform procedures on them, including injections and IV insertion.

*The policies described below apply to ALL AREAS of the Practice Lab at all times. An additional set of policies that apply specifically to the simulation area are included later in this document.*

The following rules must be followed at all times in the Practice Lab:

**Strictly Enforced:**

- Only authorized persons are allowed in the Practice Lab and no students can be in the lab without an instructor.
- Children are not allowed in the laboratory under any circumstances.
- Eating and drinking are not permitted in the laboratory at any time.
- No cell phones and other electronic devices may be used the Practice Lab only for the purpose of accessing clinical resources when specific permission has been granted by the Practice Lab Coordinator and/or course faculty. All electronic devices must be muted at all times in the lab.
- All accidents, no matter how minor, MUST be reported to the instructor and the Practice Lab Coordinator.
- No pens are to be used near the simulators.

**Appropriate Use and Behavior for Students in the Practice Lab**

- Hands must be washed thoroughly upon entering and before leaving the Lab.
- Students must wear lab coats, rubber sole and closed-toe shoes for scheduled sessions in the Practice Lab. GBC nursing scrubs must be worn during skills check-off and simulation in the Lab.
- Standard precautions must be practiced at all times.
Students are expected to help keep all areas of the Practice Lab neat and clean. This includes returning equipment and supplies to their proper place, maintaining bed and mannequins in a professional state, etc. at the end of each lab session.

Scheduling Practice Time in the Lab

- All students who use any part of the Practice Lab during open lab time must sign in via computer when entering the lab and sign out upon leaving.
- Assigned lab time (e.g., skills check-off, skills demonstration and simulation) is considered clinical time. A student is expected to arrive at the scheduled check-off time ready to demonstrate competency in specific skills. Failure to attend an assigned lab time will result in a Letter of Unsatisfactory Progress and meeting with the instructor. Remediation and/or disciplinary action may also occur.
- Open lab time gives the student additional opportunities to practice nursing skills. Students are required to sign up for practice and check off specific, required nursing skills in the Practice Lab (refer to Skills Check-off List and course schedule). In the event a student is unable to attend any scheduled session in the practice lab, the student must notify the course instructor and Practice Lab Coordinator at least two hours before the scheduled lab time.
- Students who are tardy will forfeit their time and will need to reschedule their session if space is available. Being tardy for any demonstration, skills check-off or simulation will be considered a clinical absence which will result in a Letter of Unsatisfactory Progress. This might affect the student’s eligibility to participate in a clinical assignment which, in turn, might affect their status in the nursing program.

Skills Check Offs

- If a student does not successfully pass the initial check off, he or she will be required to schedule time in the skills lab for additional practice prior to rescheduling the second attempt to demonstrate proficiency in performing the skill.
- Students who have failed a skill twice will receive a Letter of Unsatisfactory Progress which will affect their eligibility to participate in a clinical assignment and status in the nursing program.
- Students are expected to attend their practice lab group session prepared to have a scholarly conversation regarding the content for that session. Faculty are authorized to exclude a student from participation in clinical laboratory sessions when the student is unprepared, when the student is tardy, when performance falls below a competent level, when the Standards of Conduct policy is violated.
- When attending skills check-off the student will be graded pass/fail for each required skill. Grading will include attendance, student preparedness and participation.

Simulation Policies

Use of this highly technical and specialized area of the Practice Lab is a privilege and all activity in the area should be undertaken as if it were occurring in an actual clinical facility.

The following policies will be strictly enforced:

1. All students will wear scrubs, closed toe shoes, or the clothes worn normally during their clinical activities when participating in simulations.
2. Absolutely no pens of any kind are to be used near the simulators.
3. Learners must bring standard equipment (watch with second hand, stethoscope, etc.) required for clinical during simulator experience.
4. Learners will wash their hands to remove stains, ink, or oils prior to entering the simulation area, even if they have washed their hands previously for work in another area of the Practice Lab.
5. No food, gum or drink is allowed in the simulation area of the Practice Lab.
6. Standard precautions will be followed at all times in the simulation area of the Practice Lab. Simulator-learner contact will be adhered to as in the clinical environment.
7. To maximize learning opportunities during the simulation, conversation and discussions will be limited to the scenario itself.

Safety in the Simulation Area

1. Safety of all participants must be of highest priority because the simulator can be cardioverted and defibrillated (ALL DEFIBRILATORS ARE ACTIVE & DELIVER AN ELECTRICAL CHARGE). ACLS guidelines for the use and safety of these interventions must be followed.
2. During certain scenarios, learners may be using gases such as oxygen (O2). Standard safety precautions are to be followed.
3. For safety, closed toe shoes must be worn when in the simulation area.
4. Use Personal Protective Equipment (PPE) when warranted.

Simulation Confidentiality

1. Consent to record the simulation via web cameras will be obtained and kept on file from all members participating in the simulation experience.
2. After a learning experience, students should not share details and activities with other students who have not participated in the learning experience to avoid breaching HIPPA law.

Appropriate Use of the Simulation Area

1. The simulation area will not be used for task training experiences.
2. Simulators shall not be scheduled for clinical make-up days, unless arranged by instructor.
3. Once the simulation experience is completed, learners must restore the simulator and environment to the baseline status.
4. Learners who are assessed by the instructor during simulation exercises to need additional practice or remediation for a skill will be referred to the Practice Lab Coordinator for follow up.

Simulation Procedure

Objective: Student participation and performance during simulation experiences will be evaluated using formative assessment methods.

Student Preparation for Simulation

For each simulation experience students will prepare by answering three to four pre-briefing questions related to the simulation scenario. Faculty may provide students with a patient chart if applicable to the simulation scenario to review 1 week prior to simulation. If a student comes to simulation unprepared by not completing the assigned pre-briefing questions, they will be sent home, the student will receive a Notification of Unsatisfactory Progress, and the student will be required to complete a make-up assignment. If a student misses’ simulation due to illness or other issues based on the faculty discretion the student will not receive a Notification of Unsatisfactory Progress but will be required to complete a make-up assignment.

Pre-briefing

Pre-briefing will occur immediately before the simulation and will last no longer than 15-30 minutes. Pre-briefing will include:

- Asking students if they have any questions based on the patient chart, information they read, or pre-briefing questions.
- Reviewing all or some of the students’ answers to the pre-briefing questions.
• Reviewing the simulator, patient monitor, EMR, location of supplies, and another simulation/lab equipment. Immediately following pre-briefing students will be given 5 minutes to discuss their plan of action for the anticipated simulation scenario. After 5 minutes students will be assigned simulation roles and Faculty will begin the simulation.

**Formative Assessment**

The desired outcome of simulation is improved student performance and behaviors, remedy errors in thinking and practice, and provide feedback. Methods of providing constructive feedback include:

• Halting the simulation process and provide coaching, redirecting, and cueing followed by resuming the simulation or starting again.
• Providing feedback in the form of structured debriefing immediately following the simulation experience.
• Providing written feedback on the simulation evaluation tool for student review. Discussing gaps and content review as Simulation Evaluation Tool is reviewed with students after debriefing as needed.

**Assessment tool**

The course specific GBC Nursing Simulation Evaluation Tool will be used to evaluate students participating in scheduled simulation experiences as a primary or secondary nurse and as faculty determine for other participating roles based on the individual simulation scenario. The foundation for each Evaluation Tool is the competencies attached to the Student Learning Outcomes (SLOs) of each course. The Simulation Evaluation Tool will be filled out by simulation faculty immediately following simulation/debriefing. For each criterion faculty will mark “yes” to indicate the student has met the criterion, “no” to indicate the student has not met the criterion, or “n/a” to indicate the criterion is not applicable to the specific student role in the simulation or for the simulation scenario. The intent of the tool’s completion will determine whether or not the student has progressed towards meeting competencies, not necessarily if they have met each competency. One copy of the completed Simulation Evaluation Tool will be given to the student as a form of feedback and one copy will be retained by Faculty.

*If a student’s actions during the simulation would likely result in a safety risk or sentinel event faculty will immediately halt the simulation and debrief the occurrence. Depending on the situation faculty may end the simulation or resume the simulation after debriefing. Students with a sentinel or near sentinel event will be required to complete remediation.

**Debriefing**

Debriefing is a process of examining actions and meanings of actions during a simulation experience. Nursing faculty will use Tanner’s clinical judgement model for simulation debriefing to guide students through the reflective process in a structured manner. All students are expected to actively participate during simulation debriefing.
Academic Advising

AAS Nursing students will be assigned a faculty advisor upon admission to the GBC nursing program. During enrollment in the program, each student should make an appointment with his/her advisor at least one time per semester to review their progress.

Academic advisors will receive a copy of any Notice of Unsatisfactory Performance given to their advisees. However, whenever possible, students experiencing academic problems should be encouraged to meet with their advisor when problems first become apparent rather than waiting until they receive a Notice of Unsatisfactory Performance.

Contact the HSHS Administrative Support at 775-327-2317 for assistance in making an appointment with your advisor.

<table>
<thead>
<tr>
<th>Faculty Advisors</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tami Mette</td>
<td>775-327-2313</td>
</tr>
<tr>
<td>Michelle Husbands</td>
<td>775-327-2308</td>
</tr>
<tr>
<td>Staci Warnert</td>
<td>775-327-5869</td>
</tr>
<tr>
<td>Stacy Crouch</td>
<td>775-327-5868</td>
</tr>
<tr>
<td>Malia Keep</td>
<td>775-327-2089</td>
</tr>
<tr>
<td>Dorothy Callander</td>
<td>775-327-2201</td>
</tr>
<tr>
<td>Jessica Lynch</td>
<td>775-327-2310</td>
</tr>
<tr>
<td>Brian Dankowski</td>
<td>775-327-2311</td>
</tr>
<tr>
<td>Jessica Bellander</td>
<td>775-327-5317</td>
</tr>
</tbody>
</table>

Students experiencing non-academic health or emotional issues which require professional care should be referred for help outside the Health Sciences and Human Services Department. The Student Services Office is the contact for students who need counseling available through University of Nevada, Las Vegas (UNLV), Director of Disability Support, 775-327-2336 or Jake Rivera, Vice President of Academic and Student Affairs, 775-327-2116.

Learning Resources

Students must purchase required texts and other learning resources (e.g., online access codes and other learning resources). A list of required learning resources will be provided to all students enrolling in the health science programs. These can be purchased through the GBC Bookstore or through another source. Students should be very careful that all components needed for their classes are included if they purchase from an outside source. Students will be notified if additional learning resources are required prior to the beginning of each subsequent semester.

Library Services

Media required for nursing courses are located in the library. These materials are not to be checked out but must be viewed at the library.

**Fall and Spring Semester:**
Monday - Friday 9:00 am to 5:00 pm
Winter and Summer Semester:
Monday - Friday 9:00 am to 1:00 pm

Copying

Copying can be done at the GBC High Tech Center or the Library. The copy machine in the office area is for faculty use only. Computer copies made from the nursing office printer are $.10 per page. Additional copies of assignment forms are the student’s responsibility.

Technology Assistance
GBC offers a Help Desk for students experiencing problems with WebCampus access. The Help Desk is available by phone (775-327-2170) or by email (helpdesk@gbcnv.edu).

Summer Hours:
Weekdays: 7:00 am to 4:00 pm

Fall and Spring Hours:
Weekdays: 7:30 am to 9:00 pm
Saturday: 12:00 pm to 5:00 pm

Student Representatives

Student representation is encouraged during nursing program meetings and Health Science and Human Services Advisory Group meetings. Two volunteer representatives from each class are selected. These students are asked to bring questions, comments, and concerns of their class to these meetings and are expected to take information back to their group for discussion and follow-through.

Student Nurses’ Organization (SNO)

Students in the nursing program are invited to be an active member of the GBC Student Nurses’ Organization. Election of officers is held during the fall semester. A president, vice-president, secretary, treasurer, and activities coordinator(s) may be elected at each of the Elko, Winnemucca, and Pahrump centers.

Student Government Association (SGA)

Students are encouraged to be an active part of the Student Government Association (SGA). A variety of activities are provided throughout the school year. Students have the opportunity to participate individually or as a group. There may be some scholarship opportunities for participating in the SGA.

Associated Student Body

Nursing students are encouraged to be an active part of the Associated Student Body (ASB). A variety of activities are provided throughout the school year. Students have the opportunity to participate individually or as a group.
Scholarships & Financial Aid

Financial Aid is intended to help students pay for their education after high school. The aid available at Great Basin College includes grants, loans, employment, and scholarships, some of which are specifically designated for nursing students. Federal Student Aid Programs become available after you complete the FAFSA application. Submit a Free Application for Federal Student Aid (FASFA) at www.fafsa.ed.gov. Students are encouraged to contact Student Financial Services at 775-327-2095 for further information.

Program Costs and Fees

AAS Nursing Program costs over the two years will vary from year to year. Differential fees cover the cost of lab and some student supplies. Uniforms are purchased prior to entering the first year. The majority of nursing textbooks are purchased prior to the first semester to enhance learning throughout the two years. Additional expenses in the second year include the cost of the NCLEX-RN licensing and examination fees, college nursing pin, pinning ceremony and graduation fees.

Approximate Program Related Costs

Estimated total program tuition based on fall 2022 fee structure .................................................. $6,614.00
Textbooks & online access fees ........................................................................................................... $2,900.00
Uniforms and stethoscopes .............................................................................................................. Paid for by GBC Foundation
Student Background Check and Drug Screening (required for clinical rotation) ................ $125.00-175.00
Immunizations (estimate) ....................................................................................................................... $300.00
Physical Examination ....................................................................................................................... Individual amount
Health Insurance ............................................................................................................................... Individual amount
Clinical support items (e.g., watch with second hand, hemostat, bandage scissors, pen light, safety goggles, white nursing shoes, khaki slacks) ............................................................................................... Individual amount
Travel to clinical facilities ................................................................................................................ Individual amount
NCLEX-RN application and license fees (Begin December of second year)
  • NCLEX-RN Testing Center $ 200.00 (Estimate)
  • Nevada State Board of Nursing licensing fee $ 100.00 (Estimate)
  • Fingerprinting fee $ 75.00 (Estimate)
  • This process can take 4-6 months. Fingerprints are good for 6 months
Building Hours

Building hours vary based on classes and locations. Health Science and Human Services faculty offices close at 5:00 pm.

Building Use Guidelines

Great Basin College maintains open centers available to faculty, staff, students, and the local community during normal hours. During those days and hours classes, meetings and special events are scheduled security will have staff on site to provide assistance.

Open access to site facilities is provided with the understanding that:
- All persons will be treated with courtesy and respect;
- All buildings and equipment are used in the manner originally anticipated;
- All persons will comply with any posted signage;
- All persons will follow normally accepted safety and behavior standards.

The offer of open access may be revoked should any person be found to cause damages to any Great Basin College property or be involved in harmful, unsafe, or illegal behavior while on GBC property.

Security

Security and law enforcement on all Great Basin College centers is dependent upon GBC personnel working well with their respective local law enforcement agencies. Knowledge of any crime or emergency should be reported to the center security or center director immediately. Any crime or emergency requiring immediate assistance should be reported immediately to the police or sheriff by dialing 911 on any center phone.

Security may be contacted by dialing the Elko site operator (Dial "0") from any extension and requesting assistance. On the Elko site assistance may be obtained by activating any of the call boxes located on the pathways or phoning the security cell phone at (775) 934-4923. If the police department, fire department or ambulance are required dial 9-911 from any extension and tell the dispatcher of the emergency.

Fire Evacuation Plan

Before a fire happens know the following:

- Know the location of the exit nearest your area (evacuation maps posted).
- Know the location of the fire alarm pull box nearest your area.
- Know the location of fire extinguishers in your area.
- Know how to use a fire extinguisher.

Upon discovery of a fire:

1. Pull fire alarm and give verbal warning.
2. Call 911.
3. Follow evacuation procedures.
4. Close doors to contain fire and smoke.
5. If it is safe to do so, and you have been properly trained, you may attempt to extinguish the fire.
6. Determine if it is safe to re-enter the building.
7. On the Elko site, notify your respective Vice President of Academic Affairs (775) 327-2116. On all other centers notify the Center Director and the Vice President of Academic Affairs (Elko Center 775.327.2116).
Food and Beverages in Classrooms

Students are allowed to have food and beverages in the classroom. Please be courteous of your fellow students and the instructors. Please note that there is nowhere on campus to store food for students.

Personal Computer Use

GBC is not responsible for loss or damage to personal property owned by faculty, staff, or students, including personal computers, which are used or left in the building. The college is also not responsible for any thefts or damages done to vehicles parked on the premises. Most areas of the parking lot and the interior of the building are under video surveillance. If a student’s personal computer is used in one of the buildings, a multi-dimensional surge protector (common and transverse spikes) should be purchased and utilized to prevent electrical damage.

Children and Non-Students in Campus Facilities

Great Basin College is committed to providing a place of instruction that is conducive to learning; and that is, to the greatest extent possible, free from distractions. Only enrolled students should be present in classrooms, field trips, fitness center(s) and lab facilities.

Pets

The only pets (dogs, cats, birds, rabbits, ferrets, etc.) that are allowed anywhere on our campus and inside the buildings are those trained and licensed as service animals. Please do not bring any type of animal into any GBC building or clinical-related facility you enter. We will have Security help you remove your animal if needed. Please be courteous to our faculty, staff and students and leave your pets at home.

Tobacco Use / Smoking

Tobacco use and smoking is prohibited in GBC buildings. Please use outdoor designated areas only. In addition, students must comply with all clinical agency policies regarding use of tobacco and smoking while on site.
Application for Graduation

The GBC graduation is the ceremony that celebrates graduation from the college. It is a cap and gown ceremony held at each of the following locations: Pahrump, Winnemucca, and Elko Campuses. Nursing students receive an Associate of Applied Science in Nursing degree. You MUST submit an application for graduation before the set deadline in order to participate and receive a degree. Please refer to the Great Basin College catalog for further information.

Caps and Gowns

Cap and gown orders are placed with the GBC Bookstore. The cost is approximately $45.00.

Graduation Requirements

Students must complete all nursing and non-nursing courses by the end of the fourth semester to be eligible for graduation. The non-nursing courses have been placed in the curriculum to augment the nursing course content. Scheduling arrangements are made with other GBC faculty to assure there will be no time conflict with nursing classes. If a non-nursing course is taken out of sequence, there is no guarantee it will be taught at a time that does not conflict with required nursing courses.

Students are responsible for ensuring that Admission and Records receives an official transcript for transfer courses one month prior to graduation. It is also each student’s responsibility to know and to meet all course requirements and to maintain a 2.5 or high GPA throughout the program.

The Office of Admission and Records uses the year of your admission to the nursing program to determine catalog year and course requirements for graduation.

Any student taking a general education course during the fourth semester of the nursing program at another college or university must have the course work completed and an official transcript sent to the Admission and Records Office no less than one month prior to final examinations.

It is the student’s responsibility to make certain all graduation requirements are met. Failure to complete requirements will delay your application to take the National Council Licensure Examination for Registered Nurses (NCLEX-RN) – See Appendices Section.

Licensure

In the fall semester of the second year, students begin the process of applying for licensure with the State Board(s) of Nursing. Nursing students will be given the information on how to use the Nurse Portal with the Nevada State Board of Nursing for the application process. Fingerprint forms should be completed and mailed by February 1st of the year of graduation.

Students should be aware of the Eligibility Screening Questions on the Nevada Application for License (see Nevada State Board of Nursing website). If you can answer any question with a “YES”, meet with the Nursing Director and call the Nevada State Board of Nursing (888-590-6726) for clarification to determine what will be required to make you eligible to take the NCLEX-RN exam post-graduation.

Nursing Pins and Pinning Ceremony

As part of the Pinning ceremony SNO will vote on a nursing PIN to be ordered no later than March 15th. The pinning ceremonies are held in Pahrump, Winnemucca, and Elko and are separate from the GBC graduation. In order to participate in the pinning ceremony, a student must have completed all program requirements. Because the pinning ceremony is a time-honored tradition, certain guidelines regarding student appearance, program format and reception activities will be guided with the assistance of the SNO faculty advisors and nursing Director. Graduating nursing students, with assistance from the Student Nurses’ Organization officers and faculty representative will
collaborate in planning the pinning ceremony. Date and time will be chosen to accommodate graduating nursing students without conflicting with the GBC graduation and other activities held on site. First year students assist with the reception held after the pinning ceremony.

**Pinning/Graduation Cost Estimates**

- Graduation fee (apply in January) $20.00
- School pin (order in February) $SNO/Nursing dept.
- Cap and gown $45.00
- Pinning ceremony stole $SNO/Nursing dept.
APPENDIX A  Functional Abilities
APPENDIX B  Bloodborne Pathogen Exposure and Prevention Policy
APPENDIX C  Health Sciences Admission and Progression Committee
APPENDIX D  Writing Expectations for Nursing Students
APPENDIX E  National Student Nurses Association

APPENDIX F  Standards of Conduct
    APPENDIX F-1  GBC Standards of Conduct for Nursing Students
    APPENDIX F-2  ANA Code of Ethics for Nurses
    APPENDIX F-3  NSNA Bill of Rights and Responsibilities for Students of Nursing
    APPENDIX F-4  NSNA Code of Academic and Clinical Conduct

APPENDIX G  Forms and Agreements
    APPENDIX G-1  Nursing Program Injury Report
    APPENDIX G-2  Exposure to Bloodborne Pathogen Form
    APPENDIX G-3  Student Test Query Form
    APPENDIX G-4  Notification of Unsatisfactory Student Progress Form
    APPENDIX G-5  Student Agreement for the 2021-2022 Academic Year
    APPENDIX G-6  Agreement to Participate in Practice Lab Procedures
    APPENDIX G-7  Confidentiality Agreement and Consent for Photography and Video Recording
Functional Abilities (Technical Standards)

The practice of Nursing requires the following functional abilities with or without reasonable accommodations:

Visual acuity must be adequate to assess patients and their environments, as well as to implement the nursing care plans that are developed from such assessments. Examples of relevant activities (nonexclusive):

- Detect changes in skin color or condition
- Collect data from recording equipment and measurement devices used in patient care
- Detect a fire in a patient area and initiate emergency action
- Draw up the correct quantity of medication into a syringe

1. Hearing ability must be of sufficient acuity to assess patients and their environments and to implement the nursing care plans that are developed from such assessments. Examples of relevant activities (nonexclusive):

- Detect sounds related to bodily functions using a stethoscope
- Detect audible signals generated by mechanical systems that monitor bodily functions
- Communicate clearly in telephone conversations
- Communicate effectively with patients and with other members of the healthcare team

2. Olfactory ability must be adequate to assess patient and to implement the nursing care plans that are developed from such assessments. Examples of relevant activities (nonexclusive):

- Detect foul odors of bodily fluids or spoiled foods
- Detect smoke from burning materials
- Detect ketones on a client’s breath

3. Tactile ability must be sufficient to assess patient and to implement the nursing care plans that are developed from such assessments. Examples of relevant activities (nonexclusive):

- Detect changes in skin temperatures
- Detect unsafe temperature levels in heat-producing devices used in patient care
- Detect anatomical abnormalities, such as subcutaneous crepitus, edema, or infiltrated intravenous fluid
- Perform techniques such as the insertion of urinary catheters

4. Strength and mobility must be sufficient to perform patient care activities and emergency procedures. Examples of relevant activities (nonexclusive):

- Safely transfer patients in and out of bed and assist them with ambulation using appropriate assistive devices
- Safely control the fall of a patient, by slowly lowering the patient
- Turn and position patients as needed to prevent complications due to bed rest
- Hang intravenous bags at the appropriate level
- Accurately read the volumes in body fluid collection devices hung below bed level
- Perform cardiopulmonary resuscitation

5. Fine motor skills must be sufficient to perform psychomotor skills integral to patient care. Examples of relevant activities (nonexclusive):

- Safely dispose of needles in sharps containers
- Accurately place and maintain position of stethoscope for detecting sounds of bodily functions
- Manipulate small equipment and containers, such as syringes, vials, ampoules, and medication packages, to administer medications

6. Physical endurance sufficient to complete assigned periods of clinical practice and to function effectively under stress in acute health care situations.

7. Ability to speak, comprehend, read, and write English at a level that meets the need for accurate, clear, and effective communication.
8. Emotional stability to function effectively under stress, to work as a part of a team and to respond appropriately to supervision; to adapt to changing situations, to respond appropriately to patients and families under stress, and to follow through on assigned patient care responsibilities.

9. Cognitive ability to collect, analyze, and integrate information and knowledge to make clinical judgments and management decisions that promote positive patient outcomes.

10. Other abilities sufficient to demonstrate competencies such as the ability to arrive to a clinic on a timely basis; to meet the demands for timely performance of duties; to meet the organizational requirements to perform these duties in a professional and competent manner.
Bloodborne Pathogen Exposure and Prevention Policy

The Nursing Program has developed a Bloodborne Pathogen Exposure and Prevention Policy to be in compliance with Occupational Safety and Health Administration (OSHA) Standards. The policy is intended to provide direction to students and faculty to help prevent exposure to bloodborne pathogens and guidance should such exposure occur.

The purpose of this policy is to reduce the risk of student exposure to air and body substance pathogens such as, but not limited to, Tuberculosis, Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), and the Human Immunodeficiency Virus (HIV).

HIV Screening

The GBC nursing programs will not undertake any program of screening faculty or students for antibody to HIV. Any student or faculty wishing to be tested will be referred to his/her private physician.

Standard Precautions

Standard Precautions is an approach to infection control that requires the application of blood and body fluid precautions for all patients and patient specimens regardless of diagnosis. Standard precautions will be the minimum standard of practice throughout courses offered in the nursing programs at GBC where bloodborne pathogen exposure could occur.

Methods of Compliance

Students must become familiar and comply with the GBC nursing Pathogen Exposure and Prevention Policy. Students must also become familiar and comply with the exposure plan (needle stick policy) of the clinical sites to which they are assigned.

Prevention of Bloodborne Pathogen Exposure

- Students are required to participate annually in Bloodborne Pathogen Exposure Prevention and Control Class. The student must also have satisfactorily demonstrated skill in using protective equipment and procedures before receiving a patient care assignment.
- Students must have documented immunity to hepatitis B, Measles, rubella, varicella, and diphtheria prior to going to any clinical site.
- The decision to exempt a student from clinical experience will be made on a case-by-case basis by the faculty responsible for the clinical course.
- All students must have medical insurance upon entering and throughout their enrollment in the nursing program. It is the student’s responsibility to obtain and pay for this insurance, as well as to understand the benefits and limitations of any insurance they maintain or is maintained on their behalf.

Occurrence of Exposure or Incident

Student

A student in the GBC nursing programs who has exposure to blood, body fluid or other potentially infectious material to non-intact skin or mucous membranes from a needle stick, sharps injury or other cause must immediately:

- Wash needle stick and cuts with soap and water
- Flush splashes to the nose, mouth, or skin with copious amounts of water
- Irrigate eyes with clean water, saline or sterile irrigates
• Remove soiled personal protective equipment and/or clothing as soon as possible.

After washing, flushing and/or irrigating the exposed area, the student must immediately:
• Notify the appropriate registered nurse at the clinical facility AND
• Notify clinical faculty who will then implement the process below. (If there is a witness to the incident, have them do this immediately if possible.)

Faculty

The clinical faculty will be responsible for coordinating the following procedures:
• Identify the source of the exposure.
• Obtain consent from source client, if not in chart.
• Determine who will be the health care provider for the student for counseling and treatment if needed.
• Send the student to their health care provider to obtain medical evaluation and post-exposure follow-up within 1 to 2 hours of the exposure.
• Student should bring a copy of the documents with as much completed information as possible related to the incident to their health care provider. They should also have the contact number for source information (such as employee health office) so that the health care provider may obtain results.
• Initiate the documentation needed for GBC and the clinical agency.

NOTE:
The National HIV/AIDS Center provides a PEPlne, a Clinicians’ Post-Exposure Prophylaxis Hotline which offers up-to the minute advice on managing occupational exposures (needle sticks, etc.) to HIV, hepatitis and other blood borne pathogens. It is offered 24 hours a day, 7 days a week at 1-888-488-4911.

Documentation and Follow-up:

Student and Faculty

• Notify the AAS Nursing Director of the incident as quickly as possible
• Complete an incident report at the clinical facility, if required; and be aware of and follow any reporting and follow-up requirements of the clinical facility.
• Complete a GBC nursing Exposure to Bloodborne Pathogens form.
• It is the student’s responsibility to make his/her healthcare provider aware of the result of any blood panel drawn as a result of an exposure.

The National HIV/AIDS Center provides a PEPlne, a Clinicians’ Post-Exposure Prophylaxis Hotline which offers up-to the minute advice on managing occupational exposures (needle sticks, etc.) to HIV, hepatitis and other blood borne pathogens. It is offered 24 hours a day, 7 days a week at 1-888-488-4911.
Department of Health Science and Human Services

HEALTH SCIENCE ADMISSIONS AND PROGRESSION COMMITTEE

Membership:

1. Six (6) Faculty:
   a. Two (2) teaching in the Nursing Program, one (1) teaching in the AAS Radiology Technology Program, one (1) teaching in the EMS/Paramedic Program, one (1) teaching in the Human Services Program or Social Work, and one (1) at-large Health Science and Human Services Department faculty member.
   b. At least one of the faculty must be tenured.
   c. Faculty members of the committee will be selected spring semester at the last departmental faculty meeting.
   d. In the event that a committee member cannot attend an Admission and Progression meeting, that member shall find a representative from within their program, if possible, to serve as proxy for that meeting. If there are no student appearances expected for the meeting, written proxy of vote(s) on the issues addressed on the agenda for that meeting is also an acceptable substitute.

2. The Administrative Assistant for the department will service as an ex-officio member of the committee without voting privileges and will coordinate staff support for the committee.

Term of Service:

1. Faculty serve a two-year term and may serve additional terms.

Functions:

1. Make recommendations to Department of Health Science and Human Services faculty regarding policies and procedures for student admission to department health science degree programs.
2. Review applications and select students for admission to departmental health science degree programs, including review of appeals for readmission.
3. Review and make decisions related to progression or reinstatement of individual students in health science degree programs.
4. Assure the collection and dissemination of formative and summative data for evaluation of admission and progression; use relevant data admission and progression decisions.
Writing Expectations for Great Basin Nursing Students

Purpose:

- Articulate writing competencies required of nursing students.

Expectations for Written Assignments:
All written assignments are to be in APA 6th Edition format and submitted by Word document on the due date, unless otherwise specified by faculty. Writing competencies to be demonstrated by students are as follows:

- Use terminology, sentence construction, citation style, formatting, grammar, and punctuation consistent with scholarly writing.

- Write content that is purposeful, logically sequenced, organized, and, derived from evidence-based materials such as peer reviewed journals, course textbooks, best practice guidelines, outcomes management reports or other scientifically based literature.

- Reference scholarly content consistent with APA 7th Edition; refrain from using websites intended for layman, medical consumers, marketing sites, or references less rigorously reviewed for scientific merit, unless appropriate for specific purposes such as patient education. Deviation from required APA formatting will be indicated by faculty when warranted.

- Document reflective thought, thinking, reasoning and judgment when responding to specific questions and assignments such as patient education, journaling, and peer evaluations.

- Pursue academic writing in a manner consistent with the standards of academic integrity adopted by Great Basin College. This includes scrutinizing written materials to assure that authors, sources, and websites are properly cited.

- Acknowledge late assignments will not be accepted or will be penalized unless prior arrangements are made with faculty.

- If the writing requirements are not met for an assignment, then points may be deducted, the assignment may need to be rewritten, or the assignment may receive a failing grade.
NATIONAL STUDENT NURSES’ ASSOCIATION

Nursing students are encouraged to belong to the National Student Nurses Association. This program offers the student many opportunities. Dues for the 2021-2022 year are: New membership $30, Renewal $40 and two-year membership $60. Review the Bill of Rights and Responsibilities for Students of Nursing (Appendix F-4).

What is the National Student Nurses’ Association (NSNA)? The NSNA is a pre-professional association for nursing students. Involvement in NSNA prepares students for involvement in professional associations upon graduation.

The mission of the NSNA is to:
- Organize, represent, and mentor students preparing for initial licensure as registered nurses, as well as those nurses enrolled in baccalaureate completion programs
- Promote development of skills needed to be responsible and accountable members of the nursing profession
- Advocate high quality health care
- Advocate for and contribute to advances in nursing education
- Develop nursing students who are prepared to lead the profession in the future

Why People Join Professional Societies
There are several reasons why people join associations. The American Society of Association Executives conducted a survey of professional membership associations to determine why members join. The top answers, in order of preference, were:
- The ability to make professional contacts and the opportunity to network with people who can impact your profession and give you access to new opportunities, friends, jobs, and information.
- Being part of the profession and peer recognition.
- Specific member benefits.

Why Students Join NSNA
NSNA conducted a comprehensive survey of its membership to find out why students joined NSNA, what programs members liked best, and what new services and benefits members would like to receive. The following reasons for belonging to NSNA were ranked high by respondents:
- Receiving Imprint magazine.
- Availability of low-cost malpractice insurance, group health insurance and student education loan program.
- Participation in Breakthrough to Nursing, community health, legislative and recruitment projects
- Discounts on nursing-related items, state board review courses, publications, textbooks, and journals
- Reduced registration fees for the Annual Convention and Mid-Year Conference
- NSNA Foundation Scholarship Program that offers scholarships annually.

NSNA members were asked to indicate the value of membership. NSNA:
- Gives nursing students the opportunity to meet and exchange ideas with other nursing students from around the country.
- Increases nursing students’ awareness of issues confronting the nursing profession today.
- Provides information about changing political and career trends in nursing.
- Prepares students for entry into the profession by providing access to state board reviews, study tools while still in school, involvement in projects which enhance knowledge gained in class (i.e., Community Health).
- Promotes student interaction with professional and student leaders from across the country at conventions and conferences.
GBC Standards of Conduct for Nursing Students

All nursing students are held to the GBC and NSHE Student Conduct Policies as published in the GBC Catalogue.

It is expected that nursing students will come to class, practice lab, clinical assignment and/or testing sessions in a condition conducive to competent and safe performance. Nursing faculty are held legally and professionally accountable for taking prompt, appropriate, and decisive action if a student is unable to perform the essential functional abilities required for satisfactory completion of all aspects of the nursing program.

Examples of physical, cognitive, behavioral problems and lack of competency which may be questioned include, but are not limited, to:

- Frequent absenteeism and/or tardiness (no documented medical reason for absence).
- Drowsiness or sleepiness.
- Smell of alcohol on the breath/body.
- Increased inability to meet schedules and deadlines.
- Slurred/incoherent speech or speech pattern different from normal speech.
- Unusually aggressive behavior.
- Unexplained change in mood.
- Change in appearance.
- Lack of manual dexterity.
- Lack of or decreased coordination in body movement.
- Inappropriate responses to stimuli.
- Unexplained work-related accident or injury.
- Inattentiveness to work.

Students who arrive to class, practice lab, clinical assignment and/or testing sessions who are considered by their instructor to be unable to safely or effectively carry out required program related activities may be subject to:

1. having their work performance and behavior witnessed and documented
2. questioning and counseling in private as to the nature of the problem
3. meeting with the Director
4. referral to the appropriate GBC administrative staff member
5. receiving a failing grade and dismissal from the program.
6. possible ineligible for readmission.
CODE of ETHICS for NURSES

The Code of Ethics for Nurses with Interpretive Statements (The Code) was developed as a guide for carrying out nursing responsibilities in a manner consistent with quality in nursing care and the ethical obligations of the profession. In an effort to provide easy access to The Code, we are providing "view only" access, not only for ANA members, but for all nurses and the public. Also, in recognition of the impact ethical practice has on patient safety and the quality of care, ANA has designated 2015 as the "Year of Ethics," highlighted by the release of a revised code of ethics for the profession. We will have a plethora of new programs and products to help increase your awareness and integration of The Code into your everyday practice.

Respect for Others: The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.

Commitment to the Patient: The nurse’s primary commitment is to the patient, whether an individual, family, group, community, or population.

Advocacy for the Patient: The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.

Accountability and Responsibility for Practice: The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.

Duty to Self and Duty to Others: The nurses owe the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.

Contribution to Healthcare Environment: The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conductive to safe, quality health care.

Advancement of the Nursing Profession: The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.

Promotion of Community and World Health: The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.

Promotion of the Nursing Profession: The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.
Bill of Rights and Responsibilities for Students of Nursing (NSNA)

The NSNA Student Bill of Rights and Responsibilities was initially adopted in 1975. The document was updated by the NSNA House of Delegates in San Antonio, Texas (1991); and item #4 was revised by the NSNA House of Delegates in Baltimore, Maryland (2006). Further amendments were adopted by the House of Delegates at the NSNA Annual Convention on April 7, 2017, in Dallas, TX.

1. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, sex, sexual orientation, gender identity, age, citizenship, religion, national origin, disability, illness, legal status, or personal attributes, or economic status.

2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom and quality education; students should exercise their freedom in a responsible manner.

3. Each institution has a duty to develop policies and procedures which provide for and safeguard the students’ freedom to learn.

4. Students should be encouraged to develop the capacity for critical judgment and engage in an autonomous, sustained, and independent search for truth.

5. Students should be free to take reasoned exception in an informed, professional manner to the data or views offered in any course of study. However, students are accountable for learning the content of any course of study for which they are enrolled.

6. Students should have protection, through orderly approved standard procedures, against prejudicial or capricious academic evaluation. However, students are responsible for maintaining standards of academic performance established for each course in which they are enrolled.

7. Information about student views, beliefs, political ideation, legal status, United States citizenship status, sexual orientation, or other personal information which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as an element of evaluation.

8. The student should have the right to advocate for themselves and other students in the construction, delivery, and evaluation of the curriculum.

9. Institutions should have a clearly written published policy as to the disclosure of private and confidential information which should be a part of a student’s permanent academic record in compliance with state and federal laws.

10. Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions in an informed, professional manner, both publicly and privately.

11. Students should be allowed to invite and hear any individual of their own choosing within the institution's guidelines, thereby advocating for and encouraging the advancement of their education.

12. The student body should have clearly defined means to participate in the formulation and application of institutional policy affecting academic and student affairs, thereby encouraging leadership, e.g., through a faculty-student council, student membership, or representation on relevant faculty committees.

13. The institution has an obligation to clarify those standards of conduct which it considers essential to its educational mission, community life, and its objectives and philosophy. These may include, but are not limited to, policies on academic dishonesty, plagiarism, punctuality, attendance, and absenteeism.

14. Disciplinary proceedings should be instituted only for violations of standards of conduct. Standards of conduct should be formulated with student participation, clearly written and published in advance through an available set of institutional regulations. It is the responsibility of the student to know these regulations.
15. The nursing program should have readily available a set of clear, defined grievance procedures.

16. As citizens and members of an academic community, students are exposed to many opportunities, and they should be mindful of their corresponding obligations.

17. Students have the right to belong to or refuse membership in any organization.

18. Students have the right to personal privacy in their individual/personal space to the extent that their wellbeing and property are respected.

19. Adequate safety precautions should be provided by nursing programs, for example, adequate street and building lighting, locks, patrols, emergency notifications, and other security measures deemed necessary to ensure a safe and protected environment.

20. Dress code, if present in school, should be established with student input in conjunction with the school administration and faculty. This policy ensures that the highest professional standards are maintained, but also takes into consideration points of comfort and practicality for the student.

21. Grading systems should be carefully reviewed initially and periodically with students and faculty for clarification and better student-faculty understanding.

22. Students should have a clear mechanism for input into the evaluation of their nursing education and nursing faculty.

23. The nursing program should track their graduates’ success in finding entry-level employment as registered nurses and make this information available to all who apply and enroll.

24. The nursing program should provide comprehensive, clear, and concise information related to student loans, scholarships, and any other student financial aid.
NSNA CODE OF ACADEMIC AND CLINICAL CONDUCT

Preamble

Students of nursing have a responsibility to society in learning the academic theory and clinical skills needed to provide nursing care. The clinical setting presents unique challenges and responsibilities while caring for human beings in a variety of health care environments. The Code of Academic and Clinical Conduct is based on an understanding that to practice nursing as a student is an agreement to uphold the trust with which society has placed in us. The statements of the Code provide guidance for the nursing student in the personal development of an ethical foundation and need not be limited strictly to the academic or clinical environment but can assist in the holistic development of the person.

A Code for Nursing Students

As students are involved in the clinical and academic environments, we believe that ethical principles are a necessary guide to professional development. Therefore, within these environments we:

1. Advocate for the rights of all clients.
3. Take appropriate action to ensure the safety of clients, self, and others.
4. Provide care for the client in a timely, compassionate, and professional manner.
5. Communicate client care in a truthful, timely and accurate manner.
6. Actively promote the highest level of moral and ethical principles and accept responsibility for our actions.
7. Promote excellence in nursing by encouraging lifelong learning and professional development.
8. Treat others with respect and promote an environment that respects human rights, values, and choice of cultural and spiritual beliefs.
9. Collaborate in every reasonable manner with the academic faculty and clinical staff to ensure the highest quality of client care.
10. Use every opportunity to improve faculty and clinical staff understanding of the learning needs of nursing students.
11. Encourage faculty, clinical staff, and peers to mentor nursing students.
12. Refrain from performing any technique or procedure for which the student has not been adequately trained.
13. Refrain from any deliberate action or omission of care in the academic or clinical setting that creates unnecessary risk of injury to the client, self, or others.
14. Assist the staff nurse or preceptor in ensuring that there is full disclosure, and the proper authorizations are obtained from clients regarding any form of treatment or research.
15. Abstain from the use of alcoholic beverages or any substances in the academic and clinical setting that impair judgment.
16. Strive to achieve and maintain an optimal level of personal health.
17. Support access to treatment and rehabilitation for students who are experiencing impairments related to substance abuse and mental or physical health issues.
18. Uphold school policies and regulations related to academic and clinical performance, reserving the right to challenge and critique rules and regulations as per school grievance policy.

Adopted by the NSNA House of Delegates, Nashville, TN, on April 6, 2001
GREAT BASIN COLLEGE
HEALTH SCIENCE and HUMAN SERVICES
INJURY REPORT

Name of Person(s) Injured: ________________________________

Person Completing this Form (if different from above): ________________________________

Date of Incident/Accident: ____________ Date Incident/Accident Reported: ____________

Exact location of the Incident/Accident: ____________________________________________

Description of the injury: ________________________________________________________

Were there any witnesses to the accident? If yes, list below:

Describe the circumstances in which the incident/accident occurred:

Describe follow-up care:

Was person injured referred for follow-up care? If yes, which facility?

Any further comments:

__________________________________________________________

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<tr>
<th>Signature</th>
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<th>Signature of Instructor</th>
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<th>Signature of Dean</th>
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EXPOSURE TO BLOODBORNE PATHOGEN FORM

Complete the following form and return it to the Dean of Health Science and Human Services.

Student Name: ___________________________ Faculty Name: ___________________________

Exposed Individual’s Name: ___________________________ Date of Birth: ________________

Address: ______________________________________________________________________

Telephone number  Home: ___________________________ Cell: ___________________________

Source of exposure (state name of person if applicable): __________________________________________________________________________

Date of occurrence: ___________ Time occurred: _________ Time reported: ____________

Name and title of person initially notified: ______________________________________________________________________________________

Location of occurrence: ______________________________________________________________________________________________________

Check the following that apply to the occurrence:

____ percutaneous exposure (break in the skin that causes bleeding)
____ Mucous membrane contact (eyes, mouth, nose)
____ chapped skin, abraded skin, dermatitis
____ exposure to chemical
____ other, explain: __________________________________________________________________________________________________________

Were bloodborne pathogens (blood, saliva, body fluids, contaminated solutions, etc…) involved?

Yes    No    (circle 1)

Explain: __________________________________________________________________________

Describe the incident precisely: __________________________________________________________________________________________
What did you do after being exposed?  __________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

How do you feel this incident can be prevented in the future?  ______________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Signature of person making report: ________________________________ Date: ____________

Signature of faculty if applicable: ________________________________ Date: ____________

Dean of Health Science & Human Services ____________________________ Date: ____________
## Student Test Item Query Form

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<th>Student Name:</th>
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<th>I am protesting the test item:</th>
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<tr>
<th>Rationale: (Explain why you believe the test item is incorrect)</th>
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<tr>
<th>Reference Source: (Cite three published resources, including the page number, to validate your protest.)</th>
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Great Basin College  
Department of Health Science and Human Services  

CONFIDENTIAL NOTIFICATION OF UNSATISFACTORY STUDENT PROGRESS

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<tr>
<th>Student Name:</th>
<th>Date:</th>
<th>Advisor:</th>
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<tr>
<td>Course:</td>
<td>Grade:</td>
<td>Instructor(s):</td>
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Use the continuation sheet if more space is required

Areas Needing Improvement (documentation required):

Instructor Recommendations/Student Remedial Plan:

Student Response: (Optional):

Follow-up appointment with Instructor (date/time):
Follow-up appointment with Advisor (date/time):

Student Signature: _______________________________  Date: ____________________
(Signature signifies acknowledgement of this notification only)

If a student believes that he/she is being treated unfairly or that an injustice of substantial proportion has occurred, the student should refer to the student handbook for information regarding grievance of this notice.

Instructor Signature: _______________________________  Date: ____________________

Instructor Signature: _______________________________  Date: ____________________

Instructions:
1. Instructor prints two (2) copies.
2. Instructor and student sign both copies. Instructor gives one copy to the student and one copy to the Administrative Assistant for the student’s records.
3. The Administrative Assistant will notify the student’s advisor and the Admission/Progression Committee Chair.
4. If the student is not in Elko, the Faculty or, if requested, the Administrative Assistant will mail the form to the student for their signature or fax it to their location for their signature.
5. **THIS INFORMATION IS HIGHLY CONFIDENTIAL.** In the event this form must be emailed, the email subject line must contain the wording CONFIDENTIAL DOCUMENT. The form must be attached to the email and the email must contain the following confidentiality notice: Confidentiality Notice: This message and any attachments are for the sole use of the intended recipient and may contain confidential and privileged information that is exempt from public disclosure. Any unauthorized review, use, disclosure, or distribution is prohibited. If you have received this message in error, please contact the sender immediately (by phone or reply to electronic mail) and then destroy all copies of the original message.
GREAT BASIN COLLEGE

ASSOCIATE OF APPLIED SCIENCE NURSING PROGRAM

STUDENT AGREEMENT FOR THE 2023-2024 ACADEMIC YEAR

I have read, understand, and agree to abide by the policies and guidelines stated in the Great Basin College Associate of Applied Science Degree Nursing Program 2023-2024 Student Handbook.

I understand that as a condition of enrollment in Great Basin College’s Associate of Applied Science Degree Nursing Program, I agree that a clinical facility/agency may, at any time, require a “for cause” drug and/or alcohol screen. I agree to execute a consent for release of the results of the drug and/or alcohol screening information to the clinical facility/agency should they request such information.

I understand and acknowledge that once admitted to the Great Basin College’s Associate of Applied Science Degree Nursing Program, failure to maintain the professional and/or ethical standards of the program may result in dismissal from the program. I also understand that the Health Science and Human Services Department Admission and Progression Committee may at any time request information from the Administrative Officer of Great Basin College to determine whether I have ever violated NSHE (Nevada System of Higher Education) Code.

I understand and acknowledge that no resources or information from any nursing course can be shared outside the classroom, clinical, practice lab or simulation.

My emergency contact person(s) are listed below. I understand that this individual or individuals are responsible for ensuring that I am transported home in the event one of my faculty or the Associate of Applied Science Degree Nursing Director determines that I am not able to continue being present in the classroom, lab, or clinical setting.

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<th>Name</th>
<th>Phone #</th>
<th>Relationship</th>
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Printed Name  Student Signature  Date

Complete this copy of the Agreement and return to the GBC Health Science and Human Services Department.
GREAT BASIN COLLEGE
ASSOCIATE OF APPLIED SCIENCE NURSING PROGRAM

Agreement to Participate in Practice Lab Procedures
For the 2023-2024 Academic Year

During my enrollment in the Associate of Applied Science Degree in Nursing Program and under the direct supervision of a nursing faculty member, I agree to allow a nursing student classmate to perform the following procedures on my person:

5. Subcutaneous injection
6. Intradermal injection
7. Intramuscular injection
8. Intravenous catheterization (peripheral)

I agree to hold harmless and waive the liability of the student and/or students performing the procedure(s), the supervising instructor and Great Basin College for any injuries incurred as a result of my agreeing to have these procedures performed on my person.

____________________________________________________________________________
Student Name                       Student Signature                      Date

Complete this copy of the Agreement and return to the GBC Health Science and Human Services Department.
During your participation at the Great Basin College Practice Lab, you will be an active participant and observer of the performance of other individuals in the management of acute medical, surgical, and other health care events in simulated experiences.

The objective of the simulation experience program is to educate pre-licensed and licensed health care practitioners to better assess and improve their performance in evolving health care situations. Simulations are designed to challenge a healthcare professional’s response and judgment in stress environments.

Due to the unique aspects of this form of training, you are required to maintain and hold confidential all information regarding the performance of specific individuals and the details of the scenarios.

There is continuous audiovisual digital recording during all simulations which will be used for educational purposes. This video recording is considered a QUALITY ASSURANCE TOOL and is protected by Federal Law.

By signing this agreement, you agree to maintain strict confidentiality regarding both your and others' performance, whether seen in real time, on video, or otherwise communicated to you. Failure to maintain confidentiality may result in unwarranted and unfair defamation of character of the participants.

To maintain optimal simulation experiences for other learners who will be following you in the center, you are to maintain strict confidentiality regarding the specifics of the scenarios. A breach of confidentiality may result in loss of privileges in the Practice Lab.

By signing below, you acknowledge you have read and understand this statement and agree to maintain the strictest confidentiality about the performance of individuals and the simulation scenarios you observe.

I agree to maintain strict confidentiality about the details of the scenarios and the performance of other participants during scenarios at Great Basin College Practice Lab.

I authorize the Great Basin College Practice Lab to use the video recording(s) and photographs made in the Practice Lab for the following purposes:

_____ 1) Debriefing scenario participants,
_____ 2) Administrative review,
_____ 3) Educational research,
_____ 4) Commercial purposes, which can include public relations, promotional advertisements, and/or fundraising activities. I understand that, unless otherwise approved by me, I will not be specifically identified.

Last Name, First Name  (Please Print)  Date

Signature

Complete this copy of the Agreement and return to the GBC Health Science and Human Services Department
Information on Criminal Convictions for People Interested in a Nursing Career in Nevada

Your criminal conviction may prevent you from receiving a Nevada nursing license or nursing assistant certificate.

Even if you receive a nursing license or nursing assistant certificate, you may not be allowed to work in several types of health care settings.

The Nevada State Board of Nursing requires all applicants for nursing licenses and nursing assistant certificates to answer five screening questions (attached). These questions address criminal convictions, discipline in another state, chemical dependency, and medical and mental health conditions. In addition, all applicants must submit their fingerprints for an FBI and State of Nevada criminal background check.

Question #2 reads: Have you ever had a criminal conviction, including a misdemeanor or felony, or had a civil judgment rendered against you? If the answer is YES, you must attach to this application the following:

a. A letter of explanation including the date of offense, circumstances leading to the arrest, actual conviction, sentence, additional convictions and current status of sentence;

b. Copies of court documents identifying actual conviction and sentence and current status of sentence (i.e. all fines paid in full, etc.). If no documents are available, a letter from the court stating such;

c. FBI and State of Nevada fingerprint reports;

d. A letter from Parole/Probation Officer regarding completion of sentence, if applicable; and

e. A letter of reference from your current/last employer.

Important points to remember if you’ve ever been convicted of a crime

- Even if you have been told a conviction has been expunged, sealed, dismissed, dropped, closed, etc., it may still show up on your fingerprint report
  - You could have been convicted even if you didn’t spend any time in jail.
  - Criminal convictions include misdemeanors and felonies.

- If you answered “NO” to Question #2 and the Board finds you have a conviction, your application will be denied as a fraudulent application.

- If you answered “YES” to Question #2 and do not attach the required documents, your application will not be considered by the Board until you provide the documents.

If you answered “YES” to Question #2 and attach the required documents, the Board may accept or deny your application based on evidence of rehabilitation and the potential/actual risk to the public. The Board considers each application individually, using the guidelines below.
A. Board staff **may** clear your application and **may** grant you a license or certificate, if

- you have a minor event, minor traffic-related matters, minor criminal citations, and/or juvenile offenses that occurred with seven years before application; or
- you have three minor events that occurred between seven and ten years before application; or
- you have multiple minor events that occurred more than ten years before application.

"Minor event" is defined as any conviction that is not a felony or one of the eight convictions listed below.

B. Board staff **will** bring your application before the Board for acceptance or denial if you have more than one criminal conviction within the last seven years or if you have a felony. You will receive written notice regarding the date the Board will consider your application. You may appear before the Board to present information on your rehabilitation and reasons you believe the Board should accept your application. At that time, the Board may deny your application, which is reported as a disciplinary action, or the Board may accept your application, granting you a license or certificate, possibly with restrictions.

C. Board staff **will** deny your application if you have any of the convictions listed below.

1. Murder, voluntary manslaughter or mayhem;
2. Assault with intent to kill or to commit sexual assault or mayhem;
3. Sexual assault, statutory sexual seduction, incest, lewdness or indecent exposure, or any other sexually related crime that is punished as a felony;
4. Prostitution, solicitation, lewdness or indecent exposure, or any other sexually related crime that is punished as a misdemeanor, within the immediately preceding 7 years;
5. A crime involving domestic violence that is punished as a felony;
6. A crime involving domestic violence that is punished as a misdemeanor, within the immediately preceding 7 years;
7. Abuse or neglect of a child or contributory delinquency;
8. A violation of any federal or state law regulating the possession, distribution or use of any controlled substance or any dangerous drug as defined in chapter 454 of NRS, within the immediately preceding 7 years;
9. Abuse, neglect, exploitation or isolation of older persons or vulnerable persons, including, without limitation, a violation of any provision of NRS 200.5091 to 200.50995, inclusive, or a law of any other jurisdiction that prohibits the same or similar conduct;
10. A violation of any provision of law relating to the State Plan for Medicaid or a law of any other jurisdiction that prohibits the same or similar conduct, within the immediately preceding 7 years;
11. A violation of any provision of NRS 422.450 to 422.590, inclusive;
12. A criminal offense under the laws governing Medicaid or Medicare, within the immediately preceding 7 years;
13. Any offense involving fraud, theft, embezzlement, burglary, robbery, fraudulent conversion or misappropriation of property, within the immediately preceding 7 years;
14. Any other felony involving the use or threatened use of force or violence against the victim or the use of a firearm or other deadly weapon; or
15. An attempt or conspiracy to commit any of the offenses listed in this paragraph, within the immediately preceding 7 years;

After receiving written notice that Board staff has denied your application, you can appeal the denial by sending a certified letter to the Board requesting a review by the Board. This must be done within 30 days after the denial notice is mailed to you. If the Board upholds the staff denial, it will be reported as a disciplinary action. If the Board overturns the staff denial, you will receive a license or certificate, possibly with restrictions, after you have met all other licensure/certification requirements.

For questions on the Nevada State Board of Nursing's laws, regulations and policies regarding applicants with criminal convictions, please call toll free 1-888-590-6726.

If you have one of the criminal convictions listed above (1-15) and the Nevada State Board of Nursing grants you a license or certificate, the Nevada State Health Division will **not** allow you to work in any capacity in a facility for intermediate care, facility for skilled nursing, home health care, or a residential facility for groups.

For questions about the type of health care facilities in which you may work, please call the Nevada State Division of Health, Bureau of Health Care Quality and Compliance, in Carson City at 775-687-4475 and in Las Vegas at 702-486-6515.

01/23/12
GREAT BASIN COLLEGE  
ASSOCIATE OF APPLIED SCIENCE DEGREE IN NURSING

Nevada State Board of Nursing Eligibility Screening Questions

If accepted and towards the completion of the program, you will need to answer questions related to your personal life prior to taking the nursing licensing examination (i.e., the NCLEX-RN). As a precursor to that, please answer the following questions. **Attach additional details and documentation for all “YES” responses. “Yes” responses could affect licensure.**

| Yes | No | 1. Has your license in Nevada or any other state ever been denied, revoked, suspended, reprimanded, fined, surrendered, restricted, limited or placed on probation; or is any investigation complaint or action pending? **If the answer is Yes**, you must submit:
|     |    |   a. A letter of explanation of the action, what state, and the circumstances leading to the action
|     |    |   b. Copies of documents from the board taking the action identifying the allegations, action take and current action status (documentation of completion of requirements of any order); and
|     |    |   c. A letter of recommendation from current/last employer.
| Yes | No | 2. Have you ever had a criminal conviction, including a misdemeanor or felony, or had a civil judgment rendered against you? **If the answer is Yes**, for each conviction you must submit:
|     |    |   a. A detailed letter or explanation including the circumstances leading to your conviction, date convicted, actual conviction (i.e. DUI, theft, etc.), what your sentence was, and if and when you completed it;
|     |    |   b. Copies of court documents, including the actual conviction, sentence, and current status of sentence (i.e. all fines paid in full, completion letter from Parole/Probation Officer, etc.) or a letter/form from the court indicating no records are available; and
|     |    |   c. A letter of reference from your current/last employer.
| Yes | No | 3. Do you currently use chemical substances in any way which impairs or limits your ability to practice the full scope of nursing? **If the answer is Yes**, you must attach to this application:
|     |    |   a. A letter of explanation that addresses the impairment or limitations of practice;
|     |    |   b. A letter of reference from your current/last employer;
|     |    |   c. A copy of your last employment evaluation; and
|     |    |   d. If you are using the chemical substance as a confirmed medical necessity, a letter from your treating practitioner documenting the diagnosis and medical necessity for the use of chemical substances, including any practice limitations.
| Yes | No | 4. Are you currently in recovery for chemical dependency, chemical abuse, or addiction? **If the answer is Yes**, you must submit:
|     |    |   a. A letter of explanation describing your recovery experience, including length of continuous recovery, treatment, and current recovery activities;
|     |    |   b. Documentation from knowledgeable individual(s) documenting your length of sobriety; and
|     |    |   c. Documentation of inpatient or outpatient chemical dependency treatment.
| Yes | No | 5. Do you currently have a medical or psychiatric/mental health condition which in any way impairs limits your ability to practice the full scope of nursing? **If the answer is Yes**, you must submit:
|     |    |   a. A letter of explanation regarding your condition, whether temporary or permanent, including diagnosis, past hospitalizations, date of last treatment, current treatment plan, and how your condition may interfere with your ability to practice the full scope of nursing safely; and
|     |    |   b. Documentation from treating practitioner regarding the diagnosis, (Axis I-V for psychiatric diagnosis), medications, current status and treatment plan, the extent of condition, and statement regarding your ability to carry out nursing duties reliably and with good judgment.

______________________________________  __________________________
Applicant Signature                          Date