



Doctor of Nursing Practice

FNP Clinical Handbook
2025-2026

University of California, Irvine

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FNP STUDENT GUIDELINES FOR CLINICAL ROTATIONS

UC Irvine

Sue & Bill Gross School of Nursing



FNP Student Guidelines for Clinical Rotations Academic Year 2025 – 2026

Clinical Information and Policies

The Clinical Practicum component of the Program comprises six Advanced Practice Registered Nursing courses, NUR SCI 285 – 290. This portion of the program is designed to maximize clinical learning and skill progression over time. Specific requirements for each clinical course will be provided in the individual course syllabus.

During your clinical rotations you represent the University of California, Irvine, School of Nursing, Family Nurse Practitioner Track, as well as the nurse practitioner profession. Given the clinical environment and the diverse range of professionals, patients, and community members with whom you will interact, a high level of professionalism is expected of all students at all times. You are also establishing a professional network for your future: a clinical preceptor might be a future employer, serve as a reference, or write a letter of recommendation.

It is recognized that patient problems encountered in the clinical setting frequently do not coincide with the didactic content. **Nonetheless, the student is expected to gather complete subjective and objective data on all patients.** All students are required to demonstrate knowledge, critical thinking, and clinical skills within the practice setting. Students are not expected to be able to diagnose all problems or to develop treatment plans for all patients depending upon their standing in the program; however, the student must know and respect their limitations in knowledge and consult or refer appropriately to ensure patient safety. Every effort to critically think and contribute to the plan of care for each patient should be employed.

Clinical performance is expected to progress alongside the student's academic advancement each quarter. The ability to obtain a history, present patient cases, perform physical examinations, interpret findings, integrate lab data, articulate differential diagnoses, and delineate initial management plans is expected to progress with increasing accuracy each quarter. Upon graduation from UCI's DNP/ FNP program, the student will be prepared to care for individuals and families across the lifespan with a focus on delivering patient-centered care.

Clinical Placement Process

Clinical practicums provide experiences that build on each student's knowledge and skills as they progress through the program. The clinical placement process is fluid and dynamic and is secured through a partnership with students, faculty, preceptors, and healthcare organizations. Students are expected to actively partner with the Clinical Support Unit by:

- Referring clinicians from their professional network who may serve as preceptors.
- Providing all available information about potential contacts and preceptors.
- Following guidance in "Pearls for Recruiting Preceptors" (see Appendix A).

Affiliation Agreements

- **Students with potential new preceptors** must complete the "New Preceptor/Clinical Site Information" form (see Appendix B) and submit it to the Clinical Support Unit as soon as possible. New affiliations take 3 months to 1 year to secure.
- **Required affiliation agreements** must be active before students begin clinical rotations. Students cannot attend clinical sites without active affiliations. The Clinical Support Unit will work to secure agreements, but approval is not guaranteed.
- **The Affiliation agreement process** involves extensive review by UCI Health Legal and Risk Management before final Dean approval. Students should submit requests promptly upon identifying opportunities.

Clinical Sites and Preceptorship

The FNP Clinical Coordinator overseeing clinical practicums will review and approve all potential clinical sites and preceptors for their ability to support students in meeting program objectives. Clinical placement sites will, ideally, be in the primary care setting and align with our mission and vision to prepare the future advanced practice nursing workforce to provide healthcare to vulnerable populations. The clinical experience includes family practice, adult/gerontological medicine, pediatrics, and OB/-GYN.

- Students will be assigned to clinical placements with an approved affiliation agreement in place, considering the following factors:
 - **Educational value and learning opportunities**
 - Curriculum alignment
 - Preceptor availability and clinical site capacity
 - Strategic alignment of students' competencies and learning objectives with clinical sites' expertise and preceptor qualifications
 - Students' multilingual abilities
- Students **may not decline a clinical placement for any reason**; clinical placement selections are a collaborative effort involving multiple factors.
- For your rights, options, and resources regarding religious accommodations (based on a held religious belief, practice, or observance), please contact the Office of Equal Opportunity and Diversity (OEOD) at oeod@uci.edu.
- For your rights, options, and resources regarding pregnancy related accommodations (including pre-pregnancy, pregnancy, post-partum, and pregnancy loss), please contact the Office of Equal Opportunity and Diversity (OEOD) at oeod@uci.edu.
- Although faculty and staff will make every effort to identify sites for precepted rotations as close to the student's place of residence as possible, statutory regulations, UCI Health policies and procedures, requirements of health care provider sites, competition for sites, etc., may limit the location and selection of sites.
 - Students need to be prepared to travel up to 100 miles and have flexible schedules to accommodate clinical experiences.
 - In some cases, additional travel distance may be necessary to secure a clinical site that can provide learning experiences aligned with program objectives.
- The student's tenure at each site will vary: the usual duration consists of one to three quarters with varied weekly hours.
- While it is ideal for one preceptor to provide all required clinical experiences for each practicum, it is not uncommon to have 2-3 preceptors assigned per quarter to ensure there are ample opportunities to meet course requirements.
- Additional rotations in subspecialty practices may be completed during the clinical practicum.
- Specialty sites will be considered for placements but must provide learning opportunities aligned with program learning objectives and be approved by the FNP Clinical Coordinator overseeing clinical practicums. The FNP Clinical Coordinator manages student placements throughout clinical rotations in partnership with the faculty of record and the student's Clinical Nurse Educator (CNE).
- Site visits and regular communication with preceptors will be conducted to ensure clinical sites provide appropriate learning opportunities and meet program criteria.
- Students will receive correspondence from the Clinical Support Unit with information regarding their assigned clinical site and preceptor before the start of the term, when possible.
- While every effort is made to achieve 100% successful placement, on-time placement is not guaranteed.
 - Placement delays include but are not limited to lack of available preceptors, extensive onboarding requirements, insufficient medical records, unexpected public health restrictions,

etc.

- Students are expected to respond to communication regarding clinical placements within **2 business days**.
 - Failure to respond to communication pertaining to a clinical placement can result in unfavorable consequences including but not limited to a delayed start and loss of a clinical placement.

Health and Other Requirements

(see Appendix G for checklist)\

Annual Requirements

- **Tuberculosis (TB) –QuantIFERON Gold / T-Spot (IGRA Blood) Test:** Submit proof of negative Tuberculosis (TB) QuantiFERON Gold/Blood Test or T-Spot (IGRA Blood) test result. Skin tests and chest X-rays are not acceptable.
- **Influenza Vaccination:** Please complete the annual flu vaccine each fall as soon as it becomes available (due October 1st of each year).

One Time Requirements

- **COVID 19 Vaccine and Boosters:** Proof of your most recent COVID-19 vaccine and/or booster is due by **October 1st of Year 1**. Individual sites may still require documentation of a COVID-19 vaccine record as part of their onboarding process. The CSU will work directly with students on any site-specific onboarding requirements to ensure compliance.
- **Tetanus (Td/Tdap):** You must have a record of a booster within the last 10 years. Either your original vaccination or your most recent booster must be Tdap. If you had a Tdap vaccination as a child, your booster can be Td.
- **Hepatitis B vaccination:** Submit laboratory evidence of Hepatitis B immunity (titer) within the last year. If titer results show lack of immunity, then complete the three-step vaccination and complete another titer a month following your last shot in the series and show positive immunity. Laboratory evidence of immunity (titer) is the **ONLY** acceptable document for this requirement. If you completed the 3-dose Hep B and follow-up titer still resulted a negative immunity, please contact Clinical Support Unit nursingCSU@hs.uci.edu for next steps.
 - This is a one-time requirement only *for UCI*; however, community partners may require more recent and frequent evidence.
 - **Clinical sites may require repeat titer just prior to the start of clinic. Clinical sites may also require BOTH proof of vaccination (2 dose HEPLISAV-B or 3 dose series completion dates) and positive Hep B titer (with quantitative value)**
- **Measles, Mumps, and Rubella (MMR):** Laboratory evidence of immunity (titer) is the **ONLY** acceptable document for this requirement. Upload a copy of your titer/evidence of immunity to Typhon.
 - **If titer results show negative immunity/non-responsive:** Complete the three-step vaccination series, then obtain another titer one month after the final shot showing positive immunity. You must show immunity for all three. Childhood vaccinations do not meet this requirement.
- **Varicella (Chicken Pox):** Laboratory evidence of immunity (titer) required. If titer shows lack of immunity, notify the Clinical Support Unit and complete an additional titer after vaccination. Childhood vaccinations do not meet this requirement.

Other Requirements:

- **Physical and Mental Health Clearance:** Documentation is required from your healthcare provider indicating you do not have any health condition(s) that would create a hazard to yourself, employees, or patients. Documentation can be signed by a physician, physician's assistant, or nurse practitioner. Form

to have signed is provided by the School of Nursing (see Appendix C).

- ***If for any reason, a student should have a leave of absence/break in enrollment from the School of Nursing, the School of Nursing reserves the right to require another Physical and Mental Health Clearance be completed within 4 weeks of returning to classes for the student to return to clinical rotations.***
- When a student notifies faculty of an illness (physical or mental), injury or surgery that impacts student's ability to function in the clinical setting, students will be directed to provide the approved clearance form (see Appendix C) completed by an appropriate healthcare provider that provides information indicating date student is able to return to clinic duties and any physical limitations which may interfere with clinical rotation duties. The reason does not need to be specified.
- **Any physical or mental limitations noted by the healthcare provider (HCP), which may interfere with clinical duties may make the student ineligible to complete their clinical requirements that quarter.**
- ***Please note: Specific organizations may require annual physical and mental health clearance.***
- **Background Check and Drug Screen:** Order your background check and drug screen via <http://ucibackground.com/> (one-time UCI requirement).
 - Some clinical organizations may require additional screening specific to their facility and will not accept UCI documentation; the Clinical Support Unit will work with individual students as required by the clinical site.
 - Review your orientation materials for submission timing and instructions. Upload copies of both reports to Typhon—SON Staff will receive results to share with clinical partners for onboarding.
 - The Sue & Bill Gross School of Nursing requires a Urine Drug Screen (UDS) prior to starting, which must be clear for any substances. Some sites where a matriculant will be rotating require an additional UDS prior to the start of clinical rotation or scholarly work. To make placements equitable for all students, during the DNP program **students will be required to comply with the student drug free policy of our community training sites and outside agencies.** If you test positive for any substances, **including marijuana**, you will lose your opportunity to rotate at the respective site, which will impact completion of your hours. The use of any substance which is “medically necessary” and may show up on a screening must be disclosed to the program and the student will be required to submit a signed note from a licensed healthcare provider documenting the medical necessity and that the student will not be impaired, or a danger to themselves, others or any patient while in the clinical setting.

Certifications and Trainings:

- **HIPAA Training (Privacy & Security Training: Federal & State Healthcare Privacy Laws (HIPAA):** Complete via UC Learning Center (UCLC) (<https://uclc.uci.edu>).
- **EPIC Training:** Complete via UC Learning Center (UCLC) (<https://uclc.uci.edu>).
- **CPR/BLS Certification:** You must have a current American Heart Association Basic Life Support (BLS/CPR) certification throughout the program. Certifications are typically valid for 1-2 years.
- **Proof of Malpractice Insurance:** You are required to obtain Malpractice Insurance during the clinical portion of the program (starting in January of Year 2). NSO is the organization that most DNP students use. Students can go to www.nso.com to obtain a quote using the following information:
 - Profession: Nurse Practitioner
 - Specialty: Family Practice
 - Employment Status: Student
- **California RN License:** You are required to upload a copy of your active, unrestricted CA RN License information to Typhon. You must maintain an active and unrestricted CA RN License throughout the

program.

- **Driver's License:** You are required to have a current Driver's License.
- **Other Clinical Agency Requirements:** If clinical agencies have additional health specifications (e.g., drug testing, additional proof of vaccination, repeat Hepatitis C titer, repeat TB test, etc.), students who are assigned to those agencies will be required to meet them. Additionally, clinical agencies may require other forms of identification to provide clearance prior to the clinical rotation. Forms such as the following may be requested by Clinical Support Unit:
 - Social Security number and/or card
 - Passport and/or passport-style photo
 - Auto insurance information and/or card
 - Health insurance information and/or card
- **Resume/Curriculum Vitae:** This document should be revised as needed throughout the program, so it remains a current reflection of your education, work history, skills, volunteerism, awards and distinctions.

Be sure you keep all health records and clearance documents updated throughout the program. Failure to maintain current documentation of any required records, training, screening, etc. will result in removal from the clinical site and potentially delay successful completion of the course.

Typhon

- **Typhon Account and Student Information:** Students will be required to create a Typhon account ([Typhon Group: Log In](#)). Typhon is the online system that students will use throughout the program to securely upload health records and required documentation.
 - All patient information data must be de-identified when entered into Typhon.
 - Only use of patients' initials is acceptable.
 - Students should not enter patient data while in clinic unless approval is obtained from preceptor.
- Students will be required to pay a one-time account fee.
- Instructions on use of the Typhon NPST will be provided to students prior to starting their clinical rotations.
- Students will be required to upload the following information to Typhon by September 1st for clinical documentation and placement purposes:
 - Contact information (phone number)
 - Address
 - Date of birth
 - Additional email address- please provide an alternative non-UCI email
 - Emergency contact information
 - Language (spoken and medical)
 - RN License information
 - Including experience/specialty
 - Background check
 - Drug Screen test results
 - Vaccinations
 - Annually:
 - Influenza (by October 1st)
 - TB (IGRA blood test)

- One-time:
 - COVID-19
 - Tdap
 - Titers
 - Hepatitis B
 - MMR
 - Varicella
 - **Note: If any of your titers showed lack of immunity, please upload all records including original titer, booster and follow-up titer**
- HIPAA Training
- Epic Training Completion Certificate, signed EPIC attestation, date of completion
- Sexual Harassment training and certificate of completion
- CPR Certification
 - You are responsible for maintaining current CPR certification throughout the program and updating your documentation and expiration date in Typhon.
- Proof of Malpractice Insurance
 - In Year 2 of the program, you will be required to upload a copy of your proof of insurance to Typhon.
- Driver's License
- Resume/CV

Student Clinical Preceptorship Responsibilities

- **As soon as you receive your assigned clinical site(s)**, contact your preceptor(s) by phone or email to introduce yourself. Preceptors may take up to a week to respond. If you are unable to reach a preceptor after 2 attempts within one week, please inform the Clinical Support Unit.
- Arrange a start time, date, and specific location.
- **Ask about parking.**
 - *UCI does not provide a stipend for parking or meals while at clinical.*
- Some preceptors may request a telephone or in-person interview prior to your first day in clinic.
 - If a request is made, this meeting should be treated as a job interview and scheduled promptly. Arrive 15 minutes early, wear professional attire, and bring a copy of your resume.
- If a site requires additional prerequisites, including but not limited to additional titers, EHR training, orientation, completion of web-based modules, etc., this must be completed at the student's expense and done prior to beginning a clinical rotation.
 - Hours spent on these processes are **not** counted as part of your clinical hours.
 - Clinical hours are defined as direct patient care time: Hours in which direct clinical care is provided to individuals, families, and groups in one of the populations focused areas of NP practice and in primary care or acute care as appropriate.
- It is the student's responsibility to maintain communication with the site and placement team and ensure prerequisite training and documentation is completed to the site's satisfaction.
 - All communication pertaining to the clinical site must be sent via a UCI email address and responses must be received within 48 hours (about 2 business days).
 - **Failure to meet site requirements or maintain communication with assigned preceptor/clinical site may result in loss of clinical placement.**
 - *If placement is lost due to student unresponsiveness or unprofessional behavior, it is the student's responsibility to secure an alternate preceptor at a UCI affiliated site meeting program requirements for placement.*

- Students **must**:
 - Attend clinical rotations as scheduled and must arrange alternate plans when a preceptor is absent from the clinical site.
 - Attend the clinical seminar sessions as scheduled.
 - Introduce themselves as a Nurse Practitioner Student to the patient prior to conducting the patient encounter.
 - Notify their assigned CNE immediately of any problems that arise while in the clinical setting, such as challenges with completing hours and difficulty communicating with preceptors.
- Student should be prepared for clinic and bring the following to their rotations:
 - Stethoscope
 - Watch with second hand
 - Minimal money in case of emergency
 - Clinical Documents: Typhon patient case logs, H&P or Progress Note templates, etc.
 - References
 - UpToDate is a key resource available as an app on smartphones. Subscriptions are provided by UCI and can be activated through the UCI Library website.
 - ***Bring your own reference books and/or electronic devices.***

Clinical Experience Requirements

While in the clinical practicum courses, students should expect to spend several days per week in clinical. Most clinical sites operate between the hours of 8-5pm Monday through Friday; however, providers may split their days commonly working in four-hour blocks, hold hours in the evening, or on weekends. Students are expected to be available when their preceptor can accommodate them in the clinical setting while enrolled in a practicum course.

- Students must be enrolled to participate in direct patient care.
 - Students may not attend clinical after the course has ended unless the student has a documented “incomplete” for the course, is actively enrolled in the DNP- FNP program, and has approval from the Faculty of Record, FNP Clinical Coordinator, and Student Affairs.
 - Students may not attend clinical prior to the start of the term.
 - Students may not attend clinic during required synchronous class time without specific permission from their faculty of record.
 - Students cannot attend clinic between academic quarters or when the University is closed for a holiday.
- 720 direct patient care hours are required for program completion in the DNP-FNP track (see Appendix D)
 - All hours must be accounted for on a preceptor signed clinical log and within the student tracking system for health education with all required patient demographic, payer, and visit information reported.
- The expectation is that students see one to two patients an hour **at minimum**, as time management is an essential skill for advance practice registered nurses in the FNP concentration.
- Students are expected to start their clinical hours by Week 2 of the quarter.
- Every attempt should be made to evenly distribute the scheduling of clinical hours to span the entire quarter. This ensures that appropriately paced clinical learning can occur throughout the 10-week course.
 - Exceptions may be made at the discretion of the Preceptor, Faculty of Record, and FNP Clinical Coordinator in the face of extenuating circumstance.

Clinical Preceptors

A major part of the clinical learning is accomplished under the direction of the community preceptor who is trained and clinically active in the provision of health care services. The preceptor helps the student learn clinical skills while applying didactic knowledge to the clinical setting. Ideally, students will be placed with a NP; however, students may be placed with other care providers. NP students may be precepted by a board-certified (AANP or ANCC) Nurse Practitioner (NP), Certified Nurse Midwife (CNM), Medical Doctor (MD), or Doctor of Osteopathic Medicine (DO). NP students may also be precepted by licensed clinical professionals such as Physician Assistants (PAs), Optometrists, Podiatrists, Clinical Nurse Specialists, etc., as approved by the FNP Clinical Coordinator.

It is the goal of the program to educate the student to work within an interdisciplinary team consisting of the NP, PA, physician, and/or other healthcare professionals such as physical therapists, pharmacists, mental health professionals, case managers, and social workers, along with the patient and their family, sharing knowledge and responsibility for patient care.

Preceptor Requirements:

- Nurse Practitioner clinical preceptors must hold an active RN licensure, NP certificate, and NP furnishing number. It is preferred that NP preceptors hold board certification in their area of specialty.
- Certified Nurse Midwives must hold an active RN licensure, CNM certificate, and CNM furnishing number. CNMs must hold national certification.
- Physician clinical preceptors must hold an active MD or DO licensure, board certification in specialty is preferred.
- All other licensed healthcare professionals that may precept with must hold an active California license in their discipline and appropriate board certification.

Evaluation:

- The preceptor shall contribute to the practicum grade by evaluating the student at the end of the clinical rotation; we also encourage students to ask preceptors for feedback on their performance mid-way through the quarter, The final clinical grade/evaluation is the responsibility of the course Faculty of Record.
- The student shall evaluate the preceptor and clinical site at the end of the practicum.
- The Faculty of Record shall review all student and preceptor evaluations at the end of the quarter.
- Any concerns regarding a student's attainment of competency and/or satisfactory performance in clinical will be brought to the Clinical Coordinator overseeing clinical affairs.
- The CNE and/or Faculty will also conduct site visits, interviews, and maintain regular communication with preceptors throughout the quarter to ensure students are progressing as expected and that clinical sites are appropriate for the students' learning

Clinical Preceptor Role & Responsibilities:

- Serving as role models and supervisors for students during clinical rotation, preceptors must guide students in the clinical setting by performing the following responsibilities:
 - Provide adequate clinical space for the student to see patients in their setting.
 - Provide a variety of patient encounters for the student to have a balanced learning experience.
 - Supervise, demonstrate, teach, and observe the student in clinical activities to develop the

student's skills and to ensure appropriate patient care.

- All intimate physical exams must be chaperoned by a licensed clinician.
- Delegate assignments gradually, increasing levels of responsibility to the student for the clinical assessment and management of patients as the student's skills develop.
- Allow the student to document, as appropriate, in the patient charts or electronic health record (EHR) or use a chart note simulation in cases in which students may not record the encounter in patient medical records or the EHR.
- Review and, if necessary, add information to the student's entry in patient charts/EHR and co-sign all patient records/EHR written by the student.
- Participate in the evaluation of the student's clinical skills and didactic knowledge base by:
 - giving direct supervision and observation in the clinical setting
 - giving feedback to the student based on the oral case presentation
 - reviewing the student's chart notes/EHR
 - discussing the student's progress with faculty electronically, by phone, email, or in person during site visits. Students should have a clear understanding of their performance throughout the quarter, so their final evaluation is of no surprise
 - completing a written (online) evaluation of student
- Students **may NOT** make care management recommendations to patients or initiate treatment without prior preceptor discussion/review, including diagnostic tests, medications, or referrals

Professional Conduct in Clinical Rotations

All students are expected to interact in a professional, courteous, and responsible manner with staff, patients, colleagues, and visitors in the clinical setting. As a UCI DNP/ FNP student, you are an ambassador for the university and will be representing yourself as a future nurse leader and DNP.

Adherence to the American Nursing Association (ANA) Code of Ethics and the Standards of Professional Practice is an expectation. The code of ethics will serve as an ethical standard for the profession and will guide the student with ethical analysis and decision- making.

- ***ANA Code of Ethics for Nurses***
 - The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
 - The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
 - The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
 - The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and acts consistent with the obligation to promote health and to provide optimal care.
 - The nurse owes 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.
 - The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.
 - 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.
 - The nurse collaborates with other health professionals and the public to protect human rights,

- promote health diplomacy, and reduce health disparities.
- 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
- ***Professional Communication & Behavior***
 - In addition to adhering to the ANA Code of Ethics and Standards for Professional Practice, the student must adhere to all policies outlined in the [UCI Code of Student Conduct](#). These policies address the rights and responsibilities of members of the University community as well as others while on University property. These policies also address the responsibilities of students as defined herein and provide University wide standards for campus implementing regulations as a means of sustaining this community.
 - Each member of the University shares in the responsibility for maintaining this unique community so that the University's mission of teaching, research, and public service can be achieved. These policies and their campus implementing regulations are designed to protect and promote the rights of members of the University, prevent interference with university functions or activities, and assure compliance with all pertinent laws and other applicable University policies.
- ***Professionalism in the Clinical Setting***

Students will be provided with clinical syllabi and objectives for each quarter. These documents are to be shared with your preceptors at the beginning of the rotation. Students are to assume responsibility for patients only in the designated program settings and under approved supervision. Students are not permitted to initiate care of a patient without the direct supervision of their preceptor. An infraction of this policy is cause for dismissal from the program.

- Introduce yourself to all staff in the clinical environment and be sure you introduce yourself as a nurse practitioner student.
- Always wear your UCI Student ID Badge at all times
- Dress must follow Professional Attire Guidelines; see below.
- Punctuality is essential. Arrive early (suggest arriving 15 minutes early for your clinical day); plan for traffic, etc.
- Review patient schedule: look up diagnoses and labs before the patient encounters when possible.
- Preceptors may give students assignments such as research on a particular diagnosis, management of disease, treatment guidelines, etc. It is expected that the student completes these assignments as directed by preceptors. Failure to do so will be reflected on your evaluation.
- Obtain a cell phone number or contact number of the preceptor/clinic in case of absence. You must inform the preceptor prior to the scheduled rotation AND notify your assigned CNE. Changes to your clinical schedule must be approved by your assigned preceptor and submitted to your CNE,
- Do not conduct personal or business phone calls during your clinical time; this is your time to LEARN; make the most of each day in your clinical experience. Turn all cell phones to SILENT mode.
- Take initiative and be an assertive, adult learner—students are encouraged to ask to observe cases or procedures; always be respectful of patients/colleagues.
- Be prepared with clinical notes and resources (books, electronic devices). Do not expect the preceptor to have resource material for you to utilize.

- Conclude your rotation with a meeting with your preceptor to discuss your clinical progress throughout the rotation. A farewell thank-you note is always appreciated as preceptors have VOLUNTEERED their time to mentor you.
- **Professional Dress and Personal Appearance**
 - **General Dress Guidelines**
 - Student appearance reflects the individual, the School of Nursing, and the University of California, Irvine.
 - A white lab coat (¾ length) will be purchased by the student through a UCI School of Nursing vendor which will be embroidered with the University name.
 - Professional business type attire is required for clinical rotations.
 - Casual attire is not acceptable such as stretch pants/leggings, jeans/denim, capri pants, open toe shoes/flip flops, hats. **Scrubs should only be worn if specifically asked.**
 - Appropriate attire includes a shirt and tie, and long pants. Dress or skirt of appropriate length (remember you will be sitting on an exam stool) or dress pants and blouse.
 - Wear comfortable, closed-toed shoes in the clinical areas (**no sandals**).
 - All clothing should be clean, neat, free of wrinkles, and properly fitted.
 - **Other Grooming and Personal Appearance Guidelines**
 - Hair should be clean and arranged neatly.
 - Appropriate standards of bathing and grooming are expected.
 - Beards/mustaches must be short and neatly trimmed.
 - Nails should be kept clean and short; nail polish should be light-colored or neutral; artificial nails (acrylic or other) are prohibited per UCI policy.
 - Extreme styles of dress, hairdos, and makeup are not permitted.
 - Students should only wear limited, non-obtrusive jewelry in the clinical setting, the student must be cognizant of safety risks imposed by the jewelry.
 - Some clinical sites may have other guidelines pertaining to grooming. As a visitor to such sites, students must also adhere to their guidelines. Tattoos and piercings may be required to be covered by clothing/adhesive.
 - Avoid perfumes, colognes, lotions, and body sprays.

Attendance Policy

Consistent, punctual, and regular attendance to all clinicals is an essential requirement of the program. Students must present to clinic on time, prepared, and ready to begin patient care. Students are expected to remain at the clinical site for the duration of their preceptor's workday. It is an expectation that students schedule any personal or medical appointments on days and times that do not conflict with class or clinical days.

Students must comply with the attendance policy as it is outlined below:

- Attendance on each scheduled practicum day is expected unless the student has notified the preceptor and their assigned CNE of an excused absence prior to the beginning of the workday.
- Unexpected absences should be reported as soon as possible to the preceptor, CNE, and faculty of record.
- Inconsistent attendance to clinical may jeopardize the students' acquisition of knowledge and skills, impede progression in the program, and result in an "Unsatisfactory" evaluation for the rotation.
- If a student misses a clinical day for an unavoidable and serious reason, an excused absence can be obtained.
- If a student maintains employment, flexibility with scheduling is necessary to fulfill clinical and academic requirements.

- **Work obligations are not excused absences.**
- **Clinical placements are arranged around class schedules and preceptor availability.**
- **Students with specific scheduling needs are encouraged to identify preceptors that can accommodate them, but this is not the responsibility of the FNP Clinical Coordinator, Clinical Support Unit, Faculty of Record, or CNE.**
- Failure to comply with the attendance policy may result in appropriate corrective action, including and not limited to failure of the clinical practicum course.

Patient Privacy and Social Networking

HIPAA prohibits sharing of a patient’s medical information in all settings and violation may result in federal penalty, including sharing identifiable patient information during clinical seminar discussions. You may not take pictures of a patient’s condition in the clinical setting. Information about patients should be shared only with your professional colleagues on a need-to-know basis and this should be done in professional/private settings. Do not discuss any patient information in public places such as hallways or break rooms. Sharing patient information in public places (i.e., with friends, on social networking sites, etc.) is a breach of confidentiality and violates patient privacy laws and will not be tolerated. **Students are reminded to use discretion in their social media activity, as they represent the University of California, Irvine, School of Nursing at all times.** Inappropriate, unprofessional, or insensitive posts—whether related to clinical experiences or personal content—can result in students losing clinical placements. It is essential to maintain professionalism both in person and online.

Incidents in Clinical Settings

It is the student’s responsibility to report any problems that are encountered in clinical immediately. The student will be counseled by their assigned CNE and Faculty of Record and corrective action will be taken. Any problems that cannot be immediately resolved by the CNE and/or Faculty of Record will be reported to the FNP Clinical Coordinator overseeing clinical practicums. As stipulated in the DNP program disqualification policy, students may be placed on a professionalism contract or may be dismissed from the program for unprofessional conduct in the clinical practicum rotation, according to the unprofessional conduct policy (see Appendix E). Examples of such conduct may include, but are not limited to unprofessional conduct in the clinic setting including consistent lack of punctuality, frequent unexcused absences, unprofessional attire, dismissal from a clinical site for HIPAA violations, unsafe practices, violation of a clinical contract and disrespectful behavior/encounters with members of the healthcare team etc.

Please note that unprofessional behavior will not be tolerated and disciplinary action will be taken and grounds for dismissal from the program. Please see Appendix E for the unprofessional conduct policy.

Standardized Patient Exams

Clinical competency performance exams: Skills Appraisal Exam (SKA), Objective Structured Clinical Exams (OSCEs), and Clinical Practice Exams (CPX) are used periodically throughout the program to evaluate student’s progress toward achieving clinical competencies. The use of these standardized patient exams follows national best practices as defined by the National Task Force and in alignment with the 2022 Standards for Quality Nurse Practitioner Education are not included in the minimum direct patient care hours.

Scoring of these exams is done by trained standardized patients and faculty observation. In the event a student does not demonstrate baseline competencies at the expected level on the first attempt at a SKA or OSCE, the Faculty of Record will develop a remediation plan with the student for successful achievement of competencies. Remediation plans are to be determined by the Faculty of Record in conjunction with the Director and Clinical

Coordinator overseeing clinical practicums and may include but are not limited to additional clinical hours, repeat assessment, additional in- person site visit, etc.

The Clinical Practice Examination (CPX) is a comprehensive performance (practical) exam administered in Practicum V and is used as one measure of a student's overall competency prior to graduation. It is an exam utilizing standardized patients. Students are required to perform an appropriate history, physical exam, and psychosocial assessment, and create a diagnosis and management plan. In the event the student does not demonstrate baseline competency at the expected level on the CPX (Clinical Practice Exam), the student will be required to remediate as determined by the Faculty of Record in conjunction with the FNP Director and Clinical Coordinator overseeing clinical affairs.

If the SKA, OSCE, or CPX is missed for any reason, the course requirements will be considered unmet. If the absence is excused by the Faculty of Record, a make-up assignment must be arranged, and a passing grade obtained to complete the course and progress in the program.

Practicum Evaluation

Each practicum course must be passed with an 83.5% (Satisfactory) or better. The student's final evaluation is completed by the Faculty of Record utilizing multiple evaluation methods which may include standardized patient exams, preceptor evaluations, faculty site visits observations, and assignments by the Faculty of Record as outlined in the practicum syllabus. Students must complete the clinical hours for each practicum by the date specified in the syllabus to obtain a satisfactory grade in the course.

Remediation and Grounds for Dismissal and Academic Disqualification in Practicums

Students must pass both the preceptor evaluation and standardized patient exam for each clinical practicum with an 83.5% or higher. Failure to pass either the standardized patient exam or the preceptor evaluation will require remediation at faculty discretion, which may include repeating additional clinical hours.

Prior to graduation students are required to take and pass a written comprehensive exam with an adjusted score of 83.5% or higher. Failure to pass will require remediation at faculty discretion, which may include repeating additional course work, clinical hours, practice tests, and the comprehensive exam.

Failure of any clinical practicum course will result in academic conditional status. Failure of a second course in the program is grounds for academic disqualification from the program. Additionally, unprofessional behavior resulting in dismissal from a clinical site is grounds for dismissal from the program.

Faculty Clinical Site Visit

The CNE or designated clinical instructor or faculty within Nursing Science will schedule site visits quarterly, virtually or in-person, to observe and evaluate the physical site, interaction between the preceptor, student and patients, and the student's clinical progress. It is also an opportunity to work with the preceptor toward the development of the student's clinical skills. During the site visit, the Faculty/CNE/Clinical Instructor may observe the student in patient encounters, during presentation of cases to preceptor, and will review charting. A written report will be completed by the faculty and placed in the student's file in Typhon. In the event the faculty evaluation documents the student is below level of expected performance, the faculty will discuss the results with the student, preceptor, Faculty of Record, FNP Clinical Coordinator and the FNP Director and a remediation plan will be developed.

Record Keeping

- A schedule for the clinical rotation for the entire quarter is to be mapped out and submitted to the faculty of record to ensure timely completion of all required clinical hours.
- Typhon NPST system is used to track the Clinical Preceptorship information. Students will be trained in the use of this web-based clinical preceptorship tracking system and will be required to input clinical and patient data daily (see Appendix F). **Students will not be authorized to input data after 7 days.** If not done in this timeframe, the student will **lose** the time and patient encounters for the omitted day(s).
- All clinical hours must be completed by the end of the quarter. Failure to complete clinical hours in a particular population may result in delayed program progression.
 - Direct Patient Care Time as defined by National Task Force on Quality Nurse Practitioner Education (2021) as Hours/time in which direct clinical care is provided to individuals, families, and groups in one (1) of the six (6) population-focused areas of NP practice and in primary care or acute care as appropriate
- Inaccurate and/or falsified data entry on clinical logs or in the Typhon NPST system will be considered academic dishonesty and will be reported to the UCI Office of Academic Integrity & Student Conduct and may result in academic disqualification or academic conditional status.
- Students will evaluate each preceptor and site **once** during the quarter for each clinical rotation; evaluations must be completed by the designated due date.
- All records must be submitted at the end of each quarter. Failure to do so will result in an
- **“Unsatisfactory”** grade for the clinical rotation.

Exposure Guidelines to Bloodborne Pathogens (BBP) and Other Potentially Infectious material (OPIM)

Participation in direct patient care activities can pose a risk to health care professionals, particularly in terms of exposure to infectious and/or communicable diseases. Costs of testing, diagnosis, and treatment of any infection and/or communicable diseases will be the responsibility of the student. As licensed registered nurses, graduate nursing students have current knowledge of universal safety precautions. It is expected that all students strictly adhere to practices and principles of universal precautions and routinely use appropriate barrier precautions and appropriate safety devices when occupational exposure to blood borne pathogens and other potentially infectious material is likely.

Students must maintain adequate health insurance through the academic school year as a prerequisite for clinical placements and as a non-academic condition of enrollment. Whenever in a clinical placement site, students are advised to keep their health insurance cards with them.

Upon receipt of the Nurse Practitioner Track Student Guidelines for Clinical Rotations, students must sign a receipt acknowledging that they have read the guidelines and intend to follow them. The receipt then becomes part of their file.

IF A STUDENT IS INJURED WHILE IN CLINICAL:

- The student should immediately notify the clinical preceptor and their assigned CNE and/or Faculty of Record for the course.
- If necessary, the student will be excused from clinical for the day to seek medical treatment. The student remains responsible to fulfill all required clinical hours during the quarter.
- If required, emergency care may be provided directly at the clinical site, at the student's expense.
- The student is responsible for contacting his/her own health care provider following emergent care to

arrange for post-injury follow-up.

- A needle stick is considered an urgent medical concern (see post-exposure guidelines below).
- All costs that are associated with the immediate and/or follow-up treatment are the responsibility of the student.

POST-EXPOSURE GUIDELINES: BLOODBORNE PATHOGENS

If a student meets another person's blood or body fluid (e.g., through a needle stick injury, contact with skin, or mucous membrane splash), take the following steps:

- Immediately clean wound site with antiseptic soap and flush area with water. Notify your preceptor immediately.
- Any student exposed to blood or body fluid from a patient must be evaluated within **one-hour** post-exposure to obtain the most effective early prophylaxis. Preceptors should consult with the nursing supervisor or medical director immediately for facility's process. Students will be excused from clinical for the day to seek treatment as indicated. Clinical hours missed must be made up later in the quarter.
- After the exposure, the student should document the date and time, patient's name, identification number, and the clinical site in which the exposure occurred. Keep this information in a secure place. This information should be utilized to complete an incident report per facility requirements. In addition, **immediately contact the nursing supervisor or medical director at the clinical site** and provide the supervisor or director with the information pertaining to the blood borne exposure and source patient.
- If there is a UC Irvine faculty member on-site, s/he should be notified about the incident immediately. The nursing supervisor or medical director should request and obtain a source patient blood sample for Hepatitis B screening, Hepatitis C screening, and HIV screening. The nursing supervisor or medical director is authorized to release the results of the blood tests to the student. The student is responsible for contacting the supervisor or director to obtain this information.

****Note that post-exposure guidelines will vary among clinical sites and agencies; additionally, some clinical venues will have limited ability for on-site laboratory testing. Follow the agency guidelines for the site where the exposure occurs.**

- **Should the injury take place at UCIMC or a UCI Healthcare Facility during clinical:** post-exposure care is provided by Occupational Health Services during business hours. The student is to demonstrate insurance coverage and is responsible for any costs that may be incurred for post-exposure treatment. If the incident occurs after hours or on weekends/holidays, the House Supervisor will page the Infectious Disease Fellow on-call to review the details of the incident and estimate the risk of exposure. The Infectious Disease Fellow will discuss the incident, counsel the student, and will call the House Supervisor to order the HIV test on the source patient, if indicated. The University of California, Irvine Healthcare has a Policy and Procedure for **EXPOSURE: BLOODBORNE PATHOGEN PREVENTION AND CONTROL PLAN, (2017).**
- **Should the injury take place at any other facility other than UCI Health during clinical:** For cases of exposure occurring outside of UCI, the student should still follow steps #1-3 above. UCIMC will not be able to obtain the source patient's lab results. The student is responsible for obtaining these as discussed above. Post-exposure guidelines will vary among clinical sites and agencies; additionally, some clinical venues will have limited ability for on-site laboratory testing. Follow the agency guidelines for the site where the exposure occurs.
- Post-exposure prophylaxis shall be provided when medically indicated per CDC general guidelines and as prescribed for the individual student by the Occupational Health advanced practice provider, Infectious Disease advanced practice provider, or Emergency Room advanced practice provider. **For students with private health insurance:** Students may see their personal health care provider for post-exposure evaluation and care. There may be fees for office visits, lab tests,

medications and other procedures which are the responsibility of the student. The students' private insurance carrier may be billed; however, if the student's insurance will not accept the facilities' services, s/he must follow their carrier's accepted protocol, and s/he will be responsible for the cost. Again, it is the student's responsibility to know his/her benefits, exclusions, and limitations. Most insurance plans have provisions which include the need to report the injury to the insurance company within a brief period after the injury.

- The student must follow-up with their healthcare provider through the "window period" as appropriate: 72 hours (about 3 days), 6 weeks (about 1 and a half months), 12 weeks (about 3 months) and 6 months. Refer to CDC guidelines for bloodborne pathogen post-exposure care.
- The student must contact his/her healthcare provider if any of the tests are positive and must provide them with supporting documentation. The students' primary healthcare provider should provide post-test counseling and appropriate intervention.
- **Within 24 hours of the incident**, the student should notify the UC Irvine School of Nursing CNE and the Faculty of Record for the course.

Post-Exposure Guidelines: COVID-19

Please refer to UCI COVID Case Information:

<https://www.hr.uci.edu/reportcovid/>

For additional information please refer to the CDC for exposure guidelines:

<https://www.cdc.gov/covid/index.html>

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APPENDIX A: PEARLS FOR RECRUITING A PRECEPTOR

Welcome DNP-FNP Students to the School of Nursing. We are thrilled you are joining us; here is some information about your clinical experiences that begin in your 2nd year, winter quarter. Your first clinical rotation will begin in January of your second year. The University of California, Irvine takes pride in selecting and overseeing preceptors and managing student preceptorships to ensure high quality clinical experiences; it is a role we take very seriously. We have some clinical placements available to students in the Orange County area and surrounding counties; however, to make certain each student receives ample clinical experiences, **we are asking each student to identify 2 preceptors to augment your clinical learning experiences.** One preceptor will ideally be in a primary care clinical site (family medicine/practice, internal medicine, geriatrics and/or a community clinic), the other should be a preceptor who provides obstetrical (pre-natal) care to women or pediatrics. We have had significant challenges identifying preceptors for our students' OB-pediatrics rotations and as a family nurse practitioner, pre- and post-natal care and pediatrics are an essential experience in your scope of practice. Students may be precepted by MD's, DO's, NP's, and/or CNM's. Examples of clinical settings include community clinics, private practice sites, group practices, and HMOs. Your clinical rotation experience will begin with primary care. Additional rotations, such as primary care pediatrics and women's health and obstetrics, will follow.

The following information will assist you in this effort:

- Suggestions for clinical sites might be your own personal clinician, colleague, or other acquaintances. Most hospital physicians, with whom you may work, have an outpatient practice, and may consider precepting an NP student, or may help you to network with colleagues.
- Preceptors are expected to precept a student for 8-16 hours a week (1-2 days) for 10 weeks (about 2 and a half months) per quarter. Ideally, a student should remain in the same site for two quarters (5-6 months).
- Preceptors are expected to carry malpractice insurance for themselves and their practices. All students have UCI malpractice insurance which provides coverage only in UCI affiliated clinical sites. You will also be required to purchase your own individual professional malpractice coverage.
- UCI requires that we have an affiliation agreement with each clinical practice. The affiliation agreement will be facilitated by Lila Sapolu, Operational Support Analyst, and the process may take up to 6 months to complete-- so please bear this in mind.
- The preceptor experience is NOT simply a "tag-along" observational experience; the usual routine is for the student to observe the preceptor (the first day or so), and then the student is expected to gradually increase autonomy in patient care through the quarter, under direct supervision of the preceptor.
- All medical records will be signed by your preceptor and feedback from the preceptor is expected to make sure the student is progressing.

If you identify a potential preceptor, please complete the [New Preceptor and Clinical Site Form](#) and email the Clinical Coordinator. The SON will contact the potential preceptor directly to discuss details. We appreciate your commitment to a rewarding clinical experience as a nurse practitioner student. If you have any questions, please don't hesitate to contact us.

APPENDIX B: NEW PRECEPTOR AND CLINICAL SITE INFORMATION FORM

New Preceptor and Clinical Site Information Form			
Preceptor Information (Must complete ALL fields)			
Name:		Position/Title: (MD, NP, etc.)	
Phone: (Indicate Work, Cell, Home)		Email:	
Clinical Site Information (Must complete ALL fields)			
Facility Name:			
Address:			
Type of Facility:		Private Practice?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Type of Practice:		Quarter Needed: _____	
Name of Student who identified Preceptor (If Applicable)			
Administrative Person Authorized to Sign: (Volunteer Coordinator and/or Affiliation Agreements)			
Contact:		Position/Title:	
Phone:		Email:	
NOTES (Please provide any additional information regarding the Preceptor/Site. E.G., "Must contact administrator first for placement" OR "Preceptor prefers to be contacted by e-mail/ cellphone")			
OFFICE USE ONLY			
CV Received: VETTED: YES <input type="checkbox"/> NO <input type="checkbox"/>		Comments:	
RN or MD License: VETTED: YES <input type="checkbox"/> NO <input type="checkbox"/>		Comments:	
NP BRN Furnishing & Certification: VETTED: YES <input type="checkbox"/> NO <input type="checkbox"/>		Comments:	
ADMIN RECEIVED DATE / INITIAL _____			

APPENDIX C: PHYSICAL AND MENTAL HEALTH CLEARANCE FORM



Student Health/Physical Clearance

Students must have an **annual** health/physical exam completed by a licensed healthcare provider while participating in clinical practicum courses with the UCI Sue & Bill Gross School of Nursing.

History and Physical Clearance

A report, signed by a licensed healthcare provider (physician - MD or DO, physician's assistant, or nurse practitioner) shall be provided to the nursing program. This report shall indicate that the student does not have any health condition(s) that would create a hazard to themselves, employees, or patients (Title 22).

NOTE: *Nursing students who have a condition (impairment) that could interfere with the performance of their essential duties, should connect with the Disability Services Center to determine what accommodation(s) would be reasonable in a clinical setting.*

Health & Physical Examination Form		
Student Name: _____		
DOB: _____	Current Date: _____	Anticipated Graduation: _____
To be completed by licensed healthcare provider		
I have verified that the individual I have examined is the named individual on this form and find that this individual (please check all that apply):		
____ is free of any medical condition and/or contagious disease and does not pose a health risk to others. is free of any mental or physical impairment that would prevent the student from meeting the clinical practicum training obligation.		
____ The student has the following (impairment) which could interfere with the performance of the essential duties and needs to be followed up with the University Disability Services to determine what accommodations would be reasonable in the clinical setting.		
____ The student has received all required immunizations as outlined by the Centers for Disease Control and Prevention (CDC) guidelines or has provided documentation of immunity. (See Immunization requirements provided for clinical placement)		
I understand that this form is confidential and will be used solely for the purpose of determining the student's eligibility to participate in clinical rotations. I further understand that any information provided on this form will be kept confidential in accordance with applicable laws and regulations.		
Healthcare Provider Printed Name: _____		
Healthcare Provider Signature: _____		
Provider Number: _____		
Date of Exam: _____		

Health/Physical Exam Requirements

Students must have an annual health/physical exam while participating in clinical practicum courses at UCI Sue & Bill Gross School of Nursing. Students not current with this requirement will result in the student unable to start their clinical rotation.

Essential Duties to Meet Clinical Requirements

To enter into and to complete the clinical practicum courses, students must be able to meet the physical and mental health requirements of the UCI Sue & Bill Gross School of Nursing and the agencies in which students are placed for clinical. Students are to notify SON Clinical Support Unit and work with Student Disability Services to determine what accommodations would be reasonable in a clinical setting to meet these requirements.

Mental Health Requirements

The student must have the sufficient mental and emotional stability to perform under stress produced by both academic study and the necessity of performing nursing care in real patient situations while being observed by the instructors and other health care personnel. The student must be able to adapt to changing environments and stress in a clinical setting while focusing on tasks. The student must be able to cope with emotions from self and others.

Physical Requirements

In order to participate in clinical practicum courses with the UCI Sue & Bill Gross School of Nursing, students are required to travel to hospitals, clinics, and community health sites. Students need to have the endurance to adapt to a physically and emotionally demanding program. The following physical requirements are necessary to participate in the clinical practicum courses in nursing:

1. **Strength:** Sufficient strength to lift, move and transfer most patients; to restrain and carry children; to move and carry equipment; and to perform CPR, which requires sufficient body weight and adequate lung expansion.
2. **Mobility:** Sufficient to bend, stoop, get down on the floor; combination of strength, dexterity, mobility, standing/walking for long periods and coordination to assist patients; ability to move around physically and adequately in confined spaces (patient rooms, bathrooms, treatment settings, around patient equipment, etc.). Be able to perform all physical skills required to deliver patient care such as CPR, ambulation, transport, reposition, lifting, and other nursing duties.
3. **Fine Motor Movements:** Necessary to manipulate syringes and IVs; to assist patients with feeding and hygiene; to write appropriate notations; to document in health record; to perform sterile procedures and other skilled procedures.
4. **Speech:** Ability to speak clearly in order to communicate with staff, physicians, and patients; need to be understood on the telephone.
5. **Vision:** Visualize patients in order to assess and observe their health status; skin tone, color changes, dermatological conditions, non-verbal behaviors, changes in signs and symptoms of illness, health improvement or deterioration, etc.
6. **Hearing:** Hear and see patients, monitor signs and symptoms, hear alarms, patient voices, call lights, and assess patient conditions, non-verbal behaviors, changes in signs and symptoms of illness, health improvement or deterioration, hear through the stethoscope to discriminate sounds, and accurately hear on the telephone.
7. **Touch:** Ability to palpate both superficially and deeply and to discriminate tactile sensations

APPENDIX D: DNP FNP CLINICAL HOURS BY ACADEMIC QUARTER

NS 285	DNP APRN Practicum I	0	2	60	Direct Patient Care
NS 286	DNP APRN Practicum II	0	2	60	Direct Patient Care
NS 287	DNP APRN Practicum III	0	6	180	Direct Patient Care
NS 288	DNP APRN Practicum IV	0	5	150	Direct Patient Care
NS 288	DNP APRN Practicum IV	0	2	60	Scholarly Project Hours
NS 289	DNP APRN Practicum V	0	6	180	Direct Patient Care
NS 289	DNP APRN Practicum V	0	2	60	Scholarly Project Hours
NS 290	DNP APRN Practicum VI	0	3	90	Direct Patient Care
NS 290	DNP APRN Practicum VI	0	1	30	Scholarly Project Hours

APPENDIX E: UNPROFESSIONAL CONDUCT POLICY

Unprofessional Conduct Policy

1. The goal of this evaluation process is to provide constructive and actionable feedback to students whenever concerns regarding unprofessional conduct are brought forth.
2. A Professionalism Contract is used to identify unprofessional conduct and outlines the feedback provided by the faculty and appropriate actions to be taken by the student to remediate their behavior.
3. The appropriate program director and faculty of record of the associated course (if applicable), DNP chair/faculty advisor, or designated faculty member will meet with the student to provide support and clearly outline expectations for professionalism.
4. Failure of the student to comply with the actions and plan outlined in the Professionalism Contract may lead to adverse academic actions, including failure of the relevant course and up to dismissal from the program.

Procedure

1. A faculty of record, preceptor, clinical nurse educator (CNE), clinical coordinator, DNP project chair/team member/site mentor, or program director who is concerned about a student's behavior should provide verbal feedback to the student and make suggestions for improvement. An initial email summary will be sent to the student and Student Affairs department for placement in the student's file.
2. If attempts to give the student feedback about concerning behaviors are unsuccessful, the behavior is repeated, or is initially egregious enough (i.e., putting someone's safety at risk, violence, harassment, etc.), the faculty of record, DNP chair/faculty advisor, or designated faculty member and program director will complete a Professionalism Contract and meet with the student to review the form and provide feedback. A review of the behavior and remediation strategies will be discussed. The Professionalism Contract will be placed in the student's file.
3. Students who violate the Professionalism Contract during the program or who have a single confirmed report of a serious violation of professionalism that the faculty of record and program director have determined has jeopardized someone's safety will be at risk for dismissal from the program.
4. Students who are placed on a Professionalism Contract but do not feel that its issuance was merited can ask for clarification or review, as outlined in the grievance policy in the student handbook.

APPENDIX F: NPST STUDENT TRACKING SYSTEM (TYPHON)

NPST Student Tracking System

Case Log Worksheet

= REQUIRED FIELD

Student Information

Case #: _____ Date of Service: _____

Semester: _____

<p>Course: _____</p> <p>Preceptor: _____</p> <p>Clinical Site: _____</p> <p><input type="checkbox"/> Rural Visit</p> <p><input type="checkbox"/> Underserved Area/Population</p> <p>Patient Demographics (ignore if Group Encounter)</p> <p>Age: _____ yrs/mos/wks/days</p> <p><input type="checkbox"/> Pre-Term (Premie) Child?</p> <p>Gestational Age (at birth): _____ weeks</p> <p><input type="checkbox"/> Prenatal visit? Enter fetus age: _____ wks</p> <p>Gender: M / F / T</p> <p>Race: _____</p> <p>Insurance: _____</p> <p>Referral: _____</p> <p>Clinical Information</p> <p>Time with Patient: _____ minutes</p> <p>Consult with Preceptor: _____ minutes (not part of patient time)</p> <p>Type of Decision-Making: _____ Straightforward</p> <p><input type="checkbox"/> Low complexity</p> <p><input type="checkbox"/> Moderate complexity</p> <p><input type="checkbox"/> High complexity</p> <p>Student Participation: _____ Observation only</p> <p><input type="checkbox"/> Less than shared</p> <p><input type="checkbox"/> Shared (50-50)</p> <p><input type="checkbox"/> Primary (>50%)</p> <p>Reason for Visit: _____</p> <p>Chief Complaint: _____</p> <p>Type of H & P: _____ Problem Focused</p> <p><input type="checkbox"/> Expanded Prob. Focused</p> <p><input type="checkbox"/> Detailed</p> <p><input type="checkbox"/> Comprehensive</p> <p>Social Problems Addressed</p> <p><input type="checkbox"/> Abused Child/Adult</p> <p><input type="checkbox"/> Caretaking/Parenting</p> <p><input type="checkbox"/> Education/Language</p> <p><input type="checkbox"/> Emotional</p> <p><input type="checkbox"/> Grief</p> <p><input type="checkbox"/> Growth & Development</p> <p><input type="checkbox"/> Housing/Residence</p> <p><input type="checkbox"/> Income/Economic</p> <p><input type="checkbox"/> Interpersonal Relationships</p> <p><input type="checkbox"/> Issues w/Comm. Resources</p> <p><input type="checkbox"/> Legal</p> <p><input type="checkbox"/> Neglected Child/Adult</p> <p><input type="checkbox"/> Nutrition/Exercise</p> <p><input type="checkbox"/> Palliative/End of Life Care</p> <p><input type="checkbox"/> Prevention</p> <p><input type="checkbox"/> Role Change</p> <p><input type="checkbox"/> Safety</p> <p><input type="checkbox"/> Sanitation/Hygiene</p> <p><input type="checkbox"/> Sexuality</p> <p><input type="checkbox"/> Social Contact/Isolation</p>	<p>Use ICD codes for pregnancy history & complications. Use CPT codes for labs, anesthesia & mode of delivery.</p> <p>Infant Gender: M / F / O</p> <p>Birth Weight: _____ grams</p> <p>Apgar Scores: 1 min: _____ 5 min: _____</p> <p><input type="checkbox"/> Deep suctioning</p> <p><input type="checkbox"/> Endotracheal suctioning</p> <p><input type="checkbox"/> Bag and mask</p> <p><input type="checkbox"/> Intubation for ventilation</p> <p><input type="checkbox"/> Full CPR</p> <p><input type="checkbox"/> Other: _____</p> <p>Newborn Procedures</p> <p><input type="checkbox"/> Meconium aspiration</p> <p><input type="checkbox"/> Congenital anomalies</p> <p><input type="checkbox"/> Birth trauma/injury</p> <p><input type="checkbox"/> NICU Admit: _____</p> <p><input type="checkbox"/> Clinically apparent seizures</p> <p><input type="checkbox"/> Other: _____</p> <p>Newborn Complications</p> <p>Maternal Problems <24 hrs Postpartum</p> <p><input type="checkbox"/> Hemorrhage</p> <p><input type="checkbox"/> Hypertension (onset postpartum)</p> <p><input type="checkbox"/> Temperature >100.4°F</p> <p><input type="checkbox"/> Hematoma</p> <p><input type="checkbox"/> Other: _____</p> <p># OTC Drugs taken regularly: _____</p> <p># Rx currently prescribed: _____</p> <p># New/Refilled Rx This Visit: _____</p> <p>Analgesic & Antipyretic: _____</p> <p>Cardiology: _____</p> <p>Dermatology: _____</p> <p>Endocrinology: _____</p> <p>ENT: _____</p> <p>GI Agents: _____</p> <p>Gynecology: _____</p> <p>Hematology/Oncology: _____</p> <p>Infectious Diseases: _____</p> <p>Neurology: _____</p> <p>Ophthalmology: _____</p> <p>Psychiatric: _____</p> <p>Pulmonary: _____</p> <p>Rheumatology: _____</p> <p>Urology: _____</p> <p>Vaccines: _____</p> <p>Wound Management: _____</p> <p>Miscellaneous: _____</p> <p>Types of New/Refilled Rx This Visit</p> <p><input type="checkbox"/> Caretaker failure</p> <p><input type="checkbox"/> Complexity/demands of treatment</p> <p><input type="checkbox"/> Denial of need</p> <p><input type="checkbox"/> Disappearance of symptoms</p> <p><input type="checkbox"/> Disbelief in benefits/efficacy</p>
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<p> <input type="checkbox"/> Spiritual Issues <input type="checkbox"/> Substance Abuse <input type="checkbox"/> Other: _____ Procedures/Skills - General skills (Observed/Assisted/Done) Obs Asst Done <input type="checkbox"/> Arthrocentesis <input type="checkbox"/> Biopsy punch <input type="checkbox"/> Biopsy shave <input type="checkbox"/> Breast Exam <input type="checkbox"/> Cardiovascular risk assessment/management <input type="checkbox"/> Casting/splinting <input type="checkbox"/> Cerumen disimpaction <input type="checkbox"/> Cryotherapy #1 _____ #5 _____ #2 _____ #6 _____ #3 _____ #7 _____ #4 _____ #8 _____ #1 _____ #7 _____ #2 _____ #8 _____ #3 _____ #9 _____ #4 _____ #10 _____ #5 _____ #11 _____ #6 _____ #12 _____ </p>	<p> <input type="checkbox"/> Fear of addiction <input type="checkbox"/> Financial concerns <input type="checkbox"/> Forgetfulness <input type="checkbox"/> Knowledge deficit <input type="checkbox"/> Physical disability <input type="checkbox"/> Pregnancy <input type="checkbox"/> Psychiatric diagnosis <input type="checkbox"/> Religious reasons <input type="checkbox"/> Other/side effects: _____ Adherence Issues with Medications patient's primary language: _____ </p>
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Additionally, under clinical notes the assessment and plan must be documented.

APPENDIX G: DNP FNP CLINICAL COMPLIANCE CHECKLIST

DNP FNP Student Clinical Compliance Checklist

To ensure DNP FNP students are ready for scholarly and clinical practicum, several mandatory onboarding documents, certifications, and trainings must be completed. The following requirements must be completed and/or submitted by the specified deadline.

Note: As UCI students, there are mandatory health records submissions per Campus and Student Health Center guidelines.

Below is additional documentation per clinical partner requirements. Clinical partners may require site specific health documents, trainings, background check. Site specific information will be provided to students during onboarding process with respective sites.

For questions, please contact the Clinical Support Unit nursingcsu@hs.uci.edu

DEADLINE: September 1st

Note: Malpractice, Influenza & COVID 19 vaccine deadlines are separate

Clinical Onboarding Canvas

	Item	Year 1	Year 2	Year 3	Instructions
<input type="checkbox"/>	DNP Canvas Course	One Time			DNP Onboarding Canvas Course Verify your access to the Canvas page containing clinical onboarding resources and information.

Compliance Account

	Item	Year 1	Year 2	Year 3	Instructions
<input type="checkbox"/>	Typhon Contact information Typhon Group: Log In	Annual (as needed)	Annual (as needed)	Annual (as needed)	Update & Maintain information in Typhon. <ul style="list-style-type: none"> Phone number Address Date of Birth Additional Email – please provide an alternative non-UCI email Emergency Phone number License information RN experience and specialty information Languages

Programmatic Forms

	Item	Year 1	Year 2	Year 3	Instructions
<input type="checkbox"/>	UCI Health Confidentiality Agreement	One Time			Sign form in Canvas via DocuSign. Download signed form and upload to Typhon. DNP Onboarding Canvas Course
<input type="checkbox"/>	UCI Authorization and Consent to Photograph and Publish	One Time			Sign form in Canvas via DocuSign. Download signed form and upload to Typhon. DNP Onboarding Canvas Course
<input type="checkbox"/>	UCI Authorization for Release of Information	One Time			Sign form in Canvas via DocuSign. Download signed form and upload to Typhon. DNP Onboarding Canvas Course

Health and Immunizations

All records and results must be uploaded to Typhon.					
	Item	Year 1	Year 2	Year 3	Instructions
<input type="checkbox"/>	Physical and Mental Health Clearance Form	Annual	Annual	Annual	Physical and Mental Health Clearance Form must be completed, signed, and dated by a clinical provider (MD, DO, NP, PA) clearing you to work with patients.
<input type="checkbox"/>	Tuberculosis (TB) – Quantiferon Gold / T-Spot (IGRA Blood) Test	Annual	Annual	Annual	Must provide proof of negative Tuberculosis (TB) Quantiferon Gold OR T-Spot (IGRA Blood) Test result. Skin tests and chest X-rays are no longer acceptable. A proof of renewal <u>is required</u> on anniversary of last submission or can be required within clinical site's onboarding timeline.
<input type="checkbox"/>	Influenza Vaccine (Flu Shot)	Annual	Annual	Annual	Annual Flu Vaccine are released in early fall. Vaccination required by October 1st of each year.
<input type="checkbox"/>	COVID-19 Vaccine or Booster	One Time	* Clinical practicum-As needed, sites may require closer to start of rotation. CSU will contact upon placement match	* Clinical practicum-As needed, sites may require closer to start of rotation. CSU will contact upon placement match	COVID-19 vaccine OR recent booster. Vaccination required by October 1st of Year 1
<input type="checkbox"/>	Tetanus-Diphtheria-Pertussis (Tdap (Td/Tdap)	One Time			A record of original vaccine or booster <u>within the last 10 years.</u>
<input type="checkbox"/>	Hepatitis B	One Time	* Clinical practicum-As needed, sites may require closer to start of rotation. CSU will contact upon placement match	* Clinical practicum-As needed, sites may require closer to start of rotation. CSU will contact upon placement match	<p>Proof of positive Hepatitis B Antibody immunity (titer) response</p> <p>If results do not demonstrate immunity through initial titer result, then complete immunization series, AND follow-up Hepatitis B Antibody titer lab test showing positive immunity.</p> <p><i>*If you started the immunization series, upload all records (original titer, and vaccines series, and follow-up titer) to Typhon. Students are responsible for uploading results until the series and follow-up titer are complete.</i></p> <p><i>This is a one-time requirement only for UCI and UCI Health, however, community partners may require more recent and frequent evidence.</i></p> <p><i>Clinical sites may require repeat titer just prior to the start of clinic. Clinical sites may also require BOTH proof of vaccination (2 dose HEPLISAV-B or 3 dose series</i></p>

					<i>completion dates) and positive Hep B titer (with quantitative value)</i>
<input type="checkbox"/>	Measles, Mumps, and Rubella (MMR)	One Time			<p>Proof of positive Measles, Mumps, and Rubella immunity (titer) response</p> <p>If results do not demonstrate immunity through initial titer result, then complete booster(s), AND follow-up MMR titer lab test showing positive immunity.</p> <p><i>*If you started booster, upload all records (original titer, booster, and follow-up titer) into Typhon. Students are responsible for uploading results until the series and follow-up titer are complete.</i></p>
<input type="checkbox"/>	Varicella	One Time			<p>Proof of positive Varicella titer response</p> <p>If results do not demonstrate immunity through titer result, then complete booster(s), AND follow-up Varicella titer lab test showing positive immunity.</p> <p><i>*If you started the 3-step immunization series, upload all records (original titer, and vaccines) into Typhon. Students are responsible for uploading results until the series and follow-up titer are complete.</i></p>

Clearances

All records must be uploaded to Typhon.					
	Item	Year 1	Year 2	Year 3	Instructions
<input type="checkbox"/>	Background Check and Drug Screen	One Time	* Clinical practicum- As needed, sites may require closer to start of rotation. CSU will contact upon placement match	* Clinical practicum- As needed, sites may require closer to start of rotation. CSU will contact upon placement match	<p>Order a background check and a 10- panel drug screen via http://ucibackground.com/.</p> <p>Upload background check and drug screen result as proof of completion.</p> <p><i>Clinical sites may require site specific background check closer to start of clinical rotation. Students will be notified of the requirement per onboarding process.</i></p>

Certification and Trainings

All records must be uploaded to Typhon.					
	Item	Year 1	Year 2	Year 3	Instructions
<input type="checkbox"/>	CPR/BLS Certification	Every 2 years	Update as needed	Update as needed	Proof of the American Heart Association Basic Life Support (BLS/CPR) certification card. Certifications are typically valid for up to 2 years.

					Renew certification if expiring at any point in the program.
<input type="checkbox"/>	Malpractice Insurance		Update as needed	Update as needed	Proof of malpractice insurance via NSO www.nso.com Due January of your 2nd year to start your clinical rotations
<input type="checkbox"/>	California RN License	Update as needed	Update as needed	Update as needed	Upload active, unrestricted CA RN License information. Update any expired or expiring license
<input type="checkbox"/>	UC Sexual Violence and Harassment, Anti-Discrimination, Prevention and Education (SHAPE) Training	Update as needed	Update as needed	Update as needed	Complete via UCLC https://uclc.uci.edu/ Upload Certificate of Completion in Typhon
<input type="checkbox"/>	UCLC HIPAA Training	One Time			Complete via UCLC https://uclc.uci.edu/ Upload Certificate of Completion in Typhon
<input type="checkbox"/>	UCLC EPIC Trainings	One Time			Complete via UCLC https://uclc.uci.edu/ Sign EPIC Attestation via DocuSign Upload BOTH copy of signed EPIC Attestation and Certificate of Completion

Other Documents

All records and results must be uploaded into Typhon.					
	Item	Year 1	Year 2	Year 3	Instructions
<input type="checkbox"/>	Drivers License	Update as needed	Update as needed	Update as needed	Upload current drivers license to Typhon
<input type="checkbox"/>	Curriculum Vitae (CV)	Update as needed	Update as needed	Update as needed	Upload or update CV in Typhon Students must maintain and keep CV current

Uniforms

	Item	Year 1	Year 2	Year 3	Instructions
<input type="checkbox"/>	Uniform	Order as needed	Order as needed	Order as needed	Order white coat via Meridys https://www.meridys.com/students/ Login: UCIDNP Please review <i>Uniform policy</i> via current Handbook

APPENDIX H: FNP CLINICAL HANDBOOK ACKNOWLEDGMENT AND CONSENT

This document is sent via DocuSign from Clinical Support Unit

UCI Sue & Bill Gross School of Nursing

FNP STUDENT CLINICAL HANDBOOK ACKNOWLEDGMENT AND CONSENT

I, _____ have received my copy of the 2025-2026

(Print Student Name)

FNP Student Clinical Handbook

It is my responsibility to read and understand the policies and procedures set forth in this manual. It is a guide to policies and procedures for the School of Nursing.

I understand and acknowledge that the School of Nursing has the right, without prior notice, to modify, amend or terminate policies, practices, forms, and other institutional programs within the limits and requirements imposed by the university and the law.

Note that your signature on this "FNP Student Clinical Handbook Acknowledgment and Consent" form shall constitute your express written consent to abide by all the clinical requirements which include completing a background check and your agreement to undergo the Physical/Mental Health Clearance described in this handbook and the release of those results to the School of Nursing, for its use as described in this handbook.

Any questions you may have regarding this should be brought forward and answered before you sign this document. Do not sign this document until you have had all your questions answered to your satisfaction and fully understand your obligations.

[Student Signature and Date]

Should you have any technical issues or problems signing or completing this form, please email the Clinical Support Unit (NursingCSU@hs.uci.edu) as soon as possible for assistance.