Dear Clinical Preceptors and Clinical Coordinators:

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

The University of North Dakota Nurse Anesthesia Track Clinical Preceptor Guide contains documents to support the clinical affiliation between our program and your organization. This guide is intended to be used with all students who are currently enrolled in the program. Please use this guide in conjunction with the UND Nurse Anesthesia Track Student & Faculty Handbook, which provides additional program related information, policies, and procedures.

Please review the information enclosed. This guide will be reviewed and updated on a regular basis, so please feel free to make comments for future improvement. Should you have any suggestions that will make the clinical experience more valuable for students, please contact any Nurse Anesthesia faculty member.

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

Sincerely,

Kevin C. Buettner, CRNA, PhD
Program Administrator
## University of North Dakota College of Nursing and Professional Disciplines
### Nurse Anesthesia Track Faculty

<table>
<thead>
<tr>
<th>Photo</th>
<th>Name</th>
<th>Title</th>
<th>Ph.D.</th>
<th>Contact Information</th>
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<tbody>
<tr>
<td><img src="image" alt="Kevin Buettner" /></td>
<td>Kevin Buettner, CRNA, PhD</td>
<td>Program Administrator</td>
<td>701-777-4509</td>
<td><a href="mailto:kevin.buettner@und.edu">kevin.buettner@und.edu</a></td>
</tr>
<tr>
<td><img src="image" alt="Amber Johnson" /></td>
<td>Amber Johnson, CRNA, MS</td>
<td>Assistant Program Administrator</td>
<td>701-777-4742</td>
<td><a href="mailto:amber.johnson.5@und.edu">amber.johnson.5@und.edu</a></td>
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<tr>
<td><img src="image" alt="Jamie Sperle" /></td>
<td>Jamie Sperle, CRNA, DNP</td>
<td>Clinical Assistant Professor</td>
<td>701-777-4521</td>
<td><a href="mailto:james.sperle@und.edu">james.sperle@und.edu</a></td>
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<tr>
<td><img src="image" alt="Darla Adams" /></td>
<td>Darla Adams, CRNA, PhD</td>
<td>Associate Dean</td>
<td>701-777-4544</td>
<td><a href="mailto:darla.adams@und.edu">darla.adams@und.edu</a></td>
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<tr>
<td><img src="image" alt="Laurie Nelson" /></td>
<td>Laurie Nelson</td>
<td>Administrative Assistant</td>
<td>701-777-4557</td>
<td><a href="mailto:laurie.nelson@und.edu">laurie.nelson@und.edu</a></td>
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<tr>
<td><img src="image" alt="Kevin Kern" /></td>
<td>Kevin Kern, PharmD</td>
<td>Instructor</td>
<td>701-780-5150</td>
<td><a href="mailto:kevin.kern@und.edu">kevin.kern@und.edu</a>; <a href="mailto:kkern@altru.org">kkern@altru.org</a></td>
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<tr>
<td><img src="image" alt="Joanna Sikkema" /></td>
<td>Joanna Sikkema, PhD</td>
<td>Clinical Assistant Professor</td>
<td></td>
<td><a href="mailto:joanna.sikkema@und.edu">joanna.sikkema@und.edu</a></td>
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</table>
University of North Dakota Nurse Anesthesia Track

Accreditation

The University of North Dakota Nurse Anesthesia Track is fully accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) until 2021, which is recognized by the US Department of Education and the Council for Higher Education Accreditation (CHEA). The address is Council on Accreditation of Nurse Anesthesia Educational Programs, 222 South Prospect Avenue, Park Ridge IL 60068-4001. Telephone (847) 655-1160. Fax (847) 692-7137. Email: Accreditation@coa.us.com. COA Website: http://home.coa.us.com. The Master of Science (M.S.) Program in Nursing is accredited by the Commission on Collegiate Nursing Education (CCNE) until 2020 and approved by the North Dakota Board of Nursing through 2021.

History

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

Mission Statement

The mission of the University of North Dakota Nurse Anesthesia Program is to provide an exceptional educational experience to carefully selected Registered Nurses as they prepare to function as Certified Registered Nurse Anesthetists. This education prepares the student to not only be a safe and competent healthcare provider, but also advocates professional involvement, leadership, and a commitment to life-long learning.

Vision Statement

To be the premier nurse anesthesia educational program in our region and beyond.

Philosophy

The faculty and students of the Nurse Anesthesia Track believe that:

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

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

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

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

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

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

**Organizational/Communication Chart**

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Graduate Department Chair

Nurse Anesthesia Track
Program Administrator

Program Review & Evaluation Committee
Assistant Program Administrator
and Program Faculty

Advisory Council

Clinical Coordinators

Students
```
Program Terminal Behavioral Objectives/Outcome Criteria

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

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

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

1. Perform a pre-anesthetic interview and physical assessment using patient history, physical examination, review of medical records, and appropriate laboratory data.
2. Develop an appropriate anesthesia care plan consistent with the overall medical and nursing regimen and established guidelines, utilizing appropriate principles of basic and behavioral sciences in protecting patients from iatrogenic complications.
3. Administer physiologically sound anesthetics to patients of all ages and physical status categories, utilizing universal precautions and the principles of general and regional anesthesia as they apply to the diagnostic, operative and physiologic condition of the patient.
4. Perform comprehensive and appropriate equipment checks and position or supervise positioning of patients to assure optimal physiologic function and patient safety.
5. Recognize and evaluate physiologic responses to the anesthetic, implementing appropriate action that reflects the use of sound physiologic and pharmacologic principles, referring to a physician those responses beyond the nurse anesthetist's ability to manage consistent with practice standards and policies.
6. Use and interpret a broad variety of monitoring modalities including electronic monitors, taking appropriate action based on sound principle of anesthesia management.
7. Evaluate the post-anesthetic course of the patient and recommend a course of action directed toward correcting any anesthesia-related complications.
8. Serve as a resource person, team leader or team member, in the areas of acute care, cardiopulmonary resuscitation, respiratory therapy and fluid management and assist others to expand their knowledge in these areas.
  9. Perform within appropriate medical, legal, and ethical standards of anesthesia practice, accepting responsibility and accountability for own practice, recognizing personal and professional strengths and limitations, and taking appropriate actions consistent with valid self-awareness.

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

Student clinical objectives for each year and semester are located in the UND Nurse Anesthesia Track Student and Faculty Handbook.
Nurse Anesthesia Track Curriculum Outline

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

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

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

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

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

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

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

**Total Credits: 76**

*Offered in online format with one week of campus learning
**Thesis option is available
Clinical Evaluation Procedure

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

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

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

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

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

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

Professionalism and Integrity

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

Professional Decorum

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

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

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

The University of North Dakota holds in high regard professional behaviors and attitudes, including altruism, integrity, respect for others and a commitment to excellence. Effective learning is best fostered in an environment of mutual respect between teachers and learners. In the context of medical education the term “teacher” is used broadly to include peers, resident physicians, full-time and volunteer faculty members, clinical preceptors, nurses and ancillary support staff, as well as others from whom students learn.

GUIDING PRINCIPLES:

Duty: Medical educators have a duty not only to convey the knowledge and skills required for delivering the profession’s standard of care but also to instill the values and attitudes required for preserving the medical profession’s social contract with its patients.

Integrity: Learning environments that are conducive to conveying professional values must be based on integrity. Students and residents learn professionalism by observing and emulating role models who epitomize authentic professional values and attitudes.

Respect: Respect for every individual is fundamental to the ethic of medicine. Mutual respect is essential for nurturing that ethic. Teachers have a special obligation to ensure that students and residents are always treated respectfully.

RESPONSIBILITIES OF TEACHERS AND LEARNERS:

Teachers should:

- Treat students fairly and respectfully
- Maintain high professional standards in all interactions
- Be prepared and on time
- Provide relevant and timely information
- Provide explicit learning and behavioral expectations early in a course
- Provide timely, focused, accurate and constructive feedback on a regular basis and thoughtful and timely evaluations at the end of a course
- Display honesty, integrity and compassion
- Practice insightful (Socratic) questioning, which stimulates learning and self-discovery and avoid overly aggressive questioning which may be perceived as hurtful, humiliating, degrading or punitive
- Solicit feedback from students regarding their perception of their educational experiences
- Encourage students who experience mistreatment or who witness unprofessional behavior to report the facts immediately
Students should:

- Be courteous of teachers and fellow students
- Be prepared and on time
- Be active, enthusiastic, curious learners
- Demonstrate professional behavior in all settings
- Recognize that not all learning stems from formal and structured activities
- Recognize their responsibility to establish learning objectives and to participate as an active learner
- Demonstrate a commitment to life-long learning, a practice that is essential to the profession of medicine
- Recognize personal limitations and seek help as needed
- Display honesty, integrity and compassion
- Recognize the privileges and responsibilities coming from the opportunity to work with patients in clinical settings
- Recognize the duty to place patient welfare above their own
- Recognize and respect patients’ rights to privacy
- Solicit feedback on their performance and recognize that criticism is not synonymous with “abuse”

Relationships between Teachers and Students

Students and teachers should recognize the special nature of the teacher-learner relationship, which is in part defined by professional role modeling, mentorship, and supervision. Because of the special nature of this relationship, students and teachers should strive to develop their relationship to one characterized by mutual trust, acceptance and confidence. They should both recognize the potential for conflict of interest and respect appropriate boundaries.

University of North Dakota Nurse Anesthesia Track
Position Description

Position Title: Clinical Coordinator

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

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

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

Position Responsibilities:

A CRNA clinical coordinator is assigned at each clinical affiliation to serve as the primary student contact person and student resource. They have several duties, which include but are not limited to:
1. Serve as a liaison between the affiliate site and the UND Nurse Anesthesia Track.
2. Convey suggestions from their clinical site for program improvement or enrichment.
3. Sit on the Nurse Anesthesia Admissions Sub-Committee.
4. Provide on-going communication, guidelines and feedback to students assigned to clinical site.
5. Sit on the Nurse Anesthesia Track Advisory Committee.
6. Provide case assignments to students.
8. Inform program faculty of any student performance that is below average, unsatisfactory, or unprofessional.
9. Function as second-line problem resolution if dispute arises between student and clinical faculty.
Position Title: Clinical Preceptor

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

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

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

Student Daily Care Plan
Student Weekly Clinical Evaluation
Clinical Evaluation of Student Performance
Clinical Instructor Self Evaluation
Clinical Release Time
<table>
<thead>
<tr>
<th>Date:</th>
<th>Pre-operative Diagnosis:</th>
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<th>Gender:</th>
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| Proposed Surgery: |  sodomite | Female | | | |
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<th>Airway Class:</th>
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### Review of Systems:

- **RESP:**
  - HGB_____
  - HCT_____
  - PLTS_____  

- **CV:**
  - Electrolytes: BUN_____ Cl______ CO2_____
  - Na ____
  - Gluc____
  - K ____
  - Creat____

- **NEURO:**
  - Coag: PT_____
  - PTT_____ INR_____  

- **HEP/ GI:**
  - Other:
  - Blood Type:______ Type and Cross____

- **ENDOCRINE:**
  - Other:

- **RENAL:**
  - Other:

- **OTHER:**
  - EKG:
  - CXR:

### Laboratory and Diagnostic Studies:

- Medications:
  - Previous Anesthesia History:

### ANESTHESIA IMPLICATIONS

- Pathophysiology:

- Surgical Procedure:
## Surgical Implications:

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## Other Concerns:

## PHARMACOLOGIC PLAN

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<td>Maintenance:</td>
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### FLUID MANAGEMENT

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<td>3rd</td>
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### CASE MANAGEMENT

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### CHALLENGES ENCOUNTERED

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| 2.      |                      |         |

Post-op Problems / Concerns

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

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<tr>
<th>Performance Skills</th>
<th>Unmet</th>
<th>Needs Improvement</th>
<th>Met</th>
<th>Excellent</th>
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<tr>
<td><strong>PREPARATION</strong></td>
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<tr>
<td>1. Familiar with patient history - appropriate anesthesia care plan</td>
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<td>2. Comprehensive anesthesia equipment check &amp; appropriate reporting of problems or malfunctions</td>
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<td>3. Knowledgeable about surgical procedure and anesthesia implications - airway implications - positioning</td>
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<td>4. Secondary drug plan developed (Rx, low BP, HTN, arrhythmia, etc.)</td>
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<td><strong>INDUCTION</strong></td>
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<td>5. Starting IVs, A-lines, etc.</td>
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<td>14. Good judgment discontinuing anesthetic, extubating, etc.</td>
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<tr>
<td><strong>COMMUNICATION &amp; PROFESSIONALISM</strong></td>
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*If a rating of “Unmet” or “Needs Improvement” is given, an accompanying statement must be included in the narrative and a plan for resolution incorporated into the goals for the next rating period.*
IN TERMS OF THE STUDENTS BASIC SKILLS, PLEASE COMMENT ON ANY OF THE FOLLOWING.

1. Readiness/Preparation for Clinical

2. Induction

3. Maintenance

4. Emergence

5. Communication & professionalism

6. Additional Comments/recommendations

7. Goal Setting

Overall Evaluation of Student's Clinical Performance at this time is:

☐ Satisfactory  ☐ Unsatisfactory (include comments and improvement plan)

HAS STUDENT PARTICIPATED IN THE FOLLOWING?

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

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

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

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

   Number of Days Absent ____________  Date of Evaluation Conference ____________

SIGNATURES:

Clinical Coordinator __________________________________________________________

Student ________________________________________________________________

Additional Signatures _______________________________________________________
UND Nurse Anesthesia Specialization
Clinical Instructor Self-Evaluation

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

Clinical Instructor_____________________________________________________

Date: ______________________________________________________________

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

CLINICAL RELEASE TIME REQUEST

DATE: ________________________________
STUDENT NAME: ________________________________
CLINICAL SITE: ________________________________
REQUEST # __________

CLINICAL RELEASE TIME REQUESTED/REPORTED:

DATE(S): ________________________________
TIME/HOURS: ________________________________

PURPOSE FOR REQUESTING/REPORTING CLINICAL RELEASE TIME:
__________________________________________

PROGRAM FACULTY COMMENTS:
__________________________________________

☐ APPROVED ☐ NOT APPROVED

__________________________________________
STUDENT SIGNATURE ____________________________ DATE

__________________________________________
CLINICAL COORDINATOR SIGNATURE ____________________________ DATE

__________________________________________
PROGRAM FACULTY SIGNATURE ____________________________ DATE