

**STEPHEN F. AUSTIN STATE UNIVERSITY  
DEWITT SCHOOL OF NURSING**



**FAMILY NURSE PRACTITIONER PROGRAM  
PRECEPTOR HANDBOOK  
Last update 1/2021**

## **TABLE OF CONTENTS**

Content	Page Number
Letter to Preceptor	3
Introduction, definitions and responsibilities	5
Responsibilities within clinical experiences	6
Appendix A	12
Brief Preceptor Curriculum Vitae	13
Preceptor Agreement	14
Appendix B	17
Student Clinical Information Form	18
Appendix C	19
Preceptor Documentation	20
List of Procedures & Procedure Documentation	21
Appendix D	25
Advanced Health Assessment and Diagnostic and Procedures Evaluation Forms	26
Primary Care Clinical I Evaluation Forms	28
Primary Care Clinical II Evaluation Forms	31
Capstone Evaluation Forms	34
Appendix E	37
Student/Faculty Evaluation of Clinical Preceptor	38
Student /Faculty Evaluation of Clinical Site	39
Appendix F	40
Contact Number for Program	41

**Stephen F. Austin State University**  
**DeWitt School of Nursing**  
**MSN/FNP Program**

Dear Preceptor:

Thank you for serving as a preceptor for a student in the Masters of Science in Nursing, Family Nurse Practitioner (MSN/FNP) Program from the Stephen F. Austin State University (SFASU) DeWitt School of Nursing. The clinical experiences the student will obtain in your clinical area are of critical importance to the successful learning experience in the program. The clinical setting is where synthesis of concepts and application of principles for quality health care delivery are achieved.

The MSN/FNP Program student will work closely with you, learning from your advice and example. You are the key to successful learning experiences in the clinical setting. The student will progressively develop the skills and clinical judgment necessary to become a Family Nurse Practitioner through, in part, clinical practice with preceptors.

The student's clinical faculty advisor is ultimately responsible for clinical supervision of the individual students. During all clinical courses, clinical faculty will make site visits to the office or clinic to discuss the student's progress and observe the student seeing patients. The preceptor and faculty advisor collaborate in providing clinical instruction and evaluation. Faculty supervision may include site visits, preceptor consultation, and/or one to one clinical experience with faculty.

The enclosed Preceptor Packet provides a brief description of the MSN/FNP Program at SFASU. It outlines the responsibilities of the student, the preceptor, and the School of Nursing. Students are engaged in didactic coursework, along with clinical experiences. The student with whom you work will provide you with a syllabus of the course including the topics that will be emphasized during this and previous semesters to assist you in determining which types of patients are most appropriate for management by the student at various stages in the program. Brief syllabi of the clinical courses are included in this document as well as the Student Clinical Evaluation forms to be completed by you are provided.

The Preceptor Guide is regularly modified to assure consistency with professional standards and the Texas Board of Nursing regulations. Students and clinical faculty are asked to read this document as well prior to each clinical experience.

The selection of clinical site and preceptor qualifications are key to designing an excellent clinical experience that will allow students to meet their course learning objectives. It is the graduate student's responsibility to consult with their clinical faculty as they negotiate and finalize the agreement. Students should schedule their clinical days with preceptors, evenly throughout the semester thereby avoiding large blocks of clinical experiences in the beginning or the end of the semester. When clinical days are schedule throughout the semester, the student will have an opportunity to apply the content learned in the didactic course concurrently in the clinical laboratory setting. If students require an exception to this rule, the student must discuss alternative arrangements with their clinical faculty.

If you agree to be a preceptor, you will need to complete the following forms (see Appendix A) before the clinical practicum begins:

- The Preceptor Agreement, a formal contract, which established the legal parameters between you and the SFASU DeWitt School of Nursing.
- The Preceptor's resume or curriculum vitae indicating professional preparation and licensure is required by the Texas Board of Nursing and the Accreditation Commission for Education in Nursing for all preceptors. You are asked to submit a current resume/CV. This information must be updated annually.

We appreciate your contribution to our program and your critical role in the clinical education of our students.

Thank you,

*The Administration & Graduate Nursing Faculty  
Stephen F. Austin State University  
DeWitt School of Nursing*

## **Introduction, Definitions, and Responsibilities**

Stephen F. Austin State University (SFASU) has a Master of Science in Nursing (MSN) degree, with a Family Nurse Practitioner emphasis, for registered nurses who have a Bachelor of Science in Nursing (BSN) degree. This program provides the students with additional skills in advanced physical assessment, psychosocial assessment, health promotion, and diagnosis and management of acute and chronic health problems. Online didactic studies are combined with precepted clinical experiences.

The Graduate Program meets criteria specified in Chapter 219 RULE 219.9 of the Texas Administrative Code of Regulations and is approved by the Texas Board of Nursing. The practice of the expanded nursing role is within the stipulations of the Nurse Practice Act for presenting oneself as an Advanced Practice Nurse.

### **Definition: Advanced Practice Nurse and Preceptor**

The Advanced Practice Nurse (APN) is a registered nurse who, through additional study and experience, is able to provide direct care (consistent with the focus of their course of study) to patients. Care may be rendered in the primary, secondary, or tertiary setting as consistent with the program of study.

As part of preparation for advanced practice nursing as a Family Nurse Practitioner (FNP), skills in advanced physical assessment, psychosocial assessment, and management of health and illness needs in acute and chronic health problems are mastered. The role of the FNP integrates health maintenance, disease prevention, physical assessment, diagnosis, and treatment of common episodic and chronic problems with equal emphasis on health teaching and disease management for patients across the lifespan. The FNP practices with a high level of independence and decision-making in ambulatory, acute and chronic settings, functioning as a member of a health care team in collaboration with physicians and other professionals.

The FNP practices in collaboration with physicians in organized health care systems or in medical office settings. Identification and treatment of urgent and complex problems and recognition of the need for medical referral or consultation are important components of the FNP role.

The FNP program emphasizes advanced clinical practice with a sound theoretical and scientific basis. The foundation of appropriate theory is provided and is specific to the focus of study. An understanding of the economic factors affecting health care delivery and the ethical basis of health services provides important perspectives for FNPs. The ability to evaluate, and selectively apply clinical research that enables the FNP to maintain currency in scientific advances that improve patient care is integral to FNP education.

A clinical preceptor is an experienced Nurse Practitioner, Physician's Assistant, or a physician (including Medical Doctor or Doctor of Osteopathy) with both clinical practice skills and teaching skills. The preceptor characterizes the role for which students are preparing and/or

possesses the specialty skills and knowledge in health care delivery required to supervise students and to act as a role model.

### **Clinical Outcomes:**

In order to pass a course containing both didactic and clinical requirements, the student must pass both the theoretical and clinical components of the course. Students deemed unsafe or incompetent will fail the course and receive a course grade of 'F'. The behaviors constituting clinical failure include, but are not limited to, the following:

- Demonstrates unsafe performance and makes questionable decisions;
- Lacks insight and understanding of own behaviors and behaviors of others;
- Needs continuous, detailed supervision;
- Has difficulty in adapting to new ideas and roles;
- Fails to submit required written clinical assignments on the assigned date/time;
- Falsifies clinical hours.

At the end of the program, through didactic and clinical practice students are expected to meet the following program outcomes.

### **End of Program Student Learning Outcomes**

1. Synthesize nursing science with knowledge from other disciplines as the basis for the advanced level of nursing practice.
2. Evaluate effective strategies for managing the ethical and legal dilemmas inherent in patient care, the health care organization, and research.
3. Employ effective communication and collaborative skills in interdisciplinary teams for creating change in health care.
4. Analyze concepts of health promotion and culturally competent care across the lifespan.
5. Assume responsibility for the use of health care information systems and patient care technology to improve patient outcomes.
6. Demonstrate leadership and accountability in the development and implementation of health care policy.
7. Critically appraise existing literature from nursing and other disciplines to determine and implement the best evidence for practice.
8. Advocate for the advanced practice role within the policy related to access and health care communities.
9. Value continuing competence, growth, and development in the profession.

## **RESPONSIBILITIES WITHIN CLINICAL EXPERIENCES**

### **I. Responsibility of the School of Nursing**

- The School will initiate an education affiliation agreement between the preceptor organization and the School of Nursing (SON). The agreement will be signed by the preceptor's organization, the clinical facility, and the appropriate representative for the Family Nurse Practitioner program.
- The SON will provide the course work that establishes the foundation for clinical practice.

- The SON will provide faculty site visits to preceptorship sites to evaluate the student and to assist the student and preceptor, as needed, in accomplishing clinical learning objectives.
- The SON will provide the materials required for evaluation of the student's performance in the preceptor's clinical setting.

## II. Responsibility of the Faculty

### Course Coordinator:

- Responsible for identifying and evaluating clinical site contracts for all clinical sites.
- Responsible for assuring all documents are completed related to the preceptorship, including the Preceptor resume/CV, Facility Affiliation Agreement, and Preceptor Agreement (see Appendix A).

### Clinical Faculty:

- Responsible for arranging meetings with the preceptor, student, and faculty a minimum of twice during the semester for evaluation purposes. These evaluations should be completed face to face and will be arranged ahead of time at the convenience of all. Ideally both visits will be face to face, however in some circumstances, one visit will be face to face and another visit can be completed in alternate ways.
- Responsible for providing immediate consultation and/or support for the preceptor when needs or problems are reported.
- Responsible for seeking preceptor input regarding the student's performance.
- Responsible for collaborating with the student in completing the Student's Evaluation of preceptor form at the end of the semester (see Appendix E).
- Using clinical objectives for the specific semester, Clinical Faculty will document the student's progress and specify satisfactory/unsatisfactory completion of clinical competencies.

## III. Responsibility of the Preceptor

### Clinical Preceptor:

- The Preceptor will provide a setting in which the student will see patients and gain experience in clinical practice.
- The Preceptor will function as a role model to provide clinical teaching and supervision for the student in the practice of work up and management specific to patient care needs.
- The Preceptor will co-sign all records and orders written by the Family Nurse Practitioner student unless otherwise restricted and **maintain ultimate responsibility for the care of the patient.**
- The Preceptor will sign the student's clinical hours log each day the student is present in his/her clinical site and initial procedure log if any were completed that day (see Appendix C).
- The Preceptor will make contact during the semester with the student and faculty to discuss the student's progress and learning needs.
- The Preceptor will provide input regarding clinical evaluation of the student and will complete the clinical evaluation form at midterm and at the end of the semester for the student(s) he/she is precepting (see Appendix D).

- The Preceptor is expected to notify faculty immediately when unsatisfactory performance of the student is in question.

#### **IV. Responsibility of the Student**

- The Student is responsible for providing the preceptor with a current copy of the course syllabi as well as the preceptor evaluation of the student form that is used at mid-term and at the end of the clinical experiences.
- The Student is responsible for the collection of legal and contractual documents (Student Request for Clinical Agreement, Preceptor resume/CV, Preceptor Agreement) prior to the beginning of the clinical experience (see Appendix A).
- The Student will establish a mutually agreeable schedule for clinical time with the preceptor. He/she will come to the clinical experience prepared to perform the assigned learning activities.
- The Student will demonstrate ability to manage progressively complex patient care situations (including differential diagnosis, treatment plans, and patient teaching) in accordance with his/her academic progression.
- The Student will follow the policies and procedures established by SFASU and the SFASU DeWitt School of Nursing.
- The Student will follow the policies and procedures established in the clinical site.
- The Student functions under the Nurse Practice Act statutes and regulations for expanded nursing roles. Students of the SFASU DeWitt School of Nursing are covered by a blanket liability insurance policy.
- The Student participates in conferences with the preceptor and faculty to discuss progress, problems, and learning needs.
- The Student will maintain accurate records of clinical time and experiences in an electronic clinical log (Typhon). Additionally, a Preceptor Documentation form will be completed, including the preceptor's signature (initials) each day the student is in the clinical site. The original copy of the Clinical Hours Log (see Appendix C) will be submitted to the clinical faculty at the end of the semester and a copy will be provided to the preceptor.
- The Student will assist faculty in completing the following forms: Student Site Evaluation and Student Preceptor Evaluation (see Appendix E).

#### **V. Qualifications for Preceptor Specialty Courses**

- Nursing or medical expertise in clinical practice derived from practical and theoretical preparation (National Organization of Nurse Practitioner Faculties (NONPF) Guidelines for NP Programs 2016)
- Authorized to practice as advanced practice nurses in Texas, or currently licensed as a health care professional who can provide supervision and teaching in clinical settings appropriate for advanced practice nursing. (N.O.N.P.F. Guidelines Checklist IV.B.(3). (a & b) 2016).
- Current unencumbered Texas license.
- Board of Nursing or Medical Board recognition to practice in a specialty area in Texas. (N.O.N.P.F. Guidelines Checklist IV.B.3.a)
- Appropriate national certification (N.O.N.P.F. Guidelines Checklist IV.B.3.a 2016) if appropriate.



## **General Expectations for MSN Students**

Successful clinical performance is achieved through the student-preceptor-clinical instructor relationship. Each member of this educational team contributes to the student's learning experience. Students must be actively involved in arranging, maintaining, and terminating the preceptor-student relationship over the course of the semester. The responsibilities delineated in this guide are consistent with current professional, Texas Board of Nursing, and Texas law requirements.

Students in the MSN program Family Nurse Practitioner tracks are responsible for selecting a clinical site and preceptor, requesting affiliation agreements, and completing preceptor agreements. The clinical site should provide students with opportunities that allow students to demonstrate satisfactory completion of course objectives and progression in their development as nurses with advanced educational preparation.

Students should consult with course faculty regarding the appropriateness of a clinical site. Under no circumstances, will students complete the clinical laboratory portion of any specialty course under the guidance of their work supervisors or family members. Students may complete clinical experiences in the institution where they are employed when, and only when, (1.) the selected preceptor does not have input into annual work performance evaluations and (2.) the physical unit where the clinical hours are completed is NOT the unit where the student is employed. Family members of students cannot be selected as preceptors for any course.

## **Student Responsibilities for Clinical Laboratory Experiences & Preceptor Selection**

The MSN courses are offered in a structure that promotes the development of specialized knowledge and skill sets with the application of basic principles and skills and moving to the application of complex principles and skills in the delivery of advanced clinical care and in administrative roles. Students should select preceptors based on their qualifications to support student achievement of the course objectives.

Students should review their course objectives before beginning the process of preceptor selection. The clinical site and preceptor should provide learning opportunities that allow students to demonstrate satisfactory completion of the course objectives and progression in their development as nurses with advanced educational preparation. After students have a clear understanding of the learning objectives for their course, they should identify potential preceptors in their area. For questions about the appropriateness of the clinical setting or preceptor, students should contact course faculty.

When professional licensure is required for preceptors, the preceptor must meet established criteria in accordance with the position description included in this Preceptor Guide. A preceptor must hold professional licensure for supervising student involved in direct clinical practice including teaching. All preceptors for clinical courses must have an "unencumbered license". "Unencumbered license" means that there is no disciplinary action against the license. Before contracting a potential preceptor, a preliminary license verification may be helpful to avoid hurt feelings or misunderstanding later. See "Preceptor License Verification".

## **Set Up a Meeting with the Potential Preceptor**

Contact the potential preceptor to set up a meeting. At the meeting, the student should provide the potential preceptor a copy of the course objective, evaluation criteria, and the Preceptor Agreement.

Some preceptors require an interview with the student prior to signing the agreement. Students should use this opportunity to demonstrate their commitment to their coursework, knowledge of program content, ethical responsibilities (confidentiality), and willingness to adapt to their schedule to the preceptor's practice. The interview will also give the preceptor insight into the student's level, ability, and personality.

The interview will enable the preceptor to assess if the student would be a "good fit" for the preceptor's teaching style, practice setting, and the patient population. At the end of the interview, the preceptor will determine if the setting provides appropriate learning opportunities for the students to meet the course learning objectives.

### **Clinical Preceptor Agreement**

Each student should complete required documents essential to establishing the formal preceptor-student-clinical faculty-SFASU relationship. Preceptor agreements establish a relationship for a specific time period. Therefore, students and preceptors must sign a new agreement each semester.

### **Castlebranch: Verification of Student Compliance with Immunization, License, & Certifications**

The MSN Coordinator reviews the documentation stored in Castlebranch.com to assure that all information is current. Student's background check, license, drug screen, CPR, Hep. A, Hep. B, TB, Varicella, TDAP, flu vaccination, and MMR must all be uploaded into the website. If any requirement is not met, students will not be able to attend clinical. Students must verify with clinical faculty that all information is complete in Castlebranch.com (MyCB) before starting clinical. If the license, certifications, or immunizations expire during the course of the semester, students will be asked to stop attending clinical until Castlebranch.com (MyCB) information is up to date.

### **Scheduling of Clinical Hours**

Students and preceptors should agree on the days and times that the student will be in the clinical agency before starting the clinical experience. In general, clinical hours should be completed during the timeframe: Monday – Friday, 8am – 5pm. The clinical schedule must also fit clinical faculty schedules because clinical faculty must be available to students by phone and for site visits and during the student's clinical hours. Clinical faculty are authorized to be in the clinic on the day the student is scheduled to be in clinical.

### **Clinical Dress and Behavior**

Students are representatives of DeWitt School of Nursing and must present themselves as ambassadors of this program. They are expected to be respectful to preceptors, faculty, staff, patients, and their families. Reports of unprofessional behavior will result in the student being counseled and possibly subject to review by the College of Science & Mathematics.

Students should be professionally dressed and wear an ID badge that identifies them as a Registered Nurse and SFASU MSN Graduate Student. These badges should only be worn by the student when the student is in the clinical setting in the student role. Students should clearly identify themselves as an MSN nursing student in an advanced nursing role. Students must use the same name in the clinical setting and on all documents that they are using in the courses. The appropriate use of uniforms or lab coats should

be determined through the preceptor/student interview. Students are expected to conform to the dress of the clinical site where the coursework is completed.

Preceptors volunteer to help teach MSN students and often agree to do so because they enjoy learning and interacting with students. It is important to leave preceptors a copy of “Preceptorship Documentation” of hours for their records since some preceptors receive continuing education credit for preceptor activities.

### **Preparation for Clinical Laboratory**

The clinical laboratory extends the learning environment of the didactic or lecture portion of the course to integrate theoretical concepts with clinical practice. Students should prepare for the clinical laboratory by developing individual learning objectives associated with the course. Course work required in the didactic or lecture portion of the course is generally designed to prepare students for their clinical experiences. Therefore, students are expected to remain engaged in the course, prepare for clinical by completing the required readings and assignments, and reviewing additional relevant material that will ensure appropriate practice in the clinical setting.

The preceptor may recommend materials and topics for review prior to the first clinical day. Students involved in care delivery should review the common clinical problems relevant to the clinical site population. Follow-up reading of current reference material following the clinical day provides the student with the opportunity to increase the breadth of scientific and clinical knowledge gained through the clinical experience.

### **Attendance**

Performance of clinical hours at the negotiated times and days with the preceptor is required. Careful attention to attend clinical on the days which the preceptor can accommodate the student is important. It is the student’s responsibility to monitor the number of hours completed, and plan on completing the required number of hours for the term. The student is responsible for adjusting his/her personal and employment commitments so that the required number of clinical hours can be completed. If the student does not complete the required clinical hours for the term he/she cannot expect the preceptor to continue the relationship after the term has ended. Extension of the clinical period with the preceptor cannot be assumed but is granted only by agreement with the preceptor and SFA SON faculty. Exceptions related to unexpected illness of the student/family and or preceptor should be discussed with course faculty and the parties involved.

When the student cannot attend clinical on a day that it is scheduled, the student must immediately notify the preceptor and clinical faculty. The student should obtain a telephone number and discuss the procedure of notifying the preceptor and faculty for unexpected absences. Failure to notify the preceptor as negotiated, prior to the beginning of the scheduled clinical day, it is unacceptable and may place the student and clinical placement in jeopardy. The student should notify the course faculty as per the course guidelines. The student should then present the faculty with a plan to complete the lost clinical time.

# APPENDIX A

**STEPHEN F. AUSTIN STATE UNIVERSITY  
DEWITT SCHOOL OF NURSING  
MSN/FNP Program  
Preceptor Curriculum Vita**

**PLEASE PRINT CLEARLY**

**Professional Education (post-secondary schools attended):**

Institution	Degree Earned	Date

**Certifications:** \_\_\_\_\_

**Academic and Professional Honors:** \_\_\_\_\_

**Professional Experience:**

Position	Dates in Position	Institution

**Preceptor Experience**

Type of Student Preceptored	What School was the Student From	Date of Experience

\_\_\_\_\_  
Preceptor's Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student's Name

**STEPHEN F. AUSTIN STATE UNIVERSITY**  
**SCHOOL OF NURSING**  
**PRECEPTOR AGREEMENT**  
*(Form Revision – December 2020)*

Name of Preceptor: \_\_\_\_\_  
(As it appears on License)

Preceptor Mailing Address: \_\_\_\_\_

Preceptor E-mail Address: \_\_\_\_\_

Preceptor Phone Number: \_\_\_\_\_

Agency: \_\_\_\_\_

Department: \_\_\_\_\_

Student Name: \_\_\_\_\_  
(If applicable)

Preceptor Professional License Number: \_\_\_\_\_

Educational Background: \_\_\_\_\_  
Check all that apply:  ADN  BSN  MSN  PhD/DNP  PA  MD/DO

Clinical Qualifications: \_\_\_\_\_  
o Years of Practice: \_\_\_\_\_  
o Areas of Practice: \_\_\_\_\_  
o Certifications: \_\_\_\_\_

Course Title and Number: \_\_\_\_\_

Faculty Member's Agreement

Signature/Date: \_\_\_\_\_

Preceptor's Agreement

Signature/Date: \_\_\_\_\_

Director's Approval

Signature/Date: \_\_\_\_\_

**Faculty Responsibilities:**

1. Ensure that preceptors meet qualifications in Rule 215.10 or Rule 219.10, as appropriate.
2. Ensure that there are written agreements which delineate the functions and responsibilities of the affiliating agency, clinical preceptor and nursing program.
3. Ensure that clinical experiences using preceptors occur only after the student has received applicable theory and clinical experiences necessary to safely provide care to client within course or curriculum, as appropriate.
4. Orient the student and preceptor to the clinical experience.
5. Provide the preceptor with the mission, core values, organizational framework, and Differentiated Entry Level Competencies for the School of Nursing (DEC) or the National Organization of Nurse Practitioner Faculties Family Nurse Practitioner Competencies (as applicable); and discuss student expectations, skills performance, student guidelines for performance of procedures, and methods of evaluation.
6. Assure student compliance with standards on immunization, screening, OSHA standards, AHA-Healthcare Provider BLS, and current liability insurance coverage as appropriate.
7. Communicate assignments and other essential information to the agency and preceptor.
8. Meet regularly with the clinical preceptor and the student in order to monitor and evaluate the learning experience.
9. Be readily available, e.g., telephone or email, for consultation when the students are in the clinical area.
10. Receive feedback from the preceptor regarding student performance while maintaining ultimate responsibility for grading.
11. Provide feedback to preceptor regarding performance as preceptor and the clinical learning experience.
12. Provide recognition to the preceptor for participation as a preceptor.  
(Example: adjunct faculty plaque, certificate.)

**Preceptor Responsibilities:**

1. Orient to role by reviewing the appropriate Preceptor Handbook below.  
Scan the QR code with the camera on your phone.
2. Maintain ultimate responsibility for the care of clients.
3. Function as a role model in the clinical setting.
4. Facilitate learning activities for no more than two students at any given time.
5. Orient the student (s) to the clinical agency.
6. Guide, facilitate, supervise, and monitor the student in achieving the clinical objectives and student's performance of skills and other nursing activities to assure

- safe practice.
7. Collaborate with faculty to review the progress of the student toward meeting clinical learning objectives.
  8. Provide feedback to the student regarding clinical performance.
  9. Contact the faculty if any problem with student performance occurs.
  10. Discuss with faculty/student arrangements for appropriate coverage for supervision of the student should the preceptor be absent. (Student to obtain additional preceptor agreement.)
  11. Give feedback to the faculty regarding clinical experience for student and suggestions for course development.

**Agency Responsibilities:**

1. Retain ultimate responsibility for the care of clients.
2. Retain responsibility for preceptor's salary, benefits, and liability.
3. Arrange preceptor's work schedules so they are available on student clinical days.
4. Interpret the preceptor program and expectation of students to other personnel who are not directly involved with preceptorship.

**Student Responsibilities:**

1. Maintain open communications with the preceptor and faculty.
2. Maintain accountability for own learning activities.
3. Prepare for each clinical experience as required.
4. Be accountable for own actions while in the clinical setting.
5. Arrange for preceptor's supervision when performing procedures, as appropriate.
6. Contact faculty by telephone or email if faculty assistance is necessary.
7. Adhere to maintaining the confidential nature of all information obtained during clinical experience.



BSN Preceptor Handbook



MSN Preceptor Handbook



# **APPENDIX B**

**STEPHEN F. AUSTIN STATE UNIVERSITY  
DEWITT SCHOOL OF NURSING  
MSN/FNP Program**

**Student Clinical Information Form**

<b>Student Name:</b>  Cell Phone Number (that can be contacted during clinical hours):		
<b>Preceptor's Name:</b>  Practice Name:  Address:  Phone:		
<b>Clinical Faculty Name:</b>  Phone:		
<b>Total Semester Schedule</b>		
<b>Day of the Week</b>	<b>Month/Day</b>	<b>Practice Hours (e.g. 8-12, 1-5, lunch 12-1)</b>

# APPENDIX C

**STEPHEN F. AUSTIN STATE UNIVERSITY  
DEWITT SCHOOL OF NURSING  
MSN/FNP Program**

**Preceptorship Documentation**

Students should use this form to provide preceptors with a summary of the hours they spent with a preceptor. **This documentation should be left with the preceptor at the end of the preceptorship term.** Preceptors are asked to submit this documentation with requests for confirmation of preceptor time as evidence of professional development required for board certification renewal.

Preceptor Name: \_\_\_\_\_

Student Name: \_\_\_\_\_

Course: \_\_\_\_\_ Semester: \_\_\_\_\_

Clinical Instructor's Name: \_\_\_\_\_

Date of Clinical	# of Hours Completed	Preceptor Initials	Student Initials
<b>Total Hours Completed</b>			

**STEPHEN F. AUSTIN STATE UNIVERSITY**  
**DEWITT SCHOOL OF NURSING**  
**MSN/FNP Program**  
**Clinical Skills & Procedures List**

**Anoscopy**  
**Antepartum Fetal Monitoring**  
**Biopsy Excisional**  
**Biopsy Punch**  
**Biopsy Shave**  
**Breast Exam**  
**Casting/Splinting**  
**Cerumen Disimpaction**  
**Cryotherapy**  
**Cultures/Swabs Collection**  
**Cyst Aspiration**  
**Developmental Screening Tests & Growth Charts**  
**Ear Lavage**  
**EKG Interpretation**  
**Electrocutery, Chemical Cautery. Liquid Nitrogen**  
**Epistaxis & Nasal Packing**  
**Exam of Eye for Foreign Body**  
**Fluorescein Staining of Eyes**  
**Hearing Screening**  
**Incision & Drainage (I&D)**  
**Ingrown Toenail Removal**  
**IUD Removal**  
**Joint Injection**  
**Mental Health Screening**  
**Microscope, Use of and Preparation of Slides**  
**Nail Avulsion**  
**Newborn Exam**  
**Pap Smear**  
**Peak Flow Meter**  
**Pelvic Exam**  
**Prostate Exam**  
**Pulmonary Function Testing Interpretation (PFT)**  
**STD & HIV Testing & Counseling**  
**Strep/Influenza Testing**  
**Subungual Hematoma Management**  
**Suturing**  
**Trigger Point Injection**  
**Tympanometry**  
**Vision Screening**  
**Wet Mount**  
**Woods Lamp**  
**Wound Management/Complex**  
**X-Ray Interpretation**

**STEPHEN F. AUSTIN STATE UNIVERSITY**  
**DEWITT SCHOOL OF NURSING**  
**MSN/FNP Program**  
**Clinical Skills & Procedures Checklist**

**Student Name:**

#	Procedure (e.g. suturing)	SKILL LEVEL Preceptor Initials & Date				
		Confident & Independent	Fairly Confident Minimal Supervision Needed	Moderate Supervision Needed	Performed Once & With Supervision	Observed
1.	Anoscopy					
2.	Antepartum Fetal Monitoring					
3.	Biopsy Excisional					
4.	Biopsy Punch					
5.	Biopsy Shave					
6.	Breast Exam					
7.	Casting/Splinting					
8.	Cerumen Disimpaction					
9.	Cryotherapy					
10.	Cultures/Swabs Collection					
11.	Cyst Aspiration					
12.	Developmental Screening Tests & Growth Charts					
13.	Ear Lavage					
14.	EKG Interpretation					
15.	Electrocutery, Chemical Cautery. Liquid Nitrogen					
16.	Epistaxis & Nasal Packing					

#	Procedure (e.g. suturing)	SKILL LEVEL Preceptor Initials & Date				
		Confident & Independent	Fairly Confident Minimal Supervision Needed	Moderate Supervision Needed	Performed Once & With Supervision	Observed
17.	Exam of Eye for Foreign Body					
18.	Fluorescein Staining of Eyes					
19.	Hearing Screening					
20.	Incision & Drainage (I&D)					
21.	Ingrown Toenail Removal					
22.	IUD Removal					
23.	Joint Injection					
24.	Mental Health Screening					
25.	Microscope, Use of and Preparation of Slides					
26.	Nail Avulsion					
27.	Newborn Exam					
28.	Pap Smear					
29.	Peak Flow Meter					
30.	Pelvic Exam					
31.	Prostate Exam					
32.	Pulmonary Function Testing Interpretation (PFT)					
33.	STD & HIV Testing & Counseling					
34.	Strep/Influenza Testing					

#	Procedure (e.g. suturing)	SKILL LEVEL Preceptor Initials & Date				
		Confident & Independent	Fairly Confident Minimal Supervision Needed	Moderate Supervision Needed	Performed Once & With Supervision	Observed
35.	Subungual Hematoma Management					
36.	Suturing					
37.	Trigger Point Injection					
38.	Tympanometry					
39.	Vision Screening					
40.	Wet Mount					
41.	Woods Lamp					
42.	Wound Management/Complex					
43.	X-Ray Interpretation					



# APPENDIX D

**STEPHEN F. AUSTIN STATE UNIVERSITY  
DeWITT SCHOOL OF NURSING  
MSN/FNP Graduate Program**

**Preceptor Evaluation of Student**

**Directions:** Please evaluate each statement by placing a check in the box using the scale which best represents your response. Any evaluation in the minimally meets or expectations not met categories requires comments and explanation.

**4=Exceeds Expectations:** Collects complete history and physical. Presents case in a concise manner. Overall performance meets or exceeds expectations.

**3=Meets Expectations:** Collects fairly complete history and physical. Presents case in an organized manner. Has had consistent improvement in most areas.

**2=Minimally Meets Expectations:** Occasionally collects incomplete history and physical. Presents case in disorganized manner. Improvement needed in multiple areas.

**1=Expectations Not Met:** Always collects incomplete history and physical. Presents case in a disorganized manner. Is disorganized and inefficient. Potentially unsafe.

0=N/A= Not applicable or not observed

\*The following behaviors are considered unsafe/incompetent:

Demonstrates unsafe performance and makes questionable decisions

Lacks insight and understanding of own behaviors and behaviors of other

Needs continuous specific and detailed supervision

Has difficulty in adapting to new ideas and roles

Fails to submit required written clinical assignments on time

Falsifies clinical hours

**STEPHEN F. AUSTIN STATE UNIVERSITY  
DeWITT SCHOOL OF NURSING  
MSN/FNP Graduate Program**

**Advanced Health Assessment and Diagnosis and Procedures**

**Student Name** \_\_\_\_\_ **Preceptor Name** \_\_\_\_\_

	Mid-Term or Final (circle one)					Comments
	4	3	2	1	0	
1. Gathers appropriate history						
2. Conducts physical/developmental examination of systems pertinent to problem identified						
3. Begins to interpret finding from physical examination: identifies normal/normal variant, and pathological findings						
4. Based on history and physical, begins to formulate differential diagnosis and identify most likely diagnosis						
5. Consults appropriately regarding findings						
6. Records patient visits with <i>j</i> accuracy using problem-oriented recording (SOAP)						
7. Establishes a professional relationship with preceptor, staff, and patients						
8. Presents cases to preceptor in a clear, concise, and pertinent manner						
9. Accepts responsibility of own learning						
10. Professionalism: a. Is punctual in attendance at clinical b. Maintains patient confidentiality c. Accepts guidance in learning						

\*\*2 or more ratings of 0 or 1 on the Final Evaluation suggests serious clinical concerns.\*\*

COMMENTS: ( may use extra sheet or back for comments)

\_\_\_\_\_  
**Preceptor Printed Name**

\_\_\_\_\_  
**Preceptor Signature**

\_\_\_\_\_  
**Date**

**STEPHEN F. AUSTIN STATE UNIVERSITY  
DeWITT SCHOOL OF NURSING  
MSN/FNP Graduate Program**

**Preceptor Evaluation of Student**

**Directions:** Please evaluate each statement by placing a check in the box using the scale which best represents your response. Any evaluation in the minimally meets or expectations not met categories requires comments and explanation.

**4=Exceeds Expectations:** Collects complete history and physical. Presents case in a concise manner. Overall performance meets or exceeds expectations.

**3=Meets Expectations:** Collects fairly complete history and physical. Presents case in an organized manner. Has had consistent improvement in most areas.

**2=Minimally Meets Expectations:** Occasionally collects incomplete history and physical. Presents case in disorganized manner. Improvement needed in multiple areas.

**1=Expectations Not Met:** Always collects incomplete history and physical. Presents case in a disorganized manner. Is disorganized and inefficient. Potentially unsafe.

**0=N/A=** Not applicable or not observed

\*The following behaviors are considered unsafe/incompetent:

Demonstrates unsafe performance and makes questionable decisions

Lacks insight and understanding of own behaviors and behaviors of other

Needs continuous specific and detailed supervision

Has difficulty in adapting to new ideas and roles

Fails to submit required written clinical assignments on time

Falsifies clinical hours

**STEPHEN F. AUSTIN STATE UNIVERSITY  
DeWITT SCHOOL OF NURSING  
MSN/FNP Graduate Program**

**Primary Care Clinical I**

**Student Name** \_\_\_\_\_ **Preceptor Name** \_\_\_\_\_

	Mid-Term or Final (circle one)					Comments
	4	3	2	1	0	
1. Obtains appropriate history and performs indicated examination for pertinent system(s) relative to identified problem.						
2. Conducts a thorough physical examination; utilizes a systematic approach for collection of physiologic, psychological, developmental, and social data						
3. Interprets findings from physical examination accurately, identifying normal, normal variant, and pathological findings.						
4. Based on history and physical, formulates probable differential diagnoses and identifies most , appropriate						
5. Orders diagnostic tests as indicated for problem identified						
6. ^identifies health risks and implements health maintenance and illness prevention for problems identified						
7. Begins to manage care of common illnesses						
8. Begins to manage patient care across the life-span, including patient education regarding disease and treatment						
9. Considers cultural issues, psychosocial care, counseling and referral as appropriate						
10. Plans appropriate follow-up of patients						
11. Records patient visits with accuracy using problem-oriented recording (SOAP)						

	Mid-Term or Final (circle one)					Comments
	4	3	2	1	0	
<b>12. In collaboration with , preceptor, provides safe patient care</b>						
<b>13. Establishes a professional relationship with preceptor, staff, and patients</b>						
<b>14. Presents cases to preceptor in a clear, concise, and pertinent manner</b>						
<b>15. Accepts responsibility of own learning</b>						
<b>16. Professionalism:</b> <b>a. Is punctual in attendance at clinical</b> <b>b. Maintains patient confidentiality</b> <b>c. Accepts guidance in learning</b>						

**\*\*2 or more ratings of 0 or 1 on the Final Evaluation suggests serious clinical concerns.\*\***

COMMENTS:

\_\_\_\_\_  
**Preceptor Printed Name**

\_\_\_\_\_  
**Preceptor Signature**

\_\_\_\_\_  
**Date**

**STEPHEN F. AUSTIN STATE UNIVERSITY  
DeWITT SCHOOL OF NURSING  
MSN/FNP Graduate Program**

**Preceptor Evaluation of Student**

**Directions:** Please evaluate each statement by placing a check in the box using the scale which best represents your response. Any evaluation in the minimally meets or expectations not met categories requires comments and explanation.

**4=Exceeds Expectations:** Collects complete history and physical. Presents case in a concise manner. Overall performance meets or exceeds expectations.

**3=Meets Expectations:** Collects fairly complete history and physical. Presents case in an organized manner. Has had consistent improvement in most areas.

**2=Minimally Meets Expectations:** Occasionally collects incomplete history and physical. Presents case in disorganized manner. Improvement needed in multiple areas.

**1=Expectations Not Met:** Always collects incomplete history and physical. Presents case in a disorganized manner. Is disorganized and inefficient. Potentially unsafe.

0=N/A= Not applicable or not observed

\*The following behaviors are considered unsafe/incompetent:

Demonstrates unsafe performance and makes questionable decisions

Lacks insight and understanding of own behaviors and behaviors of other

Needs continuous specific and detailed supervision

Has difficulty in adapting to new ideas and roles

Fails to submit required written clinical assignments on time

Falsifies clinical hours

**STEPHEN F. AUSTIN STATE UNIVERSITY  
DeWITT SCHOOL OF NURSING  
MSN/FNP Graduate Program**

**Primary Care Clinical II**

**Student Name** \_\_\_\_\_ **Preceptor Name** \_\_\_\_\_

	Mid-Term or Final (circle one)					Comments
	4	3	2	1	0	
1. Obtains appropriate history and performs indicated examination for pertinent system(s) relative to identified problem.						
2. Conducts a thorough physical examination; utilizes a systematic approach for collection of physiologic, psychological, developmental, and social data						
3. Interprets findings from physical examination accurately, identifying normal, normal variant, and pathological findings.						
4. Based on history and physical, formulates probable differential diagnoses and identifies most , appropriate						
5. Orders diagnostic tests as indicated for problem identified						
6. Participates in the management of complex patient problems in collaboration with the preceptor						
7. With increasing autonomy, begins to manage care of common illnesses						
8. Begins to manage patient care across the life-span, including patient education regarding disease and treatment						
9. Considers cultural issues, psychosocial care, counseling and referral as appropriate						
10. Plans appropriate follow-up of patients						
11. Records patient visits with accuracy using problem-oriented recording						



	Mid-Term or Final (circle one)					Comments
	4	3	2	1	0	
12. In collaboration with preceptor, provides safe patient care						
13. Establishes a professional relationship with preceptor, staff and patients.						
14. Presents cases to preceptor in a clear, concise, and pertinent manner						
15. Accepts responsibility of own learning						
16. Professionalism: Is punctual in attendance at clinical, Maintains confidentiality, accepts guidance in						

**\*\*2 or more ratings of 0 or 1 on the Final Evaluation suggests serious clinical concerns.\*\***

**COMMENTS:**

\_\_\_\_\_  
**Student Name**

\_\_\_\_\_  
**Preceptor Printed Name**

\_\_\_\_\_  
**Preceptor Signature**

\_\_\_\_\_  
**Date**

**STEPHEN F. AUSTIN STATE UNIVERSITY**  
**DeWITT SCHOOL OF NURSING**  
**MSN/FNP Graduate Program**

**Preceptor Evaluation of Student**

**Directions:** Please evaluate each statement by placing a check in the box using the scale that best represents your response. Any evaluation in the minimally meets or expectations not met categories requires comments and explanation.

**4=Exceeds Expectations:** Collects complete history and physical. Presents case in a concise manner. Overall performance meets or exceeds expectations.

**3=Meets Expectations:** Collects fairly complete history and physical. Presents case in an organized manner. Has had consistent improvement in most areas.

**2=Minimally Meets Expectations:** Occasionally collects incomplete history and physical. Presents case in disorganized manner. Improvement needed in multiple areas.

**1=Expectations Not Met:** Always collects incomplete history and physical. Presents case in a disorganized manner. Is disorganized and inefficient. Potentially unsafe.

**0=N/A=** Not applicable or not observed

\*The following behaviors are considered unsafe/incompetent:

- Demonstrates unsafe performance and makes questionable decisions
- Lacks insight and understanding of own behaviors and behaviors of other
- Needs continuous specific and detailed supervision
- Has difficulty in adapting to new ideas and roles
- Fails to submit required written clinical assignments on time
- Falsifies clinical hours

**STEPHEN F. AUSTIN STATE UNIVERSITY**  
**DeWITT SCHOOL OF NURSING**  
**MSN/FNP Graduate Program**

Student Name \_\_\_\_\_ Preceptor Name \_\_\_\_\_

**Capstone**

	Mid-Term or Final (circle one)					Comments
	4	3	2	1	0	
1. Takes a thorough history appropriate to acute and/or chronic problem(s), including physiologic and psychosocial data						
2. Performs a physical examination appropriate to the presenting complaint and orders diagnostic test as necessary						
3. Interprets diagnostic tests correctly						
4. Formulates a reasonable differential diagnosis based on historic data and physical examination						
5. Based on history and physical examination makes appropriate diagnosis						
6. With increasing autonomy, manages the care of acute minor illness and injury, common chronic illnesses, including well-child and preventive care						
7. Includes patient education regarding course of acute or chronic illnesses in the treatment plan						
8. Participates in the management of complex patient problems; may assume primary responsibility						
9. Includes cultural issues, psychosocial care, counseling and referral for problems beyond the FNP scope of practice						
10. Plans appropriate follow-up of patients						

	Mid-Term or Final (circle one)					Comments
	4	3	2	1	0	
11. Records patient visits with accuracy using problem-oriented recording (SOAP) or designated format; develops and/or updates patient problem list						
12. Consistently addresses health maintenance and illness prevention through identification of health risks, education of patients, and preventive treatment for potential or actual problems identified						
13. In collaboration with preceptor, provides safe patient care.						
14. Develops a productive relationship with patients, preceptor, and staff.						
15. Makes and implements decisions with appropriate level of independence and consultation with preceptor as needed						
16. Accepts responsibility for own learning and continued need to learn						
17. Professional roles and responsibilities: a. Is punctual in attendance at clinical b. Maintains patient confidentiality c. Accepts guidance in learning						

\*\*2 or more ratings of 0 or 1 on the Final Evaluation suggests serious clinical concerns.\*\*

COMMENTS:

-----  
Student Name

\_\_\_\_\_  
Preceptor Printed Name

\_\_\_\_\_  
Preceptor Signature

\_\_\_\_\_  
Date

# APPENDIX E

**STEPHEN F. AUSTIN STATE UNIVERSITY**  
**DeWITT SCHOOL OF NURSING**  
**MSN/FNP Graduate Program**

**Student/Faculty Evaluation of Clinical Preceptor**

The survey will be administered online.

The purpose of this tool is to assist the student in providing the course coordinator and clinical faculty with formal feedback.

Directions: Please answer the questions and evaluate the preceptor by using the Likert Scale:

**N/A=Non-applicable; Agree; Disagree**

Did your preceptor:

1. Assist you with setting goals and providing constructive feedback?
2. Maintain confidentiality of patient?
3. Maintain confidentiality of your work performance?
4. Demonstrate understanding and promotes the FNP role?
5. Function as a patient/family advocate?
6. Interact well with co-workers and ancillary personnel?
7. Consider your individual learning needs?
8. Communicate clinical knowledge well?
9. Utilize other members of the healthcare team (i.e., social worker, dietician, allied health professionals)?
10. Help you identify your learning needs?
11. Suggest or provide additional learning experiences (i.e., related cases, etc).
12. Collaborate with you in making drug treatment choices, monitoring dosages and length of treatment, and reviewing laboratory and x-ray results?
13. Provide immediate and adequate feedback with questions and patient presentations?
14. Review differential diagnoses with you?
15. Lead you through decision making?
16. Encourage questions?
17. Provide alternative experiences when there were few or no patients?
18. Encourage you to be independent as you gained experience?
19. Help you recognize and utilize resource persons?
20. Remain accessible for consultation as you gained competence?

**STEPHEN F. AUSTIN STATE UNIVERSITY**  
**DeWITT SCHOOL OF NURSING**  
**MSN/FNP Graduate Program**

**Student/Faculty Evaluation of Clinical Site**

The survey will be administered online.

The purpose of this tool is to assist the student in providing the course coordinator and clinical faculty with formal feedback.

Directions: Please answer the questions and evaluate the preceptor by using the Likert Scale:

**N/A=Non-applicable; Agree; Disagree**

The clinical site:

1. Provides adequate space.
2. Provides adequate time to see patients.
3. Has a sufficient numbers of patients.
4. Has a variety of patients (i.e., age, type of problem, etc.)
5. Allows students to select patients according to their needs.
6. Gives students the opportunity to follow-up with patients and/or problems of interest.
7. Makes diagnostic test results readily accessible.
8. Has support staff who are appropriately helpful to the student.
9. Has support staff that are accepting of the student's role.
10. Has a site philosophy directed toward quality care, health promotion, and disease prevention.
11. Uses procedure and protocol manuals, educational materials, and has personnel to adequately support a student in advance practice nursing.
12. Has community resources, other agencies, and professional disciplines which are involved with patient care?
- 13.1 would recommend this site for future student placement?

# APPENDIX F



**Contact Numbers:**

We encourage preceptors to call the faculty directly with any question you might have about our programs or about individual students. Persons to contact about our program:

**Director – DeWitt School of Nursing**

Tammy Harris, DNP, APRN, FNP-BC  
Director and Associate Professor  
Stephen F. Austin State University  
P.O. Box 6156, SFA Station  
Nacogdoches, TX 75962  
Office: 936-468-7719  
E-mail address: tamara.harris@sfasu.edu

**Coordinator - MSN Program**

Erin Bailey, DNP, RN, FNP-C  
Coordinator MSN Program and Associate Professor  
P.O. Box 6156, SFA Station  
Nacogdoches, TX 75962  
Office: 936-468-7733  
Email address: baileyerin@sfasu.edu