# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accreditation, Membership, Affirmative Action Statement</td>
<td>5</td>
</tr>
<tr>
<td>Dean’s Welcome</td>
<td>6</td>
</tr>
<tr>
<td>Philosophy</td>
<td>7</td>
</tr>
<tr>
<td>Mission and Shared Vision</td>
<td>8</td>
</tr>
<tr>
<td><strong>General Services</strong></td>
<td>10</td>
</tr>
<tr>
<td>Cultural Opportunities</td>
<td>10</td>
</tr>
<tr>
<td>Student Employment</td>
<td>10</td>
</tr>
<tr>
<td>Army, Navy, and Air Force ROTC</td>
<td>10</td>
</tr>
<tr>
<td>Library</td>
<td>10</td>
</tr>
<tr>
<td>Tiger-Lan Laboratory</td>
<td>10</td>
</tr>
<tr>
<td>Email</td>
<td>10</td>
</tr>
<tr>
<td>Management of Personal Account Information</td>
<td>10</td>
</tr>
<tr>
<td>Educational Support Program</td>
<td>11</td>
</tr>
<tr>
<td>Psychological/Personal Counseling</td>
<td>11</td>
</tr>
<tr>
<td>Health Center</td>
<td>11</td>
</tr>
<tr>
<td>Disability Services</td>
<td>11</td>
</tr>
<tr>
<td><strong>Nursing Student Activities</strong></td>
<td>13</td>
</tr>
<tr>
<td>Student Nurses Association</td>
<td>13</td>
</tr>
<tr>
<td>Student Activities</td>
<td>13</td>
</tr>
<tr>
<td>Participation in TSNS and NSN</td>
<td>13</td>
</tr>
<tr>
<td>Sigma Theta Tau International, Beta Theta At-Large Chapter</td>
<td>13</td>
</tr>
<tr>
<td>Composites</td>
<td>14</td>
</tr>
<tr>
<td>University of Memphis Honors Assembly</td>
<td>14</td>
</tr>
<tr>
<td>Loewenberg School of Nursing Alumni Association</td>
<td>14</td>
</tr>
<tr>
<td><strong>Nursing Fees</strong></td>
<td>16</td>
</tr>
<tr>
<td>Clinical Course Fee</td>
<td>16</td>
</tr>
<tr>
<td>Course Management Fee</td>
<td>16</td>
</tr>
<tr>
<td>Malpractice Insurance</td>
<td>16</td>
</tr>
<tr>
<td>Skills Laboratory Fee</td>
<td>16</td>
</tr>
<tr>
<td>Tennessee Professional Assistance Program</td>
<td>16</td>
</tr>
<tr>
<td>Testing Fee</td>
<td>16</td>
</tr>
<tr>
<td><strong>Academic Success</strong></td>
<td>18</td>
</tr>
<tr>
<td><strong>The Bachelor of Science in Nursing</strong></td>
<td>20</td>
</tr>
<tr>
<td>BSN Program Outcomes</td>
<td>20</td>
</tr>
<tr>
<td>BSN Curricular Concepts</td>
<td>20</td>
</tr>
<tr>
<td>Professional Standards of Nursing Practice and Education</td>
<td>20</td>
</tr>
<tr>
<td>General Education Policy for Second Degree Students</td>
<td>22</td>
</tr>
<tr>
<td>External Requirements for the Baccalaureate Degree</td>
<td>22</td>
</tr>
<tr>
<td>General Education Curriculum</td>
<td>22</td>
</tr>
</tbody>
</table>
General Education Requirements ...................................................................................... 23
Curriculum Model/5 Semester Curriculum Plan ................................................................. 24
Matrix of Outcomes for BSN Program by Level ................................................................. 25
BSN Essential Content Mapping ....................................................................................... 27
Nursing Program Model ..................................................................................................... 28
Clinical Course Competencies: Core .................................................................................. 29

Academic Policies
Academic Integrity ............................................................................................................. 35
Academic Misconduct .......................................................................................................... 35
Academic Program and Advisement .................................................................................... 36
Academic Advisor ................................................................................................................ 36
Faculty Advisor ................................................................................................................... 36
BSN Advising Site ................................................................................................................ 36
LSON Honors Program Guidelines .................................................................................... 36
Clinical Nursing Course Requirements ............................................................................. 37
General Education Coursework .......................................................................................... 37
Progression in the Nursing Major ....................................................................................... 37
Irregular Progression in the Nursing Major ......................................................................... 38
Disqualification from the Nursing Major ............................................................................ 38
Dismissal Appeal Procedure ................................................................................................. 38
Withdrawal from Nursing Courses ..................................................................................... 39
Late/Retroactive Withdrawal .............................................................................................. 39
LSON Intercampus Transfer Guidelines ............................................................................. 39
Accelerated BSN Program Option Requirements ............................................................. 39
Summer School .................................................................................................................... 39

Children on Campus ......................................................................................................... 40
Classroom and Didactic Course Expectations ................................................................... 40
Presence in the Classroom .................................................................................................... 40
Attendance ............................................................................................................................ 40
Class-Specific Policies and Procedures .............................................................................. 40
Recording of Class or Lecture ............................................................................................. 40
Disruptive Classroom Behavior .......................................................................................... 40

Clinical Practicum ............................................................................................................. 41
Clinical Placement .............................................................................................................. 41
Clinical/Lab Attendance ....................................................................................................... 41
Clinical/Lab Absence ............................................................................................................ 41
Clinical Tardy ........................................................................................................................ 42
Unsatisfactory Clinical Course Grade Prevents Clinical Course Withdrawal .................... 42
Transportation ...................................................................................................................... 42
Repeating Clinical Practicum ............................................................................................... 42
Required Drug Testing ......................................................................................................... 42
Substance Use ....................................................................................................................... 42
Tennessee Clinical Placement System ................................................................................ 42
Blood and Body Fluid Exposure .......................................................................................... 42
Clinical Practice in Employment Setting ............................................................................ 43
Nursing Student Employment ............................................................................................. 43
Client Care and Ethics ......................................................................................................... 43
Client Safety & Confidentiality ............................................................................................ 43
Clinical Professional Dress ................................................................................................. 44
Clinical Uniform ................................................................................................................... 44
Clinical Supplies Required ................................................................................................. 45
Dosage Rounding Rules ....................................................................................................... 45
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Undergraduate Grade Appeal Procedure</td>
<td>78</td>
</tr>
<tr>
<td>Loewenberg School of Nursing Code of Ethics</td>
<td>57</td>
</tr>
<tr>
<td>Faculty Procedure for Notification/Suspicion of Drug/Alcohol Use by Students</td>
<td>78</td>
</tr>
<tr>
<td>Appeal of a Nursing Grade Form</td>
<td>79</td>
</tr>
<tr>
<td>LSON Grading Policy</td>
<td>49</td>
</tr>
<tr>
<td>Letter of Recommendation</td>
<td>48</td>
</tr>
<tr>
<td>Requesting Test Scores</td>
<td>48</td>
</tr>
<tr>
<td>Emergency Notification Procedures</td>
<td>48</td>
</tr>
<tr>
<td>Disaster Planning</td>
<td>48</td>
</tr>
<tr>
<td>Institutional Grade Appeal Procedure</td>
<td>49</td>
</tr>
<tr>
<td>Professional Conduct and Comportment</td>
<td>51</td>
</tr>
<tr>
<td>Controlled Medications and Alcohol</td>
<td>71</td>
</tr>
<tr>
<td>Drug Testing Procedures</td>
<td>71</td>
</tr>
<tr>
<td>Student Rights and Responsibilities</td>
<td>59</td>
</tr>
<tr>
<td>Principles of Conduct</td>
<td>58</td>
</tr>
<tr>
<td>Due Process</td>
<td>76</td>
</tr>
<tr>
<td>Student Acknowledgement of Policies/Handbook Agreement</td>
<td>82</td>
</tr>
<tr>
<td>Communication</td>
<td>46</td>
</tr>
<tr>
<td>LSON Communication Roadmap</td>
<td>47</td>
</tr>
<tr>
<td>LSON Website/eCourseware/Email</td>
<td>48</td>
</tr>
<tr>
<td>Letter of Recommendation</td>
<td>48</td>
</tr>
<tr>
<td>Requesting Test Scores</td>
<td>48</td>
</tr>
<tr>
<td>Emergency Notification Procedures</td>
<td>48</td>
</tr>
<tr>
<td>Disaster Planning</td>
<td>48</td>
</tr>
<tr>
<td>Institution Grade Appeal Procedure</td>
<td>49</td>
</tr>
<tr>
<td>Grades</td>
<td>51</td>
</tr>
<tr>
<td>LSON Grading Policy</td>
<td>49</td>
</tr>
<tr>
<td>Testing Policy</td>
<td>49</td>
</tr>
<tr>
<td>Clinical Evaluation Policy</td>
<td>50</td>
</tr>
<tr>
<td>Skills/Health Lab Evaluation Policy</td>
<td>50</td>
</tr>
<tr>
<td>Incomplete Grade</td>
<td>50</td>
</tr>
<tr>
<td>National Counsel Licensing Examination (NCLEX)</td>
<td>51</td>
</tr>
<tr>
<td>Nursing Achievement Tests</td>
<td>51</td>
</tr>
<tr>
<td>Professional Conduct and Comportment</td>
<td>51</td>
</tr>
<tr>
<td>Undergraduate Grade Appeal Procedure</td>
<td>52</td>
</tr>
<tr>
<td>Appeal of a Nursing Grade Form</td>
<td>55</td>
</tr>
<tr>
<td>Loewenberg School of Nursing Code of Ethics</td>
<td>55</td>
</tr>
<tr>
<td>Code of Ethics</td>
<td>57</td>
</tr>
<tr>
<td>Principles of Conduct</td>
<td>58</td>
</tr>
<tr>
<td>Student Rights and Responsibilities</td>
<td>59</td>
</tr>
<tr>
<td>Constitution of the SNA-LSON</td>
<td>62</td>
</tr>
<tr>
<td>Articles I-XIII</td>
<td>62</td>
</tr>
<tr>
<td>Substance Abuse Policy</td>
<td>70</td>
</tr>
<tr>
<td>Substance Abuse Policy Statement</td>
<td>70</td>
</tr>
<tr>
<td>Substance Abuse Education</td>
<td>70</td>
</tr>
<tr>
<td>Tennessee Professional Assistance Program</td>
<td>70</td>
</tr>
<tr>
<td>Testing for Cause</td>
<td>70</td>
</tr>
<tr>
<td>Drug Testing Procedures</td>
<td>71</td>
</tr>
<tr>
<td>Controlled Medications and Alcohol</td>
<td>71</td>
</tr>
<tr>
<td>Identification</td>
<td>71</td>
</tr>
<tr>
<td>Documentation</td>
<td>73</td>
</tr>
<tr>
<td>Inspection of Students and their Property</td>
<td>73</td>
</tr>
<tr>
<td>Off-campus Arrest or Convictions</td>
<td>74</td>
</tr>
<tr>
<td>Intervention/Tennessee Professional Assistance Program (TNPAP)</td>
<td>74</td>
</tr>
<tr>
<td>Treatment</td>
<td>74</td>
</tr>
<tr>
<td>Reentry to LSON with TNPAP Monitoring Contract</td>
<td>74</td>
</tr>
<tr>
<td>Dismissal from the School of Nursing</td>
<td>75</td>
</tr>
<tr>
<td>Due Process</td>
<td>76</td>
</tr>
<tr>
<td>Substance Abuse Policy and Drug Testing Procedure Agreement</td>
<td>77</td>
</tr>
<tr>
<td>Faculty Procedure for Notification/Suspicion of Drug/Alcohol Use by Students</td>
<td>78</td>
</tr>
<tr>
<td>Faculty Report of Reasonable Suspicion of Drug/Alcohol Use Form</td>
<td>79</td>
</tr>
<tr>
<td>Student Wellness Contract</td>
<td>80</td>
</tr>
<tr>
<td>Student Acknowledgement of Policies/Handbook Agreement</td>
<td>82</td>
</tr>
</tbody>
</table>
ACCREDITATION

The Loewenberg School of Nursing BSN and MSN programs are accredited by the Commission on Collegiate Nursing Education, One DuPont Circle, NW, Suite 530, Washington, DC 20036-1120. (202) 887-6791.

MEMBERSHIP

The Loewenberg School of Nursing holds agency membership in the American Association of Colleges of Nursing, the Southern Council for Collegiate Education in Nursing, and the National League for Nursing.

AFFIRMATIVE ACTION STATEMENT

The University Of Memphis offers equal educational opportunity to all persons without regard to race, religion, sex, creed, color, national origin or disability. The University does not discriminate on these bases in recruitment and admission of students or in the operation of any of its programs and activities, as specified by federal laws and regulations. The designated coordinators for University compliance with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 are the Vice President for Student Affairs and the Equal Employment Compliance Officer. Information in this document will be provided in alternate format upon request.

The University Of Memphis is an Equal Opportunity/Affirmative Action University. It is committed to education of a non-racially identifiable student body.
Message from the Dean

Dear Nursing Students:

Welcome to the Loewenberg School of Nursing at the University of Memphis! Founded in 1912, the University of Memphis is the flagship of the Tennessee Board of Regents system and a place that cultivates you to be *dreamers, thinkers, and doers*.

The Loewenberg School of Nursing (LSON), the finest higher education institute for preparing professional nurses and leaders, has an unbroken record of *academic excellence* in higher education. We believe that academic excellence is achieved through an intellectually energetic environment that challenges, yet supports bright, curious students, and is built on the core values of *caring, diversity, integrity, and leadership*.

Our distinguished faculty, dedicated staff, clinical partners, and alumni are committed to your success. To be successful, you need to *focus, study, and balance*. A myriad of services in the University and the LSON exist to support your learning, promote your wellbeing, and enrich your college life. To become a professional nurse, we provide you with diverse clinical learning experiences that help you master essential knowledge and skills for professional nursing practice across healthcare settings.

The future of nursing rests with those entering the profession. We are dedicated to the advancement of all engaged in the endeavor of educating you to become professional nurses and leaders, and we foresee significant personal and professional growth as outcomes for you, faculty and staff, and our clinical partners. Together, we work with you to make your educational experience challenging, meaningful, and rewarding!

As your Dean, I am here to serve you. I look forward to meeting you in person. I can be reached via email/call/or stop by: *lzhan@memphis.edu*; 901-678-2020; 100 Billy Mac Jones Building, room 102A.

*Go Tigers!*

Lin Zhan, PhD, RN, FAAN  
Dean and Professor
Loewenberg School of Nursing

PHILOSOPHY of NURSING

The faculty of the Loewenberg School of Nursing supports the goals and purposes of The University of Memphis by providing a professional educational program that is based upon a strong foundation in the liberal arts and sciences.

The faculty believe that learning is a lifelong process that involves change as a result of experiences. Faculty are responsible for planning, implementing and evaluating a curriculum that is responsive to the needs of the learner, the profession and a diverse society.

The nursing curriculum has been developed within the shared beliefs of the faculty regarding Person, Environment, Health, and Nursing. The faculty believe that the interactions of these elements are modified by the eight nursing competencies of: assessment and technical skills, communication, critical thinking, caring, teaching, management, leadership, and knowledge integration.

The faculty holds the following beliefs concerning the nursing meta-paradigm:

PERSON

The person is a diverse and complex being. Any form of change that affects an aspect of the person can also affect other aspects which can potentially influence well-being. The person constantly strives to adapt to change in an effort to maintain equilibrium or wellness. Through positive resolution, improved problem solving, and coping skills, the person can function independently with others. From birth to death, the person is socialized to roles in groups including families, communities, and society.

ENVIRONMENT

The environment consists of all elements external to the person. The person and environment continuously interact which results in change. The person’s health is influenced by elements in the environment such as language and culture.

Professional nurses practice in diverse settings in provider and designer, manager of care roles. Advanced practice nurses provide direct primary care and administer the tools of critical thinking and communication to identify and understand the factors within the environment that influence the goals of nursing.

The environment influences the practice of professional and advanced practice nursing. Using critical thinking the professional nurse is able to identify factors within diverse settings and to facilitate the development of more therapeutic environments of care for restoration, rehabilitation and health promotion of clients.

HEALTH

Health is a balanced state of well-being, maintained through adaptation to the environment. The health person functions as an integrated being, maximizing personal potential within the environment. The person’s health is threatened when the ability to adapt fails. This ability is influenced by physical, physiological, psychosocial, cultural, and spiritual factors.

NURSING

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

LOEWENBERG SCHOOL OF NURSING

Mission

To provide accessible and innovative higher learning education by preparing leaders who promote health in the global community through excellent teaching, rigorous research and collaborative practice/service. To fulfill this mission we are committed to:

- Creating a learner-centered educational environment
- Inspiring life-long learning through excellence in teaching
- Shaping practice through innovation and partnerships
- Creating and disseminating knowledge through research and engaged scholarship
- Embracing diversity and cultural competence

Vision

The Loewenberg School of Nursing is creating a center of excellence where education, research/scholarship, practice and partnerships integrate to advance nursing science and to promote health within the global community.

Strategic Goals

- Continue developing innovative and high-quality programs for diverse populations
- Use state-of-the-art technologies to advance education, research and practice
- Build sustainable programs of research and scholarship to advance nursing science
- Forge meaningful partnerships to promote health within the global community

Core Values

Caring is a human state, a moral imperative or ideal, an affect, an interpersonal relationship, and a nursing intervention.

Diversity is embracing the recognition, acceptance, and respect of human differences.

Integrity is acting in accordance with an appropriate professional code of ethics and accepted standards of practice.

Leadership is influencing the actions of individuals and organizations in order to achieve desired goals.

Preparing Leaders, Promoting Health

Approved by LSON Faculty December 2010
GENERAL SERVICES
General Services

Cultural Opportunities

In addition to the many cultural opportunities in Memphis, the University provides concerts, lectures, plays, art exhibits, sports and other student activities.

Student Employment

College work-study is available to financially qualified students through the Office of Financial Aid in Wilder Tower. All nursing students are encouraged to apply for financial aid.

Additionally, after the first semester of nursing study, students may obtain employment as a patient care assistant in any one of the wide variety of clinical settings in the Memphis area.

Students may be employed as nurse externs when they are in senior level nursing courses.

Army, Navy, and Air Force ROTC

Army, Navy, and Air Force ROTC are available for students in the Loewenberg School of Nursing through the Department of Military Science at the U of M (Army), Department of Naval Science (Navy) and the Department of Aerospace (Air Force) Studies. Completion of these programs leads to a commission as an officer in the respective Nurse Corps. Students wishing to take advantage of this opportunity should contact one of these U of M Departments.

Library

The Ned McWherter Library of the University of Memphis serves the faculty and students of the Loewenberg School of Nursing. All students should attend a library orientation prior to beginning nursing coursework. The library houses several indices frequently used by nursing students, including electronic access to the Cumulative Index for Nursing and Allied Health Literature (CINAHL), Medline, OVID, and the Health Reference Center Academic. These databases are available to all students via The U of M McWherter Library web site. To access these databases from off campus, students must have a U of M computer account. Off-campus access requires students to authenticate using their username and password. These can be obtained free of charge through computer services in the Administration Building.

The McWherter Library also is a designated government repository and houses a complete set of government documents. In addition to the books, journals, and documents housed in the McWherter Library, other library resources are available through inter-library loan.

Tiger-Lan Laboratory

There are numerous TigerLAN Computer Labs located across campus. Click here for a list of the labs and the computers.

Email

New students receive an account activation code with their U of M acceptance letter which can be used to create and manage all accounts using the ID Management system.

Management of Personal Account Information

Student may manage their University of Memphis account information through the University’s iAM Account Identity Management system by going to Current Students on the U of M main menu. Directions and information is available through the myMemphis portal.
**Educational Support Program**

Academic assistance with coursework is available through the Education Support Program, which is housed in Mitchell Hall, Room 217, (901) 678-2704. The Educational Support Program offers assistance with study skills, test-taking skills, test anxiety, writing assistance, and individual and group tutoring.

**Psychological Counseling**

Confidential psychological and personal counseling is available without fee to all registered students in Wilder Tower, Room 214, (901) 678-2068. Both individual and group counseling is available.

**Health Center**

The Health Center, located at the corner of De Soto and University, is open from 8:00 a.m. to 4:30 p.m. Monday through Friday and is available to all students of the University. The major emphasis is on the diagnosis and treatment of short-term acute, episodic medical illness on an outpatient basis. All students must present a valid University Identification card except in cases of extreme emergency. The Health Center may provide some health services for pre-admission health requirements when a LSON health form is presented.

**Disability Services**

Disability Resources Services (DRS), located in Wilder Tower, Room 110, (901) 678-2880, provides information and support services that enable students with disabilities to take full advantage of the educational opportunities at The University of Memphis. Specific services are determined individually and are based on functional limitations caused by disability. Reasonable and appropriate accommodations will be provided to students with disabilities that present a memo from Disability Resources Services (DRS). Students who request disability accommodations without a memo will be referred to DRS.
Student Activities

Students in the Loewenberg School of Nursing are encouraged to participate in all campus activities and to become actively involved in campus life.

Student Nurses Association

All students are strongly encouraged to be members of the Loewenberg School of Nursing Student Nurses’ Association (SNA). SNA is the pre-professional organization in Nursing. The chapter at the University of Memphis is a member of the Tennessee Student Nurses' Association and National Student Nurses’ Association. All members receive copies of *Imprint*, the journal of the National Student Nurses’ Association. In addition to campus activities conducted by the SNA, students also select representatives from the LSON SNA chapter as delegates to state, regional, and national conventions each year.

Participation in TSNA and National Student Nurses Association

Students meeting these criteria may be excused from nursing classes to attend TSNA and NSNA conventions:

1) cumulative grade point average of 3.0;
2) permission of the faculty of nursing courses. This permission will only be granted to students making satisfactory progress in courses (85% or higher on all tests and papers).

Sigma Theta Tau International, Beta Theta At-Large Chapter

Sigma Theta Tau International (STTI) is the national honor society for Nursing. Membership is by invitation only and is an honor. Junior and senior baccalaureate and graduate students in Nursing who have demonstrated excellence in their nursing education and who meet STTI eligibility criteria are invited into the honor society. Currently, induction into the local chapter of STTI, Beta Theta At-Large, occurs twice a year. All students are encouraged to attend events sponsored by Sigma Theta Tau, Beta Theta At-Large Chapter as well as regional, national and international Research Symposia of STTI.

Undergraduate Students must:
- have completed ½ of the nursing curriculum;
- have at least a GPA of 3.0 (based on a 4.0 grading scale);
- rank in the upper 35 percentile of the graduating class; and
- display academic integrity.

Registered Nurse Students must:
- have completed 12 credit hours at current school;
- have completed ½ of the nursing curriculum;
- have at least a GPA of 3.0 (based on a 4.0 grading scale);
- rank in the upper 35 percentile of graduating class; and
- display academic integrity.

For second baccalaureate degree students, this grade point average is based on nursing coursework. Please note that the average cumulative grade point average of the U of M nursing graduate is generally a 3.25. Because we can only induct the top 35% of each class, we have a number of students with grade point averages above a 3.0 that we are not able to induct because of the 35% limitation.

Inductions occur twice a year at the end of the fall and spring semesters. Qualification criteria must be met at the beginning of the fall or spring semester to be considered for the invitation to join.
**Composites**

Each graduating class of students in the Loewenberg School of Nursing is recognized by a composite portrait of each student in academic regalia, which permanently hangs in the Loewenberg School of Nursing. All graduating seniors are encouraged to have their composite pictures made. Information about composites is widely posted on all senior student bulletin boards. Composite pictures are made in early October and generally include the fall, spring and summer graduates. Pictures may only be made on the specified date.

**University of Memphis Honors Assembly**

Each Spring Semester, Nursing students are honored at the University of Memphis Honors Assembly. Students receiving awards are encouraged to invite their families to this prestigious University ceremony.

**Loewenberg School of Nursing Alumni Association**

All graduates of the Loewenberg School of Nursing (LSON) are eligible members of the LSON Alumni Association. Alumni meet periodically to plan events for students and alumni.
NURSING FEES
Nursing Fees

Nursing students are assessed the following fees:

Clinical Course Fee

Because of the low student-faculty ratio in all clinical nursing courses, students are assessed a clinical course fee for each practicum course.

Course Management Fee

Students pay an annual fee for online course management services that include portfolio development, procedure tracking, course work management and performance reporting.

Malpractice Insurance

All students are required to have malpractice insurance in effect. Because the School can obtain malpractice insurance using group rates at a less expensive price than can individual students, all non-registered nursing students must pay this fee on an annual basis.

Skills Laboratory Fee

To pay for supplies used in Nursing Skills Laboratories, students are assessed a skills laboratory fee.

Tennessee Professional Assistance Program (TNPAP)

Each unlicensed student will pay a fee to the Tennessee Professional Assistance Program. This fee of $15/year will cover all management and monitoring expenses should the student enter into TNPAP. The money will be collected annually by the bursar and forwarded to TNPAP.

Testing Fee

Students enrolled in nursing theory courses which use an ATI assessment test are assessed a fee for the cost of the test.
Academic Success

It is the desire of the LSON Dean, Faculty, and Staff to support your academic success. A few helpful tips for success in the nursing program are:

- **Review your course syllabus.** The syllabus is your guide for each course. At the beginning of each semester, carefully read your syllabus taking note of course/class outcomes, assignments, exams, and important dates. Check the syllabus prior to each class for required readings and an overview of each day’s assignments. If you have questions about the syllabus, be sure to ask your professor.

- **Be Prepared for class.** One of the most important things you can do to prepare for class is “read”. You should read required content prior to class and familiarize yourself with key terms. Once you finish reading, write down a list of questions to ask in class, highlighting things that are unclear or difficult to understand.

- **Be Prepared for Clinical.** A key factor in clinical preparation is clinical orientation. Therefore, be sure to attend orientation because this is your opportunity to familiarize yourself with the clinical site and ask questions. Arrive at clinical with all your necessary supplies and assignments and most importantly a positive attitude.

- **Study effectively.** You should also review course material following class. Carefully compare class notes to your reading materials and other classmates’ notes. As a general rule of thumb, most professors suggest students spend a minimum of two hours per week studying for each credit hour. The most common reason for course failure is not being able to balance outside employment and study time. Therefore, students with less than a 3.0 cumulative grade point average in nursing courses are strongly discouraged from work or activities that take away from studying.

- **Utilize your resources.** The university and LSON provide many resources to assist students. These can include things such as writing coaches, tutors, disability support services, test taking strategies, counseling, and much more. It is important that you seek assistance when needed and access and utilize the resources available to you.

- **Establish meaningful relationships.** Academic success in nursing is further enhanced through participation in university and school activities with faculty and peers. You are strongly encouraged to actively participate in university and LSON groups and organizations. This provides an opportunity to socialize with peers, relieve stress, improve time management skills, explore diverse interests, and creates a well-rounded educational experience.

(Revised July 2014).
THE BACHELOR OF SCIENCE IN NURSING
The Bachelor of Science in Nursing

The curriculum leading to the Bachelor of Science in Nursing includes 4 years of academic study. Approximately half of the coursework is in the liberal arts and sciences and the remainder in Nursing. All nursing students must complete the General Education Curriculum required for all University of Memphis students.

BSN Program Outcomes

The baccalaureate program prepares the graduate to:
1. Provide safe and high quality nursing care across a continuum of healthcare environments.
2. Use evidenced based research, informatics, and technologies in nursing practice to improve the health of diverse populations.
3. Explore the impact of socio-cultural, economic, legal and political factors that shape healthcare delivery and professional nursing practice.
4. Communicate and collaborate effectively both interprofessionally and intraprofessionally.
5. Implement clinical prevention and health promotion strategies to improve patient health outcomes.
6. Emulate professional values and ethical behaviors in all dimensions of nursing practice.

(Revised 4/2014, Pending CCNE Approval)

Essential Curricular Concepts, Core Nursing Competencies, BSN Nursing Course Outcomes

Curricular Concepts derive from core competencies reflected in Student Outcomes of the BSN Program (numbers indicate relationship to BSN program outcomes).

1) Patient-centered Care-1,2,3,5,6
2) Clinical Judgment and Reasoning-1,2,3
3) Evidence-based Practice-1,2,3
4) Interprofessional Collaboration-1,4,5,7
5) Communication-1,4,5,7
6) Quality and Safety-1,2,3,4,5
7) Health Promotion-1,2,6
8) Cultural Sensitivity and Humanity-1,6,7
9) Professionalism-1,2,5,7
10) Information Management and Patient Care Technology-1,2,3,5

Professional Standards of Nursing Practice and Education

The LSON faculty has adopted the American Association of Colleges of Nursing (AACN) (2008) Essentials of Baccalaureate Education for Professional Nursing Practice as the professional standard for the BSN program at The University of Memphis. The relationship between the LSON program outcomes and the AACN Essentials of Baccalaureate Education for Professional Nursing Practice is displayed in Table 1.
<table>
<thead>
<tr>
<th>AACN Essentials of Baccalaureate Education for Professional Nursing Practice</th>
<th>LSON BSN Program Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Liberal Education for Baccalaureate Generalist Nursing Practice – “A solid base in liberal education provides the cornerstone for the practice and education of nurses”.</td>
<td>1,2,6</td>
</tr>
<tr>
<td>□ Basic Organizational and Systems Leadership for Quality Care and Patient Safety – “Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care”.</td>
<td>1,2,3,4,5,6</td>
</tr>
<tr>
<td>□ Scholarship for Evidence Based Practice – “Professional nursing practice is grounded in the translation of current evidence into practice.”</td>
<td>2,3,4,6</td>
</tr>
<tr>
<td>□ Information Management and Application of Patient Care Technology – “Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care.”</td>
<td>2,3,4,5,6</td>
</tr>
<tr>
<td>□ Healthcare Policy, Finance, and Regulatory Environments – “Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nursing practice.”</td>
<td>1,4,5,6</td>
</tr>
<tr>
<td>□ Interprofessional Communication and Collaboration for improving Patient Health Outcomes – “Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.”</td>
<td>3,4,5,6</td>
</tr>
<tr>
<td>□ Clinical Prevention and Population Health – “Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice”.</td>
<td>2,5,6</td>
</tr>
<tr>
<td>□ Professionalism and Professional Values – “Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to nursing.</td>
<td>1,4,6</td>
</tr>
<tr>
<td>□ Baccalaureate Generalist Nursing Practice – “The baccalaureate-graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments.” and, “The baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.</td>
<td>1,2,4,5,6</td>
</tr>
</tbody>
</table>

(AACN, 2008; Revised 4/2014, Pending CCNE Approval)

*For the purposes of this comparison, the AACN Essentials document has been summarized.

Adopted 12/08
**General Education Curriculum**

The University General Education Program promotes a shared core learning experience for all undergraduate students at the University of Memphis and provides a framework upon which the college major can build. The major purpose of the Program is to provide students the opportunity to acquire tools and develop skills and awareness necessary for completing a college career and assuming the roles of a lifelong learner in today’s society.

The University of Memphis’ General Education Program consists of 41 hours of coursework from a variety of disciplines. Students should consult their advisors on specific General Education Program courses that may be required for the major. Click [here](#) for the General Education Program categories and their approved courses.

**General Education Policy for Second Baccalaureate Degree Students**

All students who hold a baccalaureate degree from a regionally accredited institution of higher education, including The University of Memphis, may earn another bachelor's degree with a different title.

To earn the second bachelor's degree, the student must:

1. Complete any additional college requirements as determined by the office of the dean of the college granting the second baccalaureate degree.
2. Complete all requirements for the major as determined by the department in which the second baccalaureate degree is sought.
3. Complete a minimum of 30 semester hours in residence.
4. Complete the American history as required by Tennessee State Law.
5. Earn a minimum cumulative grade point average of 2.0 and a minimum GPA of 2.0 in all course work taken at The University of Memphis.

**External Requirements for the Baccalaureate Degree**

**Definition:** External requirements are those degree requirements set by the Southern Association of Colleges and Schools (SACS), Tennessee State Law, and the Tennessee Board of Regents (TBR).

a. Twenty-five percent of the credit hours toward the degree must be earned at The University of Memphis, as required by SACS.

b. Students who have not completed one year of American History in high school must complete 6 credit hours of American History or 3 credit hours of American History plus 3 credit hours of Tennessee History in order to satisfy the History General Education requirement.

c. Effective Fall Semester 2004, each institution in the State University and Community College System of Tennessee (The TBR System) will share a common lower-division general education core curriculum of forty-one (41) semester hours for baccalaureate degrees and the Associate of Arts and the Associate of Science degrees. Lower-division means freshman and sophomore courses. The courses comprising the general education curriculum are contained within the following subject categories:
   - Communication 9 hours
   - Humanities / Fine Arts 9 hours (At least one course must be in literature.)
   - Social / Behavioral Sciences 6 hours
   - History 6 hours
   - Natural Sciences 8 hours
   - Mathematics 3 hours

See the [Undergraduate Catalog](#) for complete information on Graduation from the University.
## General Education Requirements

General education requirements for graduation as mandated by the TBR

<table>
<thead>
<tr>
<th>Foundation Courses in Arts/Sciences/Humanities</th>
<th>Essential Knowledge Needed in Nursing</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>English Composition</strong></td>
<td>Introduces, develops, and enhances the student’s ability to communicate effectively using expressive, expository and persuasive writing</td>
</tr>
<tr>
<td>ENGL 1010: English Composition</td>
<td></td>
</tr>
<tr>
<td>ENGL 1020: English Composition and Analysis</td>
<td></td>
</tr>
<tr>
<td><strong>English Literature</strong></td>
<td>Fosters an understanding of past and present human values, social structures and cultures enabling students to better understand human conditions</td>
</tr>
<tr>
<td>ENGL 2201: Literary Heritage or</td>
<td></td>
</tr>
<tr>
<td>ENGL 2202: Literary Heritage: African-American Emphasis</td>
<td></td>
</tr>
<tr>
<td><strong>Social/Behavioral Sciences</strong></td>
<td>Promotes understanding of behavioral, social and cultural differences in the implementation of the nursing process with various and diverse populations</td>
</tr>
<tr>
<td>SOCI 1010: Introduction to Sociology or</td>
<td></td>
</tr>
<tr>
<td>PSYC 1230: General Psychology and</td>
<td></td>
</tr>
<tr>
<td>Plus one from the list of general education requirements</td>
<td></td>
</tr>
<tr>
<td><strong>Math – one of the following:</strong></td>
<td>Serves as a basic math course to assist students with math in the health sciences</td>
</tr>
<tr>
<td>MATH 1420: Foundations of Math II</td>
<td></td>
</tr>
<tr>
<td>MATH 1710: College Algebra</td>
<td></td>
</tr>
<tr>
<td>MATH 1730: College Algebra &amp; Trigonometry</td>
<td></td>
</tr>
<tr>
<td>MATH 1830: Elementary Calculus</td>
<td></td>
</tr>
<tr>
<td>MATH 1910: Calculus I</td>
<td></td>
</tr>
<tr>
<td>MATH 2000: Experiences in Mathematics</td>
<td></td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td>Provides foundational knowledge of nutritional principles that promote a holistic approach to the nursing process</td>
</tr>
<tr>
<td>NUTR 3202: Nutrition for Health Care or</td>
<td></td>
</tr>
<tr>
<td>NUTR 2202: Nutrition</td>
<td></td>
</tr>
<tr>
<td><strong>Math – one of the following:</strong></td>
<td>Provides a foundation for understanding the structure and function of the human body and how it is impacted by the environment</td>
</tr>
<tr>
<td>MATH 1420: Foundations of Math II</td>
<td></td>
</tr>
<tr>
<td>MATH 1710: College Algebra</td>
<td></td>
</tr>
<tr>
<td>MATH 1730: College Algebra &amp; Trigonometry</td>
<td></td>
</tr>
<tr>
<td>MATH 1830: Elementary Calculus</td>
<td></td>
</tr>
<tr>
<td>MATH 1910: Calculus I</td>
<td></td>
</tr>
<tr>
<td>MATH 2000: Experiences in Mathematics</td>
<td></td>
</tr>
<tr>
<td><strong>History</strong></td>
<td>Enhances understanding of historical, social, cultural, economic, and political issues impacting past and present healthcare issues when implementing the nursing process</td>
</tr>
<tr>
<td>Students who have not completed one year of</td>
<td></td>
</tr>
<tr>
<td>American History in high school must complete</td>
<td></td>
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<tr>
<td>6 credit hours of American History or 3 credit</td>
<td></td>
</tr>
<tr>
<td>hours of American History plus 3 credit hours</td>
<td></td>
</tr>
<tr>
<td>of Tennessee History in order to satisfy the</td>
<td></td>
</tr>
<tr>
<td>History General Education requirement.</td>
<td></td>
</tr>
<tr>
<td><strong>Communication</strong></td>
<td>Communication is an essential and integral part of the nursing process</td>
</tr>
<tr>
<td>COMM 2381: Oral Communication</td>
<td></td>
</tr>
<tr>
<td><strong>Humanities</strong></td>
<td>Broadens nursing perspective and worldview by providing a liberal arts foundation</td>
</tr>
<tr>
<td>Humanities Elective (6 hours)</td>
<td></td>
</tr>
<tr>
<td><strong>Statistics – one of the following</strong></td>
<td>Provides a basic understanding of statistical analysis which is the foundation for evidence-based reasoning</td>
</tr>
<tr>
<td>MATH 1530: Intro to Stat. Reasoning &amp; Appl</td>
<td></td>
</tr>
<tr>
<td>SOCI 3311: Social Statistics</td>
<td></td>
</tr>
<tr>
<td>EDPR 4541: Fundamental/Applied Stat Methods</td>
<td></td>
</tr>
<tr>
<td><strong>Electives</strong></td>
<td>Allows for course selection to reflect individual interest</td>
</tr>
<tr>
<td>Upper Division Electives (3 hours)</td>
<td></td>
</tr>
</tbody>
</table>
## Freshman Year

<table>
<thead>
<tr>
<th>Course/Title</th>
<th>Credit</th>
<th>Course/Title</th>
<th>Credit</th>
</tr>
</thead>
<tbody>
<tr>
<td>ENG 1010 English Composition I</td>
<td>3</td>
<td>ENG 1020 English Comp/Analysis</td>
<td>3</td>
</tr>
<tr>
<td>BIOL 2010/2011 Anatomy &amp; Physiology I</td>
<td>4</td>
<td>BIOL 2020/2021 Anatomy &amp; Physiology II</td>
<td>4</td>
</tr>
<tr>
<td>¹History</td>
<td>3</td>
<td>¹Mathematics</td>
<td>3</td>
</tr>
<tr>
<td>¹Humanities</td>
<td>3</td>
<td>¹Humanities</td>
<td>3</td>
</tr>
<tr>
<td>²Social/Behavioral Science</td>
<td>3</td>
<td>¹History</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>16</td>
<td></td>
<td>16</td>
</tr>
</tbody>
</table>

## Sophomore Year

<table>
<thead>
<tr>
<th>Course/Title</th>
<th>Credit</th>
<th>Course/Title</th>
<th>Credit</th>
</tr>
</thead>
<tbody>
<tr>
<td>ENGL 2201 Literary Heritage or NURS 3005 Intro to Professional Nursing</td>
<td>3</td>
<td>NURS 3005 Intro to Professional Nursing Seminar</td>
<td>2</td>
</tr>
<tr>
<td>ENGL 2202 Literary Hert-Afr./American Emphasis</td>
<td>3</td>
<td>NURS 3006 Professional Nursing Seminar</td>
<td>1</td>
</tr>
<tr>
<td>BIOL 1230/1231 Microbiology</td>
<td>4</td>
<td>NURS 3400 Clinical Pathophysiology</td>
<td>3</td>
</tr>
<tr>
<td>NUTR 3202 Nutrition for Health Care (preferred)</td>
<td>3</td>
<td>NURS 3101 Health Assessment</td>
<td>2</td>
</tr>
<tr>
<td>or NUTR 2202 Nutrition</td>
<td>3</td>
<td>NURS 3103 Health Assessment Lab</td>
<td>1</td>
</tr>
<tr>
<td>COMM 2381 Oral Communication</td>
<td>3</td>
<td>NURS 3105 Foundations of Patient-Centered Care</td>
<td>3</td>
</tr>
<tr>
<td>²Social/Behavioral Science</td>
<td>3</td>
<td>NURS 3106 Foundational Nursing Skills</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>16</td>
<td></td>
<td>14</td>
</tr>
</tbody>
</table>

## Junior Year

<table>
<thead>
<tr>
<th>Course/Title</th>
<th>Credit</th>
<th>Course/Title</th>
<th>Credit</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 3000 Pharmacology in Nursing</td>
<td>3</td>
<td>NURS 4110 Evidence-Based Practice in Nursing</td>
<td>3</td>
</tr>
<tr>
<td>NURS 3205 Nursing of the Adult I: Common Health</td>
<td>3</td>
<td>NURS 3217 Nursing of the Childbearing Family</td>
<td>2</td>
</tr>
<tr>
<td>Alterations</td>
<td>3</td>
<td>NURS 3219 Nursing of the Childbearing Family</td>
<td>2</td>
</tr>
<tr>
<td>NURS 3206 Nursing of the Adult I: Common Health</td>
<td>3</td>
<td>NURS 3305 Nursing of the Adult II: Complex</td>
<td>3</td>
</tr>
<tr>
<td>Alterations Practicum</td>
<td>3</td>
<td>Health Alterations</td>
<td>3</td>
</tr>
<tr>
<td>NURS 4127 Community Health Nursing</td>
<td>3</td>
<td>NURS 3306 Nursing of the Adult II: Complex</td>
<td>3</td>
</tr>
<tr>
<td>NURS 4129 Community Health Nursing Practicum</td>
<td>1</td>
<td>Health Alterations Practicum</td>
<td>3</td>
</tr>
<tr>
<td>NURS 3127 Mental Health Nursing</td>
<td>3</td>
<td>Statistics</td>
<td>3</td>
</tr>
<tr>
<td>NURS 3129 Mental Health Nursing Practicum</td>
<td>1</td>
<td></td>
<td>16</td>
</tr>
<tr>
<td></td>
<td>17</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Senior Year

<table>
<thead>
<tr>
<th>Course/Title</th>
<th>Credit</th>
<th>Course/Title</th>
<th>Credit</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 3230 Gerontological Nursing</td>
<td>3</td>
<td>NURS 4205 Transitions into Professional Nursing</td>
<td>4</td>
</tr>
<tr>
<td>NURS 3231 Gerontological Nursing Practicum</td>
<td>3</td>
<td>Practice</td>
<td>4</td>
</tr>
<tr>
<td>NURS 3227 Pediatric Nursing</td>
<td>2</td>
<td>NURS 4206 Transitions into Professional Nursing</td>
<td>8</td>
</tr>
<tr>
<td>NURS 3229 Pediatric Nursing Practicum</td>
<td>2</td>
<td>Practice</td>
<td>8</td>
</tr>
<tr>
<td>Upper Division Elective (Nursing or non-Nursing)</td>
<td>3</td>
<td></td>
<td>12</td>
</tr>
</tbody>
</table>

¹ Refer to the *Bulletin of The U of M. Undergraduate General Education*
² Take PSYC 1030 (General Psychology) or SOCI 1111 (Introduction to Psychology)
Matrix of Outcomes for the BSN Program by Level

The overall program outcomes for the BSN program are leveled throughout the three levels of the program. Level I outcomes are met in the Provider of Care Courses in the sophomore year, Level II outcomes in Designer/Manager/Coordinator of Care Courses in the junior year, and Level III outcomes in the Member of Profession Courses in the senior year.

Level I Courses: NURS 3005, 3006, 3400, 3101, 3103, 3105, 3106
Level II Courses: NURS 3000, 3205, 3206, 4127, 4129, 3127, 3129, 4110, 3217, 3219, 3305, 3306
Level III Courses: NURS 3230, 3231, 3227, 3229, 4205, 4206

Matrix of LSON BSN student outcomes by level

Upon successful completion of the BSN program, graduates will:

1. Provide safe and high quality nursing care across a continuum of healthcare environments.

<table>
<thead>
<tr>
<th>Level I - Provider of Care</th>
<th>Level II - Designer/Manager/Coordinator of Care</th>
<th>Level III – Member of Profession</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apply principles of safe patient care</td>
<td>Adapt basic principles of safety to selected patient populations</td>
<td>Collaborate with the healthcare team to provide care to all patient populations</td>
</tr>
</tbody>
</table>

2. Use evidenced based research, informatics, and technologies in nursing practice to improve the health of diverse populations.

<table>
<thead>
<tr>
<th>Level I - Provider of Care</th>
<th>Level II - Designer/Manager/Coordinator of Care</th>
<th>Level III – Member of Profession</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify resource for evidence based practice</td>
<td>Investigate scientific evidence used to support best practice Use advanced clinical technologies in the</td>
<td>Integrate scientific evidence into practice Coordinate the use of various technologies in directing patient care</td>
</tr>
</tbody>
</table>

3. Explore the impact of socio-cultural, economic, legal and political factors that shape healthcare delivery and professional nursing practice.

<table>
<thead>
<tr>
<th>Level I - Provider of Care</th>
<th>Level II - Designer/Manager/Coordinator of Care</th>
<th>Level III – Member of Profession</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify the relationship of healthcare policies to practice standards</td>
<td>Articulate the relationship between social determinants of health, patient care and health policy</td>
<td>Advocate for health policy changes to positively impact health care and the profession</td>
</tr>
</tbody>
</table>
4. Communicate and collaborate effectively both inter-professionally and intra-professionally.  

<table>
<thead>
<tr>
<th>Level I - Provider of Care</th>
<th>Level II - Designer/Manager/Coordinator of Care</th>
<th>Level III – Member of Profession</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use therapeutic communication in the provision of care</td>
<td>Collaborate effectively with members of the healthcare team</td>
<td>Facilitate inter-professional and intra-professional communication</td>
</tr>
</tbody>
</table>

5. Implement clinical prevention and health promotion strategies to improve patient health outcomes.  

<table>
<thead>
<tr>
<th>Level I - Provider of Care</th>
<th>Level II - Designer/Manager/Coordinator of Care</th>
<th>Level III – Member of Profession</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify risks for health disparities</td>
<td>Reduce risk and prevent disease in diverse populations</td>
<td>Promote health and reduce health disparities</td>
</tr>
</tbody>
</table>

6. Emulate professional values and ethical behaviors in all dimensions of nursing practice.  

<table>
<thead>
<tr>
<th>Level I - Provider of Care</th>
<th>Level II - Designer/Manager/Coordinator of Care</th>
<th>Level III – Member of Profession</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clarify personal values and ethics as they relate to professional nursing practice</td>
<td>Provide care within an ethical and value based framework</td>
<td>Resolve ethical dilemmas associated with patient care situations</td>
</tr>
</tbody>
</table>

(Revised 4/2014, Pending CCNE Approval)
<table>
<thead>
<tr>
<th>Expected Competencies</th>
<th>NURS 3005</th>
<th>NURS 3006</th>
<th>NURS 3101</th>
<th>NURS 3105</th>
<th>NURS 3106</th>
<th>NURS 3000</th>
<th>NURS 3205</th>
<th>NURS 4127</th>
<th>NURS 3127</th>
<th>NURS 3129</th>
<th>NURS 4110</th>
<th>NURS 3217</th>
<th>NURS 3219</th>
<th>NURS 3230</th>
<th>NURS 3231</th>
<th>NURS 3227</th>
<th>NURS 3229</th>
<th>NURS 4205</th>
<th>NURS 4206</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Liberal Education for Baccalaureate Generalist Nursing Practice</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>II. Basic Organizational &amp; Systems Leadership for Quality Care &amp; Patient Safety</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<td>III. Scholarship for Evidence-Based Practice</td>
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<td>IV. Information Management &amp; Application of Patient Care Technology</td>
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<td>V. Healthcare Policy, Finance, &amp; Regulatory Environments</td>
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<td>VI. Interprofessional Communication and Collaboration for Improving Patient Health Outcomes</td>
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<td>VII. Clinical Prevention &amp; Population Health</td>
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<td>VIII. Professionalism &amp; Professional Values</td>
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<td>IX. Baccalaureate Generalist Nursing Practice</td>
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Clinical Course Competencies: Core

At the end of the clinical rotation, the student will be able to perform the following competencies and related critical elements:

1. Patient-centered Care
   Care that is compassionate and based on respect for the patient’s preferences, values, age, culture and needs. The patient is recognized as a full partner in the provision of this care. (Cronenwett, et al., 2007; Massachusetts Department of Higher Education, 2010).

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<td>Accurately and efficiently performs patient assessments with minimal instructor cues and reports changes from patient baseline. Able to interpret findings with minimal assistance. Identiﬁes patient learning needs. Formulates patient teaching plan correctly with occasional cues. Implements teaching plan correctly. Respects the rights of patients and family.</td>
<td>Using assessment tool accurately performs patient assessment; identiﬁes and reports only obvious changes from pt. baseline; Needs assistance in interpreting ﬁndings. Identiﬁes patient learning needs. Formulates basic patient teaching plan with frequent cues. Does not implement the plan when opportunity is available.</td>
<td>Unable to perform patient assessments at course level accurately and on time. Fails to identify/report physical and/or psychosocial changes from patient’s baseline while performing nursing assessments. Omits signiﬁcant clinical ﬁndings. Unable to identify basic patient learning needs. Unprepared to teach patient. Does not respect the rights of patients and family.</td>
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2. Evidence-based Practice
   Identification, evaluation, and integration of the best current evidence with clinical expertise and consideration of patient/family preferences and values for the delivery of optimal health care (Cronenwett, et al., 2007; Massachusetts Department of Higher Education, 2010).

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<td>Integrates best research evidence with clinical circumstances and patient’s values in clinical decision-making. Identifies clinical questions in the course of patient care activities. Articulates EBP skills independently.</td>
<td>Integrates best research evidence with clinical circumstances and patient’s values in clinical decision-making. Needs frequent cues to identify clinical questions in the course of patient care activities. Articulates EBP skills with assistance.</td>
<td>Unable to integrate best research evidence with clinical circumstances and patient’s values in clinical decision-making. Unable to identify clinical questions in the course of patient care activities. Unable to articulate EBP skills.</td>
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3. **Interprofessional Collaboration**
Cooperation across interdisciplinary healthcare professions which fosters open communication, mutual respect, shared decision-making, and team learning to ensure care that is reliable and continuous (Institute of Medicine, 2003; Massachusetts Department of Higher Education, 2010).

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<td>Able to identify management responsibilities of nurses on the clinical unit. Able to distinguish between functions requiring a registered nurse and functions that can be delegated. Correctly incorporates other health care workers into patient care. Collaborates with medical provider in the management of patient care.</td>
<td>Needs frequent cues to identify management responsibilities of nurses on the clinical unit. Needs occasional cues to distinguish between functions requiring a registered nurse and functions which can be delegated. Needs to be reminded to report findings to the medical provider.</td>
<td>Unable to distinguish between functions requiring a registered nurse and functions that can be delegated. Unable to share responsibility with the assigned nurse. Unable to communicate effectively with the medical provider.</td>
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4. **Communication**
Effective interaction with patients, families, and colleagues, which fosters mutual respect and shared decision-making, and promotes patient understanding, satisfaction, and positive health outcomes (Massachusetts Department of Higher Education, 2010).

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<td>Demonstrates therapeutic communication skills with patients to obtain data. Reports patient data to appropriate health care providers and faculty using accepted terminology.</td>
<td>Demonstrates minimal listening and communication skills to obtain data. Needs frequent cues to report patient data to appropriate health care providers and faculty.</td>
<td>Unable to effectively communicate with patients, peers, faculty and other health care providers. Fails to report relevant patient data to appropriate health care providers and faculty.</td>
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5. **Human Diversity and Cultural Sensitivity**
Actions which convey sensitivity and appreciation for the diversity of another, leading to the ability to work effectively with diverse groups and communities with a detailed awareness, specific knowledge, refined skills, and personal and professional respect for cultural attributes, to include differences and similarities (Giger et al., 2007; Suh, 2004).

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<td>Shows respect for others’ culture and values. Shows kindness or compassion for others.</td>
<td>Needs reminder to respect others’ culture and values. Needs reminder about importance of kindness or compassion for others.</td>
<td>Shows disrespect for others’ values and cultures. Lack of kindness or compassion for others.</td>
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6. Health Promotion
The process of advocacy and mediation, enabling individuals to have increased control over health determinants. Activities and interventions which facilitate behavioral, social, and environmental changes conducive to the achievement of health-related goals in individuals, families, communities, and populations (U.S. Department of Health and Human Services, 2000; World Health Organization, 1998).

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<td>Implements plan of care for patients that promote positive health outcomes. Sets priorities with minimal assistance. Teaches health promotion, disease prevention, and risk reduction strategies as indicated.</td>
<td>Establishes plan of care that promotes positive health outcomes for patients with frequent cues after mid-term. Has difficulty setting priorities and establishing health related goals.</td>
<td>Unable to formulate appropriate plan of care; fails to evaluate or modify plan of care. Fails to complete plan of care. Cannot set priorities.</td>
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7. Information Management and Patient Care Technology
Use of information and technology to communicate, manage knowledge, mitigate error, and support decision-making throughout the processes associated with delivering care (Quality and Safety Education for Nursing, 2007)

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<td>Documents patient data for patients on required forms according to agency policy after second week. Documents appropriate patient data in a timely and accurate manner. Uses relevant resources in the collection of data. Analyzes patient and community data in planning and executing patient care. Uses specialty-based technical skills/therapeutic interventions for diagnosis &amp; treatment of health problems (see course specific technical skills checklist). Interprets laboratory/diagnostic test data in the management of patient’s condition.</td>
<td>Documents minimal patient data on required forms according to agency policy for patients. Needs cues to document appropriate patient data in a timely and accurate manner with several cues. Uses relevant resources in the collection of data with cues. Analyzes patient and community data in planning and executing patient care with cues Uses specialty-based technical skills/therapeutic interventions for diagnosis &amp; treatment of health problems (see course specific technical skills checklist) with cues. Interprets laboratory/diagnostic test data in the management of patient’s condition with cues</td>
<td>Unable to document patient progression and assessment correctly on flow sheet. Charting not completed in a timely manner. Patient documentation contains faulty and/or inaccurate data. Unable to demonstrate proper use of written and spoken English language. Unable to use relevant resources in the collection of data. Unable to analyze patient and community data in planning and executing patient care. Unable to use specialty-based technical skills/therapeutic interventions for diagnosis &amp; treatment of health problems (see course specific technical skills checklist). Unable to interpret laboratory/diagnostic test data in the management of patient’s condition.</td>
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8. Professionalism
Pervasive dedication to and demonstration of accountability for the fundamental and inherent values of altruism, autonomy, human dignity, integrity, and social justice in the delivery of care that is consistent with legal, ethical, and regulatory standards (American Association of Colleges of Nursing, 2008; Massachusetts Department of Higher Education, 2010).

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<td>Adheres to LSON and agency policies/procedures regarding ethical behavior, patient confidentiality, dress and punctuality. Regularly takes advantage of learning opportunities and appropriately seeks feedback from instructor, staff. Is a patient advocate. Follows HIPPA regulations.</td>
<td>Requires cues to adhere to school/agency policies and principles regarding ethical behavior, patient confidentiality, dress and punctuality (first offense). Needs reminder to follow HIPPA regulations (once)</td>
<td>Fails to maintain patient confidentiality. Falsifies entries in health care records. Displays negativism, complains chronically, and avoids learning opportunities. Fails to adhere to LSON and agency policies/procedures. Unsatisfactory use of supervision. Any behavior, which jeopardizes safety of patient, self, or others. Unexcused absence, unreported absence, and repeated lateness. Repeated HIPPA violations Unsatisfactory, plagiarized or late assignments.</td>
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9. Safety and Quality
Actions and interventions which minimize risk of harm to patients and providers through system effectiveness and individual performance. The use of data to monitor the outcomes of care processes, and the implementation of improvement methods to continuously enhance the quality and safety of health care (Cronenwett, et al., 2007; Massachusetts Department of Higher Education, 2010).

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<td>Performs previously learned skills in a timely manner. Accurate verbalization of new skill/procedure and performs new skills with assistance. Collects all equipment and supplies, implements proper nursing interventions prior to performing skills. Applies theory to the clinical situation</td>
<td>Needs assistance to perform previously learned skills on time, accurately, safely. Occasionally skips steps. Accurate verbalization of skill/procedure with occasional cues. Needs cuing to apply theory to the clinical situation. Disorganized when setting up for procedures.</td>
<td>Unable to perform previously learned skills accurately. Poor organization when performing skill. Unable to verbalize skill steps; unsafe skill procedure; excessive anxiety. Unable to apply theory content to the clinical setting.</td>
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10. Clinical Reasoning and Judgment

The process of assimilating information and analyzing data regarding clinical situations and changes in patient condition, leading to decision-making based on the evidence, meaning, and outcomes achieved (Benner, Sutphen, Leonard-Kahn & Day, 2008; Pesut, 2001).

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Academic Policies for BSN Students

Academic Integrity

Students enrolled in the Undergraduate Program of the University of Memphis are expected to abide by the Code of Student Rights and Responsibilities of the University. This includes being knowledgeable about the kinds of behaviors that constitute Academic Misconduct as delineated by the University of Memphis Office of Student Conduct.

Students are expected to avoid any appearance of impropriety related to academic conduct. Specifically, students are to avoid receiving or giving any information related to quizzes or examinations. Any student, who comes into possession of any suspect materials, such as unauthorized tests, quizzes, or test/quiz questions, including study guides, will be subject to the consequences of academic misconduct. LSON students are expected to adhere to the University of Memphis Code of Student Rights and Responsibilities.

Academic Misconduct

Academic Misconduct consists of plagiarism, cheating, and fabrication and is defined by the University as:

1. **Plagiarism.** The adoption or reproduction of ideas, words, statements, images, or works of another person as one’s own without proper attribution,
2. **Cheating.** Using or attempting to use unauthorized materials, information, or aids in any academic exercise or test/examination. The term academic exercise includes all forms of work submitted for credit or hours,
3. **Fabrication.** Unauthorized falsification or invention of any information or citation in an academic exercise (University of Memphis, Code of Students Rights and Responsibilities, p. 13)

All writing submitted to any class should be the student’s original work. When using ideas and/or words from other persons, the student must reference them in the appropriate format. Anything less constitutes plagiarism.

The LSON faculty will not tolerate any form of plagiarism, cheating, fabrication or other types of academic dishonesty and are obligated to take serious actions through University channels in these circumstances as (University of Memphis, Office of Student Conduct Code of Students Rights and Responsibility).

Academic misconduct is harmful to the community of nursing and is a serious allegation that is not made frivolously. Other examples/types of academic misconduct include but are not limited to:

- Falsification of any patient record and/or the recording of nursing care that was not provided will result in an immediate failure of the nursing course.
- Any issue of academic misconduct or dishonesty in application to the nursing program, in the preparation of papers or projects, in any coursework, and/or in any clinical practicum may result in failure of the course and dismissal from the program.
- Any deliberate action that is designed to harm another student’s progress or course of study in nursing is an act of academic misconduct.
- Any student who tampers with the academic records, tests, projects, or a paper of another student has committed a serious act of academic misconduct.
- Any deliberate action (either of omission or commission) concerning the misrepresentation of licensure or certification or of courses completed will be considered a serious act of academic misconduct and may result in dismissal from the program.
As described in The University of Memphis, *Code of Student Rights and Responsibilities*, faculty members who have good cause to believe that a student has engaged in academic misconduct can either a) refer the student to the Academic Integrity Committee (p. 7) or exercise summary discipline (i.e., lowering the student's grade in the course, assignment, or examination affected by the alleged academic misconduct up to and including giving a grade of "F" for the course.

The term “cheating” includes, but is not limited to:
1. using any unauthorized assistance in taking quizzes or tests,
2. using sources beyond those authorized by the instructor in writing papers preparing reports, solving problems, or completing other assignments,
3. acquiring tests or other academic material before such material is revealed or distributed by the instructor,
4. misrepresenting papers, reports, assignments or other materials as the product of a student’s sole independent effort,
5. failing to abide by the instructions of a proctor concerning test-taking procedures,
6. influencing, or attempting to influence, a University employee in order to affect a student’s grade or evaluation, and
7. misusing forging, or altering University documents or possessing unauthorized documents.

The term “plagiarism” includes, but is not limited to, the use, by paraphrase or direct quotation, of the published or unpublished work of another person without full or clear acknowledgement. It also includes the unacknowledged use of materials prepared by another person or agency engaged in the selling of term papers or other academic materials. Click here for specific information about plagiarism and other forms of academic misconduct.

**Academic Program and Advisement**

**Academic Advisor**
All students are required to be advised on academic progression by the LSON Academic Advisor according to the University advising calendar. The Academic Advisor collaborates with the Assistant Dean for Student Affairs and Associate Dean for Academic Affairs to recommend any change in support of student success.

**Faculty Advisor**
All students are assigned to a Faculty Advisor, who advises on student academic performance. The faculty advisor serves as mentors to students in course content areas and identifies student learning needs. The faculty advisor works with the student for career development, lifelong learning, and workable strategies to enable students to succeed in the nursing profession.

**BSN Advising Site**
Important information and announcements are communicated via the eCourseware BSN Advising site located under my courses in eCourseware. The BSN advising site serves as a means of communication between the Academic Advisor, Academic Services Coordinator, faculty, and students. Students are held responsible for all posted materials (Adopted 3/09).

**LSON Honors Program Guidelines**
Students must contract with professors for an Honors Course designation. Students must select a topic of nursing importance that can be explored, developed and synthesized across the nursing curriculum. A designated LSON faculty coordinator will guide the student in this process.

Student responsibilities:
- Complete the University of Memphis Honors Course Contract. The contract must legible (type written preferred).
- Meet with the course professor as soon as possible during the first week of the semester to discuss assignments. Deadline for the completed contract is the 2nd Friday of the semester. (The contract to the University is due the 3rd Friday of the semester.)
- Develop an Honors Program Portfolio to include: previous contracts, examples of projects, documentation of work.
Maintain a portfolio and present to course professor during contract discussions and project evaluation.
Present a synthesis of course work during the final semester prior to graduation. (Revised 2/14)

BSN CLINICAL NURSING COURSE REQUIREMENTS:

Required Nursing Program Documents

Upon acceptance to LSON, students will receive a “Required Nursing Program Documents” packet. Items will need to be completed as directed to receive any nursing permits. No student will be allowed to participate in clinical learning experiences until these requirements are satisfied. Immunizations, background check and urine drug screen must be current through the entire semester student is enrolled in a practicum.

- Health Examination form
- Health Verification form
- Proof of Current Immunizations
  - Measles, Mumps, Rubella (MMR): Evidence of 2 doses of MMR, 4 weeks apart or documentation of positive titers
  - Tetanus, diphtheria, pertussis: A current Tdap vaccination within past 10 years
  - Polio-evidence of childhood immunization or a positive antibody test
  - Hepatitis B (Heptavax): Three dose series (dose #1, dose #2 in 1 month, #3 in 5 months after dose #2 (any dosing outside of this schedule requires titer showing immunity) or signed waiver.
  - Varicella (chickenpox): Evidence of a positive varicella titer (date and result), documented history or disease or verification of vaccine series (two). If titer is negative or equivalent, documentation of two varicella vaccines given no less than four to eight weeks apart is required.
  - PPD (TB skin test): An annual negative PPD test for tuberculosis or the statement from a health care provider attesting to a negative tuberculosis status.
  - Influenza vaccine-1 dose of influenza vaccine annually (complete and provide documentation September through December) or physician documentation of allergy to chicken, eggs or feathers.

- CPR certification Obtain Basic Life Support for Healthcare Provider certification as offered through American Heart Association. Online CPR certification or re-certification is not accepted. Students submit a copy of the front and back of the certification card
- Signed Authorization for Release of Student Information and Acknowledgement
- Signed Hepatitis B Waiver (required if declines Hepatitis B immunization)
- Criminal Background Check Results from approved vendor
- Student Signature Form
- Malpractice Insurance-Professional liability insurance with a minimum of $1,000,000 per occurrence/$5,000,000 per aggregate. This is purchased by the Loewenberg School of Nursing for students when the malpractice fee is paid to the University.
- Urine Drug Screen by approved vendor completed by student as directed 30 days prior to clinical placement.

Any student out of programing for a semester or more may be required to complete additional background check and/or urine drug screening upon their return. Students sitting out due to pregnancy or illness will be required to submit authorization from their healthcare provider for returning to clinical practice.

Students must complete and comply with all of these requirements during the semester prior to their anticipated enrollment. No student will be allowed to participate in clinical learning experiences until these requirements are satisfied.

General Education Coursework

Any general education courses not completed prior to beginning nursing coursework must be taken in the summer or only as approved by the faculty advisor.

Progression in the Nursing Major

1. All students must complete the nursing major (5-semester program) within 4 years. If a student withdraws from a course(s) or is not enrolled for a semester, s/he is under the same time line for nursing
2. A nursing course may only be entered twice. A maximum of one nursing course may be repeated.

3. A minimum grade of “C” must be earned in each nursing course to progress. Failure to earn a minimum grade of “C” will require repeating the course before taking other nursing courses.

4. When the theory or clinical course sequence must be repeated, the companion course must also be repeated even though a satisfactory grade has been earned.

5. Students not enrolled in nursing courses for two consecutive semesters (fall/spring; spring/fall) must reapply for LSON admission. There are no automatic readmissions. Re-enrollment is on a space-available basis. (Revised 2/2014)

Irregular Progression in the Nursing Major

Students who fail a nursing course or withdraw from a nursing course are considered in Irregular Progression. Irregular Progression students are required to complete the nursing major within 4 years.

Disqualification from the Nursing Major:

1. Failure to earn a minimum grade of “C” or “S” (clinical) when repeating a nursing course.

2. Failure to earn a “C” or “S” (clinical) in two nursing courses.

3. Professional/academic misconduct or dishonesty. (Refer to the University of Memphis’ Code of Student Rights and Responsibilities)

4. Falsification of any academic/medical/nursing records or misrepresentation of nursing care or credentials.

5. Clinical practice that places patients in physical or emotional jeopardy after the student is taught otherwise.

6. Failure to adhere to LSON substance abuse policy.

Notification of Dismissal

A student who is dismissed from a LSON nursing program is notified by email and certified U.S. Mail from the LSON Associate Dean for Academic Affairs. The dismissed student may appeal to the LSON Progression Committee led by the LSON Assistant Dean for Student Affairs.

Dismissal Appeal Process

A student has the right to appeal dismissal from the nursing program. Formal appeals are heard by the LSON Progressions Committee. The committee is chaired by the LSON Assistant Dean for Student Affairs, and includes a minimum of two faculty from the undergraduate program, and two faculty from the graduate program without direct responsibility for the student’s coursework that led to the dismissal. Requests must be submitted in writing by official university email (memphis.edu) to the LSON Assistant Dean for Student Affairs. The request must be received within (5) days of official notification of dismissal. In addition, written approval for individuals or legal representatives who are invited to attend the appeal by the student must be received by the LSON Assistant Dean for Student Affairs five (5) business days prior to the appeal hearing.

Following the appeal hearing, the committee will send a recommendation along with supporting documentation to the LSON Dean who makes the decision. The LSON Dean will then notify the student of the final decision. If the dismissal is still in dispute, the student may submit an appeal to the Vice Provost for Innovation and Support Services.
**Withdrawal from Nursing Courses**
The LSON follows the University of Memphis withdrawal policy from courses. Withdrawal from courses should be discussed with the Academic Advisor and/or the Associate Dean for clear understanding of program progression implications including 4 year requirement for program completion and a nursing course can only be entered twice.

**Late/Retroactive Withdrawal**
A late or retroactive withdrawal after the published university “drop date” will only be granted in cases where there are documented significant emergency or extreme circumstances that are beyond the student’s control, unforeseeable, and severe. Refer to University Office of the Registrar policy on [http://www.memphis.edu/registrar/student/records/withdraw.htm](http://www.memphis.edu/registrar/student/records/withdraw.htm).

Students need to meet with the Associate Dean for Academic Affairs as soon as possible following the significant emergency or extreme circumstance to discuss the possibility for a late/retroactive withdrawal. It is the responsibility of the student to document the nature and effect of the extreme circumstance, including actions to avoid withdrawal, such as meetings with university support services. Students are advised that the late/retroactive withdrawal policy is not intended for students to avoid poor grades.

**LSON Intercampus Transfer Guidelines**
The Loewenberg School of Nursing five semester traditional BSN program is offered at both the Memphis and Lambuth campuses. Students are admitted twice yearly in the Fall and Spring semesters to a home campus where they attend didactic courses; clinical courses are taught at institutions in their respective communities.

Students are strongly encouraged to complete the nursing program at their home campus, as student-faculty relationships are important for student success. In addition, each campus contracts with institutions in their respective community for clinical education. Because student credentialing and orientation at clinical settings is a lengthy and time-sensitive process, transferring between campuses can potentially affect timeliness of course completion and/or progression. Students wishing to transfer to another campus are to submit a formal request to the Assistant Dean, Student Affairs as soon as they become aware of the need for transfer. The Assistant Dean, Student Affairs, the Associate Dean, Academic Affairs and the BSN Director and Coordinator for the Lambuth campus will review requests together with didactic and clinical course seat availability at both campuses. Students will be notified by the Assistant Dean, Student Affairs within two (2) weeks of the request.

**Accelerated BSN Program Option Requirements**
The Accelerated BSN Program Option requires that students enroll in three junior level clinicals during the second semester of the nursing major. Requirements for enrollment in these three clinical courses are:

1. A 3.00 cumulative grade point average
2. A grade of “B” or better in all foundation courses without having repeated any courses.

Accelerated BSN students who do not meet these requirements will move to the Basic BSN Program. Accelerated BSN students who earn less than a “C” grade or an “Unsatisfactory” in a practicum course will not proceed in the Accelerated Track but placed in the Basic BSN Program in which all progression and irregular progression policies apply.

**Summer School**
1. There is no guarantee for the summer school due to the availability of faculty, clinical sites, and adequate student enrollment.
2. The summer school offers 3rd, 4th, and 5th semesters’ courses in nursing.
3. Students must have all general education courses completed in order to enroll in the nursing courses offered during summer session.

4. Students with the highest grade point averages are given priority for summer school enrollment. The intensive nature of summer classroom and clinical coursework indicates that students with less than a “B” average in nursing coursework should not attempt these concentrated, highly intensive courses.

**Children on Campus**

The University of Memphis campus grounds and infrastructure are designed to provide an environment conducive to academic and occupational activities performed by students and employees. For reasons that include safety as well as disruption of academic pursuits, operations, and services, the University cannot routinely accommodate minor children in campus workplaces, classrooms, or unsupervised circumstances on campus. At the same time, the University desires to encourage safe, supervised campus visitations by young people for the purposes of making decisions about their academic future; attending music classes, educational, cultural, or sporting events and camps; and authorized use of certain facilities such as the Campus Recreation Center.

Due to safety and health hazards, some areas are totally off limits to children, regardless of supervision by a responsible adult. These areas include, but are not limited to: student computer labs; teaching laboratories where chemicals are present; the fountain on the Student Activities Plaza (see Policy UM1645 for complete list of locations.)

**Classroom and Didactic Course Expectations**

**Presence in Classrooms**

Presence in classrooms is restricted to properly enrolled students or visitors with legitimate purpose, who may be adults or minors. Instructors of record are responsible for ensuring that individuals who attend their classes are properly enrolled or have been invited for the purpose of making special announcements, guest lecturing, or another authorized reason. Instructors are also responsible for addressing situations when unauthorized children attend their classes.

The Child Development Center is designed to meet the needs of student-parents at the University by providing low cost quality childcare for children ages 30 months to 12 years.

**Attendance**

Class attendance are required or determined by the faculty of each course. Each individual course syllabus has specific policies and procedures that must be followed.

According to university policy, students who do not attend classes in the first weeks of class will be administratively dropped from the class. Accordingly, any subsequent changes that must be made in financial aid awards will be done. The official University of Memphis Attendance policy is located in the U of M Undergraduate Catalog.

**Class Specific Policies and Procedures**

Each individual course syllabus has specific policies and procedures that must be followed.

**Recording of Class or Lecture**

Students should request permission from the instructor to audio or video-tape classroom lectures.

**Disruptive Classroom Behaviors**

In accordance with The University of Memphis Office of Student Conduct, the following behaviors have been defined as disruptive to an optimal classroom learning environment and will not be tolerated in the LSON. Consequences of for classroom misconduct are found in the University of Memphis Code of Student Rights and Responsibilities.

Usage of Electronic Devices

• Using cellular phones, text messaging, iPods, MP3 players, etc. while class is in session. **Note:** Students may use laptop computers in class when given permission by the instructor.
Unexcused exits
- Leaving to retrieve a soda or other snack items
- Leaving to engage in a conversation (i.e. person-to-person or by phone)
- Leaving before class is finished for any reason without prior permission from the instructor

Non-Permitted Communication during Classroom Instruction
- Talking while the instructor is talking
- Talking before being recognized by the instructor (i.e. blurt out information)
- Talking without permission during classroom instruction (i.e. side conversations with an individual or in a group)
- Mimicking and/or consistently repeating an instructor’s words

Personal Attacks
- Engaging in abusive or mean-spirited criticism of another student or an instructor
- Questioning an instructor’s authority in front of the class
- Continuing to insist on speaking with an instructor during classroom instruction
- Telling an instructor to “shut-up”

Threatening Behaviors
- Verbally abusing an instructor or student (i.e. cursing or extremely loud talking directed at a particular person)
- Threatening to physically harm an instructor or student through verbal or body gestures
- Intimidating through body gestures and/or posture or persistent staring at an instructor or student

Overt Inattentiveness
- Sleeping in class
- Preventing others from concentrating on classroom instruction
- Reading a newspaper, doing homework from another class, etc.

Other Distracting Behaviors
- Arriving late to class, especially on test dates
- Persistent Tardiness
- Creating excessive noise from packing up before class has ended
- Dressing inappropriately as to cause other students or instructor to be distracted (i.e. wearing pajamas, indecent exposure, or offensive words on clothing)

Clinical Practicum

Clinical Placement
Students are randomly assigned to clinical placements. To accommodate the number of students for placement at the various practice sites, practicum assignments may be day, evening, and/or weekend with varying hours. Students may not contact Clinical Placement Coordinator for any change in practicum assignments except when assigned to a clinical area where employed, which is NOT allowed. Transportation to the practicum sites is the responsibility of the student (Adopted 3/09, revised 7/14).

Clinical/Lab Attendance Policy
Class attendance is a contract between faculty and students. It is expected that a student will attend classes regularly and give the faculty a reason for any absence. Students are expected to be on time for class. If attendance sheets are required by the faculty, the student is responsible for signing the daily attendance sheet.

Students are responsible for achieving all the objectives for content and learning activities missed. Failure to attend class regularly can affect students' grades and financial aid. Specific attendance requirements may be required by faculty for some classes and students are expected to follow them.

Clinical attendance, including skills/simulation lab, is mandatory. Students are expected to participate in all clinical experiences at the scheduled times. In the event of an unplanned extreme circumstance or illness, a student must notify the faculty or designated representative at the clinical site by TELEPHONE before the beginning of the clinical experience or no later than 24 hours following the scheduled clinical missed. Faculty may request documentation.
substantiating absence to determine whether the clinical absence is excused. A student who fails to notify faculty of an unplanned absence is considered a **no call/no show, which results in an immediate course failure.**

The student who arrives at his/her clinical setting with symptoms of illness may be excused by the faculty or preceptor, resulting in an excused clinical absence. Faculty may request medical certification of the health status of the student on the student's return. Excused absences may be made up at the discretion of the faculty.

Students are expected to arrive on-time at the clinical site prepared to deliver safe and effective nursing care. A student who comes unprepared for his/her clinical assignment will not be permitted to participate in the scheduled clinical experience and will be considered absent (unexcused). The student will receive an assigned grade of **Unsatisfactory** for the clinical day. **Two unexcused clinical absences will result in failure of the course.** Following any absence the student is responsible for demonstrating the achievement of clinical objectives with the validation and evaluation of the nursing faculty prior to the next clinical/lab.

If the total number of clinical absences (excused and unexcused) exceeds 20% of the clinical time, this may result in the student receiving an unsatisfactory course grade. *(Revised 11/14)*

**Clinical Tardy**

Students are expected to be on the clinical unit or clinical site and ready for report or begin the clinical day at the **specified time for the unit or site location.** Any student who arrives 1-29 minutes after the start of the clinical day is tardy. Any student who arrives 30 minutes or more after the start of the clinical day is considered absent for the day (Clinical/Lab Absence Policy will apply).

**Unsatisfactory Clinical Course Grade Prevents Clinical Course Withdrawal**

Students who earn a grade of “Unsatisfactory” in a clinical practicum course during the semester may not withdraw from the course. Any course withdrawal completed under this circumstance will be administratively reversed at the end of the semester when official grades are entered.

**Transportation**

Transportation to clinical is the responsibility of the student.

**Repeating Clinical Practicum**

In the event a student repeats a clinical practicum, s/he will not be assigned the previous clinical instructor (unless there is only one faculty).

**Required Drug Testing**

Students out of clinical courses for a semester (other than summer), are required to complete the appropriate drug test with negative results within 30 days of resuming clinical course(s) even if an approved semester absence.

Students withdrawing from all nursing classes during a semester are required to complete the appropriate drug screen with a negative result before returning to the nursing program.

**Substance Use**

Students should **not consume alcohol while in uniform or within 12 hours** of a LSON assignment (pre-lab, clinical, seminar, class, other). When substance abuse or chemical dependency is suspected, students and faculty are responsible for reporting their concerns and observations to the Director of Clinical Nursing Education, Associate Dean, or Dean or designee. The Director of Clinical Nursing Education, Associate Dean, Dean, or designee will substantiate observations and concerns about the student in an investigation. The LSON Substance Abuse Policy appears in its entirety in a separate section of this handbook labeled **Substance Abuse Policy.**

**Tennessee Clinical Placement System**

In order to obtain uniform and consistent clinical orientation to all hospital facilities in the state of Tennessee, the **Tennessee Center for Nursing** has established a website that includes general and hospital orientation information.

Mastery of the website content is measured by quizzes. Upon demonstration of content mastery, students will print a
website-generated certificate and submit it to the clinical faculty member prior to the first clinical day in the hospital setting. The general orientation must be completed once a year and the information is stored in the student file. The hospital specific information must be completed each semester.

**Blood and Body Fluid Exposure Prevention and Treatment**

**Blood and Body Fluid Preventive Measures**
Student nurses should always follow Standard Precautions for Blood Borne Pathogens. If caring for known HIV or Hepatitis B patient or handling blood/body fluid/tissue of same, the student nurse may double glove.

**Blood and Body Fluid Exposure: Immediate Treatment**

- **Needle stick/human bite/medical instrument wound**
  1. Wash the area thoroughly with soap and water for 15 minutes.
  2. Encourage bleeding by milking the wound (attempt to stop bleeding if bleeding is profuse).
  3. **GO TO EMERGENCY DEPARTMENT OR EMPLOYEE HEALTH OF HOSPITAL/FACILITY WITHIN TWO (2) HOURS.** (This care is crucial to determine need for prophylaxis and ensure proper collection of both source patient and student specimens for testing.)

- **Mucous membrane splash (mouth, eyes)**
  1. Immediately rinse with normal saline or water for 15 minutes. (normal saline preferable)

**For both situations above:**

1. Notify nursing faculty immediately, regardless of perceived level of exposure.
2. Complete an incident report for all exposures.
3. Nursing faculty will have hospital/facility collect serology from source patient. If source patient is known positive for HIV, Hepatitis, or syphilis, information will be released to the student nurse. The information will include the patient’s medical history.

**Blood and Body Fluid Post Exposure Follow-Up Care:**

1. Post exposure follow up is essential. Each disease above will have windows and retesting must be done to ensure no conversion has taken place.
2. The student nurse should contact their own private physician or the Memphis Shelby County Health Department for appropriate follow-up care. All recommended and/or necessary testing and treatment will be at the student’s personal expense.

**Clinical Practice in Employment Setting**
It is a conflict of interest for students to be placed on a clinical unit where employed. If this situation occurs, contact the Clinical Placement Coordinator who will change the clinical placement location.

**Nursing Student Employment**
Students who are enrolled in a clinical nursing course may not jeopardize the safety of patients by working between the hours of 11:00 p.m. and 7:00 a.m. immediately prior to a scheduled clinical laboratory assignment.

**Client Care and Ethics**

The LSON adheres to the ANA Code of Ethics in regard to the care of all persons.

The Code of Ethics for Nurses is a dynamic document that is an integral part of the foundation of nursing. It is a succinct statement of the ethical obligations and duties of every individual who enters the nursing profession, a nonnegotiable ethical standard, and an expression of nursing’s own understanding of its commitment to society. Nursing encompasses the prevention of illness, the alleviation of suffering, and the protection, promotion, and restoration of health in the care of individuals, families, groups, and communities. Individuals who become nurses are expected not only to adhere to the ideals and moral norms of the profession but also to embrace them as part of what it means to be a nurse. The ethical tradition of nursing is self-reflective, enduring, and distinctive. A code of ethic makes explicit the primary goals, values, and obligations of the profession.

**ANA Code of Ethics Preamble**
Client Safety and Confidentiality
Clients have the right to expect competent and safe professional nursing care. Any student who, in the professional judgment of faculty, places a patient in either physical or emotional jeopardy in any clinical nursing course may be immediately removed from the course by clinical faculty and a grade of unsatisfactory be assigned. Any issue of integrity or honesty in clinical practice will receive an automatic failing grade. Issues of grave concern may result in disqualification from the nursing major.

The Tennessee Nursing Practice Act allows students to provide only that care that has been safely delegated to the student by faculty. Students who practice beyond the level of care that has been delegated are in violation of the Nurse Practice Act. As unlicensed persons, this does place patients in physical jeopardy.

The confidentiality of all clients must be maintained in accordance with legal and professional regulations. Breaches in confidentiality may result in failure of the clinical course and may result in dismissal from the program. Clients must never be discussed by name or by identifying information or in places where professional discussions may be overheard by others (elevator, dining room, other).

Any student who is removed or barred from clinical practice by a clinical agency will earn an immediate grade of unsatisfactory. Refer to the Professional Conduct and Demeanor Policy previously presented.

Clinical Professional Dress

1. Professional street clothes:
   - **Men:** Dress slacks and dress shirt, preferably with a tie. Jeans are NOT acceptable in any clinical setting.
   - **Women:** Dress slacks or a skirt and blouse or appropriate dress with flat shoes or low heels. Jeans are NOT acceptable in any clinical area. Hose or socks must be worn. Socks may be worn only with slacks.

2. **White laboratory coat** - It must be clean and pressed AND monogrammed on the left front side of your lab coat in blue block print with your name and The University of Memphis. The lab coat is to be worn with professional dress when indicated.
   - Example: Mary Johnson, SN
   - University of Memphis

You may not wear sandals, tennis shoes, jeans, T-shirts, sweats or shorts. If you are not appropriately dressed, you will be sent home.

**Important Note:** Students are expected to adhere to items 6-13 of the Clinical Uniform policy when in Clinical Professional Dress.

Clinical Uniform

Whenever a student is wearing the University of Memphis Clinical Uniform, the following policy must be followed:

1. **Uniform:** Galaxy blue monogrammed "scrubs" ordered from Landau Uniforms, Identity Factor (adopted 12/2008), or Uniform Source (Lambuth, adopted 1/2014) with student’s name and the LSON monogrammed logo provided by the supplier.

2. **Lab Coat:** The lab coat may be worn with the clinical uniform. Lab coat must be clean, pressed, in good repair and properly fitted.

3. **Scrub Jacket:** An approved white scrub jacket may be worn in the clinical setting only. It should be clean, pressed, and proper fitting with the monogram placed on the left front as with the lab coat.

4. **Undergarments:** Proper undergarments must be worn. Plain, white, short sleeve T-shirts with no lettering or pictures may be worn underneath the scrubs.
5. **Footwear**: Footwear must be clean and/or polished, in good repair, conservative in style, and must be safe. White leather nursing shoes or white leather tennis shoes with minimal color trim with enclosed heels and toes are to be worn. White socks above the ankle are to be worn with the uniform.

6. **Hair**: Hair must be clean, neat, and well groomed. In patient care areas, hair should be confined so as to not interfere with patient care. Sideburns, mustaches or beards must be well-groomed with no visible stubble. Hair color should be a “natural color”, defined as one color that could be worn naturally (though not necessarily one’s own natural color). Hairstyles should not be of extreme nature.

7. **Fingernails**: Nails must be well-groomed, cleaned and trimmed to fingertip length so as not to interfere with routine tasks and/or patient comfort. Polish, if worn, must be a neutral shade without art and in good repair. No artificial nails or tips are allowed in the clinical setting.

8. **Jewelry**: No more than one small stud earring per earlobe may be worn by women only. There can be no other visible body piercings. No necklaces or bracelets are allowed. Wearing of wedding bands and engagement rings is acceptable.

9. **Alcohol, After-Shave, Lotions, Deodorants, and Smoke**: Absence of body odor is expected. Daily use of body deodorant/soap is part of personal hygiene. Due to patient sensitivity, use of fragrances should not be obvious to patients with whom students may come into contact (including elevators). No cologne, perfume, after-shave, or scented lotion is permitted. Students are to refrain from drinking alcohol 12 hours prior to clinical.

10. **Make-up**: should be complimentary as to create a natural appearance.

11. **Tattoos** and body art may not be visible

12. **The U of M student ID must be worn at all times in the clinical area.**

13. **Students may not smoke in clinical settings and labs.**

**Clinical Supplies Required**

1. Watch with a second hand.
2. Black permanent ink pen.
3. Stethoscope with a bell and a diaphragm (included in the University Bookstore kit).
4. Blood pressure cuff (included in the University Bookstore kit).
5. Bandage scissors (included in the University Bookstore kit).
6. Pen light (included in the University Bookstore kit).
7. CPR mouth barrier. You must always have a mouth barrier in your pocket in the clinical area (included in the University Bookstore kit).

**Dosage Rounding Rules**

**Oral Medication Administration**

1. **Tablets**
   Tablets may be broken in half or fourths (not very accurate) only if scored. If the tablets are not scored, round up or down depending on the calculated dose i.e.: 1.1-1.4 tablets, give one (1) tablet; 1.5-1.9, give two (2) tablets. This is a relatively inaccurate method of medication administration. Where possible a liquid form of the medication should be used to facilitate accuracy.

2. **Liquids**
   **Volume**
   Round liquids to tenths, i.e.: 10.3 mL of cough syrup may be given. Pour 10 mL into a medicine cup; draw up 0.3 mL in a 3 mL syringe and add to the medicine cup.
Dose
Oral medication dosages should be rounded to the nearest whole number. Use this rule when calculating oral doses based on BSA or mg/kg.

You must differentiate between liquid measure (mL) and dose (g., mg., mcg).

Parenteral Medication Administration

1. Injections (IM or sc)
   a. Round to tenths if amount is >1 mL.

   Example: 1.9 mL of Demerol may be given IM. This means that you carry the problem to hundredths, so that you can then round to tenths. (In clinical practice, a 3mL syringe would be used for any amount between 1 and 3 mL)

   b. Round to hundredths if the amount is < mL.

   Example: 0.76 mL of Atropine may be given IM. This means that you carry the problem to the thousandths, so that you can then round to hundredths. (In clinical practice, a tuberculin syringe would be used for any amount 1 mL or less)

2. Intravenous Medication Administration

   Volume

   Intravenous infusion rates are expressed as gtts/min. or mL/hr. When gtts/min are needed, always round to a whole number (you cannot give a partial drop!). Most intravenous infusion pumps are calibrated so that tenths of mLs can be administered. If you find yourself in a situation where the pumps are not so calibrated, round the rate to a whole number.

   Dose

   To calculate the medication dosage infusing in mg/min. or mcg/min. (or mg/hr. or mcg/hr.), calculate the final answer and round to hundredths.

   Hint: Again it is important to differentiate between volume (amount of liquid) and dose (amount of medication).

   Time

   Infusion times should be expressed in whole numbers (hours and minutes)

3. Body Measurements

   Weight

   When converting pounds to kilograms, round kilogram weight to tenths.

Verbal and Phone Orders

Students may never take a verbal medical order from a healthcare provider. A phone order may ONLY be taken by a student when the faculty member is also listening on the phone line as the order is given and thus is able to co-sign that medical order.
LSON Communication Roadmap

Use the LSON communication roadmap as a tool to determine the best next step for any concern you might have.
**LSON Website/eCourseware/Email**

Information is posted on the LSON website: [http://nursing.memphis.edu](http://nursing.memphis.edu). The website serves as a means of communication between the faculty and students. Syllabi, textbooks, orientation, and other important class information will be posted in eCourseware. There are also bulletin boards located by the entrance to Newport Hall, in the computer lab and in various locations throughout the building. Students are encouraged to check these boards.

Keeping up with changes or news from the University of Memphis and LSON is the responsibility of the student. "To help us communicate more effectively, the University provides electronic mail resources to support its work of teaching. Electronic mail, or e-mail, is now an official means of written communication for all students, faculty, and staff at the University of Memphis." (President Raines, July 2, 2002).

**Letter of Recommendation**

Employment recommendations are only provided to those students who are in good academic standing in the LSON. Should the student's academic standing change, it is the responsibility of the student to notify the employing clinical agency. Good academic standing requires that students earn a grade of "C" or "S" in all nursing courses.

All employment recommendations from the LSON require the student to give permission for the LSON and the employing agency to release to each other any student information that is relevant to safe patient care and the safe nursing practice of the student. Because a letter of recommendation may include information from the student's academic record and because the letter itself is considered part of the student's academic record, the LSON follows the University registrar policy for Letters of Recommendation.

**Requesting Test Scores**

All test results and final examination grades will be posted in the eCourseware. Scores or grades may not be given via telephone.

**Emergency Notification Procedure**

The University of Memphis has installed an outdoor emergency notification system. Click [here](#) to obtain additional information and to enroll in the emergency TIGER text message system.

**Disaster Planning**

While it is not feasible to have a disaster plan that is applicable to every disaster that can occur, some general guidelines are instructive. Memphis is in a geographic location that experiences tornadoes, floods, and is on a major earthquake fault.

Any natural disaster that disrupts communication or travel creating a serious state of emergency is one that we do not want to worsen by using the telephone or traveling. Clinical courses will not meet in those circumstances. Please do not make phone calls which further disrupt communication to inquire about a clinical course, a scheduled test, or any nursing class.

Following a serious earthquake, hidden structural damage to freeways, bridges, and overpasses often occurs. For example, in the San Francisco Loma Prieta Earthquake an overpass and a bridge collapsed. It was impossible for a driver to see that the San Francisco Bay Bridge had collapsed until the driver drove off the edge of the bridge onto the lower deck resulting in the loss of life. While students may be in a clinical course or at The U of M during a serious earthquake, you are strongly advised not to drive under or over an overpass or bridge until they have been certified to be safe by the local authorities.

If you are in a clinical setting during an earthquake, please remember that all equipment attached to your patient may move in different directions. Life sustaining equipment, such as a ventilator, needs to be held in place. Also items that are not secured to walls will fall. Please do not stand anywhere near a shelving unit that contains unsecured equipment or supplies or stand underneath a hanging light fixture.

**Electrical power will not be a problem because all hospitals have back-up generator power.**
If you are outside during an earthquake, do not stand anywhere near a building with brick or masonry that may well fall from the building.

All hospitals have a disaster plan that will be immediately implemented. In the event you are in clinical during a disaster, you will receive instruction on where to go and what to do by your clinical instructor. If you are not already in clinical, do not go to your clinical agency unless specifically requested to do so.

**Inclement Weather**
The University’s official number to call for closing is 901-678-0888. The local television and radio stations will announce when the university is closed. However, anytime it is unsafe for you to travel, please consider your class/clinical to be canceled for you. Your personal safety is always our first concern. Please notify faculty if you will be absent from a clinical laboratory class due to unsafe weather conditions.

**Grades**

**LSON Grading Policy**
In accordance with LSON course grading policy, students must earn an average of 75% in order to pass the course. The average must be 74.5% in order to round to 75%. **Final grades ONLY will be rounded to the 10th place. NO ROUNING OCCURS UNTIL THE FINAL GRADE.**

**Example:**

Grading Weights:

<table>
<thead>
<tr>
<th>Component</th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exam 1</td>
<td>15%</td>
</tr>
<tr>
<td>Exam 2</td>
<td>15%</td>
</tr>
<tr>
<td>Exam 3</td>
<td>15%</td>
</tr>
<tr>
<td>Final Exam (comprehensive)</td>
<td>25%</td>
</tr>
<tr>
<td>Quizzes</td>
<td>10%</td>
</tr>
<tr>
<td>ATI</td>
<td>10%</td>
</tr>
<tr>
<td>Formal Paper</td>
<td>10%</td>
</tr>
</tbody>
</table>

\[0.15 \times \text{Exam 1} + 0.15 \times \text{Exam 2} + 0.15 \times \text{Exam 3} + 0.25 \times \text{Final} + 0.1 \times \text{Quizzes} + 0.1 \times \text{ATI} + 0.1 \times \text{Formal Paper} = X/1\]

Courses are assigned a numeric/“S” or “U” grade in accordance with the grading policy for the undergraduate program of the Loewenberg School of Nursing:

Course letter grades are assigned according to the policy of the LSON.

- A = 100-92
- B = 84-91
- C = 75-83
- D = 74-65
- F = 64 and below

**Testing Policy**

**Examinations**

All course examinations are mandatory. Students are expected to be present for exams at the designated time and place provided by the course instructor. A test absence may be excused only in extreme unplanned circumstances (i.e., illness, injury, death of close family). Students missing an exam for any reason must contact the Associate Dean for Academic Programs in person, by telephone, or email at least **one hour prior to the scheduled examination.**

1. All students must bring official identification to the testing session.

2. All student items, except a specified calculator, will be deposited on the floor in the front of the room. No coats, sweaters, or caps are allowed on the person during testing.
3. A random seating arrangement for students will be faculty generated.

4. During nursing tests, no questions should be asked out loud by students. If a question must be asked, students are expected to raise a hand for assistance and the faculty proctor will come to you. Students may not leave the room during the exam.

5. The LSON faculty will not tolerate any form of plagiarism, cheating, fabrication or other types of academic dishonesty and are obligated to take serious actions through University channels in these circumstances. Students are expected to abide by the Code of Student Rights and Responsibilities of the University. This includes being knowledgeable about the kinds of behaviors that constitute Academic Misconduct as delineated by the University of Memphis’ Office of Student Conduct.

6. If a unit exam is missed and excused the final exam for the course will be weighted to account for the missed exam. Any additional missed exam will result in a grade of zero unless a student has been granted an excused absence due to extreme circumstances.

7. If a final examination is missed due to an extreme unplanned circumstance, with proper documentation a make-up exam will be administered.

Clinical Evaluation Policy
Students are evaluated in the clinical setting continually throughout the semester. Students must display progressive improvement and demonstrate ‘Satisfactory’ performance of all Core and Course-specific competencies by the conclusion of the semester to successfully pass the clinical course. Final clinical course grades are assigned as either ‘Satisfactory’ or ‘Unsatisfactory’.

The Student Clinical Evaluation tool is utilized by faculty to evaluate each student’s clinical performance. This tool reflects both the LSON Core competencies and the Course-specific competencies.

A student who receives an ‘Unsatisfactory’ in one Core or Course-specific competency will receive an ‘Unsatisfactory’ for the entire clinical day. A student who earns an Unsatisfactory Clinical Day grade is required to meet with the assigned faculty to be counseled regarding measurable behaviors that the student must demonstrate in order to bring the competency grade to a passing level. Faculty members will substantiate all ‘Unsatisfactory’ grades with anecdotal comments. In the event that a student receives a ‘Needs Improvement’ on the same competency, the 3rd ‘Needs Improvement’ will be changed to an ‘Unsatisfactory’ and the student will be deemed ‘Unsatisfactory’ for the entire clinical day.

Three ‘Unsatisfactory’ clinical days during the semester will result in failure of the course.

Skills/Health Lab Evaluation Policy
Course specific skills unique to each Lab are listed in the Lab course syllabus. A student is required to successfully demonstrate competency in all course-specific skills.

A student who is unsuccessful during the first course-specific skill demonstration will have two additional attempts to demonstrate competence in the skill(s) prior to the end of the semester. All course-specific skills must be demonstrated successfully prior to the last day of class in order to pass the Lab course. A student who is unable to demonstrate competence in any of the course-specific skills after three attempts fails the course.

Students are accountable for all current policies specified in The University of Memphis Undergraduate Catalog, the LSON BSN Student Handbook, and each LSON course syllabus.

Incomplete Grade
When extenuating circumstances (i.e., illness) prevent a student from completing a course, a grade of “Incomplete” may be given at the discretion of the faculty in accordance with University Academic Standards. This grade will automatically convert to an “F” in 45 days following the end of the semester when course requirements have not been met.
National Counsel Licensing Examination (NCLEX)
Upon completion from the nursing program, graduates are eligible to take the NCLEX examination for state licensure at designated testing sites.

In the semester prior to graduation, the Dean’s Office will notify the Tennessee Board of Nursing of all students who are eligible to take the licensure examination. The application and procedure for the NCLEX is provided by the LSON Clinical Placement Coordinator.

Nursing Achievement Tests
To insure your success as a nurse, the faculty administer nationally normed achievement tests as part of course evaluation. The minimal expectation is that individual student scores will be at the national average.

Each semester, the Associate Dean and course faculty will review these scores. Student scores are on file in the school and available for review after the computer testing. The Associate Dean or course instructor may meet with students who score low on the achievement test to discuss ways to promote student academic success.

Professional Conduct and Comportment
The nursing student is a representative of the University of Memphis (UM), and should realize that their conduct and demeanor may positively and negatively affect the judgments of others about UM, Loewenberg School of Nursing (LSON).

LSON students are expected to be thoughtful and professional when interacting with faculty, patients and their families, nurses, attending physicians, nursing preceptors, affiliated institutional staff, other students, the public and other members of the health care team. This professional behavior is to be maintained in any and all situations where the student is identified as a LSON student, including situations off-campus, as well as in "virtual" sites, such as online social networking sites.

Professional conduct and comportment is required of students in cyberspace in the same manner it is required in all other settings. Students must keep in mind that behaviors that are illegal or in violation of UM policy on campus will be illegal or violate UM policy if it occurs and/or appears online. If a student identifies as a LSON student in an online forum, the LSON will hold them to the highest standards of professional conduct. While it is not the policy of LSON faculty to routinely monitor students’ web sites, if inappropriate postings are brought to their attention, faculty will investigate the report.

Inappropriate behaviors include, but are not limited to, the use of offensive language, gestures, or remarks. Illegal conduct that violates HIPPA includes, but is not limited to, disclosure of patient information, including discussions with other persons and/or posting online photographs of patients. Attempting, directly or indirectly, to obtain or retain a patient or discourage the use of a second opinion or consultation by way of intimidation, coercion or deception, is also inappropriate and unprofessional conduct. Violations of Professional Conduct and Comportment may result in sanctions up to and including dismissal from the nursing program, as well as, federal prosecution, fines, and imprisonment.

The UM-LSON upholds the American Nurses’ Association’s Principles for Social Networking.

1. Nurses must not transmit or place online individually identifiable patient information.
2. Nurses must observe ethically prescribed professional patient — nurse boundaries.
3. Nurses should understand that patients, colleagues, institutions, and employers may view postings.
4. Nurses should take advantage of privacy settings and seek to separate personal and professional information online.
5. Nurses should bring content that could harm a patient’s privacy, rights, or welfare to the attention of appropriate authorities.
6. Nurses should participate in developing institutional policies governing online conduct.
To Avoid Problems

1. Remember that standards of professionalism are the same online as in any other circumstance.
2. Do not share or post information or photos gained through the nurse-patient relationship.
3. Maintain professional boundaries in the use of electronic media. Online contact with patients blurs this boundary.
4. Do not make disparaging remarks about patients, employers or co-workers, even if they are not identified.
5. Do not take photos or videos of patients on personal devices, including cell phones.
6. Promptly report a breach of confidentiality or privacy.

References

Undergraduate Grade Appeal Procedure

The responsibility for evaluating student work and assigning grades lies with the instructor of the course. The purpose of the grade appeal procedure is to provide a review process 1) for a student to understand the reasons why the grade was assigned, 2) for the instructor to become aware of and correct possible errors, 3) for appropriate supervisors at the department and college level to review the basis on which a grade has been awarded and to correct cases in which a grade is determined to have been assigned based on arbitrary or capricious action, or other reasons not related to academic performance. If, after departmental and college review, the grade is still in dispute, an appeal may be submitted to the Undergraduate Grade Appeals Committee, which consists of faculty and student representatives, for final resolution.

In all cases of a disputed grade, the student has burden of proof that the grade assigned was not appropriate. If the case has not been resolved at the student/instructor level, then the student should submit a written petition that would include a copy of the syllabus along with copies of any tests, quizzes, assignments or other written work completed and graded as part of the class requirements to the appropriate step of review. At each step of further review, copies of any previously submitted materials and any written responses to those petitions should be included.

It is important to distinguish grounds for grade appeal from questions about quality of instruction. Successful grade appeals should be based on evidence that the student performed at a level sufficient to warrant a different grade. It is important for students to bring to the instructor’s and the department’s attention perceived deficiencies in instruction, but these by themselves do not normally warrant a change in grade. For a successful grade appeal, the student should be able to show, for example, not that the student could have earned a grade of “B” under different circumstances, but rather that the student actually did earn a grade of “B” according to the standards set out on the syllabus for the course, and was assigned a lower grade. If, in the opinion, of the department or the college, deficiencies in instruction are so grave as to warrant an alternative accommodation, then the proper remedy will normally involve alternative assignments or examinations to allow the student the opportunity to demonstrate the appropriate level of competency in that area to earn a different grade than the grade originally assigned. The decision about these cases should be made at the departmental or college level. In disputed cases where the appeal is based primarily upon perceived quality of instruction, the Undergraduate Grade Appeals Committee has the option of referring the case directly to the Vice Provost for innovation and support services.

Procedures

A student wishing to appeal a grade must follow Steps 1-4 listed below. (The deadlines listed below apply to the dates when classes are in session during the fall or spring semesters.) If a student fails to observe the deadlines, the decision made in the previous step will be final. If a department or college fails to respond to the student’s complaint within the deadline, the student should contact the Office of the Vice Provost for Undergraduate Programs. The deadline for filing the appeal should be extended appropriately to ensure that the student retains the opportunity to
pursue the appeal at the next step. All correspondence and records will be retained in the office in which the complaint is resolved.

**Step 1:** The student should first consult with the instructor, at the latest within two weeks of the beginning of the subsequent fall or spring semester, in an effort to provide a satisfactory resolution of the complaint. If the student cannot schedule a meeting with the instructor, the student may contact the department chair, who will schedule the meeting between the student and the instructor. The only exception to this step is the case in which the instructor is unavailable. In this case, the student may proceed directly to Step 2.

**Step 2:** If the complaint is not resolved in Step 1, the student may present the complaint in writing by the end of the third week in the semester to the chair of the department in which the course was offered. Included in the petition the student should attach the appropriate materials described above, and if available, the instructor’s written explanation for the assigned grade. The department chair will attempt to resolve the complaint in consultation with the instructor and the student. The department chair will provide a written response to the student within two weeks from the time the written complaint has been received. If the department chair was the instructor of the course, the student may proceed directly to Step 3.

**Step 3:** If the complaint has not been resolved at the departmental level, the student may appeal further by presenting a written petition to the dean of the college in which the course was offered, along with a copy of the materials presented at the previous stage and any written responses received from the department. At the latest, this petition should be presented within one week after the departmental response. Within two weeks of the time the complaint was received, the dean may use any resources available to resolve the conflict.

If the dean finds that the request does not have merit, the dean shall notify the student in writing, with copies sent to the instructor and the department chair. If the dean and the department chair agree that the grade should be changed, the dean shall be empowered to change the grade without the instructor’s consent. Either the student or the instructor may appeal this decision in Step 4. If the dean and the department chair do not agree, the dean shall present his or her view in writing to the student, with copies to the instructor and the department chair, so that the student may include that information in an appeal to the Undergraduate Grade Appeals Committee for final resolution of the complaint.

**Step 4:** If the complaint has not been resolved through the previous steps, the student may present a grade appeal petition addressed directly to the Undergraduate Grade Appeals Committee through the Office of the Vice Provost for Undergraduate Programs. Copies of written materials and petitions presented at the previous steps, along with any written responses received from the department or the college, must be included with the petition at the time of submission. The deadline for submission of a petition is March 15 for grades awarded during the previous fall term, and October 15 for grades awarded during the previous spring or summer terms. The Office of the Vice Provost for Academic Support and Innovation will forward the petition along with the attached materials to the chair of the Undergraduate Grade Appeals Committee, who will distribute copies to the members of the Committee.

The Committee members shall review the petition and the attached materials and then forward their recommendation to the chair of the Committee about whether a hearing is warranted in this case. If a majority of the Committee does not vote that the case merits a hearing, the grade stands as issued. If a majority of the Committee votes in favor of a hearing, the chair of the Committee shall inform the student and the instructor, and shall arrange a hearing to be attended by the student, the instructor, and the members of the Undergraduate Grade Appeals Committee or their designated alternates. Copies of the Committee’s decision for the hearing shall be sent to the department chair and dean of the college.

Prior to the hearing, the instructor should be given a copy of the student’s petition and supporting materials. If members of the Committee feel that additional factual information is needed prior to or after the hearing to render a decision, the chair of the Committee should inform the Office of the Vice Provost for innovation and support services of that request in writing, and that office should make every effort to provide that information in writing to the Committee. At the hearing, first the student and then the instructor will each have the opportunity to present their cases orally and to present any other written materials they deem appropriate. The Committee members shall have
the opportunity to ask questions to both the student and instructor. At the end of the meeting, the student and then the instructor shall be given the opportunity for brief closing statements.

The chair of the Committee should inform the student, the instructor, the department chair, the college, and the Office of the Vice Provost for Academic Support and Innovation of the Committee’s decision in writing within one week of the hearing. If a majority of the Committee agrees that the grade should be changed, the Office of the Vice Provost for Innovation and support services will notify Student Records of the grade change. Otherwise the grade shall remain as recorded. The decision of the Undergraduate Grade Appeals Committee shall be final.

The Undergraduate Grade Appeals Committee shall be composed of seven members and seven alternates constituted as follows:

A chair designated by the Vice Provost for Innovation and support services, a faculty member and alternate designated by the dean of the college involved, two faculty members and two alternates designated by the Faculty Senate, one student and one alternate designated by the college, two students and two alternates selected through the Student Government Association.

Although the primary responsibility of the Committee is to review grade appeals and assign the appropriate grade in cases where the appeal is upheld, the Committee shall also report any findings of discrimination or prejudice to the Office of the Vice Provost for Undergraduate Programs for further consideration and possible action.

**NOTE:** The method for calculating the grade in any nursing course is not subject to appeal. Students who disagree with the weighting of tests, final examinations, papers, or projects may express their views in writing to the course coordinator and to the LSON Curriculum Committee.
Course ___________________________ Faculty ___________________________

Statement of the Problem

Requested Remedy

Student Signature ________________________ Date ________

Current Mailing Address __________________________

City___________ State_____________ Zip _________

Current Telephone Number ___________

Alternate Telephone Number __________

Faculty Signature ________________________ Date ________

Attach one legible copy of all written work in this course.
LOEWENBERG SCHOOL OF NURSING
CODE OF ETHICS
Loewenberg School of Nursing
Code of Ethics

Shared Vision

We, the students of the Loewenberg School of Nursing are, with the faculty, members of a community of clinician scholars. As citizens of this community, we are committed to the universal principles of ethics: Beneficence, Nonmaleficence, Autonomy, and Justice. These principles guide our relationships with clients, and with peer and faculty colleagues. With the faculty, we embrace and celebrate our multidimensional diversity for the richness it brings to our nursing culture. In this hospitable environment, we anticipate fairness and equity.

*******

**Beneficence** means to do good and to prevent harm. By providing nursing care to a culturally diverse people, we shall make a conscious and continuous effort to promote good in our communities, thus improving the quality of life for recipients of these efforts and care. Members of the Loewenberg School of Nursing community of scholars shall uphold nursing's honored tradition of sensitive response to societal health care needs. These needs will be sensitively addressed through an expanding knowledge base.

*******

**Nonmaleficence** means to do no harm. The individual practices and collective practice of the Loewenberg School of Nursing members shall be guided by accepted Standards of Practice, the Code for Nurses, and the Nursing Process to assure the nonmaleficient delivery of nursing care to clients. Each member shall be accountable for his or her level of skill and practice.

*******

**Autonomy** implies the implicit and mutual respect among members of this community and the consumers of our care. Together, we coexist within defined boundaries to bring about a common good. We believe that autonomy is a valid principle for all individuals. Providers of nursing care have the right to independent judgment based on knowledge, while the consumers of our care have the right to choice and self-determination. As persons we are bound together by our humanity, a characteristic which commands a measure of respect and regard.

*******

**Justice** requires equity and fairness. We are members of a Just community of scholars. We anticipate fair and responsible interactions among members. We allocate our academic and clinical efforts with justice, maintaining responsibility and accountability for our own behaviors, and distributing the benefits and burdens of our care appropriately.
Principles of Conduct

Members of the Loewenberg School of Nursing Community will:

1. Demonstrate respect and regard for each other and clients by strict adherence to principles governing confidentiality. This principle restricts members to the ethical use of client and colleague data.

2. Refrain from chemical use which impairs professional judgment and performance and violates the public trust.

3. Conduct the personal life such that there is positive reflection upon the community and profession and is within the norms of society.

4. Conduct the academic life and clinical life with honesty. Community members will refrain from all forms of academic dishonesty, which includes cheating and theft. Likewise members will refrain from the misrepresentation of clinical activities. Honesty and integrity are the cornerstones of nursing practice. Breaches of honesty will be considered grievous matters.

5. Be responsible and accountable for the individual level of practice. Members will refrain from substandard practice, and will deliver nursing care within the scope of practice.

Authors: Bousson, J., Brown, J., Foster, B., Holliday, Y., Janecek, A., Joyner, P., Malone, T., McGuire, M., Munal, M., Reeves, D., Smith, J., and Stujenske, M. This document was developed by the Spring 1994 Ethical Dialogues Class (Nursing 4303, facilitated by Margaret M. Aiken, PhD, Associate Professor of Nursing, April 1994.
Students' Rights and Responsibilities

The LSON supports the NSNA By-laws Students' Rights/Responsibilities*

1. Students should be encouraged to develop the capacity for critical judgment and engage in a sustained and independent search for truth.

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

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

4. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, color, creed, national origin, ethnicity, age, gender, marital status, life style, disability, or economic status.

5. Students should be free to take reasoned exception to the data or views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.

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

7. Information about student views, beliefs, political ideation, or sexual orientation which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as a basis of evaluation.

8. The student should have the right to have a responsible voice in the determination of his/her curriculum.

9. Institutions should have a carefully considered policy as to the information which should be a part of a student's permanent educational record and as to the conditions of this disclosure.

10. Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions publicly and privately.

11. Students should be allowed to invite and to hear any person of their own choosing within the institution's acceptable realm, thereby taking the responsibility of furthering their education.

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

13. The institution has an obligation to clarify those standards of behavior which it considers essential to its educational mission, its community life, or its objectives and philosophy.

14. Disciplinary proceedings should be instituted only for violations of standards of conduct formulated with significant student participation and published in advance through such means as a student handbook or a generally available set of institutional regulations. It is the responsibility of the student to know these regulations. Grievance procedures should be available for every student.

15. As citizens and members of an academic community, students are subject to the obligations which accrue to them by virtue of this membership and should enjoy the same freedoms of citizenship.

16. Students have the right to belong or refuse to belong to any organization of their choice.
17. Students have the right to personal privacy in their living space to the extent that the welfare and property of others are respected.

18. Adequate safety precautions should be provided by nursing programs, for example, adequate street lighting, locks, and other safety measures deemed necessary by the environment.

19. Dress code, if present in school, should be established with student input in conjunction with the school director and faculty, so the highest professional standards are maintained, but also taking into consideration points of comfort and practicality for the student.

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

21. Students should have a clear mechanism for input into the evaluation of nursing faculty.

The NSNA Student Bill of Rights and Responsibilities was initially adopted in 1975. The document was updated by the NSNA House of Delegates in San Antonio, Texas (1991); and item #4 was revised by the NSNA House of Delegates in Baltimore, Maryland (2006).
CONSTITUTION OF THE SNA-LSN
Constitution of the Student Nurses Association
The Loewenberg School of Nursing
The University of Memphis

ARTICLE I

NAME

The name of this organization shall be the Student Nurses Association, hereinafter referred to as SNA, of the Loewenberg School of Nursing at The University of Memphis. This organization is a constituent of the National Student Nurses’ Association, Inc., hereinafter referred to as NSNA.

ARTICLE II

PURPOSE

The purpose of the Student Nurses Association, shall be:

1) To maintain and uphold the ideals and standards of the Loewenberg School of Nursing.

2) To provide students an opportunity for participation in self-government.

3) To encourage an attitude of professional responsibility.

4) To facilitate faculty and student interaction.

5) To act as a liaison on behalf of students with Loewenberg School of Nursing faculty and administration.

6) To foster and participate in positive community public relations.

7) To plan and coordinate extra-curricular activities.

8) To allocate funds for approved functions of the Student Nurses Association.

ARTICLE III

MEMBERSHIP

Student Nurses Association membership opportunities are granted to individuals regardless of a person’s race, color, creed, national origin, ethnicity, age, gender, marital status, lifestyle, disability or economic status.

SECTION 1. Member Eligibility

1. Students enrolled at the Loewenberg School of Nursing leading to licensure as a registered nurse.

2. Registered nurses enrolled at the Loewenberg School of Nursing leading to a baccalaureate degree with a major in nursing.

3. Eligible members must maintain all grades and academic standing in accordance with the Loewenberg School of Nursing student handbook.
ARTICLE IV

DUES

SECTION 1. Joining the Student Nurses Association

Students enrolled at the Loewenberg School of Nursing shall pay a onetime membership fee to the association at any time during the academic year.

SECTION 2. Fee Assessment

Dues shall be set in the spring by the Executive Council for the following academic year.

ARTICLE V

EXECUTIVE COUNCIL AND THEIR FUNCTIONS

SECTION 1. Officers and Directors

Officers and Directors of the Student Nurses Association shall be:

1. President
2. Vice President
3. Secretary
4. Treasurer
5. Historian
6. Director of Activities
7. Director of Breakthrough to Nursing

SECTION 2. Eligibility

1. All Officers and Directors shall be willing and able to fulfill the duties of the position held.
2. No Officer or Director shall hold more than one position at any time.
3. All Officers and Directors shall become members of the National Student Nurses’ Association, Inc.; paid membership fees shall be reimbursed by the University of Memphis chapter.

SECTION 3. Purpose

The purpose of the Student Nurses Association Executive Council shall be to represent all of the members of the Student Nurses Association.

SECTION 4. Duties of the Executive Council

1. The President shall:
   a) Serve as the principal officer of the association and preside at all meetings.
b) Provide an agenda for scheduled General and Student Nurses Association Executive Council meetings to the Secretary for posting.

c) Appoint Ad Hoc committees and their chairpersons, subject to the approval of the Student Nurses Association Executive Council, and to hold each chairperson responsible for the duties of the Ad Hoc committee.

d) Represent the Student Nurses Association, University of Memphis chapter, at state and national functions.

e) Communicate the actions and decisions of the Student Nurses Association Executive Council to the students, faculty and administration of the Loewenberg School of Nursing.

2. The Vice President shall:

a) Assume the duties of President in the absence or disability of the president.

b) Accede to the office of President during the subsequent election.

c) Orient and recruit accepted Loewenberg School of Nursing students to the Student Nurses Association.

d) Design, order and distribute merchandise in relation with the Loewenberg School of Nursing at the University of Memphis.

e) Perform other duties as assigned by the President in accordance with the priorities and needs of the Student Nurses Association.

3. The Secretary shall:

a) Post notices of General and Student Nurses Association Executive Council meetings, including the corresponding agenda.

b) Distribute and collect attendance rosters at all General and Student Nurses Association meetings.

c) Record the minutes of General and Student Nurses Association Executive Council meetings; distribute official minutes to the SNA Executive Council and association advisors.

d) Maintain organized and assessable records of minutes from prior meetings, classified list of active members, and the constitution of the Student Nurses Association.

e) Perform other duties as assigned by the President in accordance with the priorities and needs of the Student Nurses Association.

4. The Treasurer shall:

a) Collect dues from eligible students to become active members of the Student Nurses Association as needed throughout the academic year.

b) Collect appropriate revenue and make payments in relation to merchandise sales and/or student body projects.

c) Make a verbal report of the current balance of the Student Nurses Association financial account at every General and SNA Executive Council meeting.

d) Prepare a budget and present it to the Student Nurses Association Executive Council for approval at the first SNA Executive Council meeting of each semester.

e) Maintain organized and assessable records of monies received and/or expended.

f) Perform other duties as assigned by the President in accordance with the priorities and needs of the Student Nurses Association.
5. The Historian shall:
   a) Take photographs during activities and social functions organized by the Student Nurses Association.
   b) Coordinate with the Loewenberg School of Nursing Webmaster and maintain a Student Nurses Association webpage.
   c) Perform other duties as assigned by the President in accordance with the priorities and needs of the Student Nurses Association.

6. Director of Activities shall:
   a) Reserve an on-campus location to conduct General and Student Nurses Association Executive Council meetings.
   b) Plan all activities and social functions of the Student Nurses Association; including the reservation of a venue, obtaining entertainment, and purchasing refreshments and decorations.
   c) Provide opportunities of community involvement for members of the Student Nurses Association.
   d) Perform other duties as assigned by the President in accordance with the priorities and needs of the Student Nurses Association.

7. Breakthrough to Nursing Director shall:
   a) Promote career opportunities within the field of nursing for traditional, nontraditional, and minority students.
   b) Design, order, display posters and distribute brochures in relation to the career opportunities within the field of nursing.
   c) Perform other duties as assigned by the President in accordance with the priorities and needs of the Student Nurses Association.

SECTION 5. Faculty Advisors

There shall be at least one faculty member of the Loewenberg School of Nursing who shall act as an advisor to the Student Nurses Association Executive Council.

SECTION 6. Vacancies

1. The candidates for a vacant office must meet all eligibility requirements.

2. Providing a vacancy shall be filled, it shall require a 2/3 vote of the Student Nurses Association Executive Council.

3. In the case that the President is verbally resigning, the President shall tender the resignation to the Vice President.

SECTION 7. Transition from Office

1. Upon transition from office, all officers and directors shall resign any monetary possession, account information, records, books, documents, and/or other articles pertaining to the Student Nurses Association.

2. Each officer and officer shall be responsible for the orientation of their successor to the duties of their office prior to transition from office.
ARTICLE VI

COMMITTEES

SECTION 1. Ad Hoc Committees

1. The Student Nurses Association Executive Council, at its discretion, shall establish Ad Hoc committees deemed necessary to carry on the work of the association.

2. An Ad Hoc committee chairman shall be appointed by the President and shall work under the direction of the Student Nurses Association Executive Council.

SECTION 2. Reports of Committees

Each committee chairman shall submit reports to the Student Nurses Association Executive Committee as necessary or requested and shall be subject to approval.

ARTICLE VII

MEETINGS

SECTION 1. General Meetings

1. General meetings shall be held twice per semester and at such other times as deemed necessary by the Student Nurses Association Executive Council or the Dean of the Loewenberg School of Nursing.

2. The quorum for the general meetings shall consist of at least 2/3 of the Student Nurses Association Executive Council, including the President or Vice President, and at least one (1) active member.

SECTION 2. Executive Council Meetings

1. Student Nurses Association Executive Council meetings shall be held at least once a month, in addition to general meetings. Meetings may be in person or by electronic correspondence.

2. Participation at these meetings is required for Executive Council members.

3. Excessive absences from council meetings may result in removal from office.

4. The quorum for the Executive Council meetings shall consists of at least 2/3 of the Student Nurses Association Executive Council, including the President or Vice President.

ARTICLE VIII

ELECTIONS

SECTION 1. Nominations

1. Notifications of vacant executive council positions will be posted two (2) weeks prior to elections.

2. The Student Nurses Association Executive Council shall receive nominations of candidates submitted by active members of the Student Nurses Association.

3. The Student Nurses Association Executive Council shall present the slate of approved candidates one (1) week before the election.
SECTION 2. Elections

1. The election shall be by vote.
2. Plurality vote shall elect.
3. A tie vote shall be decided by revote.
4. The installation date shall be designated by the Student Nurses Association Executive Council.

ARTICLE IX

FISCAL YEAR

The fiscal year of the Student Nurses Association shall begin September 1 and end August 30.

ARTICLE X

PARLIAMENTARY AUTHORITY

All meetings of this association shall be conducted according to the parliamentary law as set forth in Robert’s Rules of Order Newly Revised where the rules apply and are not in conflict with these bylaws.

ARTICLE XI

AMENDMENTS

SECTION 1. Amendment Process

1. Bylaws may be considered for revision and/or amendment at the written request of an active member of the Student Nurses Association.
2. Proposed amendments must be submitted the Dean of the Loewenberg School of Nursing for approval.
3. Proposed amendments approved by the Dean of the Loewenberg School of Nursing, shall be presented to the active members of the Student Nurses Association for approval.
4. These bylaws may be amended at a General meeting by a 2/3 votes of those active members present and voting provided that notice of the proposed amendments has been posted to active members at least one (1) week prior.
5. Amendments to the Student Nurses Association bylaws, adopted at the General meeting, shall promptly be incorporated into the bylaw and become effective immediately.

ARTICLE XII

DISTRIBUTION OF FUNDS

SECTION 1. Association Funds

1. Funds raised by dues, merchandise and fundraising activities shall be used to:
   a) Cover operating expenses; to include Daily Helmsman ads, making copies, mail services, and office supplies, entertainment, decorations, and refreshments.
   b) Off-set registration and travel expenses for selected Executive Council members at conventions and conferences.
   c) Support non-profit charitable organizations through the collection of items or funds.
ARTICLE XIII

DISSOLUTION OF ASSOCIATION

In the event of dissolution of the Student Nurses Association, University of Memphis chapter, all assets remaining after obligation of payments shall be distributed to the Loewenberg School of Nursing scholarship fund.
The University of Memphis
Loewenberg School of Nursing
Substance Abuse Policy Statement*

The University of Memphis, Loewenberg School of Nursing’s Substance Abuse Policy Statement is guided by the philosophy of the American Nurses Association’s 1982 and 1984 resolutions stating that appropriate treatment should be offered prior to disciplinary action. The student should understand that the School of Nursing will use this policy to assist the student into recovery. This philosophy is intended to protect our clients by removing the impaired students quickly and promoting an atmosphere for the student to self-report and receive help. Early detection, intervention, and treatment of substance abuse and chemical dependency enhance the likelihood of a successful outcome.

The School of Nursing maintains a drug free environment. Students are expected to provide safe, effective, and supportive care for their clients. To fulfill the academic requirements for nursing education, nursing students must be free from chemical impairment while participating in all aspects of nursing education. Faculty recognize substance abuse and chemical dependency as occupational health hazards of nursing practice. Any student suffering from the disease of chemical dependency or use will receive the same consideration for treatment and recovery as a student having any other chronic illness. The School of Nursing’s Substance Abuse Policy and Procedure Statement is particular to the School of Nursing.

The School of Nursing requires that students neither possess nor use drugs and alcohol while in the academic setting. The academic setting includes both didactic and clinical course work. The faculty defines impairment as: being under the influence of, possessing in the student’s body, blood, or urine, consuming, transferring, selling or attempting to sell while on school or clinical affiliate sites. This policy does not prohibit the possession or dispensing of patient medications in accordance with clinical assignments. Abuse of substances includes episodic misuse or chronic use.

Any nursing student in violation of the policy will be subject to disciplinary actions up to and including dismissal from the school, reporting to state licensing board, and possible referred to local police authorities. Faculty will intervene as outlined in the policy statement.

*Upon matriculation into the professional or graduate component of nursing studies, each student will be required to sign he or she has reviewed and agrees to abide by the School of Nursing Substance Abuse Policy and drug testing procedures. (Appendix A)

A. Substance Abuse Education is included in the curriculum.

B. Tennessee Professional Assistance Program

Once admitted into the nursing curriculum, each unlicensed student will pay $15.00/year to Tennessee Professional Assistance Program (TNPAP). This fee will cover all management and monitoring expenses should the student enter into TNPAP. The money will be collected by the School of Nursing. A designee for the School of Nursing will forward the money to TNPAP. Graduate students are covered under their active Tennessee Registered Nurse License and not required to pay an additional fee.

C. Testing for Cause

Students who refuse to undergo an immediate drug and alcohol screen will be subject to immediate disciplinary actions, up to and including dismissal from the program.

Testing for cause will require that the student undergo an immediate blood test, urine screen, hair follicle screen, saliva screen, or breath alcohol test, and possibly a physical body examination under any of the following circumstances:
1. When there is reasonable suspicion that the student is under the influence of intoxicants, non-prescribed or prescribed narcotics, hallucinogens, marijuana or other non-prescribed or prescribed controlled substances.

2. After the occurrence of a work-related injury, illness, or accident while on school/hospital property.

3. Observation of poor judgment or careless acts.

D. Drug Testing Procedure

- Tests will be conducted by a qualified laboratory using established methods and procedures.

- Confidentiality of the student as well as the integrity of the urine, hair, salvia, or breath sample will be protected.

- The procedure for collection will be regulated, as determined by the collection site, may involve a witness to the voiding or collection of the sample, securable split specimen containers, and chain of custody procedures.

- The sample will be screened for drugs. Presumed positives will be confirmed by a second test (split sample) from the original urine sample and confirmed using Gas Chromatography/Mass Spectrometry GCMS technology.

- If the test is positive, the available evidence, including health history, will be used to determine the presence or absence of drug abuse.

- The testing laboratory will notify the Dean of the School of Nursing with test results.

- The School of Nursing will ensure confidentiality of results by making the information available only to the student and appropriate School of Nursing faculty.

- The costs of the tests are the responsibility of the student.

E. Controlled Medications and Alcohol

1. Students who are taking over-the-counter or prescribed medication are responsible for being aware of the effect the medication may have on their academic performance or personal behavior and should report to their instructor or advisor the use of any medication that may impair their performance.

2. Students are held accountable for policies and procedures in the healthcare settings for controlled substances per department policy for controlled substances at all clinical sites.

3. The School of Nursing recommends that students not consume alcohol or mood altering substances for a minimum of 12 hours prior to clinical or class.

F. Identification

The School is responsible for identifying individuals with deteriorating academic performance, behavioral changes and excessive absenteeism, but is not responsible for diagnosing the nature of the problem. Chemical dependency should not be determined on faculty judgment alone. The student should be evaluated by an appropriately prepared professional with an educational background in chemical dependency, mental health issues, and treatment methodology. It is the responsibility of every faculty member, clinical instructor or preceptor, and nursing student to immediately report unsafe working conditions or hazardous activities related to chemical impairment that may
jeopardize the safety of the individual, the patient, or colleagues. Faculty are also responsible for recognizing the signs and symptoms of chemical impairment on academic and clinical performance. Faculty will follow procedure for suspicion/identification (Appendix B).

There are numerous signs of substance abuse and chemical dependency related to job performance and attendance. While single incidences of these behaviors may not be significant, the presence of several, and an increasing frequency or a consistent pattern of these behaviors are the basis for reasonable suspicion of chemical impairment. Signs commonly associated with impairment include a change in the pattern of attendance, behavior or performance; physical signs of impairment or withdrawal, and unusual/abnormal use of controlled substances.

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<tr>
<th>Attendance</th>
<th>Behavior</th>
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<tr>
<td>Excessive sick calls</td>
<td>Unkempt/inappropriate clothing</td>
</tr>
<tr>
<td>Repeated absences with a pattern</td>
<td>Poor hygiene</td>
</tr>
<tr>
<td>Tardiness</td>
<td>Mood swings</td>
</tr>
<tr>
<td>Frequent accidents on the job</td>
<td>Frequent irritability with others</td>
</tr>
<tr>
<td>Frequent physical complaints</td>
<td>Excessive talkativeness</td>
</tr>
<tr>
<td>Peculiar/improbable excuses for absences</td>
<td>Poor recall</td>
</tr>
<tr>
<td>Frequent absence from clinical area</td>
<td>Physical abuse</td>
</tr>
<tr>
<td>Frequent trips to rest room/locker room</td>
<td>Rigidity/inability to change plans</td>
</tr>
<tr>
<td>Long coffee or lunch breaks</td>
<td>Incoherent or irrelevant statements</td>
</tr>
<tr>
<td>Early arrival or late departure</td>
<td>Drowsiness at work</td>
</tr>
<tr>
<td>Presence in clinical during scheduled time off</td>
<td>Uncooperativeness with staff</td>
</tr>
<tr>
<td>Confusion about work schedule</td>
<td>Tendency towards isolation</td>
</tr>
<tr>
<td>Request for assignments at less supervised setting</td>
<td>Deteriorating relationships</td>
</tr>
<tr>
<td></td>
<td>Wears long sleeves all the time</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Performance</th>
<th>Physical Signs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excessive time required for record keeping</td>
<td>Hand tremors</td>
</tr>
<tr>
<td>Assignments require more effort/time</td>
<td>Excessive sweating</td>
</tr>
<tr>
<td>Difficulty recalling/understanding instructions</td>
<td>Marked nervousness</td>
</tr>
<tr>
<td>Difficulty in assigning priorities</td>
<td>Coming to clinical area intoxicated</td>
</tr>
<tr>
<td>Display of disinterest in work</td>
<td>Blackouts</td>
</tr>
<tr>
<td>Absentminded/forgetful</td>
<td>Frequent hangovers</td>
</tr>
<tr>
<td>Alternate periods of high and low activity</td>
<td>Odor of alcohol</td>
</tr>
<tr>
<td>Increasing inability to meet schedules</td>
<td>GI upset</td>
</tr>
<tr>
<td>Missed deadlines</td>
<td>Slurred speech</td>
</tr>
<tr>
<td>Frequent requests for assistance</td>
<td>Increased anxiety</td>
</tr>
<tr>
<td>Carelessness</td>
<td>Unsteady gait</td>
</tr>
<tr>
<td>Overreaction to criticism</td>
<td>Illogical or sloppy charting</td>
</tr>
<tr>
<td>Ilogical or sloppy charting</td>
<td>Deteriorating handwriting</td>
</tr>
<tr>
<td>Poor judgment</td>
<td>Inattentive</td>
</tr>
<tr>
<td>Inattentive</td>
<td>Disorganized</td>
</tr>
<tr>
<td>Tendency to blame others</td>
<td>Complaints regarding poor care</td>
</tr>
<tr>
<td>Wears long sleeves all the time</td>
<td>Hand tremors</td>
</tr>
<tr>
<td>Excessive use of breath mints/mouthwash</td>
<td>Sniffling, sneezing</td>
</tr>
<tr>
<td>Clumsiness</td>
<td>Anorexia</td>
</tr>
<tr>
<td>Flushed face</td>
<td>Watery eyes</td>
</tr>
<tr>
<td>Anorexia</td>
<td></td>
</tr>
</tbody>
</table>
Use of Controlled Substances

 Signs out more controlled substances than other providers  
 Frequently breaks or spills drugs  
 Waits to be alone before obtaining controlled substances for assigned cases  
 Discrepancies between patients’ charts and narcotic records  
 Patient complaining of pain out of proportion to medication charted  
 Frequent medication errors  
 Defensive when questioned about medication errors  
 Frequent disappearance immediately after signing out narcotics  
 Unwitnessed or excessive waste of controlled drugs  
 Tampering with drug vials or containers  
 Use of infrequently used drugs

G. Documentation

When Substance Abuse or Chemical Dependency is suspected, students and faculty are responsible for reporting their concerns and observations to the faculty, clinical coordinator or Dean. The Dean or designee will substantiate observations and concerns about the student in an investigation that will include:

1. Documentation is to be written, clear, concise, and include dates, times, locations, and names and signatures of witnesses when possible. The Faculty Report of Reasonable Suspicion of Drug/Alcohol Use Form will be used (Appendix C). Please return the form in a sealed envelope to the Dean marked “confidential” as soon as possible. Notify the Dean’s office by phone to request a drug screen if indicated.

2. Review of records, including but not limited to patient records, narcotic inventory/usage, attendance records, record of grades, and clinical evaluations. Trends, violations or errors will be documented.

3. Confidentiality of reportees will be assured. The student should be made aware of adverse actions and counseled whenever possible.

H. Inspection of Students and their Property

1. Searches of students and their property include but are not limited to lockers, mailboxes, lunch boxes, book bags, purses, or other items on medical center property and private vehicles if parked on school or medical center property. Whenever possible, searches of student personal property will take place in the presence of the student.

2. Inspections may be conducted by authorized personnel, including but not limited to school of nursing representatives, faculty members, or school/medical security officers without notice, without student consent and without a search warrant.

3. Physical evidence such as used syringes, medication vials, or containers of alcohol, found during a search of a student locker or property will be retained as supporting evidence.

4. A student who refuses to submit to an immediate search or inspection shall subject to immediate dismissal.
I. Off-campus Arrests or Convictions

A student who is arrested or charged for a drug offense which involves the off-campus sale, distribution, or possession of legal or illegal drugs must promptly inform the school of the arrest and the nature of the charges. The school will determine whether or not the student may continue in the program. Failure to notify the school of an arrest or charge for a drug offense is grounds for disciplinary action up to and including dismissal from the school.

J. Intervention/Tennessee Professional Assistance Program (TNPAP)

Intervention is a planned method of confrontation that attempts to provide an objective and factual presentation of the problem to the impaired student. The objective of intervention is for the student to agree to an assessment for diagnoses and possible treatment.

1. The student will sign consent forms for drug and alcohol testing and assessment for chemical dependence (Appendix D).

2. The student will be encouraged to self-report to the Tennessee Professional Assistance Program (TNPAP) for Nurses.

3. All information, interviews, reports, statement, memoranda, and drug test results, written or otherwise, received by the intervention team are confidential. Documentation will be kept by the School of Nursing in a secure file, separate from the student academic file and will be destroyed following successful completion of the program. All documentation will become part of the permanent academic file should disciplinary action be warranted.

4. The student will be assigned a faculty advocate to facilitate communications between the student, TNPAP, and the School of Nursing.

K. Treatment

Following a positive assessment for substance abuse or chemical dependency, the student will be suspended from the program and required to immediately enroll in treatment.

1. The cost of the evaluation, subsequent treatment, and associated fees are the responsibility of the student.

2. If the student fails to enter treatment within the recommended time period, he or she will be dismissed from the program and reported to the state peer assistance program and/or the state licensing board.

3. Following agreement to treatment, a leave of absence will be granted to the student and cannot exceed 12 months.

4. If a student fails to complete treatment and reenter the school within the specified length of time, he or she will be subject to immediate dismissal from the School of Nursing.

L. Reentry to the School of Nursing with TNPAP Monitoring Contract

Following successful completion of an approved treatment program, a student may be allowed to reenter the School of Nursing with a conditional enrollment status that is dependent upon: abstinence from all psychoactive substance, participation in on-going after-care programs, and compliance with TNPAP monitoring contract. Access to controlled substances in the clinical area will be determined by TNPAP and the Dean of the School of Nursing.
Reentry after treatment will be granted only once.

1. The Tennessee Professional Assistance Program (TNPAP) will recommend reentry to the School of Nursing. The student must have a planned program for continued recovery (aftercare). The student will follow any restrictions for clinical practice as determined by the School of Nursing.

2. A conference will be conducted with the student, the student’s treatment counselor, TNPAP liaison, and the Dean or designee.

3. A written contract with the school will be required for all students reentering the program.

4. The contract will include the responsibilities and requirements of the student and the consequences of failure to meet any of the requirements.

5. The contract will be specific for the individual according to his or her situation and state licensing regulations/requirements/guidelines.

6. A re-entry contract may be more restrictive than the state requirements.

7. Faculty/clinical instructors will be notified of any clinical practice and schedule restrictions.

8. Continuation will be contingent on documented compliance with the TNPAP rehabilitation plan.

9. The recovering student will be treated with respect and afforded all opportunities granted to other students with disabilities.

10. Graduates can apply for licensure at the appropriate time if they are in compliance with the TNPAP contract.

M. Dismissal from the School of Nursing

Reasons for dismissal of a student with a suspected or known problem with substance abuse or chemical dependency, include, but are not limited to the following:

1. Failure to provide a written consent for a drug screen.

2. Failure to provide a blood, urine, saliva, hair follicle, or breath sample for a drug screen.

3. Refusal to have an assessment for possible substance abuse or chemical dependence.

4. Failure to complete treatment.

5. Failure to abide by the terms of the re-entry contract with the school.

6. Loss of licensure as a registered nurse (graduate students).

7. Criminal activity related to Substance Abuse or Chemical Dependency.

8. Failure to allow search of property.
N. Due Process

The School of Nursing considers the Substance Abuse Policy Statement as procedural due process. Any student may appeal decisions through the University of Memphis Grievance Procedure. The Dean of the School of Nursing may determine on a case by case basis special circumstances to this policy.

*Adapted from the University of South Alabama, The University of Tennessee Memphis, Northwestern University, Boise State University, and Purdue University North Central.
Appendix A
The University of Memphis
Loewenberg School of Nursing
Substance Abuse Policy and Drug Testing Procedure Agreement

I understand that the University of Memphis, Loewenberg School of Nursing may ask me to submit to a drug test for cause, at a designated laboratory, which will provide the result of the test to the Dean of the College of Nursing.

By signing this document, I indicate that I have read, I understand, and I agree to the school of nursing substance abuse policy and drug testing procedure.

This notarized document constitutes my consent for drug testing by a school of nursing designated laboratory in the event I am asked to submit to a drug screen for cause. It also constitutes consent for the laboratory to release the result of my drug test to the dean of the school of nursing. Urine tests will be split specimen samples and confirmed using GCMS technology.

In Witness Whereof, this instrument is executed this the _____ day of _____________, 20__.

WITNESSES:

Witness #1 Signature __________________________
Student’s Signature __________________________

Witness #2 Signature __________________________
Student’s Printed Name ________________________

STATE OF ________________________________

COUNTY OF _____________________________

On this _____ day of _____________, 201__, before me appeared ____________________________ to be known to be the person described in and who executed the foregoing instrument, and acknowledged that ____________________________ executed the same as ________ free act and deed.

Given under my hand and seal on the day and year above written.

SEAL ______________________________________

NOTARY PUBLIC ___________________________

My commission expires: ________________

Adapted from University of South Alabama
Appendix B
The University of Memphis
Loewenberg School of Nursing
Faculty Procedure for Notification/Suspicion of Drug/Alcohol Use by Students

The School of Nursing maintains a drug-free environment. Any nursing student who demonstrates behavioral changes suspected to be related to the use of drugs or alcohol will be subjected to testing. The nursing faculty member’s decision to refer a student for drug testing will be based on, but not limited to:

- Observable phenomena such as direct observation of drug use and or physical symptoms or manifestations of being under the influence of a drug including the odor of alcohol.
- Erratic behavior, slurred speech, staggered gait, flushed face, dilated/pinpoint pupils, wide mood swings, and deterioration of work performance.
- Information that a student has caused or contributed to an accident that resulted in injury requiring treatment by a licensed health care professional.
- Conviction or being found guilty of a drug, alcohol or controlled substance violation.

Drug Testing Procedure:

1. There is a report of suspicious student behavior(s).
2. The faculty and another health care provider together witness the suspicious behavior(s).
3. The student remains in the presence of a faculty or other designated person until drug testing procedure is complete.
4. The student is not allowed to leave the premises or engage in driving or other unsafe behaviors that may threaten self or others.
5. Notify the LSON Dean (or designee) of the suspicious behavior.
6. The Dean (or designee) calls Mid-South Drug Testing Center to report situation and location of student.
7. Faculty completes the LSON Faculty Report of Reasonable Suspicion of Drug/Alcohol Use form (Appendix A of BSN Student Handbook)
8. Student is suspended from classes pending test results.
9. Test results will be reviewed within 24 hours.
10. If negative results, the student may need further review for other conditions affecting behavior; appropriate referrals should be made
11. If positive results, a referral to Tennessee Professional Assistance Program (TNPAP) is provided to student.
12. If a student accepts the TNPAP referral and completes that program, with appropriate treatment/monitoring, he/she can be accepted back into the nursing program.
13. If student does not accept TNPAP referral or does not complete that program, with appropriate treatment/monitoring, he/she will not be accepted back into the nursing program.

Current drug testing vendor:
Kelly Dobbins, MA, R-CPCT, BAT
Mid-South Drug Testing
3294 Poplar Ave., Suite 250
Memphis, TN 38111
p. 901.320.9295; f. 901.320.9359
www.midsouthdrugtesting.com
Appendix C  
University of Memphis  
Loewenberg School of Nursing  
Faculty Report of Reasonable Suspicion of Drug/Alcohol Use Form

Please use the space below to provide a detailed description of student behavior. All information is to be kept confidential. Please return this form in a sealed envelope to the Dean. Notify the Dean’s office immediately to request a drug screen.

1. Name of Student: ______________________________

2. Date of Incident: ______________________________

3. Time of Incident: ______________________________

4. Location of Incident: ____________________________

5. Detailed description: Include any behaviors, visual, olfactory, or auditory observations

* Refer to the list in the Substance Abuse Policy and consider the following:
  * Speech
  * Coordination
  * Performance
  * Alertness
  * Demeanor
  * Eyes
  * Clothing
  * Odor of alcohol on breath
  * Other observed behaviors

* List reports of complaints of student behavior
* List unexplained absences or tardiness

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Faculty/date/time_________________________________ Witness/date/time________________________
Student/date/time:_______________________________

*Adopted from the University of South Alabama
Appendix D
The University of Memphis
Loewenberg School of Nursing
Student Wellness Contract

I, ____________________________, will receive a comprehensive evaluation to determine chemical dependency or substance abuse. The exam will include a psychological evaluation. I understand that the payment for the evaluation, treatment, and follow-up care will be my responsibility. If treatment is not recommended, evidence of such shall be presented to the Dean of the School of Nursing before I may return to my academic studies. I understand that academic studies include both clinical and didactic course work. If treatment is recommended, I must complete the treatment program determined by the evaluator. Written evidence of my treatment program completion, ability to return safely to school, and my after care plan will be submitted to the Dean of the School of Nursing. I understand that the School of Nursing may impose restrictions on certain academic components of my studies including limited access to narcotics. It has been explained to me that the grade of (W) withdraw will be awarded for the nursing course(s) interrupted by my treatment. I understand that a written reinstatement request be submitted for the semester that I desire to return to the nursing program. I understand that further evidence of chemical impairment will result in the recommendation by the nursing faculty for my administrative dismissal from the program. My signature allows the release of information between TNPAP and the School of Nursing.

In Witness Whereof, this instrument is executed this the _____ day of _____________, 201__.

WITNESSES:

Witness #1 Signature  Student’s Signature

Witness #2 Signature  Student’s Printed Name

STATE OF __________________________
COUNTY OF __________________________

On this _____ day of _____________, 20 __, before me appeared __________________________ to be known to be the person described in and who executed the foregoing instrument, and acknowledged that __________________________ executed the same as ________ free act and deed.

Given under my hand and seal on the day and year above written.

SEAL __________________________

NOTARY PUBLIC

My commission expires: ____________

*adopted from Boise State University and Purdue University North Central
STUDENT ACKNOWLEDGEMENT OF POLICIES/HANDBOOK
Student Acknowledgement of Policies/Handbook Agreement  
2014-2015  

I have received a copy of the LSON BSN Student Handbook. I have read, understand, and will abide by the LSON policies related to:  
Core Performance Standards (as per the University of Memphis Undergraduate Catalog)  
Academic Integrity  
Academic Misconduct  
Advisement  
Clinical Nursing Course Enrollment Requirements  
General Education Course work  
Participation in TSNA and NSNA  
Progression in the Nursing Major  
Irregular Progression in the Nursing Major  
Disqualification from the Nursing Major  
Withdrawal from Nursing Courses  
Late/Retroactive Withdrawal  
Accelerated BSN Program Option Requirements  
Summer School  
Children on Campus  
Classroom and Didactic Course Expectations  
Attendance  
Clinical Placement  
Clinical/Lab Attendance  
Clinical/Lab Absence  
Clinical Tardy  
Unsatisfactory Course Grade Prevents Clinical Withdrawal  
Repeating Clinical Practicum  
Required Drug Testing  
Substance Use  
Blood and Body Fluid Exposure and Prevention  
Clinical Practice in Employment Setting  
Nursing Student Employment  
Client Care and Ethics Policy  
Client Safety and Confidentiality  
Clinical Professional Dress  
Clinical Uniform  
Clinical Supplies  
Dosage Rounding Rules  
Verbal and Phone Orders  
Communication  
Requesting Test Scores  
Disaster Planning  
Inclement Weather  
Grade  
Testing  
Clinical Evaluation  
Skills/Lab Evaluation  
Nursing Achievement Tests  
Professional Conduct and Comportment  
Undergraduate Grade Appeal Procedure  
Substance Abuse Policy  

Print Name: _____________________________________________________  
Signature: _____________________________________________________  
Date: __________________________________________________________