AdventHealth UNIVERSITY

Department of Nursing

Associate of Science in Nursing (ASN)

Student Handbook Supplement

Academic year – 2025-2026

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APPROVAL AND ACCREDITATION

AdventHealth University (AHU) is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award associate, baccalaureate, master's, and doctorate degrees. AdventHealth University also may offer credentials such as certificates and diplomas at approved degree levels. Questions about the accreditation of AHU may be directed in writing to the Southern Association of Colleges and Schools Commission on Colleges at 1866 Southern Lane, Decatur, GA 30033-4097, by calling 404-679-4500, or by using information available on SACSCOC's website (www.sacscoc.org).

The ASN program is approved by the Florida Board of Nursing (FBON), located at 4052 Bald Cypress Way, Tallahassee, FL 32399; phone: 850-245-4125; fax: 850- 617-6460; web address: https://floridasnursing.gov.

Effective May 30, 2024, AHU's ASN program is a candidate for initial accreditation by the Accreditation Commission for Education in Nursing. This candidacy status expires on May 30, 2026. Accreditation Commission for Education in Nursing (ACEN), 3390 Peachtree Road NE, Suite 1400, Atlanta, GA 30326. (404) 975-5000. http://www.acenursing.com/candidates/candidacy.asp

Note: Upon granting of initial accreditation by the ACEN Board of Commissioners, the effective date of initial accreditation is the date on which the nursing program was approved by the ACEN as a candidate program that concluded in the Board of Commissioners granting initial accreditation.

DEPARTMENT OF NURSING MISSION STATEMENT

In harmony with the AdventHealth University' Mission Statement, the Department of Nursing develops nurse leaders who live the healing values of Christ. Faculty provide educational experiences within a Christian environment, designed to promote excellence in nursing. Furthermore, the Department provides educational opportunities for students to explore and develop university values of nurture, excellence, spirituality, and stewardship as related to nursing leadership.

Nurture. Nurture encompasses working with others including nursing colleagues, inter-professional entities, community members, patients, and families. Graduates are equipped to deal effectively with change, assist team members to work collaboratively, and apply critical thinking skills to manage and work with individuals as well as systems.

Excellence. Excellence in leadership is promoted through the study of quality initiatives and the safety issues inherent in today's healthcare milieu. Graduates are able to utilize evidence-based practice, provide data and guide others in vital decisions made in healthcare and higher education.

Spirituality. Spirituality directs and guides graduates in the practice of Christian professionalism. Guided by Christian ethics and biblical standards, graduates provide vision, offer solutions and assist the organization to operationalize its mission of offering healthcare as ministry.

Stewardship. Stewardship is also part of the repertoire of graduates as they use organizational resources judiciously. As conscientious stewards, graduates are respectful of the time, effort and resources available to patients and families, coworkers, and the community at large.

ASSOCIATE OF SCIENCE IN NURSING (ASN) PROGRAM MISSION STATEMENT

The ASN program prepares excellent, entry-level nurses to demonstrate caring Christian principles based on the AHU values of Nurture, Excellence, Spirituality, and Stewardship. The ASN Program educates graduates to provide whole-person nursing care to individuals and families in a structured environment. Therefore, the curriculum is grounded in the liberal arts and includes professional values, core competencies, knowledge, and role development. Content for the ASN student provides basic nursing knowledge that is relevant to common, well-defined problems. The graduate is prepared to function as a member of the nursing profession and a care manager in acute care settings.

ASN PROGRAM GUIDELINES

The goals of the ASN program are to educate students to:

A. Demonstrate caring Christian principles in the role of a registered nurse based on the AHU values of Nurture, Excellence, Spirituality, and Stewardship.
B. Provide whole-person care to individuals and families in a structured environment.
C. Integrate professional values and competencies with knowledge from the liberal arts and nursing knowledge that is relevant to common, well-defined health problems as a member of the nursing profession and a care manager in acute care settings.

STATEMENT OF PHILOSOPHY

The faculty believe that the discipline of nursing is both an art and a science that promotes health through the delivery of wholistic care to individuals, families, and communities. The Department of Nursing believes that professional, health-oriented service to individuals, families, and communities is core to the practice of professional nursing.

The practice and teaching of nursing is a calling to exercise God's gifts in a life of service to humanity. Through the profession of nursing, graduates extend the healing ministry of Christ by practicing *healthcare as ministry*. Faculty and students, guided by Christian principles, achieve personal and professional excellence through quality education and life-long learning.

Integrating the concepts from the Neuman Systems Model and AHU's Christian principles, the curriculum addresses the four metaparadigm concepts of nursing: (a) person, (b) environment, (c) health, and (d) nursing as follows in the curricular framework.

DEPARTMENT OF NURSING CURRICULAR FRAMEWORK

The nursing curriculum is based on the clinical, nursing model and incorporates content from the Neuman Systems Model that focuses on the provision of wholistic health care. The Neuman Systems Model is health oriented, wholistic, open, and dynamic. The model focuses on two components: the patient/client system's response to stressors and the interventions used to assist the patient/client in response to those stressors. The goal of the model is to facilitate optimal wellness of the patient/client. In the academic setting, this goal is translated into the development and attainment of a sound educational program that enable learners to attain the program outcomes. The model addresses the four metaparadigm concepts of nursing: (a) person, (b) environment, (c) health, and (d) nursing. The definitions of the metaparadigm concepts are an integration of the Neuman Systems Model and Christian principles as expressed by AdventHealth University (AHU).

Person. A person is a child of God who is an integrated whole and created to live in harmony with God, self, and others. A person is also a patient or client system who may be the learner, the faculty, the support staff, an individual, a family, or the community. The patient or client system consists of five integrated variables that include physiological, psychological, socio-cultural, developmental, and spiritual factors. These variables are integrated into the nursing curriculum to prepare graduates with the capacity for caring, compassion, critical thinking, and respect for the dignity and self-determination of others. The nursing faculty are committed to caring, compassion, critical thinking, and respect for students by modeling these behaviors in the delivery of the curriculum.

Environment. The environment is all of God's creation. The environment is an open and dynamic system consisting of intrapersonal, interpersonal, and extra-personal forces influenced by, and influencing the person's response to stressors. The external environment may consist of classrooms, teaching and learning media, practice settings, the student's home and professional employment settings. Internal environments may include spiritual, cultural, psychological, social, and physiological factors that impact teaching, learning transactions, and the capacity for learning. These environmental factors are built into the planning, design, implementation, and evaluation of the curriculum.

Health. Health is a continuum of wellness to illness and is dynamic in nature. Optimal wellness or stability is achieved when the total patient or client system needs are met. A

reduced state of wellness is the result of unmet patient or client system needs. Health is dependent on the interplay of internal and external resources to support the patient or client system. The nursing curriculum advocates for the health of self and others and is designed with a focus on health promotion, health maintenance, disease prevention, and health restoration. Therefore, the eight principles of health include C-Choice, R-Rest, E-Environment, A-Activity, T-Trust, I-Interpersonal Relationship, O-Outlook, and N-Nutrition (CREATION), and are embedded throughout the curriculum. Students engage in health-related activities across the lifespan that benefit the individual, family, community, and society to enhance optimal functioning.

Nursing. Nursing is both an art and a science that promotes health through the delivery of wholistic care to individuals, families, and communities. Nursing is a dynamic, interactive process and treats human responses to stressors throughout the life span. The curriculum is structured with a focus on the development of nurses who are accountable and responsible for developing and delivering caring, compassionate, wholistic nurse-patient or client system interactions. These interactions are extended through the healing ministry of Christ. Students are nurtured by faculty and learn to nurture others. Pedagogical excellence is modeled in preparing students for patient or client-focused professional nursing care using evidence-based practice.

Health Maintenance, Health Promotion, Disease Prevention, and Health Restoration in the Neuman's System Model (NSM)

Health maintenance, health promotion, disease prevention, and health restoration are key concepts in the NSM and are integral to all courses in the nursing program. In the NSM one of the goals of a system is to conserve system energy and maintain or enhance the system's normal level of wellness. This normal level of wellness is called the system's *normal line of defense.* Systems develop methods of dealing with the routine problems of life that, unchecked, would threaten that normal line of defense. Collectively these methods (i.e. diet, exercise, or meditation) of dealing with life's problems are called *flexible lines of defense* and are generally considered to be part of the system's internal environment.

Health promotion interventions that begin in the system's external environment (i.e. wearing a helmet or routine medications) but serve to enhance the system's level of wellness and/or prevent *stressors* (i.e. disease or trauma) from disrupting the system's normal line of defense are called *primary prevention interventions*. Over time, primary prevention interventions may be incorporated into a system's flexible line of defense. Once a stressor succeeds in disrupting the system's normal line of defense, the system's internal lines of resistance (i.e. white blood cells or clotting factors) are activated to combat the impact of the stressor. If a stressor is not successfully ameliorated, the result is the death of the system.

Interventions implemented from outside the system aimed at combating the impact of stressors are called *secondary interventions* (i.e. surgery or acutely needed medications). Once a stressor has been successfully ameliorated, the system begins to either reestablish a new normal level of wellness that demonstrates resultant loss of system energy, or the system begins to increase its level of wellness through the continued effect of the internal

lines of resistance combined with *tertiary interventions* from the external environment (i.e. cardiac or physical rehabilitation). The NSM labels this process of health restoration as the *reconstitution* of the system.

Once the reconstitution process is completed (the system stops getting better) a new normal line of defense is established with concomitant flexible lines of defense. This new normal line of defense may be reestablished at the same level of wellness, a lower level of wellness, or a higher level of wellness than the system was previous to the incidence of the stressor. The level of wellness where the new normal line of defense is established depends on the system's response to internal and external efforts to reestablish that new normal line of defense.

One of the goals of healthcare in general, and nursing in particular, is to achieve the highest level of wellness for all people. This is achieved through the consistent implementation of scientifically-supported primary, secondary, and tertiary healthcare interventions. Deciding if an intervention is primary, secondary, or tertiary depends more on where the system is in its particular health trajectory than on the nature of the intervention. For example, a person with diabetes may take insulin as part of their flexible line of defense but will continue to need that insulin after a stressor disrupts their normal line of defense. At that point the insulin becomes a secondary intervention. When the person begins to reconstitute from the stressor the insulin becomes a tertiary intervention. After a new normal line of defense is established, the insulin returns to a primary intervention and ultimately part of the person's flexible lines of defense.

Neuman System Model Definitions

Basic Structure: The basic structure consists of common client survival factors related to system variables as well as unique individual characteristics.

System variables: Physiological, psychological, socio-cultural, developmental, and spiritual factors.

Lines of Resistance: The lines of resistance protect the basic structure. These lines are activated following stressor invasion of the normal lines of defense

Normal Lines of Defense: An adaptation level of health developed over time and considered normal for a particular individual client or system; it becomes a standard for wellness deviance determination.

Flexible Lines of Defense: Protective system for the client's stable state. Ideally it prevents stressor invasion and protects the normal line of defense. It is strengthened by primary prevention.

Stressors: Environmental factors are intra-, inter-, and extra-personal in nature and have the potential for disrupting system stability by penetrating the system lines of defense and resistance. The stressor is considered inherently neutral or inert. Their outcomes may be either positive or negative; client perception and coping ability are major considerations for caregivers and clients.

Intra-personal stressors: The internal environmental forces that occur within the boundary of the client system.

Inter-personal stressors: The external environmental interaction forces that occur outside the boundaries of the client system at the proximal range.

Extra-personal stressors: The external environmental interaction forces that occur outside the boundaries of the client system at the distal range.
Primary Prevention Level: Before a reaction to stressors has occurred.
Secondary Prevention Level: After a stressor reaction has occurred.
Tertiary Prevention Level: Following treatment of a stressor reaction.
Reaction: Is based on the perception of the stressor by the basic structure and may occur in varying degrees.
Intervention: Any preventative mode of action that modifies a stressor or potential stressor at the primary, secondary or tertiary level. These modes of action can be implemented by the patient/client, significant other, family, community, nurse, or other health care provider.

Interventions are correctly termed:

- Primary Prevention-as-Intervention,
- Secondary Prevention-as-Intervention
- Tertiary Prevention-as-Intervention

Reconstitution: Represents the return and maintenance of system stability, following treatment of a stressor reaction, which may be result in a higher or lower level of wellness.
Advocate: Argue for, stand up for, endorse, intercessor, mediator, protects and defends human rights and patient well-being.
Care provider: Use of the nursing process to assist the patient/client to attain, maintain, and retain health.
Collaborator: Includes the role of advocate, liaison, coordinator, educator, and care provider
Coordinator: Organizes patient/client care.
Educator: Teaches, reinforces, and evaluates learning.
Liaison: Contact, a go-between for departments and individuals.
Manager: Efficient and effective use of human, physical, financial, and technological resources to meet patient/client needs and support organizational outcomes.

Goal of the Neuman Systems Model and Clinical Practice

The main nursing goal is to facilitate optimal wellness of the patient/client through retention, attainment, or maintenance of client system stability.

Whole Person Care: CREATION Life Principles Defined

C – Choice: Accept responsibility for optimal health
R – Rest: Enjoy replenishing sleep and relaxation
E – Environment: Create a nurturing, rejuvenating surrounding
A – Activity: Put your body into motion
T – Trust: Express your faith and belief in God
I – Interpersonal Relationships: Celebrate relationships
O – Outlook: Practice a positive, happy attitude
N – Nutrition: Fuel your high-performance life

EDUCATIONAL PHILOSOPHY OF ADVENTHEALTH UNIVERSITY

AdventHealth University has adopted an educational philosophy that includes a course delivery format: blended learning. Blended learning includes content and activities delivered in a simulation, or hands on learning, while other content and activities are offered in a classroom setting. The blended course promotes learning that is interactive and engaging for students in the classroom but also allows them to learn material outside of the classroom. In the blended format, a portion of the course activities will be completed on campus, at clinical settings, or through asynchronous learning videos. Course activities may include, but are not limited to, lecture content, case scenarios, chats or discussions, exams, and clinical involvement. All nursing classes are offered in person.

ASN STUDENT LEARNING OUTCOMES (SLO)

Level I and Level II (End of Program Student Learning Outcomes - EOPSLO)

LEVEL I - LEVEL OUTCOMES

1. Caring: (AHU: CA 1; ANA: 9; NSM: S, NCLEX-RN Test Plan: Psychosocial Integrity, Basic Care and Comfort)
    - Demonstrate caring, Christian principles to guide interactions with patients/clients, health care professionals, and the public that demonstrate diversity, equity, and inclusion.
2. Communication: (AHU: CO 1; ANA: 10; NSM: PSY, NCLEX-RN Test Plan: Psychosocial Integrity)
    - Express effective skills in communication and information management.
3. Critical Thinking: (AHU: CT 1; ANA: 5; NSM: PSY, NCLEX-RN Test Plan: Safe and Effective Care Environment, Health Promotion and Maintenance, Pharmacological and Parenteral Therapies)
    - Apply critical thinking, clinical reasoning and judgement, and the nursing process to address healthcare needs throughout the lifespan.
4. Ethical / Moral: (AHU: E/M 1; ANA: 7; NSM: SC, NCLEX-RN Test Plan: Safe and Effective Care Environment)
    - Recognize ethical, legal, economic, and political factors that affect the management of healthcare care for individuals, families, and communities.
5. Lifelong Learning: (AHU: LL 1; ANA: 13; NSM: PSY, NCLEX-RN Test Plan: Safe and Effective Care Environment)
    - Recognize responsibility to participate in activities that foster ongoing professional growth and development in self, others, and the profession.
6. Professional Expertise: 1: (AHU: PE 1; ANA: 12; NSM: PSY, NCLEX-RN Test Plan: Safe and Effective Care Environment, Reduction of Risk Potential)
    - Apply nursing research and other evidence-based approaches for use in safe practice.
7. Professional Expertise: 2: (AHU: PE 1; ANA: 18; NSM: SC, NCLEX-RN Test Plan: Safe and Effective Care Environment, Health Promotion and Maintenance)

- Discuss community resources to meet the primary, secondary, and tertiary health care needs of individuals, families, and communities.

8. Professional Expertise: 3: (AHU: PE 1; ANA: 5, 8, 11, 12; NSM: PHY, NCLEX-RN Test Plan: Safe and Effective Care Environment, Physiological Adaptation)
    - Demonstrate the roles of the nurse as a care provider, manager, educator, advocate, and delegator of nursing care as appropriate.
9. Professional Expertise: 4: (AHU: PE 1; ANA: 10; NSM: All Variables, NCLEX-RN Test Plan: Safe and Effective Care Environment, Psychosocial Integrity)
    - Employ knowledge from nursing, the arts and sciences, and humanities to meet patient/clients' physiological, psychological, sociocultural, developmental, and spiritual needs.
10. Service to the Community: 1 (AHU Service to the Community 1, ANA: 1)
    - Complete service-learning projects as assigned.
11. Service to the Community: 2: (AHU Service to the Community 1, ANA: 1)
    - Participate in service-learning activities as sponsored by AHU Chapter of NSNA and other community organizations.

LEVEL II - LEVEL OUTCOMES (End of Program Student Learning Outcomes - EOPSLO)

1. Caring: (AHU: CA 2; ANA: 9; NSM: S, NCLEX-RN Test Plan: Psychosocial Integrity, Basic Care and Comfort)
    - Provide caring, Christian principles to guide interactions with patients/clients, health care professionals, and the public that demonstrate diversity, equity, and inclusion.
2. Communication: (AHU: CO 2; ANA: 10; NSM: PSY, NCLEX-RN Test Plan: Psychosocial Integrity)
    - Use effective skills in communication and information management.
3. Critical Thinking: (AHU: CT 2; ANA: 5; NSM: PSY, NCLEX-RN Test Plan: Safe and Effective Care Environment, Health Promotion and Maintenance, Pharmacological and Parenteral Therapies)
    - Apply critical thinking, clinical reasoning and judgement, and the nursing process to address healthcare needs throughout the lifespan.
4. Ethical / Moral: (AHU: E/M 2; ANA: 7; NSM: SC, NCLEX-RN Test Plan: Safe and Effective Care Environment)
    - Explain ethical, legal, economic, and political factors that affect the management of healthcare care for individuals, families, and communities.
5. Lifelong Learning: (AHU: LL 2; ANA: 13; NSM: PSY, NCLEX-RN Test Plan: Safe and Effective Care Environment)
    - Explain responsibility to participate in activities that foster ongoing professional growth and development in self, others, and the profession.
6. Professional Expertise: 1: (AHU: PE 2; ANA: 12; NSM: PSY, NCLEX-RN Test Plan: Safe and Effective Care Environment, Reduction of Risk Potential)
    - Apply nursing research and other evidence-based approaches for use in safe practice.

7. Professional Expertise: 2: (AHU: PE 2; ANA: 18; NSM: SC, NCLEX-RN Test Plan: Safe and Effective Care Environment, Health Promotion and Maintenance)
    - Discuss community resources to meet the primary, secondary, and tertiary health care needs of individuals, families, and communities.
8. Professional Expertise: 3 (AHU: PE 2; ANA: 5, 8, 11, 12; NSM: PHY, NCLEX-RN Test Plan: Safe and Effective Care Environment, Physiological Adaptation)
    - Demonstrate the roles of the nurse as a care provider, manager, educator, advocate, and delegator of nursing care as appropriate.
9. Professional Expertise: 4: (AHU: PE 2; ANA: 10; NSM: All Variables, NCLEX-RN Test Plan: Safe and Effective Care Environment, Psychosocial Integrity)
    - Use knowledge from nursing, the arts and sciences, and humanities to meet patient/clients' physiological, psychological, sociocultural, developmental, and spiritual needs.
10. Service to the Community: 1 (AHU Service to the Community 1, ANA: 1)
    - Complete service-learning projects as assigned.
11. Service to the Community: 2: (AHU Service to the Community 1, ANA: 1)
    - Participate in service-learning activities as sponsored by AHU Chapter of NSNA and other community organizations.

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24/7 Help Desk Technical Support:
Toll-Free Telephone: 1-877-642-1902
Submit a ticket or a live chat on the Canvas system

CHAIN OF COMMAND AND COMMUINICATION COURTESY

The information in this section is provided to assure that students are able to utilize the full array of course support that is provided by AdventHealth University.

Contact Sequence (See roles below)
Address *course content questions* in the following sequence:

1. Lead Faculty
2. Assistant Dean.

Address *process questions* ("How do I …") in the following sequence:

1. Lead Faculty for course details or Academic advisor for registration details
2. Director of Student Success and Retention

Address Technological Questions:

1. Contact the 24/7 Help Desk to document the issue, receive immediate assistance, and obtain a problem identification number. Toll-free 24/7 telephone access at 1-877-642-1902 or send email to external e-mail: Submit a ticket or the live chat on the Canvas system

2. Contact the Director of Online Student Success and Retention and/or course Lead Instructor.

Lead Faculty/Course Coordinator
The Lead Faculty/Coordinator is responsible for the following activities:

a. Developing course content, including group activities, live conferences, and discussion boards.
b. Monitoring student discussion forums and participation.
c. Analyzing results of quizzes and examinations.
d. Monitoring students' progress in the course.
e. Maintaining communication/team meetings with the section adjunct instructors.
f. Review requests for extensions/incomplete grades.
g. Monitoring students' engagement in the course.
h. Submitting final course grades.
i. Recording course data in WaterMark PSS.

Students should contact the Lead Faculty for the following issues:

a. Questions about the material, including readings, assignments, multi-media presentations, discussion forums, and group activities were not answered by the section adjunct faculty.
b. Course policies or procedures.
c. Requests for extensions/incomplete grades

Success Coach and Remediation Specialist (Phoebe Johnson-ASN Orlando)
The Success Coach and Remediation Specialist is responsible for the following activities:

a. Supporting students and instructors to resolve issues and increase progress toward academic achievement and perseverance.
b. Meeting with students to conduct a gap analysis and create a success plan.
c. Coordinating student referrals to academic or psychosocial resources as appropriate.
d. Monitoring student performance and documenting progress.
e. Designing and implementing teaching strategies to help nursing students meet outcomes.
f. Assisting students with goal setting, planning, and overcoming obstacles.

Contact the Success Coach and Remediation Specialist for the following issues:
To develop a proactive academic plan.

a. When your nursing program requires a meeting or ongoing coaching.
b. To adjust study strategies due to low quiz/exam scores.
c. For issues related to clinical competency, including unsafe clinical behavior, or failing a clinical competency.
d. Lapses in professional judgment (i.e., tardiness, absenteeism, unprofessional behavior).

e. Extended lapse in program completion for any reason (not enrolled in nursing courses for a trimester or longer before resuming coursework).

Nursing Department ASN Assistant Dean (Dr. Kelli Lipscomb-Orlando Campus)
The Nursing Department Assistant Dean is responsible for the following activities:

a. Oversight of the nursing program.
b. Management of nursing faculty and staff.
c. Approval of student requests for academic exemptions (petitions).
d. Enforcement of compliance with departmental and university-wide accreditation and regulatory standards.
e. Faculty and program evaluation.
f. Implementation of program policies.
g. Assignment of faculty.
h. Compliance with accreditation and regulatory standards.

Contact the Department ASN Orlando Assistant Dean for the following issues:

a. Suggestions concerning program improvements/modifications.
b. Issues not satisfactorily addressed by other program faculty or staff.

ASN Program Coordinator Orlando Campus
The Program Coordinator is responsible for the following activities:

a. Facilitate faculty and adjunct development and adjunct evaluations.
b. Oversee student readmission and resequencing process.
c. Oversee student forums and grievance process.
d. Assist with accreditation process.

Contact the Program Coordinator for the following issues:

a. Suggestions concerning program improvements/modifications.
b. Issues not satisfactorily addressed by the section Adjunct Instructor and the Lead Faculty/Course Coordinator.

Nursing Department ASN Assistant Dean (Dr. Jacoba Leiper-Tampa Campus)
The Nursing Department Assistant Dean is responsible for the following activities:

a. Oversight of the nursing program.
b. Management of nursing faculty and staff.
c. Approval of student requests for academic exemptions (petitions).
d. Enforcement of compliance with departmental and university-wide accreditation and regulatory standards.
e. Faculty and program evaluation.
f. Implementation of program policies.
g. Assignment of faculty.
h. Compliance with accreditation and regulatory standards.

Contact the Department ASN Tampa Assistant Dean for the following issues:

a. Suggestions concerning program improvements/modifications.
b. Issues not satisfactorily addressed by other program faculty or staff.

FACULTY RESPONSIBILITIES TO THE STUDENT

The student will be provided with:

a. Instruction in the classroom setting and through the use of simulation.
b. Access to current nursing references and audiovisual materials.
c. Clinical experiences supervised by qualified faculty in accredited health facilities.
d. Individual counseling and referrals as needs arise.
e. A learning center equipped for demonstration, supervised practice, and evaluation of skill performance.
f. Access to University resources such as enrollment services, student services, financial aid, and Student Academic Support Services. All students may access these services through the University webpage, e-mail, phone, and when necessary, video conferencing.

The faculty will:

a. Post a schedule of office hours.
b. Keep appointments with the students or make alternative arrangements.
c. Provide evaluations of student progress and performance on a regular and timely basis.
d. Encourage development of effective learning and study habits.
e. Listen to grievances and suggestions and seek constructive solutions to problems.
f. Return graded papers to students on a regular and timely basis.
g. Communicate any changes in scheduling to the student.
h. Begin classes and clinical labs with prayer and/or devotional readings.

STUDENT RESPONSIBLITIES TO THE FACULTY

The student is expected to:

a. Meet appointments punctually or arrange for their postponement.
b. Promptly notify the faculty of unforeseen circumstances that affect attendance and performance.
c. Take initiative in meeting deadlines and completing assignments.
d. Take responsibility for learning (i.e. preparing for classes, clinical assignments, and skill validations).
e. Take initiative in consulting with faculty regarding concerns.
f. Follow University, department, and clinical agency policies.
g. Prepare for active participation in class, lab, and clinical.
h. Demonstrate a positive, professional attitude.

CIVILITY POLICY

AdventHealth University is a Christian-based institution where each student, faculty, and staff are valued as one of God's unique creations; this is evidenced by how students, faculty, and staff converse and conduct themselves. Care should be taken to present oneself as a Christian professional; this can be achieved in part by avoiding cursing, inappropriate innuendos, and belligerent behavior.

Students, faculty, and staff are required to demonstrate civility in all interactions and communication, e.g., in-person, on-line, emails, phone and cell calls, virtual interactions, texting. They must always treat each other with respect and caring. Students, faculty, and staff will demonstrate civility, professional, and caring, Christian behaviors in all interactions and communication, e.g., consideration, kindness, patience, grace, a positive attitude.

Students, faculty, and staff who demonstrate incivility, unprofessional, and un-Christian behaviors in interactions and communication, e.g., confrontational, interrupting, bullying, cursing, vulgarities, sarcasm, aggressiveness, threatening, accusatory, disrespectful, unkind, impatient, negative tone of voice, negative behavior, negative communication, judgmental, devaluing students, peers, faculty, staff, colleagues, and administration will be documented in a Disciplinary Process. This may lead to referral to the Citizenship Committee and dismissal from the Programs in the Department of Nursing, based on the frequency and severity of the behaviors. The Faculty and Vice-Chairs of the Department of Nursing Programs will make the determination of the disciplinary actions and procedure.

STUDENT ACADEMIC SUPPORT SERVICES

The nursing faculty has established a Student Academic Success Coach that focuses on helping students succeed in the ASN Program. The office of Student Academic Support Services (SASS) promotes student success through concentrated efforts at assessment of student difficulties, studying and learning skills, and increasing student awareness of the prioritization of life issues.

If students are referred to SASC, they must comply with all of the conditions of the program in order to remain in the ASN program. Students will be referred to SASC or the Nursing Learning Lab in the following situations:

a. Nursing exam scores of 80% or less on any unit exam.
b. Difficulty in clinical performance or paperwork.
c. Any nursing course withdrawal.
d. Any nursing course failure.

Students who are referred to the SASC will have an individual success plan and an assessment by their coach and nursing academic advisor. Compliance with the Student Success Plan will be tracked and reviewed periodically by nursing faculty and nursing professional tutors.

Components of the individual success plan include the following as appropriate:

a. Attendance at student success seminars.
b. Referral to and assessment of learning styles and challenges.
c. Referral to counseling.
d. Weekly meeting with nursing academic advisor and/or course faculty.
e. Content review: group or individual with professional nursing tutors.
f. Math tutoring.

g. Reading tutoring.

AHU AI POLICY

All ASN students are held to the Academic Integrity standards as stated in the AHU Academic Catalog, including the use of A.I.

Policies and Procedures - AdventHealth University - Modern Campus Catalog™

NATIONAL STUDENT NURSES' ASSOCIATION, INC. CODE OF ETHICS

AHU endorses the NSNA Code of Ethics (2022). See https://www.nsna.org/nsna-code-of-ethics.html

Student: Faculty Ratio

In the classroom environment, AHU ASN holds a 1:32 ratio for faculty and students. In clinical, lab and simulation AHU ratio is 1:10.

HONESTY POLICY

Because nurses are accountable for the very lives of their patients, the Department of Nursing places great importance on high ethical and moral standards. Students are expected to be honest and trustworthy in all aspects of' their educational program. In addition to the AHU Academic Integrity Policy and the Use of Generative Artificial Intelligence (AI) Policy, the following special conditions apply:

Clinical Performance

a. Students are expected to document times and details of completed patient care activities accurately.
b. Students are expected to report instances of incomplete patient care delivery.
c. Students are expected to acknowledge and report errors and omissions related to patient care.
d. Purposeful falsification with or without high potential for injury will be subject to disciplinary action that may include dismissal from the program.
e. Release of patient's protected health information (oral, written, or electronic) in any manner to an individual or entity that does not have an authorized need to know is prohibited.

Testing

a. The faculty controls the options of seating arrangements, movement in the room, leaving the room, and stopping an exam for any reason including but not limited to violation of the honesty policy or electronic support.
b. All books, papers, notebooks, and personal belongings will be placed at a designated area before entering a testing situation. The student will have no paper

or writing implements at their testing location unless provided by the course faculty at the start of that test session. Any paper or writing implements found on or with the student will be grounds for termination of the exam and a grade of 0 (zero) will be earned.

c. Any information found on or in the immediate vicinity of the student, and verbal or non-verbal communication between students during a testing situation, will be grounds for termination of the test and a grade of 0 (zero) will be earned. Students observed with these behaviors will be subject to disciplinary action that may include dismissal.
d. Students who need to communicate with faculty are to remain seated and raise their hands.
e. Any violation of test security will be considered an act of dishonesty (e.g., copying tests, passing information to other students, and looking at another student's test).
f. No electronic devices of any kind will be allowed in operation during any exams or quizzes.
g. Nursing students, nursing faculty, nursing administration, AHU administration, and platform administration are the only people allowed to see any nursing module exam, dosage calculation test, quiz, standardized exam or individual questions on these exams, tests, or quizzes that are given in any nursing courses. All nursing exams, tests, and quizzes are considered secure and therefore, not available to any other persons. The module exams, tests, quizzes, standardized exam, and individual questions will be available for student review per the review policy in each course.
h. No watches of any kind.
i. No cell phone on person; cell phone must be "OFF" and with personal belongings.
j. All belongings are to be placed to the side of the room.
k. No personal headphones, earphones, or earbuds. University-provided earplugs only. Earplugs are available in the library, free to students. It is the student's responsibility to obtain the earplugs.
l. No garments that cover the head, except religious garments, can be worn during exams. No articles of clothing can be draped over the legs.
m. Glasses worn by the student must be prescription only and not electronic in nature (i.e. Meta Glasses).

****If the student is found to be in violation of any of the above testing expectations, the student will earn a grade of 0 (zero) on the exam, with no exceptions.**

Written Assignments

a. All references used in written assignments must be documented. Failure to do so is considered academic dishonesty.
b. Students are expected to complete their own assignments. Copying the work of another person is dishonest and is plagiarism.

DISCIPLINARY POLICY

The disciplinary process is intended to help the student identify and correct unacceptable behavior and promote a higher professional standard. Disciplinary action is used to maintain a positive learning environment and safe clinical practice. Four steps in the disciplinary process can be implemented at any time throughout the ASN Program. The process may begin at any step, depending on the circumstances and behavior. The four steps are:

1. Documentation – if no previous write-ups exist in the student file.
2. Warning
3. Probation
4. Dismissal

Implementation of the disciplinary process is necessary following unacceptable behavior or noncompliance with one or more of the AdventHealth University or Department of Nursing policies. A written description will include the incident and/or behavior on a disciplinary action form. The disciplinary process is cumulative and remains in effect throughout the ASN Program.

Behaviors considered unacceptable in the nursing program include, but are not limited to:

a. Pattern of late submission of assignments.
b. Lack of preparation for a lab or clinical experience that impacts performance.
c. Failure to keep scheduled appointments without prior communication.
d. Failure to give prior notification of tardiness or absence from class and/or clinical.
e. Exhibiting a negative or unteachable attitude.
f. Being disruptive or inappropriate at any university function, including riding the shuttle.
g. Inappropriate attire and/or appearance in the clinical area, see Uniform Policy.
h. Soliciting or receiving tips or monetary gifts from patients.
i. Failure to complete remediation in the specified manner and/or time, see Remediation Policy.
j. **For a breach of confidentiality, see the Confidentiality Policy.
k. **For acts of dishonesty, see the Honesty Policy.
l. **Failure to render safe nursing care for any reason.
m. **Uncivil behavior, see Civility Policy.

**Depending on the circumstances, these behaviors may be grounds for immediately placing the student on probation or dismissal, as noted in the Disciplinary Policy. For example, a student may be dismissed from the nursing program for violation of testing integrity or HIPAA from the clinical setting.

The process is initiated following an infraction of one or more policies in the Nursing Student Handbook or an identified academic or clinical deficiency.

1. Documentation:
   a. Documentation is initiated following an unacceptable behavior. Students will progress to warning status with subsequent unacceptable behaviors.
2. Warning:
   a. Accumulation of one (1) documentation for unacceptable behavior.
   b. Placement of a student into warning without the specified number of documented unacceptable behaviors (see # 10-12) will be discussed with the Assistant Dean and the Dean of Nursing prior to student notification.
3. Probation

a. Accumulation of one (1) documentation and (1) warning for unacceptable behavior.
b. Placement of a student into probation without the specified number of documented unacceptable behaviors (see #10-12) will be discussed with the Assistant Dean and Dean of Nursing prior to student notification.

4. Dismissal:
   a. Accumulation of one (1) documentation, (1) warning, and (1) probation for unacceptable behaviors.
   b. Dismissal of a student with or without the specified number of documented unacceptable behaviors (see #10-12) will be discussed with the Assistant Dean, the Dean of Nursing, and the Senior Vice President for Academic Administration prior to student notification.

See Appendix D: Disciplinary Form

INCIDENT ALERT

The purpose of the Incident Alert is to provide written documentation of a minor infraction or a pattern of minor unprofessional behaviors. Depending on the circumstances, these behaviors may be grounds for immediate placement of the student in the Disciplinary Process. See the disciplinary policy for a list of unacceptable behaviors.

The incident alert is a one-time documentation to alert the student of the potential for disciplinary action for this behavior or any other unacceptable behavior throughout the program. The incident alert is to include a description of the behavior and student-generated goals for improvement. (See Appendix E: Incident Alert Form)

The faculty is responsible for reviewing the list of unacceptable behaviors found in the disciplinary process with the student. This allows the student to be reminded of any other behaviors that could result in the institution of the disciplinary process in current or future semesters.

STUDENT DRESS CODE

DEPARTMENT OF NURSING DRESS CODE FOR CAMPUS AND CLASSROOM

AdventHealth University is a Christian-based institution where each student, faculty, and staff is valued as one of God's unique creations; this is evidenced by the way in which students, faculty, and staff converse and conduct themselves. Care should be taken to present oneself as a Christian professional; this can be achieved in part by avoiding cursing, inappropriate innuendos, and belligerent behavior, as well as dressing appropriately.

Campus Dress Code

Nursing students in the ASN Program must adhere to the modest dress code when on campus for any purpose other than class, lab, and simulation. Students must consult with faculty for proper attire.

Modest Dress includes but is not limited to:

- Garments must be made of no see-through materials.
- Shirts or blouses that covers midriff, no tank tops or spaghetti straps.
- Skirts and dresses that come below the knees.
- Shorts that are at least mid-thigh in length.
- Undergarments that are covered.
- Proper-sized garments (i.e., no cleavage, midriff, and skin below the waist showing).
- Clothes in good repair.
- Clothes that are clean, pressed, and in good taste.

Items to avoid:

- Garments with inappropriate slogans or representations.
- Tight fitting spandex-type garments (e.g., Leggings, biking shorts, sports bras).
- Clothes that do not completely cover cleavage and skin below the waist.
- Oversized, ostentatious earrings.
- Body piercings should be covered or body piercing jewelry removed.

Professional Dress includes:

- Suit or sport coat and dress slacks for men.
- Business Suit: Dress, pants, or a skirt and blouse ensemble for women.
- Collared shirt and tie for men.

Professional Program Dress:

Faculty and staff members are empowered to speak with any student related to the student's appropriateness of dress and behavior. It is expected that the student will follow such suggestions. Failure to follow given directives related to dress and behavior will result in disciplinary action by the BSN Program.

Classroom Dress Code

Students must wear loose fitting scrub tops and bottoms and shoes in good repair while on campus for every class. Students may wear professional dress as directed by faculty and course requirements.

General Policies & Procedures - AdventHealth University - Modern Campus Catalog™

CLINICAL UNIFORM POLICY

All students providing direct patient care in a clinical agency must be in the school uniform unless explicitly designated otherwise by the course faculty.

a. Students MUST purchase the uniform which consists of a top and pants from the Scrubs and Stuff website: https://shop.scrubsnstuff.biz or Uniform Advantage retail stores.
b. Students must purchase one uniform set. It is recommended to purchase two sets.
c. The uniform consists of a top and pants/skirt in pewter grey and embroidered with AHU logo.

d. For students who choose to wear a uniform skirt, it must be the Scrubs and Stuff 30" Knit Waistband by Cherokee Professionals in Pewter. Student must also wear white pantyhose. The length must be at or below the knees.
e. Students may a wear a long sleeve shirt under uniform top; the undershirt must be white with no words, logos or pictures on sleeves.
f. White non-porous shoes should be clean, polished, kept in good repair, and worn with white hose or white socks.
g. Lab coat must be white.
h. Sweater or lab jacket must be white.
i. Students may not wear an AdventHealth Employee jacket.
j. Clinical agency badge is required.
k. The following items are required in the clinical setting
    - Identification badge
    - Stethoscope
    - Penlight
    - Watch with a second-hand
    - Black ink pen
    - Bandage scissors
    - Blank Database
    - Other clinical specific items as designated by course faculty

CLINICAL AGENCY UNIFORM REQUIREMENTS

a. Students are expected to be in full uniform when in the clinical area providing or observing direct patient care.
b. A white lab coat will be worn over professional-type clothes when the student is in the clinical area but not involved in direct patient care. Dress must meet the criteria of the AdventHealth University Student Dress and Deportment Policy. Additionally, no jeans, flip-flops, or shorts may be worn.
c. The student uniform is not to be worn off campus, except for traveling to and from home. It is intended for clinical practice only. It must not be worn for employment.
d. General appearance and manners when in uniform,
    - Shoes and uniform must be clean and neat.
    - Hair must be worn in such a manner that when the person bends over or moves, it does not come down around the face.
    - Nails should be trimmed so they do not extend over the tips of the fingers; polish, if worn, should appear natural. No artificial nails may be worn.
    - The only acceptable jewelry is a wedding band and/or engagement ring, and post-type earrings, only one in each ear. No visible body piercing jewelry, including tongue.
    - No artificial eye lashes
    - Beards must be clean and kept. Must be able to properly fit N95 mask.

- Good personal hygiene, including an effective deodorant and mouthwash, is required.
- No mobile phones or other electronic devices may be visible and present on the student at any time while on the unit or in patient areas.

e. The following are considered inappropriate when in uniform:

- Perfume, strong cologne or after-shave lotion.
- Decorative barrettes, decorative combs, "scrunchies", or ribbons in the hair. Any barrettes or combs should match the hair color as closely as possible.
- Clogs, sandals.
- Chewing gum.
- Extremes in hair color or style.
- Excessive makeup.
- Students should not smoke or vape while in uniform
- Student ID badges, not employment badges, must be worn in the clinical setting.
- Students must use the OPID provided by the clinical institution when accessing patient data for clinical assignments.

Students must honor any additional requirements of the dress code of each facility in which they have clinical experiences.

Students arriving in a clinical area inappropriately dressed may be asked to leave. This will constitute a clinical failure for the day and will result in an unexcused clinical absence.

CONFIDENTIALITY OF INFORMATION POLICY

Students will abide by institutional, state and federal privacy and confidentiality regulations and laws. Information students receive during their clinical experiences is considered confidential. Release of this data, in any manner, to an individual or entity that does not have an authorized need to know is prohibited. While in the clinical setting, it is possible to work with, have access to, and overhear information regarding patients, physicians, and others which must be considered confidential. Students are directed, therefore, not to discuss outside the clinical setting or even with other students or agency personnel these items of information. Even casual conversation with instructors, agency personnel, and other students may be overheard and thereby violate the right of privacy of others. Be particularly careful about conversation in elevators, eating areas, and other public areas.

Any inappropriate or unauthorized retrieval, review, or sharing of protected health information with other students, instructors, or agency personnel, or with the assistance of agency personnel is considered a breach of confidentiality and is illegal.

Students are to respect the privacy of all individuals with whom they come in contact while in the nursing program. Students who violate or participate in a breach of confidentiality will face disciplinary action, see Disciplinary Policy.

SOCIAL MEDIA ADDENDUM

Comments, discussions, and personal information about patients, families and any health care provider are NEVER allowed to be posted on social media web sites, including but not limited to: blogs, emails, Facebook, Twitter or ANY other type of electronic or internet media. Comments that may be viewed as negative regarding AdventHealth University, clinical sites, and or fellow students should not be posted, and if posted, may result in disciplinary action. Students are expected to review the AHU Academic Catalog, Social Networking policy and the National Council of State Boards of Nursing (NCSBN) guidelines regarding social media, https://www.ncsbn.org/Social_Media.pdf as they will be held accountable for the information in these documents.

COMPUTERIZED TESTING POLICY

a. Students MUST have a personal tablet or laptop computer for every nursing course. Please see the "Software and Hardware Requirements" section under "Laptop Policy" section of the Academic Catalog for AHU laptop specifications.
b. All examinations in the nursing program MUST be taken using a laptop computer. Paper copies of examinations will not be available for students.
c. All course work designated as "in-class" must be completed in the classroom.
d. Students must bring their laptop computer with a power cord for each examination with the secure browser software loaded.
e. Students may not share computers for quizzes or examinations.
f. Technical support is available to students prior to administration of a scheduled exam. Students with technical issues must contact University Technical Support prior to the scheduled exam.
g. Failure to start an examination on time or take an exam at the scheduled time, for reasons including but not limited to those listed below, will result in a 10 % total reduction in that examination grade. A maximum of one deduction will be applied to any given examination. This means: 5 points will be deducted from a 50-item examination, or 10 points will be deducted from a 100-item examination. Students receiving ADA accommodations for testing will be held to the same standards according to the nursing department testing policy as students in the classroom not receiving ADA accommodations. At the discretion of the instructor, you may be asked to reschedule your exam to a later day, time, or date if proper notice was not given.

   You may be asked to reschedule your exam for the following issues:

   - Tardiness greater than 5 minutes
   - Failure to have a working laptop computer
   - Personal reasons
   - Illnesses without a health care provider release/note of office visit

- Transportation issues, including parking difficulties
- Exam not downloaded

h. Students are required to make up the missed exam within 48 hours of returning to class. The student is required to notify the instructor of the course within 24 hours of missing the exam.
i. It is the responsibility of the student to contact the course instructor to schedule the exam and provide documentation of the extenuating circumstance for record. If the student does not reach out to reschedule and take exam, they will receive a zero (0).

TECHNOLOGY REQUIREMENTS

All students are required to have a laptop that meets the AdventHealth University specifications (see the Laptop/Mobile Device for Learning Policy).

EXAMPLIFY GUIDELINES

Some course exams (i.e. unit exams and final exams) may be proctored through ExamMonitor, a virtual test proctor. ExamMonitor provides remote proctoring capabilities for assessments delivered via Examplify. ExamMonitor records video and audio of exam takers during exams, which are uploaded upon assessment completion and reviewed for potential breaches of academic integrity. Students are accountable and responsible for all exam guidelines noted in the Associate of Science in Nursing (ASN) Degree Program Student Handbook Supplement.

Students Responsibilities:

a. Students need to use their laptop for testing. The library may have loaners available if students are having issues with their own laptops.
b. All communication with Examplify will be through the student's my.ahu.edu email. Students need to know how to check this email. If they have issues, they can go to my.AHU.edu site to find out their password and ID; if they need further help, go to the IT department for further consultation.
c. Students must have downloaded the exam 15 minutes prior to the scheduled class time.
d. After the exam and/or review students must upload the answer files before leaving the testing classroom/location. Failure to upload the exam will result in a "zero" grade for the exam.

CLINICAL ATTENDANCE

The clinical experience is integral to successful completion of the ASN program and paramount to NCLEX success. As such, clinical days are not flexible and not able to be changed; students need to make accommodation for the assigned clinical day. Allotted hours for clinical experiences and observations are set for each course. All students must complete the required clinical hours to pass the course.

Clinical Absence

Clinical should only be missed in cases of documented student illness, student accident or student hospitalization. Students must give notification of absence to the Course Faculty and clinical faculty an hour prior to the clinical experience except in extenuating circumstances. If extenuating circumstances occur, the student must notify the Course Faculty and the adjunct faculty within 24 hours of the clinical absence. Documentation must be provided within 48 hours of the event occurring to the Course Faculty and clinical faculty. This documentation should reflect a visit to the student's healthcare provider on the date of the clinical absence and not a day in the future. Failure to notify the Course and clinical faculty to a clinical absence will be documented and may result in disciplinary action.

Students may only have one (1) clinical absence. Hours for the clinical absence must be made up, **regardless of reason**. The make-up clinical day may be at another Adventhealth Facility or AdventHealth facility partner and may require the student to attend on a different day or time than they had previously. There are no virtual clinical days that will count as clinical make up. Students will attend face to face on the day and time as decided by course faculty, clinical faculty availability and unit availability. Students are required to pay for clinical make-up using the process listed below. Students may not be absent for more than one clinical day. A second clinical absence will result in a clinical failure for the course and the student will be required to retake the course in its entirety to include didactic, lab and clinical.

Clinical absences without a documented excuse approved by the Course Faculty will result in clinical day failure and may also lead to course failure

Clinical Day Failure

Tardiness, unpreparedness, and the inability to safely deliver nursing care may also constitute clinical day failure. This may also result in disciplinary action.

Clinical assignments are considered part of the clinical day and essential to the clinical learning experience. All associated clinical assignments must be completed each week to receive full credit for the clinical day. Failure to complete and submit properly may result in a clinical day failure. It is the responsibility of the student to ensure clinical assignments are uploaded correctly. Each incident will be reviewed with the Assistant Dean, and clinical faculty.

Clinical Make-Up Process

Every attempt will be made to accommodate students requiring and eligible for clinical make-up during the course. If this is not possible, make-up clinical time may be arranged after the course is completed and may result in a grade of incomplete.

Students required to do clinical make-up due to missed clinicals or clinical day failures (as determined by Course Faculty) will be required to pay for clinical make-up, unless stated otherwise by faculty. The process to pay for clinical make-up is listed below.

1. Students will contact the business office to pay the required charge for clinical makeup.
2. Student will provide a receipt to Course faculty and/or Clinical Coordinator to demonstrate that payment has been made for clinical make-up. The receipt may not

be submitted to the adjunct clinical faculty. This must be done within 72 hours of the anticipated make up clinical day, to ensure space.

3. After submitting a receipt, the student will be permitted to attend clinical, provided all the current compliance tracking system records are uploaded and have met compliance.
4. Student will pay $25 per hour times the number of hours missed in clinical.

Two clinical day failures for any reason will result in course failure.

CLASSROOM ATTENDANCE

Attendance in each class is integral to student success in nursing school. Students are expected to attend each and every classroom meeting. If students are absent, it is their responsibility to make up any missed content, watch and review posted lectures and seek assistance from course faculty if needed. Students may not miss more than 2 classes during a course in a trimester. If a student is absent more than 2 times in a course without valid documentation as defined by course faculty, the student may be deemed unsuccessful in the course. If the student is deemed unsuccessful in the course, this will count as a course failure. Students may only have two (2) course failures throughout the duration of the program. If a student reaches a third (3) failure, the student will be dismissed from the program.

STUDENT SIMULATION POLICIES

Simulation days are not flexible and cannot be changed. Students need to make accommodation for the assigned simulation day and times. Allotted hours for simulation experiences are set for each course. Simulation absences and/or failure without approved make-up may result in course failure.

Simulation Absence

Simulation should only be missed in cases of documented student illness, student accident or student hospitalization. Students must give notification of absence to the Course Faculty an hour prior to the simulation experience except in extenuating circumstances. If extenuating circumstances occur, the student must notify the Course Faculty within 24 hours of the simulation absence. Documentation must be provided within 48 hours of the event occurring to the Course Faculty. This documentation should reflect a visit to the student's healthcare provider on the date of the simulation absence and not a day in the future. Failure to notify the Course faculty to a simulation absence will be documented and may result in disciplinary action.

Simulation absences without a documented excuse approved by the Course Coordinator will result in simulation day failure and may also lead to disciplinary action.

Simulation Failure

Tardiness, unpreparedness, and the inability to safely deliver nursing care constitute a simulation failure for that simulation experience.

All associated simulation assignments must be completed each week to receive full credit for the simulation day. It is the responsibility of the student to ensure all simulation assignments are submitted properly and by the timeline established by the course faculty. Failure to complete will result in a failure for that simulation day. Make up simulation assignments are not permitted unless an extenuating circumstance occurs. Each incident will be reviewed with the Program Coordinator, Assistant Dean, and Faculty of the simulation course.

Simulation Make-Up

Every attempt will be made to accommodate students requiring and eligible for simulation make-up during the course. If this is not possible, make-up simulation time may be arranged after the course is completed and may result in a grade of incomplete.

Students required to do simulation make-up due to missed simulations or simulation day failures (as determined by Course Coordinator) may be required to pay for simulation make-up, unless stated otherwise by faculty.

STUDENT LAB POLICIES

Students need to make accommodation for the assigned lab day and times. Allotted hours for lab experiences are set for each course. Lab days are not flexible and cannot be changed; students need to make accommodation for the assigned lab days. Lab absences and/or failure without approved make-up may result in course failure.

Lab Absence

Lab should only be missed in cases of documented student illness, student accident or student hospitalization. Students must give notification of absence to the Course Faculty and lab faculty an hour prior to the lab experience except in extenuating circumstances. If extenuating circumstances occur, the student must notify the Course Faculty and the lab faculty within 24 hours of the absence. Documentation must be provided within 48 hours of the event occurring to the Course Faculty and lab faculty. This documentation should reflect a visit to the student's healthcare provider on the date of the lab absence and not a day in the future. Failure to notify the Course and lab faculty to a lab absence will be documented and may result in disciplinary action.

Lab Failure

Tardiness, unpreparedness, and the inability to safely deliver nursing care constitute failure for that lab experience and result in a lab failure and course failure.

All associated lab assignments must be completed each week to receive full credit for the lab day. Failure to complete will result in failure for that lab day. Make up lab assignments are not permitted unless an extenuating circumstance occurs. Each incident will be reviewed with the Course Coordinator, Assistant Dean, and Faculty of the lab course.

Lab Make-Up

Every attempt will be made to accommodate students who require and are eligible for lab make-up during the course. If this is not possible, make-up lab time may be arranged after the course is completed and may result in a grade of incomplete.

Code of Conduct Policies:

Nursing Skills Code of Conduct and AHU Academic Misconduct Policy

COMPLIANCE TRACKING SYSTEM

Compliance Tracking System and Registration

Once a student is accepted into the Nursing Program, all compliance tracking records are due by a scheduled date, as referenced in the acceptance letter. If a student is non-compliant with the current compliance tracking system, a hold will be placed on the student's account to prevent the student from registering for classes for the upcoming term.

The student will not be permitted to register for classes until appropriate documentation in the current compliance tracking system. CastleBranch is approved by the Department of Nursing. This process can take up to fifteen (15) business days. The student will be resp

0141onsible for all associat41ed late fees and other losses of funding resulting from noncompliance.

Students w

ho are non-compliant with the current compliance tracking system (CastleBranch) will receive an unexcused clinical absence and will be required to pay for the make-up of l,kl's. See Clinical Attendance for details on the process to pay for clinical make-up.

NOTE: If the student has completed the clinical hours for the trimester and has expired requirements in the current compliance tracking system and records are discovered after the clinical hours are completed, the student will be entered into a disciplinary process for failure to comply with the current compliance tracking system records during clinical attendance.

PROFESSIONAL BEHAVIOR IN CLINICAL AGENCIES

Students are required to complete a designated number of clinical hours for each nursing course. Clinical hours that are missed for any reason must be made up. The faculty is responsible for assisting students in learning as much as possible while in the clinical setting. Students facilitate this process by:

a. Arriving on time to report, conferences, and other scheduled appointments.
b. Completing required paperwork and reviewing related procedures prior to or during the clinical experience.
c. Preparing to deliver optimum care, getting plenty of rest, bringing needed supplies, and being aware of patient information.
d. Seeking out every possible learning experience, using initiative, asking questions, and becoming actively involved in learning. In order to make effective use of your time, breaks off the unit during clinical time are not permitted, except the faculty designated lunch break.\
   -p[0-p[054r 1q234567890-=\eporting to the faculty and staff before leaving and upon returning to the clinical area.
e. Remembering that you are a guest in the clinical facility. A guest seeks to establish a positive rapport with the host by:
   - Being polite in your interactions with staff.
   - Abiding by policies/procedures unique to the facility.
   - Asking permission before helping yourself to the unit's food supplies.

- Using judgment when expressing your frustrations or negative feelings about occurrences on the unit (this usually means going to faculty first in a non-public area of the unit).
- Recognizing that snacks and trays on the unit are for patients only.
- Showing interest and enthusiasm for learning.
- Saying "thank you" to those who helped contribute to your learning experience.
- Not having mobile phones and other devices visible and present on the unit at
  475263.a4
  "?;jhmnfgv006201ny point

ADVENTHEALTH CARE SYSTEM
RULES AND REGULATIONS FOR NURSING STUDENTS

AHU Nursing Students:

a. Will adhere to policies and procedures of the assigned hospital and the school contract.
b. May be treated for injuries in the closest Emergency Department. Payment or treatment will be the responsibility of the student.
c. Will wear the designated school uniform with student clinical ID badge and follow the hospital dress code. If a nursing student comes to the hospital for pre-assignment preparation, they should wear appropriate attire and a lab coat with student clinical ID badge.
d. May perform procedures after demonstrating competence in the educational
e. setting.
f. May admit patients, assess patients, and initiate the nursing care plan, which will be checked by the instructor.
g. Will document procedures, medications, and care given as appropriate, including computer charting. Students are to document their names, titles, and school initials after their notes. The instructor will review and verify student nursing care as appropriate, including computer charting. During the practicum experience, the preceptor may document student nursing care in place of the instructor. Please request permission from the unit secretary before taking charts out of the station.
h. May not take verbal or telephone orders from physicians.
i. Will complete patient assignments approved by the instructor and RN in charge, Nurse Manager, Assistant Nurse Manager, or Charge Nurse/Team Leader.
j. Will have current CPR certification.
k. Will be immunized according to school policy.
l. May use the hospital cafeteria.
m. May attend continuing education programs if prior arrangements have been made by the instructor. Occasionally, there may be a fee involved.
n. Will practice with compassion and respect for the dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of their health problems.

o. Nursing students in a registered nurse program may perform procedures as written in the RN or team leader job description under the supervision of the RN or Team Leader. Exceptions include the following:
   - Blood administration
   - IV push medications except for Heparin and Saline flush
   - Investigational Drugs
   - IV Chemotherapy
   - IV or PO Narcotics
   - Accu-checks
   - Physician Orders: taking verbal, telephone, or signing off written orders.
   - Starting IVs without an RN present.
   - Doing or assisting in any invasive procedures without an RN present.

p. If the clinical instructor is not present and the student has the opportunity to perform a new or unfamiliar procedure, the student may observe the bedside RN, or the bedside RN may elect to wait until the instructor is present, to allow the student to perform the skill with the instructor. Any skill performed for the first time by the student requires the clinical instructor to be present and directly observe the student perform the skill. This may not be the case in precepted practicum experiences and Dedicated Education Units (DEUs), at the discretion of the clinical and course faculty.

q. Students in the following courses: NRSG 180 and NRSG 210 are only able to administer medications with an instructor present. No medications can be administered without clinical instructor presence. Students in NRSG 242 are able to administer medications with their assigned bedside nurse after their clinical instructor observes their first medication administration in clinical.

r. Students currently in clinical on a DEU are to refer to the course lead faculty instructions regarding medication administration policy for that DEU. Medications can never be administered without a licensed RN present and directly observing.

s. Any student desiring to be an observer in a department other than nursing must have prior approval from the instructor and the department head.

t. Nursing students will report (hand-off) to an appropriate RN and/or patient caregiver.

u. If an error is made in medication or procedure, notify the Nurse Manager or charge nurse and the instructor immediately.

v. Any student in the clinical setting who is deemed unsafe to participate in clinical may be asked to leave the clinical site and may be subject to further discussion/investigation and potentially face disciplinary action.

w. Students may not for any reason access patient charts for patients not in their care for that day. If students are found to access charts unrelated to their own clinical assignment, this constitutes a HIPAA violation and the student will be subject to disciplinary action including potential dismissal from the program.

Parking

a. For Orlando clinicals, parking is available free of charge at the AdventHealth North King Street Parking Garage located at 421 E King Street Orlando, FL 32803. All vehicles must display a university parking decal, which can be obtained at the Office of Student Services.
b. Full-time security patrols this parking area.
c. Surface parking (non-garage, ground-level parking lots) is available at no charge for 3-11 clinical rotations. Do not park in unpaved areas adjacent to the parking lots; doing so may result in receiving a ticket from the Orange County Police.
d. For other clinical sites, park according to instructions given by the clinical faculty.
e. Any student in the clinical setting who is deemed unsafe to participate in clinical may be asked to leave the clinical site and may be subject to further discussion/investigation and potentially face disciplinary action.

ILLNESS/INJURY/EXPOSURE

A student who is injured, becomes ill, or is exposed to a communicable disease during their clinical experience must follow process below:

1. Student must report this event immediately to their direct supervisor including their clinical faculty, the staff nurse responsible for their patient, or their preceptor, and the supervisor staff on the unit (i.e. the Charge Nurse, Assistant Nurse Manager, Nurse Manager or Nurse Educator).
2. Comply with the recommendation of their clinical faculty and the responsible staff nurse regarding immediate treatment in the Emergency Department (ED), or follow-up with Centra Care.
3. Provide documentation to the faculty from a health care professional of treatment for this condition, and release to attend further clinical.

Please Note: Students are responsible for their own insurance while working in any clinical site for injuries incurred or negligence. If uninsured students are responsible for any fees associated with the incident.

The responsible faculty must:

1. Accompany the student to the ED, as appropriate, for treatment and support the student as the student contacts someone who can assume further responsibility for him or her.
2. Immediately report the incident to the appropriate Course Coordinator. The AHU Chaplain may be contacted as appropriate.
3. Notify the Vice President of Student Services and complete the Campus Incident Form within two business days.
4. Collect and place a copy of the treatment and release to attend further clinicals in the student's file. This will be done under the supervision of the Course Coordinator.

Appendix G provides the appropriate AHU Campus Incident Form.

RE-SCHEDULING OF ACADEMIC EXPERIENCES RELATED TO CAMPUS CLOSURE

When adverse weather conditions or situations cause the University campus to close, the following guidelines should be used for rescheduling missed educational experiences. All course decisions are contingent upon the approval of the Assistant Dean.

Classroom: At the discretion of course faculty, missed content may be presented at an alternate time, posted on the internet, or may be incorporated into other activities as possible. Exam content may be combined and given at a designated time, or may be presented in an alternate format, such as a case study in which the content would be applied, or take-home exam. Course faculty will be responsible to assure established theory hours are met.

Clinical:

On Site: It is recommended that course faculty determine alternate clinical experiences, which would meet the clinical objectives missed. Options would include use of the simulators, case studies, or other options as determined by course faculty.

Observations: Faculty will re-schedule observations whenever possible. Faculty will be created alternate educational activities, which would meet the clinical objectives for those students missing clinical hours because of missed observations. Course faculty will be responsible to assure established clinical hours are met.

PROGRAM PROGRESSION

Program Requirements

Students must meet all course requirements to progress to the next course. Nursing courses are sequential and have prerequisite and/or co-requisite course requirements, which may include nursing and general education courses. All nursing courses must be successfully completed in the prescribed order to progress in the nursing program. It is the student's responsibility to:

a. Achieve a minimum grade of C+ in each nursing course (including clinical and theory components) and a "C" (2.00) in each cognate and general education course and maintain a minimum cumulative GPA of 2.75 in nursing courses. The nursing GPA will be calculated at the completion of the third trimester in the ASN Program and at the completion of the nursing program to ensure eligibility for progression and graduation.
b. Nursing courses may be repeated for failure to achieve a minimum grade of C+ withdrawal from a course, or failure to maintain a minimum GPA of 2.75 in nursing courses. After entering the nursing program, a student may repeat only two (2) nursing course for any reason. This nursing course may be repeated only two (2) time. Students who do not complete courses or do not progress with their cohort cannot be assured of placement in their choices of subsequent courses.
c. All students must complete their level's general education courses indicated on the ASN Course Schedule before progressing to the next level.
d. Fulfill any remedial contracts.
e. Present a verification of up-to-date immunizations.

f. Verify current certification in Basic Life Support professional cardiopulmonary resuscitation (CPR) from the American Heart Association, including infant, child, and adult CPR.
g. G. Provide documentation of annual TB Respirator (Mask) Fit testing.
h. Complete all course requirements, including standardized testing.
i. Pass all dosage calculation competencies.
j. Meet the graduation requirements of AHU and the nursing program plan of study.
k. Apply for eligibility to take the NCLEX-RN® and obtain licensure as a registered nurse.

GRADING

Theory

Exams, quizzes, and assignments will be used as evaluation tools in computing course theory grades. There will be no rounding of any final course grade in all nursing courses for the undergraduate and graduate programs (ASN, BSN, RNBSN, MSN, DNP, and DNAP). The AdventHealth University grading scale is provided as reference by following the link below. https://catalog.ahu.edu/content.php?catoid=67&navoid=6127

Clinical/Lab/Simulation

Clinical, Lab and Simulation performance is evaluated using ratings of satisfactory or unsatisfactory based on faculty observation.

EXAM REVIEWS

Beginning with those students who start the ASN program in Fall 2025, the following unit exam policy is implemented: Students must average an 80% on their unit exams in each course before any additional coursework is added to their grade in that course. If the student does not reach the 80% average for unit exams in a course, the student will be marked as unsuccessful in the course and receive a failure for the course, no other coursework will be added to the grade. Students may only receive two (2) course failures throughout the duration of the program. If the student receives a third (3) course failure, the student will be dismissed from the program. Students scoring an 80% or lower on an exam, are highly encouraged to participate in individual exam review with course faculty. Unit exams will be available for review after every student has taken the exam. Concerns related to specific exam questions will be handled on an individual basis with the faculty member no later than 5 business days after the exam review. Exam review setting will adhere to exam-taking environment guidelines. Final exams will not be made available for review.

Remote Exam Review Guidelines: Faculty will only discuss concepts/content missed. No actual exam questions will be shown to the student.

REMEDIATION POLICY

Remediation is intended to help the student who may have a weakness in nursing skills and knowledge. The remediation process may be implemented any time an area of weakness is identified. This may consist of, but is not limited to:

A. Learning Center Referral

1. When a student has areas of difficulty that can be remediated by work in the Learning Center, a "Learning Lab Referral" will be instituted by the clinical or theory faculty.
2. A completion deadline of at least 10 days for remediation will be provided unless clinical needs necessitate a more rapid remediation time.
3. It is the student's responsibility to notify the Learning Center Coordinator that a referral has been issued, as well as to ensure the referral is completed.
4. An extension of the deadline may be obtained based on the learning needs and progress of the student.
5. If the referral is not completed as designated, the Disciplinary Policy will be implemented or advanced.

B. Remedial Contract

1. When significant areas of weakness are identified, the faculty member will initiate a remedial contract with the student. Weak areas may be indicated by:
   a. Clinical performance
   b. Skill Validation performance
   c. Theory grades
   d. HESI exams
   e. Other evaluative methods
2. Goals for improvement and prescribed remediation activities will be established. This may include:
   a. Remediation in the Learning Center
   b. Review of theory content
   c. Working through NCLEX-RN review questions
   d. Audio-visual materials
   e. Other forms of technology, i.e., web-based
3. A Completion deadline will be determined. It is the responsibility of the student to make the necessary appointments to fulfill the contract.
4. The faculty member will follow up with the student to ensure compliance by the specified deadline.

Mandatory Remediation for Course Failures and GPA Failures

Students who do not earn a C+ or higher in nursing course(s) or who do not meet GPA Progression requirements must:

a. Retake and pass NRSG course(s) to replace unsuccessful NRSG course(s) grade(s) or improve Nursing GPA to 2.75.
b. Attend mandatory remediation for every nursing course in which students received less than a B- as a final course grade in the trimester before entering the next level in nursing.
c. Complete the HESI Course Specific Exam before progressing to the next level in the nursing program.

The remediation will be provided by Student Academic Support Services and the Nursing Department will schedule the HESI exams.

STUDENT GRADE APPEAL POLICY

The student has the option to appeal any grade (e.g., test, quiz, assignment, project, care plan/database, proposal). The process for grade appeal is listed below.

1. To appeal a grade, the student must send an email statement to the faculty who assigned the grade through the LMS (i.e., Canvas) no later than five business days after the grade is posted. This email must contain a detailed explanation of all of the following:
   - The grade that the student is appealing.
   - The grade that the student is requesting.
   - The rationale and related documentation for why the grade should be changed.
2. The faculty must respond to the student within five business days of the appeal via the LMS, explaining the one of the following:
   - The decision by the course faculty if the grade will be changed, with rationale.
   - The decision by the course faculty if the grade will not be changed, with rationale.
3. If the appeal is not resolved, the student may submit an email statement to the Course Coordinator through the LMS (i.e., Canvas) no later than five business days after the response from the faculty. This email must contain a detailed explanation of all of the following:
   - The grade that the student is appealing.
   - The grade that the student is requesting.
   - The rationale and related documentation for why the grade should be changed.
4. The Course Coordinator must respond to the student within five business days of the appeal via the LMS, explaining one of the following:
   - The decision by the Course Coordinator if the grade will be changed, with rationale.
   - The decision by the Course Coordinator if the grade will not be changed, with rationale.
5. If the appeal is not resolved, the student may submit an email statement to the ASN Assistant Dean requesting that the ASN Assistant Dean consider an appeal for a grade change, no later than five business days after the Course Coordinator's response. The statement must contain the detailed information of the previous 2 appeals, as well as faculty and Course Coordinator responses. Then, the ASN Assistant Dean will speak with the faculty involved in the appeal and reply in writing to the student within five business days of receiving the student's emailed statement requesting a grade change.
6. If the appeal is not resolved, the student may submit an email statement to the Dean of the Department of Nursing requesting that the Dean of the Department of Nursing consider an appeal for a grade change, no later than five business days after the response by the ASN Assistant Dean. The statement must contain the detailed information of the previous 3 appeals, as well as faculty, Course

Coordinator, and ASN Assistant Dean responses. Then, the Dean of the Department of Nursing will speak with the faculty, Course Coordinator, and ASN Assistant Dean involved in the appeal and reply in writing to the student within five business days of receiving the emailed statement, submitted by the student, requesting a grade change.

NURSING DEPARTMENT READMISSION

Readmission is not automatic and is contingent on available clinical/class space. Students will be readmitted under current program policies. Students who are eligible will be considered for readmission to the program when they complete the following:

1. Submit a Readmission Form to the Department of Nursing no later than three weeks prior to the beginning of the trimester in which they wish to enroll.
2. Hold a cumulative GPA of 2.50.
3. Present annual verification of tuberculosis screening. If the test is positive, refer to the Communicable Disease Policy in the Student Handbook for additional information.
4. Verify current certification in professional cardiopulmonary resuscitation (CPR) from the American Heart Association, including infant, child and adult CPR
5. Meet specified requirements as set forth by the Department of Nursing regarding the individual student.
6. Successfully demonstrate validation of nursing skills (if applicable) (see the Fee Schedule in the Financial Information section for Nursing Competency Validation exam fees).
7. If a lapse of time greater than two years occurs in a student's program of study, prior nursing credits will not automatically be accepted. The student may petition to validate nursing knowledge and skills and have prior nursing credits accepted through written examinations and clinical performance evaluations.

CONFLICT RESOLUTION AND GRIEVANCE POLICY

The Department of Nursing promotes open communication, professionalism, and resolution of conflict at the level at which it occurs. Students who believe that their academic rights have been infringed upon or that they have been treated unjustly are entitled to fair, impartial consideration.

Definition of Terms

Concern or Complaint: a matter for the faculty to consider.

Conflict: differences expressed verbally or written.

Grievance: written statement submitted by the student to the Department of Nursing Dean, after completing steps 1 through 3 below.

Resources

An open access policy is maintained throughout the Department of Nursing to promote communication and resolution of concerns. Individuals are encouraged to attempt a resolution at the level at which it occurred. Students have access to the faculty's office telephone number and may contact the faculty either through the course e-mail or the faculty's University e-mail.

Note: Most of the concerns expressed by students relate to grades. Assignments are graded by the faculty without bias, using the grading rubrics developed by the lead faculty. Read the faculty feedback and review the assignment against the rubric to ensure compliance with the grading criteria before expressing concerns about grades. All concerns regarding grades should be communicated to the faculty within 5 business days of receipt of the grade.

Students with grievances which are not covered under the Student Grade Appeal Policy (*ASN Degree Program Student Handbook Supplement)*, the Discipline Procedure *(AHU Student Handbook*), or the Disciplinary Policy *(AHU Student Handbook*) are encouraged to take the appropriate steps to resolve the issue informally by discussing it directly with the individual(s) involved. If informal resolution is not possible or the issue was not resolved, students may submit a written grievance to the Vice President for Student Services within ten business days of the incident. The Vice President for Student Services will investigate the case and respond to the student in writing within ten business days.

Grievance Process

The following grievance process applies to the ASN Program (also see the *Academic Catalog)*:

1. Step 1: Discuss the concern /complaint with the involved faculty member no later than 1 week after the incident.
2. Step 2: The faculty involved must respond to the student within one week of receipt of the complaint.
3. Step 3: If the issue is not resolved, a written statement should be submitted to the next level (from faculty to lead faculty; from lead faculty to ASN Program Coordinator) no later than one week after the response from the first response. The next-level faculty will then confer with the initial faculty and respond to the student in writing within one week of receiving the student's written statement.
4. Step 4: If a resolution is not reached, the student submits a written statement to the Assistant Dean no later than one week after the ASN Program Coordinator's response. The Assistant Dean will investigate the issue and reply in writing to the student within one week of receiving the student's written statement. *This step is considered to be a formal grievance at this point.* The student must submit the written formal grievance to the Assistant Dean within 4 weeks of the occurrence.
5. Step 5: If the student is still not satisfied with the outcome, the student may request that all materials related to the grievance, including the written statements of the Program Coordinator and the Assistant Dean are given to the AHU Dean of Students and Office of Student Affairs who will review the grievance materials and return a written decision within two (2) weeks.

DOSAGE CALCULATION COMPETENCY

Ensuring patient safety remains a critical component of nursing practice. Safe medication administration is one part of this necessary component. Dosage calculations, or med math, are a critical piece of medication administration. Dosage calculation is learned during the NRSG

130 Fundamentals of Nursing course. In this course, students will be exposed to the practice of completing dosage calculations of basic math or ratio problems, conversions, drop factor, infusion rate, and adult weight-based calculations. Competency in these calculations is evaluated at the end of the course. Subsequently, in each trimester, students review previously learned content and are introduced to new dosage calculations. Nursing students are required to confirm their competency prior to administering medications in the clinical environment. The following process will occur:

A. During the NRSG 130 Fundamentals in Nursing course, students will learn dosage calculations through course assignments and material.
   - To show competency at this level, a 25-question dosage calculation quiz will occur by the end of the trimester, accounting for 5% of the course grade.
   - Dosage calculation problems will still be present on regular course exams, as well as the final exam.

B. In all subsequent trimesters, nursing students will be required to complete a 20-question dosage calculation quiz during the first week of the trimester, in which a score of $\geq$ 90% must be achieved (see dosage calculation quiz guidelines below). The process is as follows:
   1. In the first week of the trimester, each course level will set the schedule for the initial dosage calculation quiz according to the clinical/lab schedule.
   2. Students will take the quiz at the assigned day/time. There is no make-up for quizzes; any inability to take the quiz as scheduled results in a 0% score and the need to continue in the remediation process. (NOTE: If the student is not registered for class before the test date will be automatically placed in remediation).
      - Achieving a score of $\geq$ 90% on the quiz validates the student's competency and the ability to enter the clinical experience unrestricted for medication administration.
      - Failure to achieve the 90% score requires the student to complete remediation (see remediation process below) and take a second attempt. If the student enters clinical, they will not be permitted to administer any medications.
   3. Students requiring a second attempt, will take a second attempt at a 20-question dosage calculation quiz during the second week of the trimester per each course's clinical/lab schedule.
      - Achieving a score of $\geq$ 90% on the quiz validates the student's competency and the ability to enter the clinical experience unrestricted for medication administration.
      - Failure to achieve the 90% score requires the student to complete remediation and take a third attempt. If the student enters clinical, they will not be permitted to administer any medications.
   4. Students required to take a third attempt will take the third and final attempt at a 20-question dosage calculation quiz during the third week of the trimester per each course's clinical/lab schedule.

- Achieving a score of ≥ 90% on the quiz validates the student's competency and the ability to enter the clinical experience unrestricted for medication administration.
- Failure to achieve the 90% score after the third attempt indicates an inability to demonstrate competency for the student to administer medications in clinical and the student will not be deemed clinically competent and will fail the clinical portion of the trimester. This means that the student will be unable to attend any courses in which they are enrolled during that semester. They will need to retake the courses when they are offered again, in their entirety to include didactic, lab and clinical.

5. A student will only be allowed to enter the dosage calculation remediation process twice during their entire ASN nursing school program. A need for a third remediation process will result in a clinical failure for trimester and the inability of the student to progress. The student will then need to follow the readmission policy for the program.

DOSAGE QUIZ GUIDELINES AND BLUEPRINTS

a. Students will be allotted the following time to take the quiz:
   - 100-level courses – 40 minutes
   - 200-level courses – 50 minutes due to advanced calculations
b. Any student with confirmed accommodations through the Office for Students with Disabilities will be required to submit documentation to course faculty to receive such accommodations, including extended time.
c. NO paper exams are administered; a functional computer with necessary testing software must be in good working order.
d. Scratch paper will be provided to students and MUST be returned after the quiz.
e. Students who require remediation due to an unsuccessful attempt are required to reach out to the Student success coach, and the course faculty via Canvas email within 24 hours of the unsuccessful attempt, to start the remediation process.
f. A minimum of 1 week will occur between quiz attempts to allow adequate time for remediation.
g. Students must bring the remediation packet with them to the next dosage calculation exam attempt, or a grade of zero (0) will be earned for the next attempt.
h. Blueprint per term is as follows:
   - MS I: basic math or ratio problems, ability to utilize conversions, drop factor, infusion rate, and adult weight-based calculations.
   - MS II: basic math or ratio problems, ability to utilize conversions, drop factor, infusion rate, adult weight-based calculations, and reconstitution.
   - MS III: basic math or ratio problems, ability to utilize conversions, drop factor, infusion rate, adult weight-based calculations, reconstitution.

Dosage Calculation Exam Remediation Guidelines

1. Students who require remediation due to an unsuccessful attempt are required to reach out to the Student success coach, and the course faculty via Canvas email

within 24 hours of the unsuccessful attempt, to start the remediation process and request information on the necessary materials and instruction for remediation. Information includes self-enrollment in a remediation course in Canvas, where all remediation materials will be located.

2. Remediation dosage problems will follow the above blueprint for each course.
3. Between each attempt at the ≥ 90% necessary score, remediation will differ:
   - Prior to the second attempt, the student will complete 50 remediation questions digitally through Canvas. Students will be required to complete all work independently; evidence of sharing work or submitting another's work will result in disciplinary action, up to dismissal from the program.
   - Prior to the third attempt, the student will complete 25 remediation questions in person with a Nursing Tutoring Center staff member and 50 remediation questions digitally through Canvas.
   - During all remediation, students will be required to complete all work independently; evidence of sharing work or submitting another's work will result in disciplinary action, up to dismissal from the program.
4. Between each attempt, the Nursing Tutoring Center will notify course faculty of the student's successful completion of remediation to sit for a quiz attempt.
5. Students may request additional remediation at any time if needed.

STANDARDIZED TESTING (HESI)

All ASN students are required to take designated Health Education Systems, Inc. (HESI) specialty exams in each course. The HESI specialty exams evaluate the student's abilities to apply content from specific clinical nursing areas. These exams serve as preparatory tools for the National Council Licensure Examination (NCLEX), the final step to becoming a Registered Nurse. Research has shown that scores above 900 on the HESI RN Exit Exam strongly indicate success on the NCLEX. To ensure readiness for the comprehensive RN Exit Exam, students must engage in remediation following each specialty exam according to a specific study plan provided with their HESI feedback. Documentation of this remediation is required after each specialty exam.

Purpose: HESI Student Testing and Remediation aims to promote excellence in the AHU-ASN nursing program by improving students' critical thinking, clinical judgment, decision-making, and test-taking strategies. Additionally, by utilizing HESI evaluation data, the program is able to assess student achievement of course outcomes, identify curriculum gaps, and compare student performance with similar groups to help students achieve NCLEX-RN success.

Specialty HESI Examinations: The specialty HESI examinations (standardized exams) are administered in NRSG 105, NRSG130, NRSG 135, NRSG 150, NRSG 170, NRSG 180, NRSG 220, NRSG 242, and a Customized HESI exam in NRSG 210. The customized exam will integrate content/concepts from the NRSG105, NRSG130, NRSG135, NRSG150, NRSG180, and the NRSG210 courses. The Exit HESI exam will be administered in the NRSG 225 course.

Before Proctored HESI Exam: To help prepare for the proctored HESI exam, it is recommended that students complete Elsevier Adaptive Quizzing (EAQs) in the relevant specialty area and review the rationales provided. Students can generate customized quizzes (EAQs) based on their progress. Additionally, students should take HESI Practice tests to further prepare for the specialty exams.

HESI EXAM POLICY

The HESI exams will be counted as 5% of the total course grade (See Grading Conversion Chart below). A benchmark score of 900 is the recommended standard for all specialty courses.

Grading Conversion Chart

HESI Score	Grade Range	HESI Score	Grade Range
≥1000	100%	600-699	60%-69.9%
900-999	90%-99.9%	500-599	50%-59.9%
800-899	80%-89.9%	400-499	40%-49.9%
700-799	70%-79.9%	0-399	0%-39.9%

a. Students must take the Specialty HESI Exam versions One (1) for each course.
b. The HESI score achieved from the test (version 1) will be scored and recorded in the grade book.
c. All students, regardless of the HESI Exam score received, must remediate.
d. Failure to complete and/or submit the required remediation by the assigned due date, will result in a grade of Zero (0) for both the exam and remediation (totaling 10% of the course grade) and may affect progression to the next course.
e. All students are required to take the specialty HESI Exam in the assigned week per their syllabus. Failure to do so will result in a zero. No retakes are permitted unless extenuating circumstance occurs which will be reviewed by Course Faculty, Assistant Dean, and Program Coordinator. Documentation must be provided to be considered.
f. Students taking the exam will sign and submit the ASN Specialty HESI Remediation Agreement Form (see Appendix F). The document is kept in the student's permanent file.

HESI REMEDIATION POLICY

Students completing 100% of the assigned HESI Remediation will earn 5% of the total course grade. The following remediation plan must be completed and submitted into the HESI Dropbox located in your course on or before the assigned due date.

a. HESI Essential Packets (Packets): To access HESI remediation, click the remediation link in the right column inside your HESI course.
    1. Based on your HESI Report, essential packet tiles will be created.

2. Each essential packet tile will list the concept and your HESI score for that concept.
3. Click on a specific packet title to open it.
4. Each packet will contain various types of information in different amounts, depending on the concept. You may need to click a link to expand or collapse your packet list to see all the essential packet tiles.
5. Packets may include textbook excerpts, quizzes, audio files, videos, or other contents.
6. Remediation time is determined by your exam score (See Required Minimum Remediation Timetable below).
7. To return to your remediation page, click the Exit link at the top of the page.

Required Minimum Remediation Time (HESI Essential Packet Tiles)	
HESI Score (1st exam)	Time Required (Only actual online time spent completing remediation will be counted)
≥1000	Complete 30 min. (minimum) of remediation in the two (2) lowest content areas (30 min. x 2= 1 hr.).
900-999	Complete 45 min. (minimum) of remediation in the two (2) lowest content areas missed. (45 min. x 2= 1.5 hr.)
800-899	Complete 1 hour (minimum) of remediation in the two (2) lowest content areas missed (1 hr. x 2= 2 hrs.)
799-750	Complete 1 hour (minimum) of remediation in the three (3) lowest content areas missed (1 hr. x 3= 3 hrs.)
< 750	Complete 1 hour (minimum) of remediation in the four (4) lowest content areas missed (1 hr. x 4= 4 hrs.)

b. HESI Case Studies
   1. Students must complete the assigned HESI Case Studies in the Remediation Packet.
   2. A score of 80% minimum per Case Study is required to count for completion. You have unlimited attempts to achieve a score of 80%.
   3. At the end of the case study, you will see your results page. This will list your score along with tabs listing the correct and incorrect questions. You will be able to review the rationales and answers for all questions.
   4. To repeat the case study, click Begin in the upper-right corner. To leave the case study and return to your remediation page, click Exit in the upper-right corner.
   5. Your case study results will also be listed at the bottom of the Exam Results page. You can access this by clicking Exam Results in the left column and then selecting your exam from the drop-box.
   6. Clinical Judgment Skills under the case studies in the remediation plan may be helpful to review for more tips on test-taking strategies.

c. Submit Screenshots: Submit the following remediation completion reports into HESI Dropbox in CANVAS:
    1. HESI completion of Essential Packets (ensure time and concepts are visible)
    2. Completion of Case Studies with a grade of 80% or greater

Failure to complete and/or submit proof of completion for the required remediation listed by the assigned due date will result in a grade of zero (0) for both the exam and remediation, totaling 10% of the course grade, and may prevent progression to the next course.

EXIT HESI EXAM POLICY

The Exit HESI exam will be administered in the final trimester of the nursing program to assess students' comprehensive nursing knowledge. The Exit HESI exam score will be one of the exam grades (20% of course grade) in NRSG225. According to Elsevier HESI Assessment, the recommended minimum score on the Exit HESI Exam remains 900.

a. The Exit HESI is worth 100 points.
b. The Exit HESI exam must be taken at the scheduled date and time.
c. The score will be converted into a percentage (i.e., 1000 and above= 100%, 950= 95%, 900=90%, 850=85%, 750=75%, etc.).
d. All students will remediate by using the Evolve-provided remediation packets and retest on the scheduled date and time.
e. The results from the first and second Exit HESI will be averaged, and the mean score of the two exams will be the final exam score.
f. The HESI scores used for mean calculation will be the official scores reported from Elsevier and not the student's computer.
g. Failure to submit the required completed remediation by the assigned due date will result in a grade of "0" for the HESI grade.

OTHER DEPARTMENT OF NURSING POLICIES AND PROCEDURES

Liability

Nursing faculty and students are covered by malpractice insurance provided by the University. The coverage applies only to school-related clinical experiences. Coverage does not extend to students and faculty working on their own time in clinical agencies.

Observation Labs

Observation of clinical activities or professional contact with patients by students is to be carried out only as it is a part of the planned educational program. Safety of patients, limited facilities, and professional ethics demand that a faculty member arrange observational experiences.

Communication– Bulletin Boards – Electronics

Important notices are generally made available to students via bulletin boards, course email, website, and class announcements. Students are expected to be aware of all information communicated by these means and, therefore, are advised to check these areas frequently.

AHU bulletin boards are for official University use only. Other uses must have prior departmental approval.

Telephone Calls (Clinical Areas)

Mobile phones and other electronic communication devices are never permitted in a clinical environment for any reason, by an ASN nursing student. Unit provided telephones (i.e. Spectralink), in clinical areas are for business use and are not to be used for personal calls. Restrict cell phone calls to emergencies only, and never in patient care areas.

Classroom Decorum

Student behavior either contributes to or distracts from learning in the classroom. On the first offense, students demonstrating disruptive behavior may be addressed in the classroom. On the second offence, may be asked to leave the classroom. If there is a third offense, students are asked to see the Program Coordinator, or Assistant Dean. Students must pick up any food items, wrappers, etc. when they leave the classroom, or there is a possibility that eating will not be allowed in the classroom. Cellular phones are to be turned off while in the classroom. In an emergency, cell phones may be used outside the classroom.

Nursing Forum

Nursing Forum is a Department of Nursing committee composed of students and faculty. Its purpose is to promote communication among students and faculty, discuss issues related to the Department of Nursing, and make suggestions for meeting student needs more effectively. Two volunteer representatives from each class join faculty sponsors in forming this committee.

Florida Nursing Student Association (FNSA)

The Department of Nursing sponsors a chapter, AdventHealth University Nursing Student Association (AHU-NSA), which is part of a state-wide Florida Nursing Student Association (FNSA) and a national organization known as the National Student Nurses Association (NSNA). Students are encouraged to join and participate in AHU-NSA to enhance professional growth. Activities include participation at the state convention, as well as community and outreach programs.

Transportation

Students are expected to make their own arrangements for transportation to and from all clinical agencies.

Medical Records Access

Students may have access to the medical record of an assigned patient after obtaining authorization from a faculty member. Students may never access the medical record of any patient not assigned to them. This is a privacy violation and the student may be subject to dismissal from the program, at the first offense. Students may not access the medical records of anyone known to them without authorization from a faculty member.

Cardiopulmonary Resuscitation (CPR)

Students are expected to take an American Heart Association "Basic Life Support (BLS) for the Health Care Provider" course and receive validation.

BLS validation is required before students are permitted to enter the clinical area, and it must be current throughout the entire program. Students whose BLS validation expires prior to the completion of the clinical experience for a trimester will not be allowed to register for that trimester until appropriate validation is submitted.

Infection Control Policy

Students should not attend clinicals or classes when they could potentially transmit disease to others. During the delivery of nursing care, there is a risk of exposure to infectious organisms. With proper immunization and education, healthcare workers can be reasonably protected from the risk of infection. Students are obligated to comply with the standards set forth by the clinical agency in which they are functioning. Health care professionals have a fundamental responsibility to provide care to all patients assigned to them. Refusal to care for patients based on diagnosis is contrary to the ethics of the nursing profession.

Health Records

i. Tuberculosis screening is a one-time requirement upon acceptance into the Nursing Program. If the student has not been enrolled in the nursing program for greater than four (4) months prior to returning to the nursing program, an updated tuberculosis screening is required. Depending on the clinical facility, an additional TB screening may be required. Form and verification of results must be uploaded into the current compliance tracking system to satisfy compliance prior to the expiration date. Failure to maintain current health records in the compliance tracking system will result in unexcused clinical absences and may result in the entrance or continuation of the Disciplinary Process.

ii. The annual Mask Fit Test is required for Florida students who provide direct patient care in all healthcare settings. Students must provide documentation of annual TB Respirator (Mask) Fit testing. Mask Fit Testing must be performed at an AdventHealth affiliated location only. Refer to the Annual Mask Fit Test form. Form and verification of results must be uploaded into the current compliance tracking system to satisfy compliance prior to the expiration date. Failure to maintain current health records in the compliance tracking system will result in an unexcused clinical absence and may result in the entrance or continuation of the Disciplinary Process.

iii. Annual Influenza vaccine is required during the identified Flu season. Refer to the Annual Influenza Vaccine Form. The form must be uploaded into the current compliance tracking system to satisfy compliance. Failure to maintain current health records in the compliance tracking system will result in unexcused clinical absences and may result in the entrance or continuation of the Disciplinary Process. NOTE: See the COMPLIANCE TRACKING SYSTEM section of this handbook for more detailed information.

Photocopying

Photocopying machines are available for student use in the Learning Resource Center and the Library. Do not ask for copying to be done in the Nursing Department.

Background Check

In order to comply with the requirements of clinical sites, AdventHealth University performs a background check on every student. If a student is/or has been convicted of a felony, he/she may be barred from studying at this institution.

Course and Faculty Evaluation

At the completion of each nursing course, students will be given an opportunity to evaluate the course, clinical experience, and faculty members. University evaluation forms will be provided.

Program Evaluation

Each student will be given an opportunity to evaluate the nursing program upon completion of the requirements for the Associate of Science in Nursing degree.

Departmental forms will be provided.

Parking

Orlando: There is no student parking on campus. Parking for commuter students is available free of charge at the AdventHealth North King Street Parking Garage located at 421 E King Street, Orlando, FL 32803. All vehicles MUST display a AdventHealth University parking decal, which can be obtained at the Office of Student Services.

Shuttle buses will provide service to and from Bay Run and LaSalle Arms Apartments for those living in university housing. Commuter students are not allowed to park at the Bay Run or LaSalle Arms Apartments.

Shuttle Hours for University Housing*:

Monday-Thursday: 5:30 am-9:00 pm, Friday: 5:30 am-4:00 pm

**These hours are subject to change*

Cars parked illegally on campus, on student housing property, or in hospital parking facilities not designated for student parking will be ticketed, booted, or towed. The cost of a ticket or for removing a boot is $50.00. Tickets and boot fines must be paid to the Business Office within 15 business days. Fines not paid within 15 business days will result in an additional $25 late fee and added to the student's account. All parking fines are donated to the AdventHealth University *Grace Fund*. The Senior VP for Student Affairs & Health and Biomedical Sciences handles all parking disputes.

Towing of vehicles and associated charges will be handled and processed by Links Towing (407-896-0813).

Parking Violations include:

- Unauthorized/Improper parking in designated areas (including grass and driveways).
- Failure to display appropriate decals.

- Parking in visitors'/designated/marked spaces.

An AHU security officer is on duty 24/7 for your protection. The AHU Security Department monitors all AHU parking areas on a regular basis for safety and parking violations. AdventHealth Security monitors the parking garages for parking, safety, and security issues. (AH Hospital Security 407-303-1515). Any concerns relating to parking compliance should be addressed with the Director of Security at 407-353-4002.

BUILDING HAZARD

A. Building Hazards

A hazard exists when you find:

a. Smoke
b. Fire or flame
c. Excessively hot closed door or wall.
d. Uncontrolled flammable or explosive liquid or gas.
e. Bare, live, electrical wire.

What to do:

a. Note the location and assess the extent of the hazard.
b. Get immediate help if other persons are in the area.
c. If the hazard is a fire and is small and not near explosive material, secure the nearest fire extinguisher and direct it to the base of the flame.
d. Activate the nearest fire alarm.
e. Follow the Building Evacuation Plan posted in each building.

B. Building Evacuation Procedure

Evacuate the building when:

a. Fire alarm in the building sounds.
b. An authorized person orders the building to be evacuated.
c. A hazardous situation exists.

What to do:

a. Stay calm and help others to stay calm.
b. Obey directions given by faculty or other authorized personnel.
c. Do not try to carry anything out of the building.
d. Follow the exit route posted in the building.
e. Move out quickly without pushing.
f. Get quickly away from the building once outside and reassemble as a group in your assigned assembly area.
g. Remain in the assembly area until all clear is sounded or an authorized person gives you further directions.

DECLARATION

The provisions of this *Student Handbook* are not to be regarded as an irrevocable contract between the student and AHU. The University reserves the right to change any provision or requirement at any time. All regulations adopted by the Board of Trustees of AHU or the

faculty subsequent to the publication of this *Student Handbook* have the same force as those published herein.

ADVENT HEALTH UNIVERSITY DEPARTMENT OF NURSING: ASN SUPPLEMENT

Appendix A: Policies Agreement

In signing this paper, I acknowledge that I am responsible for all policies located in the student handbook herein.

Student Signature_____

Date_____

Print Student Name_____

Students with grievances that are not covered under the Academic Appeal Policy (*Academic Bulletin*) or the Discipline Policy (*Student Handbook*) are encouraged to take the appropriate steps to resolve the issue informally by discussing it directly with the individual(s) involved. If informal resolution is not possible or the issue is not resolved, students may submit a written grievance to the Vice President for Student Services within ten business days of the incident. The Vice President for Student Services will investigate the case and respond to the student in writing within ten business days.

ADVENTHEALTH UNIVERSITY

DEPARTMENT OF NURSING

Appendix B: ASN Program Plan of Study
RECOMMENDED SEQUENCE OF CLASSES

Term/ Year	1st Trimester/_____		2nd Trimester /_____		3rd Trimester /_____	
	***BIOL 101 Anatomy and Physiology I** ***ENGL 101 English Composition I** ***MATH 103 Survey of Mathematics** ***NUTR 120 Nutrition for Healthcare** ***PSYC 128 Developmental Psychology**	4 cr 3 cr 3 cr 2 cr 3 cr	***BIOL 102 Anatomy and Physiology II** ***BIOL 225 Principles of Microbiology** **NRSG 105 Health Assessment** **NRSG 130 Fundamentals of Nursing (C)**	4 cr 4 cr 3 cr 3 cr	***RELP 103 Philosophy of Healthcare** **NRSG 135 Pharmacology in Nursing** **NRSG 150 Mental Health Nursing (C)** **NRSG 180 Medical Surgical Nursing I (C)**	3 cr 3 cr 3 cr 5 cr
	Total	**15 cr**	**Total**	**14 cr**	**Total**	**14 cr**
Term/ Year	4th Trimester /_____		5th Trimester /_____		_____/_____	
	NRSG 170 Childbearing in Nursing (C) **NRSG 210 Medical Surgical Nursing II (C)** **NRSG 220 Family & Childcare in Nursing (C)** **RELP 242 Issues in Grieving and Loss**	3 cr 5 cr 3 cr 2 cr	**NRSG Medical Surgical Nursing III (C)** **NRSG 225 NCLEX-RN Immersion** **NRSG 250 Transition to Professional Nursing and Practicum (C)**	5 cr 4 cr 4 cr		
	Total	**13 cr**	**Total**	**13 cr**		

All nursing courses within the ASN Program must be completed with a grade no lower than a "C+" (77%).

The nursing GPA will be calculated at the completion of the third trimester in the ASN Program and at the completion of the nursing program to ensure eligibility for progression and graduation. **PLEASE NOTE: All courses listed in the current level must be completed before a student can progress to the next level, including Gen Eds. Clinical hours will be face-to-face at AdventHealth Hospitals.**

ASN Program Graduation Requirements:

** Exit HESI and remediations are graduation requirements. Please see the Standardized Testing policy in ASN Student Handbook Supplements.

Cognate Prerequisites Courses	Cr	Cognate Corequisite Courses	Cr	General Education Courses	Cr	Nursing Courses	Cr
BIOL 101 Anatomy and Physiology I (with Lab)	4	BIOL 102 Anatomy and Physiology II (with Lab)	4	**RELP 103 Philosophy of Healthcare**	3	NRSG 105 Health Assessment	3
ENGL 101 English Composition I	3	BIOL 225 Principles of Microbiology (with Lab)	4	**RELP 242 Issues in Grieving and Loss**	2	NRSG 130 Fundamentals of Nursing (C)	3
MATH 103 Survey of Mathematics	3	**These 2 courses must be taken with the first 2 nursing courses (NRSG 105 and NRSG 130) if not completed prior.**				NRSG 135 Pharmacology	3
NUTR 120 Nutrition for Healthcare	2					NRSG 150 Mental Health (C)	3
PYSC 128 Developmental Psychology	3					NRSG 170 Childbearing in Nursing (C)	3
						NRSG 180 Medical-Surgical Nursing I (C)	5
						NRSG 210 Medical-Surgical Nursing II (C)	5
						NRSG 220 Family and Childcare in Nursing (C)	3
						NRSG 225 NCLEX-RN Immersion	4
						NRSG242 Medical-Surgical Nursing III (C)	5
						NRSG 250 Transition to Professional Nursing and Practicum (C)	4
TOTAL	**15**	**TOTAL**	**8**	**TOTAL**	**5**	**TOTAL**	**41**

NURSING LEARNING CENTER CODE OF CONDUCT
Appendix C
Code of Conduct

Print your name: _____

1. Code of Conduct

a. The NLC labs are a simulated, "real," environment to be treated like a clinical setting.
b. The NLC labs are a safe, learning environment.
c. When conducting health assessments and lab practice, opportunities are provided for students to practice with each other, under close supervision by faculty. Please arrange, in advance, to bring a person to work with you in the lab. Faculty will not provide a partner.
d. Food, drinks, and personal belongings must be placed in the designated areas.
e. Wash your hands or use hand sanitizer before, and after, using models or any equipment.
f. Treat the actors, mannequins, models, and body parts like they are patients.
g. When performing procedures, perform them as they were taught during skills instruction.
h. Sharps injuries should be reported to the professor in charge of the skills session, or the NLC Coordinator, for assistance and documentation.
i. Betadine is not to be used on any of the models.
j. Used sharps shall be disposed of in the sharp container.
k. Non-reusable supplies shall be placed in the designated area. If you don't know where to place used supplies, please ask a lab assistant or NLC coordinator.
l. Items signed out for use outside of the labs shall also be cared for according to the guidelines above.
m. Items signed out for use outside of the labs shall be returned on time.
n. Equipment signed out for use outside of the lab must also be returned with all the parts intact.
o. Items signed out and not used must also be returned.
p. Leave the lab the same way you found it, or in better condition than you found it.
q. Children and family members are not allowed in the NLC per University policy.
r. Cell phone usage, including smart watches, is not permitted. No recording and no photos are allowed. Faculty will provide further instructions if usage is applicable.
s. Students are expected to bring required equipment to labs and simulation as directed by the course faculty.

2. Dress Code

a. Scrub tops may be of any print or solid color. Pants must be a solid color. Consult with your course faculty to determine the acceptable top and pants.
b. White scrub pants and tops are allowed, as long as undergarments are not visible.
c. Athletic shoes are permitted in the NLC. Absolutely no flip flops, sandals, crocs or open-toed shoes are allowed in the lab.
d. White leather shoes for clinicals, with white socks are encouraged.
e. The AHU nursing student name badge is required to be worn at all times, on the left upper corner of the uniform.
f. A professional watch with a second hand is required. Smart watches are not acceptable.
g. Hair must be off of the neck and long hair must be pulled back. Nothing is allowed in the hair (e.g., scarves, hats, caps, hair decorations or adornments), unless for religious reasons. The following items are allowed in the hair to restrain it: Clips, bobby pins, ponytail clips or ties. All hair items must be the same color as the hair.
h. Nails must be trimmed so that they do not extend over the tips of the fingers. Polish, if worn, must be neutral. No artificial nails may be worn.

i. The only acceptable jewelry is a wedding band and engagement ring, and post-type earrings, only one in each ear. No visible body piercing jewelry, including the tongue, may be worn.
j. No bracelets are allowed, unless medically necessary.
k. A religious necklace may be worn under the scrub top. No other necklaces are allowed.
l. Tattoos must be covered.
m. If students arrive to the lab wearing inappropriate attire or without their name badge, they will be asked to leave the NLC and will be recorded as an unexcused absence.

3. Evaluations

a. Student performance during a lab will not be discussed outside of the lab environment.
b. Student performance will stay confidential.
c. Be aware that while students are in the lab, their performance will be evaluated.
d. If students require revalidation, they are responsible to coordinate with the course coordinator to schedule practice time (i.e., remediation) prior to a follow-up revalidation attempt.

Consequences for non-compliance with this Code of Conduct may result in disciplinary action, at the discretion of the faculty.

By signing this form, I agree to follow the above Code of Conduct while enrolled in the nursing program.

Signature: _____Date_____

Print Name _____

ADVENT HEALTH UNIVERSITY

DEPARTMENT OF NURSING

Appendix D: Disciplinary Action Form

Student Name: _____ Date: _____

Course: _____

PREVIOUS WRITE-UPS REVIEWED: YES NO

The disciplinary process involves four steps:

Documentation

Warning

Probation

Dismissal

Steps taken in this process remain in effect throughout the entire program (See the Disciplinary Policy).

DESCRIPTION OF BEHAVIOR(S) OR INCIDENT(S):

GOAL(S) FOR IMPROVEMENT (Collaboration between the faculty and student):

ACTION PLAN:

Faculty

Signature: _____

Student:

Signature: _____

Faculty

ACTION TAKEN:

( ) DOCUMENTATION ( ) WARNING ( ) PROBATION ( ) DISMISSAL

Comments:

SIGNATURES:

1. _____ 2. _____
Faculty Course Coordinator

3. _____ 4. _____
Nursing Administrator Student

STUDENT RESPONSE REQUIRED:

ADVENT HEALTH UNIVERSITY DEPARTMENT OF NURSING

Appendix E: Incident Alert Form

STUDENT NAME: _____ DATE:_____

COURSE: _____

PREVIOUS WRITE-UP: YES NO

DESCRIPTION OF BEHAVIOR(S) OR INCIDENT(S):

GOALS FOR IMPROVEMENT (STUDENT-GENERATED):

CONTRACT AGREEMENT:

( ) Reviewed Disciplinary Process and unacceptable behaviors. (See "Disciplinary Process" in the Nursing Student Handbook Supplement.)

STUDENT COMMENTS REQUIRED: (Use the reverse side for additional space.)

SIGNATURES:

_____

Faculty Date

_____

Course Coordinator Date

_____

Nursing Administrator Date

_____

Student Date

ADVENT HEALTH UNIVERSITY DEPARTMENT OF NURSING

Appendix F: HESI Remediation Agreement Form _____/_____
(Trimester/Year)

Course Name: NRSG _____: _____

Student Name_____Date of Exam _____Score_____

Standardized Testing (HESI): All ASN students are required to take designated Health Education Systems, Inc. (HESI) specialty exams in each course. The HESI specialty exams evaluate the student's abilities to apply content from specific clinical nursing areas. These exams serve as preparatory tools for the National Council Licensure Examination (NCLEX), the final step to becoming a Registered Nurse. Research has shown that scores above 900 on the HESI RN Exit Exam strongly indicate success on the NCLEX. To ensure readiness for the comprehensive RN Exit Exam, students must engage in remediation following each specialty exam according to a specific study plan provided with their HESI feedback. Documentation of this remediation is required after each specialty exam.

Purpose: HESI Student Testing and Remediation aims to promote excellence in the AHU-ASN nursing program by improving students' critical thinking, clinical judgment, decision-making, and test-taking strategies. Additionally, by utilizing HESI evaluation data, the program is able to assess student achievement of course outcomes, identify curriculum gaps, and compare student performance with similar groups to help students achieve NCLEX-RN success.

Specialty HESI Examinations: The specialty HESI examinations (standardized exams) are administered in NRSG 105, NRSG130, NRSG 135, NRSG 150, NRSG 170, NRSG 180, NRSG 220, NRSG 242, and a Customized HESI exam in NRSG 210. The customized exam will integrate content from the NRSG105, NRSG130, NRSG135, NRSG150, NRSG180, and NRSG210 courses. The Exit HESI exam will be administered in the NRSG 225 course. **Before Proctored HESI Exam:** To help prepare for the proctored HESI exam, it is recommended that students complete Elsevier Adaptive Quizzing (EAQs) in the relevant specialty area and review the rationales provided. Students can generate customized quizzes (EAQs) based on their progress. Additionally, students should take HESI Practice tests to further prepare for the specialty exams.

HESI Exam Policy:

A. The HESI exams will be counted as 5% of the total course grade (See Grading Conversion Chart below). A benchmark score of 900 is the recommended standard for all specialty courses.

Grading Conversion Chart

HESI Score	Grade Range	HESI Score	Grade
≥1000	100%	600-699	60%-69.9%
900-999	90%-99.9%	500-599	50%-59.9%
800-899	80%-89.9%	400-499	40%-49.9%
700-799	70%-79.9%	0-399	0%-39.9%

B. Students must take the Specialty HESI Exam for each course.
C. The HESI score posted in the Elsevier gradebook will be the score recorded
D. All students, regardless of the HESI Exam score received must remediate.
E. Failure to complete and/or submit the required remediation by the assigned due date will result in a grade of Zero (0) for both the exam and remediation (totaling 10% of the course grade) and may affect progression to the next course.
F. Students taking the exam will sign and submit the ASN Specialty HESI Remediation

Agreement Form (see Appendix F). The document is kept in the student's permanent file.

HESI Remediation Policy: Students completing 100% of the assigned HESI Remediation will earn 5% of the total course grade. The following remediation plan MUST be completed and submitted into the HESI Dropbox located in your course.

A. **HESI Essential Packets (Packets):** To access HESI remediation, click the remediation link in the right column inside your HESI course.
1. Based on your HESI Report, essential packet tiles will be created.
2. Each essential packet tile will list the concept and your HESI score for that concept.
3. Click on a specific packet title to open it.
4. Each packet will contain various types of information in different amounts, depending on the concept. You may need to click a link to expand or collapse your packet list to see all the essential packet tiles. To return to your remediation page, click the Exit link at the top of the page.
5. Packets may include textbook excerpts, quizzes, audio files, videos, or other contents.
6. Remediation time is determined by your exam score (See Required Minimum Remediation Timetable below)

Required Minimum Remediation Time (HESI Essential Packet Tiles)	
HESI Score (1st exam)	**Time Required (**Only actual online time spent completing remediation will be counted)
≥1000	30 min. (minimum) of remediation in the two (2) lowest content areas (30 min. x 2= 1 hour).
900-999	45 min. (minimum) of remediation in the two (2) lowest content areas (45 min. x 2= 1.5 hours).
800-899	1-hour (minimum) remediation in the two (2) lowest content areas (1 hr. x 2= 2 hours).

799-750	1-hour (minimum) remediation in the three (3) lowest content areas (1 hr. x 3= 3 hours).
< 750	1-hour (minimum) remediation in the four (4) lowest content areas (1 hr. x 4= 4 hours).

B. HESI Case Studies

1. Students must complete the assigned HESI Case Studies in the Remediation Packet.
2. A score of 80% minimum per Case Study is required to count for completion. You have unlimited attempts to achieve a score of 80%.
3. At the end of the case study, you will see your results page. This will list your score along with tabs listing the correct and incorrect questions. You will be able to review the rationales and answers for all questions.
4. To repeat the case study, click Begin in the upper-right corner. To leave the case study and return to your remediation page, click Exit in the upper-right corner.
5. Your case study results will also be listed at the bottom of the Exam Results page. You can access this by clicking Exam Results in the left column and then selecting your exam from the drop-box.
6. Clinical Judgment Skills under the case studies in the remediation plan may be helpful to review for more tips on test-taking strategies.

C. Submit Screenshots: Submit the following remediation completion reports into HESI Dropbox in CANVAS:

1. HESI completion of Essential Packets (ensure time and concepts are visible)
2. Completion of Case Studies with a grade of 80% or greater

Failure to complete and/or submit proof of completion for the required remediation by the assigned due date will result in a grade of zero (0) for both the exam and remediation, totaling 10% of the course grade, and may prevent progression to the next course.

Upon finishing the remediation, submit screenshots of the completion reports (as outlined in section C) along with the signed ASN Specialty HESI Remediation Agreement Form. This document will be kept in the student's permanent file.

I have completed the learning agreement based on my NRSG_____: _____ HESI Specialty Exam.

STUDENT SIGNATURE: _____Date _____

ADVENT HEALTH UNIVERSITY

DEPARTMENT OF NURSING

Appendix G: AHU Incident Report Form

Date Incident Occurred: _____ **Date Report Submitted:** _____

Incident Location: _____

Individual (s) Involved: _____

Subject: _____

Incident Description: _____

Action Taken:

Other Recommendations:

Submitted by: **Witnessed by:**

Please submit this original form to the Office of the Vice President of Student Services. Copy to: Vice President of Operations

Appendix H: AH Standard Operating Procedure (SOP)
Workers' Compensation (WC) Employee Guidelines

SOP number AHO.800.504A	**SOP Name** Workers' Compensation (WC) Employee Guidelines
Location AdventHealth Orlando	**Responsible Department** Staffing Management: Human Resources
SOP Owner/Executive Owner Senior Executive People Officer	**Original Creation Date (If applicable)** Not Applicable
Effective Date 07/06/2023	**Review Date** 07/06/2023

I. SCOPE: This SOP applies to all AdventHealth Orlando team members.

II. PURPOSE: The purpose of this SOP is to establish a uniform process for AdventHealth Orlando team members to follow in the event of a work-related injury or illness.

III. QUALIFIED PERSONNEL: All AdventHealth Orlando team members.

IV. TRAINING: Not applicable

V. SUPPLIES & EQUIPMENT: Not applicable

VI. PROCESS/PROCEDURE:

A. Employee Guidelines

1. Injuries / Illnesses
   a. To report an Employee Event / Injury, please sign into your **PeopleSoft HUB**. Once inside click **Quick Links** icon, then select **Workplace Injury Event** or Origami Risk - New Incident.
   b. If you are unable to submit the incident report through the HUB, call 866-3593455 for AdventHealth Workers Compensation Department.
   c. If you need medical treatment due to injury/illness related to work event, report to any AdventHealth Centra Care for evaluation and recommendation for future treatment.
   d. If you receive medical treatment for a work-related event, you must immediately inform your Manager and HR Loss Control WC Consultant.
2. Exposures

a. If you are reporting a COVID-19 related work Exposure and are feeling ill, you should access the Employee Health Assistant app-based intake form on *SharePoint/Quick Links/Coronavirus Information/Team Member Resources/Exposure* or Employee Health Assistant - Initial Report - Power Apps. Employee Health will contact you to monitor symptoms, schedule, and complete testing.
b. If you had an exposure not COVID-19 related (Blood/body fluids or an Unusual exposure, contact the Exposure Hotline (888-807-1020, option #2).

3. Treatment
   a. Referrals from authorized WC providers will be reviewed by your assigned WC Adjuster for determination of authorization. Treatment not approved could result in out-of-pocket responsibility.
   b. Keep all authorized scheduled medical appointments. Failure to keep an appointment may result in loss of benefits.
   c. You must clock out for all medical appointments.
4. Light Duty
   a. If your medical provider assigns restrictions due to your injury/illness, you must inform your manager. If your department is unable to provide you work due to your restrictions, immediately contact HR Loss Control WC Consultant for review of possible Transitional duty assignment.
5. Off Work / FMLA
   a. If your authorized medical provider has taken you off work, you must immediately inform your manager and contact HR Loss Control WC Consultant.
   b. Benefit determination for lost wages will be reviewed by your WC Adjuster.
6. Benefits
   a. If you are losing time from work due to the injury/illness, you are responsible to continue premium payments for your benefits. Payroll will allow true up of 33% of PDO (or other paid time off you may be entitled to) each week, which will continue deductions for your benefits, but once you run out of PDO/other paid time off through payroll, you must contact HR Shared Services (HRSS) Benefits team at 844-843-6363 to make arrangements to pay your premiums. Please open a self-service case on the HUB- hub.adventhealth.com (home page > HR AnswerLink > Create an HR Case) if you have questions about using your PDO while on leave.
7. Drug Screening
   a. Your work-related injury may fall into a category that requires a drug screen within 24 hours under AdventHealth Drug Free policy. You

will be contacted by HR Loss Control WC Consultant if drug screening is required.

8. Statute of Limitations
    a. Your eligibility for WC benefits may also be eliminated one year from the date you last receive a wage replacement check or approved medical care/treatment.

B. Manager Guidelines

1. Injuries / Illnesses
    a. If your Team Member needs medical treatment due to injury/illness related to a work event, they should report to any AdventHealth Centra Care for evaluation and recommendation for future treatment.
    b. Team Members that require treatment on the date of accident are paid for their full shift.
2. Serious Injuries / OSHA Reporting
    a. Pursuant to OSHA regulations, employers are required to notify OSHA when:
        1) Team Member is killed on the job or suffers a work-related hospitalization, amputation, or loss of an eye.
        2) A fatality must be reported within 8 hours.
        3) An in-patient hospitalization, amputation, or eye loss must be reported within 24 hours.

    You must notify HR Loss Control Consultant and send notification to email AdventHealth CFD-S WC CFD-S.WorkersCompensation@AdventHealth. com immediately. If these events are not reported timely AdventHealth is responsible for Citations accessed.
3. Exposures
    a. If your team member is reporting a COVID-19 related work Exposure and is feeling ill, they should access the Employee Health Assistant app-based intake form on *SharePoint/Quicklinks/Coronavirus Information/Team Member Resources/Exposure*. Employee Health will contact the team member for monitoring and provide you with instructions if further assistance is required.
4. Treatment
    a. When the team member requires follow up medical treatment, they must clock out for all appointments.
5. Light Duty
    a. If the medical provider assigns Temporary restrictions due to team members injury/illness, you will review and determine if work is available. If light duty work is not available, you must notify the HR Loss Control Consultant to review for placement in the Transitional Duty assignment.

b. Once team member is released to full duty status, immediately place them back on schedule.

6. Transitional Duty
   a. If placed in Transitional Duty, wages will continue to be charged from your cost center up to 12 weeks.

VII. DEFINITION(S): Not applicable

VIII. EXCEPTION(S): Not applicable

IX. REFERENCE(S):

Email: CFD-S.WorkersCompensation@AdventHealth.com

X. RELATED DOCUMENT(S) / ATTACHMENT(S):

CW HR 206.3 Leave of Absence - Workers' Compensation

CW HR 257 Drug and Alcohol Testing

SOP AHO.798.001 Transitional/Modified Duty Program

Workers' Compensation (WC) Employee Guidelines