



**HANNAH E. MULLINS SCHOOL OF PRACTICAL NURSING**

**ADMISSION PACKET**

**Class beginning MARCH 2023 Full Time**

**Special COVID-19 Conditions possible**

## Hannah E. Mullins School of Practical Nursing

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**ACCREDITED BY:**

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**APPROVED BY:**

Ohio Board of Nursing

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Ohio Dept. of Higher Education

25 S. Front Street

Columbus, OH 43215

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## ENROLLMENT PROCEDURE/ ADMISSION CRITERIA

### Checklist for Enrollment

1. Attend Enrollment Information Meeting
2. Submit Application with nonrefundable \$50 fee prior to due date.
3. Official High School / GED Transcript (or equivalent as currently described by Dept. of Ed. for verification purposes)
4. Complete the FAFSA (if seeking Federal Financial Aid). Payment arrangements must be in place two (2) weeks prior to the start of school.
5. Take PAX Exam by **scheduled due date** with a composite score of at least 101
6. Background check and drug testing
7. Financial Aid / Payment Meeting
8. Admission Package / Health Forms (See below requirements). Must be complete and approved by the scheduled due date.
9. Complete Orientation
10. The prospective student who completes the “Checklist for Enrollment” will be considered for enrollment first along with PAX Score.

#### PAX Exam

The PAX Exam is a pre-entrance test. The prospective student must achieve at least a 101 to be eligible for enrollment. The prospective student is responsible for registering, paying and taking the test on their own. PAX Student User Guide can be found on the website.

The prospective student who does not achieve the 101 minimum score may retest one more time during that enrollment period.

PAX information can be found on the website.

### Physical Exam Requirements

Failure to meet this requirement may result in the prospective student becoming ineligible for enrollment to current class. The following paragraphs describe the requirements, explain how these requirements are met, and identify the forms for meeting them.

1. **Health Related Requirements** – Successfully completing a nursing education program and learning how to correctly implement nursing care is physically, mentally and sometimes, emotionally demanding. Consequently, it is important for HEMSPN faculty and staff, as well as the potential nursing prospective student, to know whether the prospective student is capable of meeting these demands with minimal potential for injury to self or others. Therefore, medical certification that the entering nursing prospective student is capable of meeting the demands and stresses of nursing and the HEMSPN program is an entrance requirement. The medical certification is met by documentation of: (a) personal health history and risk factors, (b) current health status through a physical examination, (c) an essential functions assessment, (d) documentation of dates that the prospective student received the required immunizations or evidence of positive titers, (e) tuberculosis screening, and (f) current cardiopulmonary resuscitation (CPR) certification for healthcare providers. Each of the required forms, except the CPR certification, must be *completed, properly documented, and submitted* to Hannah E. Mullins School of Practical Nursing as soon as possible but, prior to the first day of class.
  - 1.1 **Current Health Status and Physical Examination** – The personal health history assists the healthcare provider in determining the applicant’s present health status and health risks. It also helps the applicant to be more aware of their own health risks and how to adopt health behaviors for prevention of potential problems. Thus, this admission requirement may be the initial step in the socialization process of becoming a licensed practical nurse.
    - 1.1.1 The physical examination identifies the applicant’s current health status and assists in determining the capability of the applicant to meet the physical demands of nursing education and the nursing profession. The physical examination must occur no later than 1 year prior to first day of class.

**Essential Functions** – The Hannah E. Mullins School of Practical Nursing, in compliance with the Americans with Disabilities Act, does not discriminate against qualified individuals with documented disabilities. These essential functions are considered vital for the implementation of safe nursing care and, therefore, for successful completion of the HEMSPN program.

Success as a prospective nursing student depends upon many variables. Among them are academic abilities and certain technical skills. In the clinical setting, HEMSPN prospective nursing students, under the supervision of faculty, perform essentially the same physical, mental, and emotional activities as those of a licensed practical nurse. Therefore, ‘essential functions’ is defined as competencies which represent the minimum abilities necessary to successfully complete course, lab and clinical student learning outcomes as well as implement safe nursing care. The inability to meet these competencies may interfere with meeting the course, lab, clinical student learning outcomes and, therefore, may result in termination from the program. Examples of such competencies are:

- Carrying out procedures that prevent the spread of infection (examples: frequent hand washing with antibacterial soap, frequent use of mask and gloves, create and maintain sterile fields, etc.);
- Lifting and transferring patients, with appropriate assistance if needed, from a stooped to an upright position to accomplish bed-to-chair and chair-to-bed transfers;
- Turning, moving, and repositioning residents/patients in hospital or specialized beds;
- Pivot transferring residents/patients alone or with assistance of another health team member;
- Physically applying adequate pressure to effectively control bleeding, or perform cardiopulmonary resuscitation (CPR);
- Responding and reacting immediately to instructions/requests, monitor equipment, and auscultation (example: listen to and discriminate patient’s heart sounds through a stethoscope and respond immediately to any noted problems);
- Satisfactorily completing clinical laboratory experiences up to and including eight hours in length;
- Demonstrating ability to effectively perform a variety of nursing tasks involving observation of objects and persons, depth and color perception, and paperwork;
- Tactilely discriminating between sharp/dull and hot/cold;
- Accurately reading small print for safe, accurate medication administration;
- Performing mathematical calculation for medication preparation and administration;
- Communicating effectively and appropriately, both orally and in writing including the use of a computer;
- Making appropriate decisions in a timely manner when stressful situations arise; and
- Demonstrating ability to perform nursing skills safely and effectively using a variety of equipment.

Prospective students entering the program with a documented disability do so with the understanding that successful progression through the program requires: (a) meeting the same theory, lab, and clinical standards, expectations, requirements and learning outcomes as the other nursing prospective students, (b) providing safe, technically accurate nursing care, and (c) following HEMSPN policies and procedures. HEMSPN faculty and staff, whenever possible, will provide a reasonable accommodation to assist disabled prospective students in accomplishing these expectations. The HEMSPN Director, Superintendent of Salem City School District, and the HEMSPN nursing faculty evaluate requests for reasonable accommodation and the ability for HEMSPN to meet the requested accommodation.

1.1.2 **Essential Functions Assessment** – Applicants and their health care provider are responsible for determining their own eligibility in light of the minimum competencies that are essential for the safe performance of nursing care. Furthermore, evaluation of the prospective student’s ability to perform the minimum acceptable mental and physical competencies is a component of medical certification required by HEMSPN and associated clinical agencies. Therefore, the Essential Functions Questionnaire must be completed, signed by a healthcare provider, and returned to the HEMSPN.

1.2 **Required Immunizations or Titers** – The following immunizations or documented positive titers.

#### **T. B. POLICY:**

- **Two-Step Mantoux** A two-step method means that you receive first TB test and seven to twenty-one days later you receive the second TB test. Results of each step must be submitted along with date test given and date result was read. The test must be read between 48 to 72 hours after administration.

- **Chest X-Ray**-If the Mantoux skin test is positive; a radiologist's report of a current chest x-ray must be attached to the physical form. If the prospective student's Mantoux test results convert from a negative to a positive, the prospective student must comply with recommendations to follow-up with family healthcare provider or a county clinic and provide documentation.
- A TB assay

Once enrolled in the program, it is the prospective student's responsibility to maintain an updated Mantoux and TDap or Td as required.

- 1.2.1 **Tuberculosis Screening** – The results of *two* Mantoux tuberculin skin tests must be documented on the immunization record in one of the following ways:

| Type   | Procedure † ‡  | Documentation  |
|--|--|--|
| <b>Two Step Method:</b> For prospective students who have not had a Mantoux test within the previous year          | Initial skin test plus second test conducted 7 – 21 days later | Results of each test and date.   |
| <b>One Step Method:</b> For prospective students who have documentation of a Mantoux test within the previous year | Skin Test  | Results of current Mantoux plus the one conducted within the previous year plus the current skin test. |

† If the Mantoux skin test is positive, a radiologist's report of a current chest x-ray must be attached to the physical examination form. If a Mantoux test results converts from a negative to a positive, the prospective student must comply with recommendations regarding follow-up care with the family healthcare provider or a county TB clinic and provide documentation.

‡ **Be advised that TB testing can be done before or at the same time as mRNA COVID vaccine or must be delayed for at least 4 weeks after completion of the mRNA COVID-19 vaccination.**

‡ **Be advised that the MMR (measles, mumps, and rubella) vaccine cannot be administered within four (4) weeks of administration of the Mantoux.**

**MMR POLICY: Rubeola** (measles), **Mumps** and **Rubella** (MMR).

- If born before 1957, considered immune, or
- If born after 1/1/1957; **two vaccines** are required for measles, 1 mump, and 1 rubella, or
- Positive titers

**VARICELLA POLICY:** Documentation or copies of a record of two **Varicella** immunizations at least four weeks apart, or the results of a Varicella titer indicating immunity. If the titer does not indicate immunity, then **two Varicella** immunizations are required.

‡ **Be advised that the Varicella vaccine cannot be administered within four (4) weeks of administration of the Mantoux.**

**TDap or Td POLICY: Administration of a TDap or the date** of most recent TDap (adult tetanus/diphtheria/pertussis) immunization. If proof of a TDap is provided, then must have a current Td. If ten (10) or more years have passed since the last immunization, then another Td is required.

**HEPATITIS B POLICY:** Hepatitis B immunization is highly recommended. However, after careful consideration of the provided information, the prospective student may choose not to receive the injections. In this case a waiver must be signed.

**INFLUENZA:** A yearly flu vaccine is required and proof to be provided to the school. For September enrollment this should not be completed before October of the enrolling year to be current for the upcoming flu season. HEMSPN prospective students are offered the flu vaccine during the SRMC's flu clinics each fall.

**CORONAVIRUS:** A COVID-19 vaccine is required and proof to be provided to the school. Vaccination status must be up to date per current CDC guidelines. This includes any booster guidelines.

### **The Hannah E. Mullins School of Practical Nursing Statement Regarding Hepatitis B Virus Immunization**

Occupational hazards are an inherent component for many jobs; personal risks are especially high for health care workers and nursing prospective students especially when exposed to communicable diseases and blood-borne pathogens such as Hepatitis B Virus (HBV). Thus, the Occupational Safety and Health Administration (OSHA) has published standards for addressing exposure to blood-borne pathogens. These standards follow guidelines issued by the Center for Disease Control and cover all employees who could encounter blood, body fluids, or infections materials.

The Hannah E. Mullins School of Practical Nursing faculty and staff would like incoming prospective students to be aware of the increased occurrence of and risk for exposure to the Hepatitis B virus (HBV) during clinical learning experiences and for all members of the healthcare team. Although hospitals and healthcare agencies comply with the OSHA standards by immunizing employees against HBV, prospective students need to plan for their own immunization if protection against hepatitis is desired. Therefore, it is highly recommended but, at this time, not required that HEMSPN prospective students receive or initiate the Hepatitis B Immunization protocol prior to admission. Prospective students may check with local health departments, hospitals, work settings, or healthcare provider to inquire about a HBV immunization program. For adequate immunization, three vaccinations and a blood antibody test (titer) are necessary.

#### **Uniforms / Classroom and Clinical**

**Classroom** – Prospective students must purchase navy blue scrub pants/top from any source and / or purchase official Hannah E. Mullins School of Practical Nursing (HEMSPN) t-shirt, sweatshirt and fleece jackets from the school.

**Clinical** - Prospective students are required to wear the official Hannah E. Mullins School of Practical Nursing (HEMSPN) clinical uniforms only; no substitutions are permitted. One clinical uniform will be provided in the cost of the Lab / Supply Fees. Any additional clinical uniforms can be purchased directly through DeAngelo Uniforms at the prospective student's expense. The uniforms are fitted by and purchased through:

DeAngelo Uniforms  
6012 Market Street  
Youngstown, Ohio 44512  
(330) 758-5211

Masks or appropriate face covering will become part of the prospective students' uniform and must be worn at all times while mandated. Prospective student will supply their own masks.

Since prospective students attend theory classes a minimum of two (2) to a maximum of five (5) days per week and a majority of the clinical learning experiences are three (3) full days per week, it is highly recommended prospective students purchase at least three (3) classroom and two (2) clinical uniforms.

#### **Additional Uniform/Clinical Requirements:**

- All white, professional, leather shoes with quiet heels; no clogs;
- Wristwatch – non-digital/electronic, professional, non-ornamental, white, blue, black or metallic with second hand; **no smartwatches.**
- Student Identification – The student's name is embroidered on the HEMSPN clinical uniform. Information will be submitted during the fitting.
- Nursing clinical supply kit may be purchased at the office, this includes a BP cuff, stethoscope, gait belt, pen light, bandage scissors.

## Text Book Purchase Policy

HEMSPN prospective students will be responsible for purchasing textbooks prior to the beginning of each quarter. Textbooks may be purchased through the following options:

### New Books through HEMSPN:

1. Orders will be taken during financial aid meeting.

### Purchase on Your Own

1. Title, author, ISBN# and edition number will be given. Books purchased on your own must be approved the first week of class. If not approved, books will need to be purchased that meet approval.

### Payment:

1. Payment in full must be paid at the time of receipt
2. Federal Student Aid can be applied to cover the cost of funds are available. Prospective student may opt out of this option.

For each course theory packets and clinical toolkits are required. Because these packets are required, they will be bundled with the books for a fee.

Instructors may choose to provide PowerPoint presentations for their lectures. Printing PowerPoint presentations are optional and not included in the above bundles. They will be placed in the student's Google Classroom and may be printed by the student.

## Laptop Computer Requirements for Tests and Quizzes

### **Must have a laptop / tablets:**

- That has a camera and microphone.
- That has the ability to have internet.
- That has enough memory and processing speed to play streaming videos, and download/upload documents and tests.

## SIGNIFICANT INFORMATION FOR ALL PROSPECTIVE STUDENTS ENTERING THE NURSING PROFESSION

Following successful completion of any nursing program, the graduate applies to the Ohio Board of Nursing (OBN) for permission to take the pre-licensing examination. The OBN has established criteria for licensure eligibility in the State of Ohio. The newest criteria are related to a history of certain criminal activities, mental illnesses, and drug abuse. The following is for the entering prospective student's information only and provides further details related to these criteria.

### **1. Criminal History Record Check/Felony Preclusion:**

On April 8, 2002, the governor signed HB 327, a bill that, in part, amends the Nurse Practice Act (law) to require applicants to submit to a criminal record check as part of the application for initial licensure as a nurse in Ohio. The criminal records check includes the Federal Bureau of Investigation (FBI) records and is conducted by the Bureau of Criminal Identification and Investigation (BCI).

All prospective students entering a nursing program after June 1, 2003 are required to submit their fingerprints to the Bureau of Criminal Investigation (BCI) for a criminal record check through the BCI-and the Federal Bureau Investigation (FBI) check. For this reason, fingerprinting will be conducted prior to admission to the program. Results will be mailed directly to HEMSPN. **The cost of this background check and will then be billed to the prospective student.** Fingerprinting will be conducted again during the second half of the program to be submitted to the OBN in preparation of licensure examination. Part-time program will have fingerprinting done an additional time to cover the span of the program.

The following are examples of questions on the *Ohio Board of Nursing Application for Licensure by Examination to Practice Nursing* to which the applicant must attest:

- *Have you ever been convicted of, found guilty of, pled guilty to, pled no contest to, entered an Alford plea, received treatment or intervention in lieu of conviction, or received diversion for any of the following crimes (this includes crimes that have been expunged if the crime has a direct and substantial relationship to nursing practice)?*

- *A misdemeanor committed in the course of practice in Ohio, another state, commonwealth, territory, province, or country?*
- *A felony in Ohio, another state, commonwealth, territory, province, or country?*
- *A crime involving gross immorality or moral turpitude in Ohio, another state, commonwealth, territory, province, or country?*
- *A violation of any municipal, county, state, commonwealth, or federal drug law. This does not include alcohol related offenses.*
- *Has any board, bureau, department, agency or other public body, including those in Ohio, in any way limited, restricted, suspended, or revoked any professional license or certificate granted to you; placed you on probation; imposed a fine, censure or reprimand against you? Have you ever voluntarily surrendered, resigned or otherwise forfeited any professional license, certificate or registration?*
- *Have you ever, for any reason, been denied licensure or re-licensure, application for licensure or re-licensure, or the privilege of taking an examination, in any state (including Ohio), commonwealth, territory, province, or country?*
- *Have you ever entered into an agreement of any kind, whether oral or written, with respect to a professional license in lieu of or in order to avoid formal disciplinary action with any board, bureau, department, agency, or other public body, including those in Ohio?*
- *Have you been notified of any current investigation of you, or have you ever been notified of any formal charges, allegations, or complaints filed against you by any board, bureau, department, agency, or other public body, including those in Ohio, with respect to a professional license?*

In compliance with the law and so that Hannah E. Mullins School of Practical Nursing (HEMSPN) can assure all clinical sites that enrolled students are not a risk to patients, residents, staff or visitors, the records check is initiated prior to enrollment.

A prospective student with a criminal history that is identified on the OBN Designated Legal Offences that disqualify employment of a person in a position that is responsible for direct care or a charge of similar nature from another state or principality will be required to provide the information to the school prior to enrollment.

## 2. History of Mental Illness

Although a history of mental health problems may not exclude the nursing graduate from “sitting for state boards”, there are specific questions that the Ohio Board of Nursing asks to help the Board members determine eligibility for licensure in the State of Ohio. The specific questions on the Ohio Board of Nursing application are:

- *Have you ever been diagnosed as having, or have you been treated for, pedophilia, exhibitionism, or voyeurism?*
- *Within the last five years, have you been diagnosed with or have you been treated for bipolar disorder, schizophrenia, paranoia, or any other psychotic disorder?*
- *Have you, since attaining the age of eighteen or within the last five years, which ever period is shorter, been admitted to a hospital or other facility for the treatment of bipolar disorder, schizophrenia, paranoia, or any other psychotic disorder?*

## 3. History of or Current Illegal Use of Chemical or Controlled Substances

As with the history of mental illness, a history of drug abuse does not automatically prevent the graduate from obtaining a license and practice nursing in Ohio. However, the following are specific questions that the nursing applicant must answer when applying for permission to take the licensure examination:

- *Are you currently engaged in the illegal use of chemical substances or controlled substances?*
- *If you answered “Yes” are you currently participating in a supervised rehabilitation program or professional assistance program which monitors you in order to assure that you are not illegally using chemical substances or controlled substances?*

In addition to the Ohio Board of Nursing criteria, associated clinical agencies require a drug screening of all nursing prospective students prior to their clinical experiences at that agency. A prospective student whose test indicates the presence of non-prescribed and/or illegal drugs or alcohol in any detectable amount will be disqualified from attending clinical rotations, therefore, dismissed from the program.

## Health Insurance, Physical and Mental Health Care

Unfortunately, nursing, as well as other health care professions, place students and practitioners at risk for contracting communicable diseases and for physical injury. Although the HEMSPN faculty makes every attempt to promote safe nursing implementation and to protect the nursing student, there are times when this is not possible, or when circumstances prevent them from doing so. HEMSPN is unable to provide health insurance or to rearrange class and clinical schedules for the student. THEREFORE:

1. It is the responsibility of each student to cover the cost of healthcare provider and hospitalization fees incurred while enrolled in the program. In addition, any healthcare fees incurred as a result of any HEMSPN policies, procedures, or experiences are the sole responsibility of the student. Consequently, it is strongly recommended that each student carry adequate medical/health insurance.
2. Should a student become ill/injured during hours of instruction, ie: regular school hours in theory, laboratory or clinical, the student must report to a faculty member or Program Director immediately. If the illness/injury is a threat to the student's or their classmates' or their client's safety, health or wellbeing, the student must leave the classroom, laboratory or clinical setting.
3. If the illness/injury is severe, EMS will be activated, and the emergency contact person will be called. For illness/injury not requiring immediate attention the student may leave of own accord or call emergency contact person.
4. All expenses incurred are the responsibility of the student.
5. HEMSPN does require follow-up health care and a medical release stating student may return **without restrictions** to ensure the safety of the student, peers, and potential patients when the student returns to clinical experiences.
6. When an illness or injury is deemed an actual or potential threat to the safety of the student, classmates, or potential patients/clients, then the HEMSPN Director and faculty will determine if the student can remain in the program. A medical release is required following illness or injury and when patient safety or the student's ability to meet course/program requirements is questionable. Concurrence by a professional health counselor or another healthcare provider will also be required if deemed appropriate by the HEMSPN Director.
7. The HEMSPN student is not an employee of HEMSPN or Salem City Schools or associated healthcare agencies; therefore, they are not entitled to Worker's Compensation Benefits. As stated above, the student is financially responsible for any medical or healthcare treatment incurred. However, it is required that any student illness or injury, especially that which occurs during clinical experiences, be reported immediately to a faculty member or the HEMSPN Director.
8. Except in the case of an emergency, appointments with private healthcare provider or health clinics shall be made at times that do not conflict with class, laboratory, or clinical experiences.
9. **Pregnancy** - To protect the health of mother and fetus, the pregnant student is required to notify the Director and faculty of pregnancy as soon as possible. A written statement from the attending healthcare provider that indicates the student's ability to continue the nursing program **without restrictions** must be submitted after each pre-natal visit. If the healthcare provider indicates the student cannot continue in the program then the student may be eligible for a leave of absence, if meeting the criteria described in the Catalog/Student Handbook. Failure to submit written healthcare provider statements during pregnancy will result in dismissal from the program. During pregnancy, the student is required to maintain appropriate attire and grooming. This includes necessary alterations to the student's uniform. Following delivery and postpartum recovery, a written statement from the attending healthcare provider indicating the student's ability to resume clinical responsibilities without restrictions must be submitted prior to returning to clinical.

## DISABILITIES

The practical nursing student, under the supervision of faculty, essentially performs the same physical, mental, and emotional activities as licensed practical nurses. HEMSPN, in compliance with the Americans with Disabilities Act (ADA), does not discriminate against qualified individuals with documented disabilities. The student who enters the nursing program with a disability does so with the complete understanding that they will be expected to meet every course, clinical simulation laboratory, and clinical requirements and expectations as identified in the program, level, course, and clinical student learning outcomes. They must also attend, participate and complete satisfactorily all assigned clinical experiences. HEMSPN will make reasonable accommodations for medically documented disabilities. A documented diagnosis and written request for reasonable accommodations must be submitted four (4) weeks prior to admission and will be evaluated by the HEMSPN Director and the HEMSPN nursing faculty.

If the student must withdraw because he/she cannot reasonably be accommodated, the HEMSPN financial guidelines related to withdrawal/dismissal from the program will apply.

**Health Records** - See enclosed policy and forms.

## **UNETHICAL CONDUCT, UNACCEPTABLE BEHAVIOR/ATTITUDE**

Ethics refers to the moral or philosophical principles that society defines actions as being right or wrong. Nursing ethics identify how nurses must conduct themselves in relation to their profession, to the patients/residents for whom they provide nursing care, to other members of the health care team, and to the community. Standards in the Code of Ethics of the National Association of Practical Nurse Education and Services, Inc. (NAPNES) reflect the high ideals that the practical nurses and practical nursing students integrate into their nursing practice.

Unethical professional conduct is any behavior that violates a profession's Code of Ethics. For the HEMSPN nursing program, it encompasses any behavior that violates the NAPNES Code of Ethics (Appendix H). Such behavior includes, but is not limited to:

- (a) cheating;
- (b) lying;
- (c) falsifying records;
- (d) breaching confidentiality;
- (e) stealing;
- (f) abusing alcohol or drugs;
- (g) abusing patients/residents;
- (h) behaving in a disorderly manner within the school, hospital, or cooperating healthcare agencies;
- (i) providing nursing care outside the standards of care for licensed practical nurses; and
- (j) not forthcoming to the HEMSPN Director regarding criminal charges following the fingerprint check/while enrolled in the practical nursing program.

An undesirable behavior or attitude of the HEMSPN nursing student is defined as the inability to work and cooperate with co-workers and peers, continual antagonism of instructors or classmates, repeated cause for dissension among classmates or co-workers, and/or verbal/nonverbal/electronic communication which, in the opinion of faculty members or the Director, negatively affects the learning environment (see Bullying, Harassment, and Intimidation Policy for additional information).

Any of the behaviors identified in the previous paragraphs are unprofessional and/or unethical and are grounds for dismissal including permanent dismissal.

## **PROGRAM SCHEDULE**

The HEMSPN program is initiated with the admission of students in the full-time program twice per year – in September and March. The curriculum is divided into four equal quarters with a one to three-week break following each quarter. The part-time program enrolls every other September (depending on demand). The curriculum is divided into four equal quarters with a one to three-week break every 11 weeks. Some national and customary holidays (i.e., Memorial Day, Christmas, etc.) are incorporated into the academic schedule.

Classes and related clinical experiences are divided into two equal levels – Junior and Senior Levels; which consist of 700 clock hours for a program total of 1,400 hours.

The full-time program is designed to be Monday through Friday from the hours of 8:00 a.m. to 4:00 p.m. for theory/classroom days. Due to the COVID – 19 special considerations, start times can become staggered, so class/lab could start as early as 7:00 am. Clinical hours vary depending on the clinical site; times are generally scheduled between the hours of 6:30 a.m. and 3:30 p.m. depending on the point in the program, clinical experiences can be 2 – 3 days per week. Some clinical experiences could include afternoon and evening hours as well as Saturdays and/or Sundays. These afternoon/evening hours and/or weekend experiences are minimal.

The part-time program is designed to be Tuesday, Wednesday, and Thursday with one 6-hour day, and two 5-hour days. For theory/classroom days. Due to the COVID – 19 special considerations, start times can become staggered, so class/lab could start as early as 7:00 am. Clinical hours vary depending on the clinical site; times are generally scheduled between the hours of 6:30a.m. and 12:30 p.m. depending on the point in the program, clinical experiences can be 1 – 2 days per week. Some clinical experiences could include afternoon and evening hours as well as Saturdays and/or Sundays. These afternoon/evening hours and/or weekend experiences are minimal.

Lunch and periodic breaks are scheduled for days the student attends theory/clinical/simulation lab experiences. The student receives tentative schedules for class, clinical, and laboratory experiences at the beginning of each course and clinical rotation.

Due to the COVID-19 situation, the above schedule may be modified to a hybrid \* schedule. In a hybrid schedule students will complete theory classes online. Online classes and virtual simulations may replace some or all face to face classroom, lab and clinical experiences.

\*Hybrid course instruction is part face to face and part online instruction from home.

## **HEMSPN DRUG FREE POLICY**

### **Purpose and Goal**

Hannah E. Mullins School of Practical Nursing (HEMSPN) is committed to protecting the safety, health, and well-being of all students, faculty, staff, patients and other individuals associated with the organization. HEMSPN recognizes that alcohol and drug abuse pose a significant threat to patients, clients, classmates, faculty, and staff as well as prevent the fulfillment of student and HEMSPN short and long-term goals. Consequently, HEMSPN faculty and staff have established a drug-free policy that balances respect for individuals with the need to maintain an alcohol and drug free environment.

The Hannah E. Mullins School of Practical Nursing Drug Free Policy recognizes that involvement with alcohol and other drugs can be very disruptive, adversely affect learning, quality of work and performance, pose serious health risks, and have a negative impact on learning, productivity and morale. Therefore, HEMSPN cannot condone nor tolerate student or employee substance abuse. Accordingly, every student and employee is prohibited from using, possessing, manufacturing, trafficking, or being under the influence of any illegal drug or alcohol and / or abuse of prescribed drugs while participating in any HEMSPN associated or assigned activity. Possession of drug paraphernalia is also prohibited. Therefore, as a condition of admission into, membership of, and association with this organization, HEMSPN requires that students, faculty, and staff adhere to a strict policy regarding the illegal use, abuse, or possession of drugs and alcohol. HEMSPN also encourages individuals voluntarily to seek professional help with drug and alcohol problems for self and family members as early as possible.

### **Covered Individuals**

Individuals covered by the HEMSPN Drug Free Policy are those individuals who conduct business for, are applying to, or are conducting business with and/or on the property of HEMSPN, Salem City School District, and associated health care agencies. The policy includes but is not limited to all full- and part-time faculty, staff, and students while working for, learning under the guidance of, or representing HEMSPN in any capacity.

### **Applicability**

The HEMSPN Drug-Free Policy applies whenever an individual is representing, learning under the guidance of, or conducting business for and/or with the organization. Therefore, this policy applies: a) whenever conducting business, representing, or learning under the umbrella of the HEMSPN organization, b) while on HEMSPN, Kent State University, Salem City School District or an associated healthcare agency's property, and c) at HEMSPN sponsored events.

### **Prohibited Behavior**

It is a violation of the Hannah E. Mullins School of Practical Nursing Drug Free Policy to abuse, possess, sell, trade, transfer, give, and/or offer for sale alcohol, illegal drugs, intoxicants, or prescribed drugs to an individual for whom the prescription was not intended as well as improper use of legal drugs. Furthermore, the illegal or unauthorized use of prescription drugs is prohibited is a violation of the HEMSPN Drug-Free Policy to intentionally misuse and/or abuse prescription medications.

Prescription and over-the-counter drugs are not prohibited when taken in standard dosage for the use intended and/or according to a healthcare provider's prescription. Any HEMSPN associated individual taking prescribed or over-the-counter medication is responsible for consulting the prescribing healthcare provider and/or pharmacist to ascertain whether and/or how the medication will interfere with mental and physical capabilities.

### **Alcohol**

HEMSPN students and employees are prohibited from possessing, consuming, selling, distributing, or being under the influence of alcohol while conducting or being involved in any scheduled HEMSPN related activity.

### **Controlled Substances**

HEMSPN students and employees are prohibited from possessing, using, being under the influence of, having a detectable level of (as evidenced by a positive drug test), selling, purchasing, distributing, manufacturing, or dispensing a controlled substance, except in accordance with a healthcare provider's prescription and in accordance with pertinent federal and state laws and regulations, while conducting or being involved in any scheduled HEMSPN related activity.

### **Notification of Convictions**

Any current, potential, or eligible-for-readmission student, as well as a part-time or full-time employee who is arrested for or convicted of a criminal drug violation must notify the Hannah E. Mullins School of Practical Nursing in writing within five calendar days of the arrest/conviction. The Hannah E. Mullins School of Practical Nursing will take appropriate action within 30 days of an arrest notification. The individual who is convicted of a criminal drug violation shall be dismissed immediately from the Hannah E. Mullins School of Practical Nursing. Federal and state contracting agencies will be notified when appropriate.

### Searches

As posted in all HEMSPN facilities, entering HEMSPN and Salem City School District's property constitutes consent to searches and inspections. Unannounced searches of lockers, vehicles, and equipment by police and drug-sniffing dogs may be conducted without prior consent or knowledge of the owner. These searches can be conducted in the presence or absence of the owner. The HEMSPN reserves the right to inspect any staff's or student's vehicle and containers including, but not limited to, bags, boxes, purses, briefcases, lunch containers, book bags, etc. that are brought onto HEMSPN/Salem City School District property or the property of any associated healthcare agency. This inspection shall occur any time that the HEMSPN faculty or director has a reasonable suspicion that the drug-free policy has been violated and that such an inspection is reasonably necessary for the investigation of possible violations.

### Drug Testing

To ensure accuracy and fairness of drug testing individuals who are associated with the HEMSPN program, all testing will be scheduled by HEMSPN and performed by an authorized agency.

- (1) Each HEMSPN student, as a condition of admission, will be required to participate in periodic, random, and/or scheduled testing upon selection or request of the HEMSPN Director/faculty member.
- (2) All drug-testing information will be maintained in the student file. It may be shared with the clinical agencies. The substances for which testing will be done are Amphetamine, Methamphetamine, Barbiturate, Benzodiazepine, Cannabinoid, Cocaine and Opiates which include: Phencyclidine, Oxycodone, Methadone
- (3) Any HEMSPN student or employee who tests positive will be dismissed immediately from the HEMSPN program.
- (4) A HEMSPN student or employee will be subject to the same consequences of a positive test if he/she:
  - a. Refuses the screening or the test;
  - b. Adulterates or dilutes the specimen;
  - c. Substitutes the specimen with that from another person or sends an imposter;
  - d. Will not sign the required forms;
  - e. Refuses to cooperate in the testing process in such a way that it prevents completion of the test; or
  - f. Refuses to searches as defined above.

### Consequences

One of the goals of the HEMSPN Drug Free Policy is to encourage students, faculty, and staff to voluntarily seek professional help with alcohol and/or drug problems. However, if an individual violates the HEMSPN Drug Free Policy, the consequences are serious. If an applicant for the position of student or employee violates the drug-free policy, any offer of admission, readmission, or employment shall be withdrawn. If a current student or employee violates the policy, he or she shall be dismissed immediately from HEMSPN.

**If a failed drug test occurs prior to enrollment, the student will be billed for the cost of testing. Any perspective or current student, who previously failed their drug test, may reapply for future enrollment but must pass the mandatory drug test administered at HEMSPN. Potential or current employees who violate the drug-free policy will not be eligible for employment.**

### Assistance

Hannah E. Mullins School of Practical Nursing recognizes that alcohol, drug abuse, and drug addiction are treatable illnesses. HEMSPN also realizes that early intervention and support improve the success of rehabilitation. In support of its students and employees, the HEMSPN Drug Free Policy:

- (1) Encourages students and employees to seek help if they are concerned that they or their family members may have a drug and/or alcohol problem.
- (2) Encourages students and employees to utilize the services of qualified community professionals to assess the seriousness of suspected drug or alcohol problems and identify appropriate sources of help.

Treatment for alcoholism and/or other drug abuse disorders may be covered by the employee benefit plan although there is no plan for covering costs incurred by the student. However, the ultimate financial responsibility for recommended treatment belongs to the student/employee.

### **Confidentiality**

All information received by the Hannah E. Mullins School of Practical Nursing through this or any healthcare agency's drug-free policy/program is confidential communication. Access to this information is limited to those who have a legitimate need to know in compliance with relevant laws and management policies.

### **Shared Responsibility**

A safe and productive drug-free environment is achieved through cooperation and shared responsibility. Because it is recognized that they have important roles to play, faculty, staff, and students are encouraged to:

- (a) be concerned about working and learning in a safe, drug free environment; and
- (b) report dangerous behavior to a faculty member or the HEMSPN Director.

It is the Director, faculty and staff's responsibility to:

- (a) inform the student/employee of the drug free policy;
- (b) observe student/employee performance;
- (c) document negative changes and problems in performance; and
- (d) clearly state consequences of policy violations.

### **Communication**

Communicating the HEMSPN Drug-Free Policy to both the student and employee is critical. To ensure everyone is aware of his or her role in supporting the drug free policy:

- All HEMSPN perspective applicants, students and employees will receive a written copy of the policy, and
- The policy will be reviewed during orientation with new students and employees.

- Adapted from: 1) Atrium Drug Free Policy - <https://erecruit.atriumeoffice.com/MVC/Media/Attachments/0/362dbde5-40e1-449d-a921-09fda3c2e582.pdf>
- 2) Salem Anesthesia Associates, Inc. (2003, June). "Policy Concerning Substance Abuse". Salem, Ohio
- 3) Salem Regional Medical Center's drug free workplace policy

**Hannah E. Mullins School of Practical Nursing**  
**Fee Schedule 2022-2023**  
**Class beginning September 2022 & March 2023**

| HEMSPN Pre-Enrollment Fees<br>(nonrefundable) | Full Time<br>Program | Part Time<br>Program |
|---|----------------------|----------------------|
| Application Fee                               | 50.00                | 50.00                |
| PAX Pre-Entrance Exam                         | 55.00                | 55.00                |
|   | <b>\$115.00</b>      | <b>\$115.00</b>      |

| HEMSPN Tuition / Lab Fee |                    |                    |
|--------------------------|--------------------|--------------------|
| Tuition                  | \$15,725.00        | \$15,725.00        |
| Lab / Supply Fee         | 2,750.00           | 3,300.00           |
|                          | <b>\$18,475.00</b> | <b>\$19,025.00</b> |

| Out-of-Pocket Expenses            | Source                              | Full Time Program<br>Part Time Program<br><br>Approx. Amount |
|-----------------------------------|-------------------------------------|--|
| <b>Institutional Charges:</b>     |                                     |  |
| Textbooks / Packets               | HEMSPN or Outside source            | 723.00   |
| Supply Kit                        | HEMSPN or Outside source            | 100.00   |
| <b>Non-institutional Charges:</b> |                                     |  |
| Graduation Uniform                | DeAngelo Uniforms                   | 65.00  |
| NCLEX Application and Fee         | Treasurer State of OH / Pearson Vue | 278.50   |

- Some Out-of-Pocket Expenses are outside of HEMSPN's control and are subject to change.
- Some charges are subject to sales tax

**Billing and Payment Schedule**

Tuition will be charged according to payment periods; a payment period is ½ of your academic year. Fees will be charged to the pay periods in the 1<sup>st</sup> academic year. Financial aid or other payment must be in place two weeks prior to the beginning of class. The Practical Nursing Program tuition and fees schedule is as follows,

| Pay Period (PP)                    | Tuition       | Lab/Fees<br>Full Time | Lab/Fees<br>Part Time | Hours in PP       |
|------------------------------------|---------------|-----------------------|-----------------------|-------------------|
| 1 <sup>st</sup> Academic Year PP 1 | 5,055         | 824                   | 946.50                | 450 Hours         |
| 1 <sup>st</sup> Academic Year PP 2 | 5,055         | 796                   | 919.50                | 450 Hours         |
| 2 <sup>nd</sup> Academic Year PP 1 | 2,808         | 520                   | 702.50                | 250 Hours         |
| 2 <sup>nd</sup> Academic Year PP 2 | 2,807         | 610                   | 731.50                | 250 Hours         |
|                                    | <b>15,725</b> | <b>2,750</b>          | <b>3,300</b>          | <b>1400 Hours</b> |

Prices in effect from July 1, 2022 until June 30, 2023

*THE FOLLOWING PAGES:*

- *Take to healthcare provider*
- *Healthcare provider must sign each page*
- *All blanks must be filled out*
- *Immunization records must be up to date*

*ONCE COMPLETED, ENTIRE HEALTH FORM PACKET MUST BE  
TURNED INTO OFFICE BY DUE DATE*

**FEBRUARY 20, 2023**

*INFORMATION MUST BE FILLED OUT*

*WILL NOT ACCEPT “SEE ATTACHED” for  
IMMUNIZATIONS AND TITER*

**IMMUNIZATION RECORD**

APPLICANT'S NAME: \_\_\_\_\_ Date: \_\_\_\_\_

**For the exact policy regarding each of the following immunizations, see the following page.  
INFORMATION MUST BE FILLED OUT. THE SCHOOL WILL NOT ACCEPT "SEE ATTACHED"**

|                           |                      |                          |                                   |
|---------------------------|----------------------|--------------------------|-----------------------------------|
| <b>1) Mantoux TB Test</b> | Date(s) Administered | Date(s) Read and Results | Health Care Provider initial here |
|                           | Step One             | Date                     | Date Result                       |
|                           | Step Two             | Date                     | Date Result                       |
|                           |                      |                          |                                   |

|                           |                      |                       |                                      |
|---------------------------|----------------------|-----------------------|--------------------------------------|
| <b>2) MMR: See policy</b> | Dates of Vaccination | Or Titer Verification | Health Care Provider initial here    |
|                           | Rubeola:             | 1) 2)                 | Date Result: Immune___ Not Immune___ |
|                           | Rubella:             | 1)                    | Date Result: Immune___ Not Immune___ |
|                           | Mumps:               | 1)                    | Date Result: Immune___ Not Immune___ |

|                     |  |                       |                                      |
|---------------------|--|-----------------------|--------------------------------------|
| <b>3) Varicella</b> | Dates of Vaccination                     | Or Titer Verification | Health Care Provider initial here    |
|                     | Evidence of disease still requires titer | 1)                    | Date Result: Immune___ Not Immune___ |
|                     |  | 2)                    |                                      |

|  |                            |                                  |                                   |
|--|----------------------------|----------------------------------|-----------------------------------|
| <b>4) Tetanus</b><br><ul style="list-style-type: none"> <li>• Within 10 years</li> <li>• Proof of previous TDap</li> </ul> | Dates of Vaccination       |                                  | Health Care Provider initial here |
|  | Proof of TDap Date:        | <i>DO NOT WRITE IN THIS AREA</i> |                                   |
|  | Current Immunization Date: | <i>DO NOT WRITE IN THIS AREA</i> |                                   |

|                                   |                      |                                      |                                   |
|-----------------------------------|----------------------|--------------------------------------|-----------------------------------|
| <b>5) Hepatitis B (or waiver)</b> | Dates of Vaccination | Or Titer Verification                | Health Care Provider initial here |
|                                   |                      | Date Result: Immune___ Not Immune___ |                                   |

|                       |                     |                                  |                                    |
|-----------------------|---------------------|----------------------------------|------------------------------------|
| <b>6) Flu Vaccine</b> | Date of Vaccination | <i>DO NOT WRITE IN THIS AREA</i> | Health Care Provider initials here |
|                       |                     | <i>DO NOT WRITE IN THIS AREA</i> |                                    |

|  |                     |  |                                    |
|--|---------------------|--|------------------------------------|
| <b>7) Coronavirus Vaccine (COVID-19)</b> | Date of Vaccination | <i>DO NOT WRITE IN THIS AREA</i>                 | Health Care Provider initials here |
|  | 1)                  | <i>DO NOT WRITE IN THIS AREA</i>                 |                                    |
|  | 2)                  | IF APPLICABLE (please note if Johnson & Johnson) |                                    |
|  | 3)                  |  |                                    |

**Healthcare Provider Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Healthcare Provider's Printed Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**T. B. POLICY:**

- **Two-Step Mantoux**-A two-step method means that you receive first TB test and seven to twenty-one days later you receive the second TB test. Results of each step must be submitted along with date test given and date result was read. The test must be read between 48 to 72 hours after administration.
- **Chest X-Ray**-If the Mantoux skin test is positive; a radiologist's report of a current chest x-ray must be attached to the physical form. If the student's Mantoux test results convert from a negative to a positive, the student must comply with recommendations to follow-up with family healthcare provider or a county clinic and provide documentation.
- **TB assay**

Once enrolled in the program, it is the student's responsibility to maintain an updated Mantoux and TDap or Td as required.

If MMR or Varicella vaccine is given before the TB Mantoux, you should wait at least 4 weeks before doing the TB Mantoux skin test.

**MMR POLICY: Rubeola** (measles), **Mumps** and **Rubella** (MMR).

- If born before 1957, considered immune, or
- If born after 1/1/1957; **two vaccines** are required for measles, 1 mump, and 1 rubella, or
- Positive titers

**VARICELLA POLICY:** Documentation or copies of a record of two **Varicella** immunizations at least four weeks apart, or the results of a Varicella titer indicating immunity. If the titer does not indicate immunity, then **two Varicella** immunizations are required.

**TDap or Td POLICY: Administration of a TDap or the date** of most recent TDap (adult tetanus/diphtheria/pertussis) immunization. If proof of a TDap is provided then must have a current Td, if ten (10) or more years have passed since the last immunization, then another Td is required.

**HEPATITIS B POLICY:** Hepatitis B immunization is highly recommended. However, after careful consideration of the provided information, the student may choose not to receive the injections. In this case a waiver must be signed.

**INFLUENZA:** A yearly flu vaccine is required and proof to be provided to the school. For September enrollment this should not be completed before October of the enrolling year to be current for the upcoming flu season. HEMSPN students are offered the flu vaccine during the SRMC's flu clinics each fall. \*

**CORONAVIRUS:** A COVID-19 vaccine is required and proof to be provided to the school. Vaccination status must be up to date per current CDC guidelines. This includes any booster guidelines.

**HEPATITIS B WAIVER**

If you choose NOT to receive and have never received the Hepatitis B vaccine, or if you are in the process of receiving but the series will not be complete by enrollment, you will need to complete this waiver. Please do so only after discussing it with your healthcare provider and reviewing the provided information.

This waiver is signed to confirm that, as a health care provider who will be exposed to blood or other potentially infectious materials, I understand that I am at risk of acquiring Hepatitis B Virus (HBV) infection. I acknowledge that Hannah E. Mullins School of Practical Nursing strongly recommends that I receive the HBV vaccine. I also understand that I have the right to decline the vaccination and do so at this time. Should I acquire HBV infection, I will hold harmless Hannah E. Mullins School of Practical Nursing and any persons associated therewith as well as any healthcare agency and associated individuals at which I implement nursing care during HEMSPN clinical learning experiences.

---

Printed/Typed Name

---

Signature \_\_\_\_\_ Date \_\_\_\_\_

---

Witness \_\_\_\_\_ Date \_\_\_\_\_



**PHYSICAL EXAMINATION**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Weight: \_\_\_\_\_ Height: \_\_\_\_\_  
Blood Pressure \_\_\_\_\_ Temperature: \_\_\_\_\_ Pulse: \_\_\_\_\_ Respirations: \_\_\_\_\_

**GENERAL APPEARANCE:** \_\_\_\_\_  
\_\_\_\_\_

Skin: \_\_\_\_\_

Eyes: \_\_\_\_\_ Vision (Snellen) R \_\_\_\_\_ L \_\_\_\_\_

Correction with glasses/contacts: R \_\_\_\_\_ L \_\_\_\_\_

Ears Condition: R: \_\_\_\_\_ L: \_\_\_\_\_ Hearing: R: \_\_\_\_\_ L: \_\_\_\_\_ Hearing Aids: Yes No

Nose: \_\_\_\_\_ Throat: \_\_\_\_\_

Lungs: \_\_\_\_\_

Heart: \_\_\_\_\_

Extremities: \_\_\_\_\_

Nervous System: \_\_\_\_\_

Back: \_\_\_\_\_

Abdomen: \_\_\_\_\_

Surgical Scars: \_\_\_\_\_

Hernia: Yes \_\_\_\_\_ No \_\_\_\_\_ Potential: \_\_\_\_\_

I have examined this individual and have found no condition that might represent a health hazard or possible health hazard to self, patients, or employees. I find him/her to be physically and mentally qualified to perform the duties of a practical nursing student without restrictions and is free of communicable disease. If not, I have listed reason(s) above with limitations if applicable.

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

**Healthcare Provider's Signature** \_\_\_\_\_

**Healthcare Provider's Printed Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**City/State/Zip** \_\_\_\_\_

**ESSENTIAL FUNCTIONS QUESTIONNAIRE**

APPLICANT'S NAME: \_\_\_\_\_

Nursing students, with supervision of faculty, perform essentially the same physical and emotional activities in the clinical setting as licensed practical nurses. A person qualified for the HEMSPN program is one who is able, with or without reasonable accommodation, to meet the essential functions of the licensed practical nurse. The following abilities also are considered essential for successful completion of the HEMSPN program.

| <b>The above name applicant has the physical capability of performing these activities per the length of the program:</b>  | <b>CAN Perform</b> | <b>*Can Perform WITH Limitations</b> | <b>Can NOT Perform</b> |
|--|--------------------|--------------------------------------|------------------------|
| <ul style="list-style-type: none"> <li>• Can stand, walk, climb, bend, lift, push, carry, and twist for extended periods of time in both the classroom, skills labs, and clinical settings.</li> </ul> |                    |                                      |                        |
| <ul style="list-style-type: none"> <li>• Can perform fine and gross motor skills.</li> </ul>   |                    |                                      |                        |
| <ul style="list-style-type: none"> <li>• Is free of communicable diseases.</li> </ul>  |                    |                                      |                        |
| <ul style="list-style-type: none"> <li>• Does not have any physical health conditions that will affect patient care.</li> </ul>  |                    |                                      |                        |
| <ul style="list-style-type: none"> <li>• Does not have any mental or emotional health conditions that will affect classroom, lab environment or patient care.</li> </ul>                               |                    |                                      |                        |
| <ul style="list-style-type: none"> <li>• Has the visual acuity, auditory acuity and tactile ability and smell to function in classroom, lab, and clinical settings.</li> </ul>                         |                    |                                      |                        |
| <ul style="list-style-type: none"> <li>• Has the ability to communicate clearly and effectively.</li> </ul>  |                    |                                      |                        |
|  |                    |                                      |                        |

\*FULLY DESCRIBE the limitation(s): \_\_\_\_\_

\_\_\_\_\_

Students with a disability who enter the program do so with the understanding they will be expected to meet course requirements, with any reasonable accommodation that may be provided by the school. Requests for reasonable accommodation will be evaluated by the Director of the Program, and the Nursing Faculty.

**Instructions for the healthcare provider:** (a) Initial or check appropriate boxes, (b) Describe limitation, (c) Sign document.

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

**Healthcare Provider's Signature** \_\_\_\_\_

**Healthcare Provider's Printed Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**City/State/Zip** \_\_\_\_\_