HEALTH SCIENCE AND HUMAN SERVICES
DEPARTMENT

2017-2018 Student Handbook

Consisting of the following Programs:
AAS Nursing Program
AAS Radiology Technology Program
AAS Emergency Medical Services–Paramedic Program
AAS Human Services Program

** Great Basin College is regionally accredited by the Northwest Commission on Colleges and Universities (NWCCU) which is a postsecondary accrediting agency recognized by the US Department of Education and the Council for Higher Education Accreditation (CHEA)
8060 – 165th Avenue N.E., Suite 100, Redmond, WA  98052           425-558-4224 **
Welcome to Great Basin College’s Health Science and Human Services Department. The programs offered by this department are dynamic professions that offer almost unlimited opportunities and challenges. They play a key role in the delivery of health care. The roles continually diversify and the need for more healthcare providers will be greater than ever in the coming decade. You will be joining more than 400 GBC graduates who are making a difference in the health of their patients and in the dramatic changes taking place within the health care system!

The Health Science and Human Services faculty support the Mission of Great Basin College to enrich lives through student-centered educational programs. We are committed to enriching your life and those you care for in the future by preparing you to provide high quality health care and to engage in life-long learning.

Amber Donnelli, PhD, RN, CNE
Dean, Health Science and Human Services
Nursing Programs Director

Purpose of the Student Handbook

The purpose of this handbook is to assist you in understanding more fully the policies, practices, and procedures of the Health Science and Human Services Department of Great Basin College. This handbook serves as the source of information about the policies and procedures in the programs offered in the Health Science and Human Services Department (nursing, radiology, paramedic, and human services programs). You are required to sign a statement indicating you understand and agree to abide by these policies and guidelines each year that you are in the program. Because policies and procedures are continuously subject to change by external and internal sources, the faculty review and modify these policies and practices as necessary. Students will be notified in writing of any changes made during the academic year.

This handbook is not all-inclusive, nor does it replace the Great Basin College General Catalog or the Nevada System of Higher Education (NSHE) Board of Regents Code Title 2, Chapter 6 which addresses misconduct. The provisions of this document are not to be regarded as an irrevocable contract between the student and the GBC HSHS programs.

IMPORTANT NOTE: In most cases where a conflict may exist between the guidance in this handbook and the GBC Catalog, the GBC Catalog shall take precedence. However, some unique aspects of the healthcare education require policies different from those for other GBC students, for example, student health requirements.

Nondiscrimination for Disability

Great Basin College is committed to providing equal educational opportunities to qualified students with disabilities in accordance with state and federal laws and regulations, including the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973. A qualified student must furnish current verification of disability. The Students with Disabilities Office, located in Berg Hall, will assist qualified students with disabilities in securing the appropriate and reasonable accommodations, auxiliary aids, and services. For more information or further assistance, please call 775.753.2271.
GREAT BASIN COLLEGE
HEALTH SCIENCE AND HUMAN SERVICES PROGRAMS
STUDENT AGREEMENT FOR THE 2017-2018 ACADEMIC YEAR

I have read, understand and agree to abide by the policies and guidelines stated in the Great Basin College Health Science and Human Services Programs 2017-2018 Student Handbook.

I understand that as a condition of enrollment in a program offered through the Great Basin College Health Science and Human Services Department, I agree that a clinical facility/agency may, at any time, require a “for cause” drug and/or alcohol screen. I agree to execute a consent for release of the results of the drug and/or alcohol screening information to the clinical facility/agency should they request such information.

I authorize Health Science and Human Services Department to release my immunization, CPR, background and drug screening reports to the clinical education facilities as mandated by the affiliation contract.

I understand and acknowledge that once admitted to one of programs offered by the Great Basin College Health Science and Human Services Department, failure to maintain the professional and/or ethical standards of the program may result in dismissal from the program. I also understand that the Health Science and Human Services Department Admission and Progression committee may at any time request information from the Administrative Officer of Great Basin College to determine whether I have ever violated NSHE (Nevada System of Higher Education) Code.

I understand and acknowledge that no resources or information from any Health Science and Human Services course can be shared outside the classroom or lab.

My emergency contact person(s) are listed below. I understand that this individual or individuals are responsible for ensuring that I am transported home in the event one of my faculty or the Health Science and Human Services Department Dean determines that I am not able to continue being present in the classroom, lab, or clinical setting.

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<th>Name</th>
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Printed Name Student Signature Date

Witness: (Faculty / Dean) Date

Keep this copy in this handbook for future reference. The Student Agreement at the back of this handbook must be signed and returned to the GBC Health Science and Human Services Department.
GREAT BASIN COLLEGE
HEALTH SCIENCE AND HUMAN SERVICES DEPARTMENT
Agreement to Participate in Practice Lab Procedures
For the 2017-2018 Academic Year

During my enrollment in one of the programs offered by the GBC Health Science and Human Services Department and under the direct supervision of a faculty member, I agree to allow a student classmate to perform the following procedures on my person:

1. Subcutaneous injection (For Nursing and Paramedic Programs Only)
2. Intradermal injection (For Nursing and Paramedic Programs Only)
3. Intramuscular injection (For Nursing and Paramedic Programs Only)
4. Intravenous catheterization (peripheral) (For Nursing and Paramedic Programs Only)
5. Positioning (For Radiology Program Only)

I agree to hold harmless and waive the liability of the student and/or students performing the procedure(s), the supervising instructor and Great Basin College for any injuries incurred as a result of my agreeing to have these procedures performed on my person.

___________________________________________________________________________
Printed Name      Student Signature               Date
__________________________________________________________________________
Witness: (Faculty / Dean)                    Date

*Keep this copy in this handbook for future reference.*
*The Agreement at the back of this handbook should be signed and returned to the GBC Health Science and Human Services Department.*
During your participation at the Great Basin College Practice Lab, you will be an active participant and observer of the performance of other individuals in the management of acute medical, surgical, and other health care events in simulated experiences.

The objective of the simulation experience program is to educate pre-licensed and licensed health care practitioners to better assess and improve their performance in evolving health care situations. Simulations are designed to challenge a healthcare professional’s response and judgment in stress environments.

Due to the unique aspects of this form of training, you are required to maintain and hold confidential all information regarding the performance of specific individuals and the details of the scenarios.

There is continuous audiovisual digital recording during all simulations which will be used for educational purposes. This video recording is considered a QUALITY ASSURANCE TOOL and is protected by Federal Law.

By signing this agreement, you agree to maintain strict confidentiality regarding both your and others’ performance, whether seen in real time, on video, or otherwise communicated to you. Failure to maintain confidentiality may result in unwarranted and unfair defamation of character of the participants.

To maintain optimal simulation experiences for other learners who will be following you in the center, you are to maintain strict confidentiality regarding the specifics of the scenarios. A breach of confidentiality may result in loss of privileges in the Practice Lab.

By signing below, you acknowledge you have read and understand this statement and agree to maintain the strictest confidentiality about the performance of individuals and the simulation scenarios you observe.

I agree to maintain strict confidentiality about the details of the scenarios and the performance of other participants during scenarios at Great Basin College Practice Lab.

I authorize the Great Basin College Practice Lab to use the video recording(s) and photographs made in the Practice Lab for the following purposes:

1) Debriefing scenario participants,
2) Administrative review,
3) Educational research,
4) Commercial purposes, which can include public relations, promotional advertisements, and/or fund raising activities. I understand that, unless otherwise approved by me, I will not be specifically identified.

________________________________________________________________________
Last Name, First Name (Please Print) Date
________________________________________________________________________
Signature Witness

Keep this copy in this handbook for future reference. The Agreement at the back of this handbook should be signed and returned to the GBC Health Science and Human Services Department.
# Table of Contents

## Section I  Department Foundations  11 - 13

- Great Basin College Mission Statement
- Mission of the Health Science and Human Services (HSHS) Department
- Department Organizational Chart

## Section 2  Communications  14 -16

- Cell Phones and Pagers
- E-mail
- Classroom Taping
- Social Media & Online Communication – Ethics and Legal Liability
- Bulletin Boards
- Address, Name, and Phone Changes
- Inclement Weather
- Cancelled Classes
- Student Messages-General Emergency
- Terrorist Attack
- Student Records
- Essential Skills
- Critical Behaviors

## Section 3  Student Health and Safety  17 - 22

- Physical Examination
- Immunizations
- CPR Card
- Insurance
- Background Report and Drug Testing
- Substance Abuse
- Marijuana
- Bloodborne Pathogen Exposure and Prevention Policy
- Health and Injury Policies
- Other Health Policies and Information
- Appearance Standards
- Student Identification Badges
- Student Evaluations of Faculty and Learning Outcomes
- Gifts
Section 4  HSHS Academic Policies & Procedures  22 - 30

Policies and Guidelines for Nondiscrimination for Disability
Procedure for Accommodation on the Basis of Disability
Sexual Harassment
GBC Academic Regulations
Academic and Professional Dishonesty
Great Basin College Student Conduct Policy
Distance Learning
Working While in Program
Written Paper Expectations and Format
Textbooks and Other Course Materials
Drop/Withdraw Policy
Grading
Class Attendance
Civility in the Classroom
Unsatisfactory Progress Policy and Procedure
Unsatisfactory Progress for Academic-Related Reasons
Voluntary Withdrawal
Process for Admission and Progression Committee Review
Student Appeal of Admission and Progressions Committee Decision
Grievance Procedure

Section 5  Clinical  31 - 34

HIPAA
Mandatory In-Service
Clinical Assignments
Scheduling and Transportation
Attendance
Authority and Responsibility in Clinical Settings
Communication in Clinical Settings
Preparation of Clinical Experiences
Performance for New Skills
Safe Practice Policy
Unsafe Practice Policy
Incident and Quality Assurance Reports
Skill Remediation
Dishonesty in the Clinical Setting

Section 6  Practice Labs and Simulation Area  35 - 38

Practice Lab Policies
Simulation Area Policies

Section 7  Student Services  38 - 39
Academic Advising
Information and Academic Technology
Library Services
Copying
Student Representation
Student Organizations (SNO, RAD, PARM, SOAP) and Student Government

Section 8  Financial Information  40

Scholarships and Financial Aid

Section 9  GBC Building Facilities  40 - 42

Building Hours
Building Use Guidelines
Security
Fire Evacuation Plan
Food and Beverages in Classrooms
Personal Computer Use
Children and Non-Students in Campus Facilities
Pets
Tobacco Use/Smoking

Section 10  Graduation  42 - 43

Application for Graduation
Graduation Requirements
Caps and Gowns
Pinning Ceremonies
Pinning/Graduation Cost Estimates

PROGRAM SPECIFIC SECTION

Program Specific Section

Appendices
GREAT BASIN COLLEGE

MISSION STATEMENT

Great Basin College enriches people's lives by providing student-centered, post-secondary education to rural Nevada. Educational, cultural, and related economic needs of the multicounty service area are met through programs of university transfer, applied science and technology, business and industry partnerships, developmental education, community service, and student support services in conjunction with certificates and associate and select baccalaureate degrees.

HEALTH SCIENCE AND HUMAN SERVICES DEPARTMENT

MISSION STATEMENT

The Department of Health Science and Human Services enriches lives of citizens and students through provision of health and human services career programs and by partnering with providers and institutions to improve the health and well-being of rural Nevadans.
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<thead>
<tr>
<th>Role</th>
<th>Name</th>
<th>Phone</th>
<th>Email</th>
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</thead>
<tbody>
<tr>
<td>Dean, Health Sciences and Human Services</td>
<td>Amber Donnelli, PhD, RN, CNE</td>
<td>753-2135</td>
<td><a href="mailto:amber.donnelli@gbcnv.edu">amber.donnelli@gbcnv.edu</a></td>
</tr>
<tr>
<td>Nursing Program Director</td>
<td></td>
<td></td>
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<tr>
<td>Administrative Assistant</td>
<td>Gaye Terras</td>
<td>753-2301</td>
<td><a href="mailto:gaye.terras@gbcnv.edu">gaye.terras@gbcnv.edu</a></td>
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<tr>
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<td>753-2020</td>
<td><a href="mailto:peggy.drussel@gbcnv.edu">peggy.drussel@gbcnv.edu</a></td>
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<tr>
<td>Nursing Professor</td>
<td>Michelle Husbands, MSN, FNP-BC</td>
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<tr>
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<tr>
<td>Nursing Professor Pahrump</td>
<td>Glenn Taylor MSN, RN</td>
<td>775-727-2020</td>
<td><a href="mailto:glenn.taylor@gbcnv.edu">glenn.taylor@gbcnv.edu</a></td>
</tr>
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<td>Radiology Professor/Coordinator</td>
<td>Mary Doucette, MS, CBRPA/RRA, R.T.(R)(M)(QM)(CT)(MR)</td>
<td>775-753-2463</td>
<td><a href="mailto:mary.doucette@gbcnv.edu">mary.doucette@gbcnv.edu</a></td>
</tr>
<tr>
<td>Paramedic/EMT Professor/Coordinator</td>
<td>David Ellis, DC, NRP, FP-C</td>
<td>406-459-5456 (Cell)</td>
<td>775-753-6194 (Office)</td>
</tr>
<tr>
<td>Human Services Professor/Coordinator</td>
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<td>702-358-3157 (Cell)</td>
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<tr>
<td>Help Desk</td>
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<td>753-2167</td>
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<tr>
<td>Registrar</td>
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<td>753-2102</td>
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<tr>
<td>Bookstore</td>
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<td>753-2270</td>
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<td>Student Financial Services</td>
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Cell Phones and Pagers

Cell phones and other hand held devices are not to be used for texting and email functions during class or clinical time. Sound should be turned off on all personal electronic devices carried in classrooms, clinical, or the Practice Lab. Smart phones, IPADS®, Kindles®, Skyscape®, etc. can be used to access relevant resources for selected classroom, clinical, and Practice Lab activities.

E-mail

Because GBC has many rural clinical sites, email is an important form of communication. All students must have email access and are required to check their e-mail frequently and regularly because it is the primary route used for official departmental and course communications. Changes to email addresses must be reported to the department and Admissions and Records immediately.

Classroom Taping

No classroom content of any type may be videotaped, audiotaped, recorded, or transmitted in any manner without the written permission of the instructor and each member of the class. Any content recorded becomes the property of the course instructor. This is for the protection of the confidentiality of patients, students, instructors, and GBC staff. Students in the class will be required to sign a release form to allow recording in the course. Recordings must be destroyed at the end of the semester.

Social Media and Online Communication - Ethics and Legal Liability

Students are reminded that they are legally liable for anything they write or present online. Students can be disciplined by GBC for commentary, content, or images that are defamatory, pornographic, proprietary, harassing, libelous, or that can create a hostile work environment. Students can also be sued by GBC employees, clinical agencies, and any individual or company that views their commentary, content, or images as defamatory, pornographic, proprietary, harassing, libelous or creating a hostile work environment.

To avoid negative impacts resulting from unwise or inappropriate use of social media, be aware of the following:

- If you post anything about GBC or the Health Science and Human Services programs, make it clear that you do not represent the college or any of the programs, nor their views.
- Be aware not only of the content you post, but of any content that you host (e.g. comments others post on your site). Content you host can have the same effect as content you post.
- Potential employers may use social media to evaluate applicants. Inappropriate content may eliminate job opportunities.
- Once you have posted via social media, it is out of your control. Others may forward it, save it, repost it, etc. It is almost impossible to retract after it is posted.
- If you disclose confidential information about patients, other health care providers, fellow students, or faculty, the college and/or health care facility may take legal action against you. Disclosing patient confidential health information is a violation of HIPAA and can result in severe fines.
The faculty recognizes that social media sites –MySpace, Facebook, Twitter and others offer alternative ways to reach and communicate with friends and other students. The responsible use of social media strengthens our programs’ reputation within the community and expands public awareness of our varied educational options.

The following policies and procedures must be adhered to in all use of social media that in anyway relates to or mentions GBC and/or the Health Science and Human Services programs:

1. The social media site content must not replicate information that is available on the college web page.
2. Material and content from classes may not be copied and placed on social media sites, including personal information regarding patients, students, instructors, or other GBC staff.
3. Personal blogs should have a clear disclaimer that the views expressed by the author in the blog is the author’s alone and do not represent the views of GBC or the Health Science and Human Services Department.
4. Information with GBC affiliation should only be information that could be contained in a resume.
5. Information published on a blog should comply with HIPPA, FERPA, and GBC confidentiality policies.
6. Students must be respectful of all persons and their right to privacy.
7. Do not reference GBC faculty, staff, or students without their written consent. Do not use their images or likeness without consent.
8. Respect copyright laws and site sources appropriately. Plagiarism still applies to online content. GBC logos may not be used without written consent from Department Chair.
9. Any press or media contacts should be referred to Social Media Specialist at 775-753-2105.
10. All requests for social media development should include its purpose and objectives, name of the social media site, and the name of the moderator, with request forwarded to the Dean of the Health Science and Human Services Department at 753-2135.
11. Student must not be friends with faculty on Facebook until such time as the student has graduated, or left the college.

Bulletin Boards

Student bulletin boards are posted in the hallway near the office suite in the Health Science building. The purpose of the boards is to share official college and departmental notices of importance to students and information about educational and job opportunities. Nothing should be posted on the bulletin boards without permission from the Administrative Assistant or Dean in Health Science and Human Services Department.

Address, Name, and Phone Changes

Students must notify the department Administrative Assistant and the Admissions and Records Office when any changes are made in name, address, email address, or phone numbers so that contact information is updated and emergency messages can be delivered.

Inclement Weather

If classes are cancelled at Great Basin College, nursing clinicals will also be cancelled. This information will be posted on the Great Basin College website.

Student Messages – General Emergency

Great Basin College, in compliance with the Clery Act, will issue timely warning notices in the event a situation occurs on one of our centers or in the areas adjacent to our centers that constitutes a potential ongoing or continued threat to students, faculty and staff. Timely warning notices will be issued upon the recommendation of the Director of Environmental Health, Safety & Security (EHS&S), the Center Director or the local Police agency. Timely warnings will be issued on a case-by-case basis when approved by
the GBC Executive Administrators based on the available facts, the risk to the center community, and the risk of compromising law enforcement efforts.

Timely warnings will be issued via the GBC email system, posted on the home page of the GBC web site, posted via video signage, printed notices and personal contact. Warnings will include the date, time and reported location of an incident, a brief summary of the incident, a description of the suspect(s) and vehicles if known. Warnings will include safety information specific to the type of incident and contact information to obtain additional information.

**Terrorist Attack**

If the State of Nevada's Office of Homeland Security places the Elko area in a level red alert, students in the clinical education sites will be released from clinical until the red alert has been lifted. GBC faculty or staff approval to leave the clinical education site is not required.

**Student Records**

The Admission and Records Office maintains official GBC files for all students who apply to the college. A cumulative, confidential file of program documents is kept for each student in the Health Science and Human Services Department. The confidential file contents may include: application materials, immunization records, copies of the CPR card, transcripts, student agreements, test scores, clinical assignment and performance forms, skills checklists, Student Counseling forms, Notification of Unsatisfactory Progression forms, Practice Lab Remediation forms, and action plans (if applicable). Class work, tests, quizzes and projects may also be included in this file. Records of individual student conferences and clinical evaluation conferences will be read and signed by the student and faculty prior to becoming a part of the student's cumulative record. Records are retained and stored in the Health Science and Human Services Department for five years and are then shredded.

All student files are maintained in designated, locked file cabinets. Student files are protected under the Family Educational Rights and Privacy Act of 1974 (FERPA). For further information, refer to the section on Family Educational Rights and Privacy Act in the GBC catalog.

**ESSENTIAL SKILLS**

**Effective communication** involves the ability to employ therapeutic communication techniques and appropriate interpersonal relationship skills during interactions with instructors, clients, family members, and groups of individuals including health care team members, peers, and supervisors.

**Critical thinking** is a reasoned, interactive and reflective process focused on deciding what to believe or do. Critical thinking involves the ability to identify and challenge assumptions, the ability to explore and imagine alternatives, as well as the ability to make judgments based on evidence (i.e., fact) rather than conjecture (i.e., guesswork).

**CRITICAL BEHAVIORS**

**Accountability** is the state of being responsible for one's individual behaviors and their outcomes when assuming the professional role. Accountable means being attentive and responsible to the health care needs of the individual, family, or group. The faculty believe the initial groundwork for accountability is laid during the first semester and continues throughout the student's professional career. Ideally, continued educational experiences strengthen the student's ability to further explore, analyze, and test one's functioning relative to accountability.

**Collaboration** is defined as the intentional act of professionals working together toward a common goal. In successful collaboration, mutual respect for each professional's background and commitment to respond to problems as a whole are essential. Fundamental to the concept of collaboration is the ability to independently communicate and make decisions in support of the individual, family or group.

**Self-leadership** can be described in terms of an individual having a positive self-regard which consists of knowing one's strengths and weaknesses, allowing oneself to be challenged and strengthened through
goal setting, and understanding the fit between one’s ability to contribute to the organization and the organization’s needs. Self-leadership is also the influence that individuals have over themselves to regulate, manage, direct, and/or control their own behavior.
Physical Examination

All HSHS students must provide evidence of a satisfactory physical examination. Nursing and Paramedic students within six weeks of the start of the fall semester (between July 1 and August 15), Radiology students in their second semester prior to May 1st. This information will validate that they are able to meet the demands of the program without compromising the patient or themselves. In addition, the following psychomotor requirements must be validated:

1. Assess clients through auscultation, percussion, palpation, and other diagnostic maneuvers.
2. Manipulate equipment necessary to assist the individual, family and/or group to desired outcomes.
3. Lift and move individuals and/or groups of individuals to provide safe care and emergency treatment.
4. Perform cardiopulmonary resuscitation.
5. Perform independently of others.
6. Possess cognitive abilities to measure, calculate dosages, reason, analyze and synthesize.

Immunizations

The following immunizations must be current. You can obtain any required immunizations from your physician/physician’s assistant or nurse practitioner. Any immunizations that are still current do not have to be repeated.

1. **Two-step tuberculosis (TB) skin test**  Be sure you receive the two-step Mantoux or PPD. (This baseline is valid for 12 months. One-step renewals can then be done each 12 months thereafter.)

   **Step One:** Go to your physician’s/physician assistant’s/nurse practitioner’s office or a clinic and have the skin test done; return 48-72 hours later to have it read.

   **Step Two:** One week later, go back and have the skin test done again; return 48-72 hours later to have it read. A tine test is not acceptable and the one-step TB test is not acceptable. If you have had a positive skin test in the past, you must have documentation of a negative chest x-ray.

2. **Measles/mumps/rubella (MMR)**  (Series only to be done once in a lifetime.)
   a. If you were born in 1957 or after and have no serological evidence of immunity, no physician-diagnosed measles or mumps disease, or prior vaccination evidence, obtain two doses of MMR vaccinations.
   b. If you were born before 1957, show proof of one of the following:
      - history of physician-diagnosed measles and mumps disease
      - laboratory evidence of measles and mumps immunity
      - laboratory evidence of rubella immunity
      - MMR or Rubella vaccination evidence

3. **Tetanus, diphtheria, pertussis**
A Td booster is required every 10 years following the completion of the primary 3-dose series. A 1-time dose of Tdap to those younger than 65 years of age who have direct patient contact is required.

4. **Hepatitis B series**
   The Hepatitis B series is a series of three immunizations. If you have not been previously immunized, the first immunization must be completed by the end of July, the second completed one month after the first, and the third immunization completed five months after dose #2. Check with your health care provider if you have questions.

   **Note: Hepatitis A series:** Currently, clinical facilities do not require immunization for hepatitis A; however, it is highly recommended due to exposure at various clinical sites. This is a series of two immunizations. If you have not been previously immunized, the second dose should be completed 12-18 months after the first. If the combined hepatitis A and hepatitis B vaccine (Twinrix) is used, 3 doses at 0, 1, and 6 months; alternatively, a 4-dose schedule may be used, administered on days 0, 7, and 21-30 followed by a booster dose at month 12.

**Influenza**
Proof of immunization with vaccine(s) recommended for health care providers by CDC for the current year. Some clinical sites will require flu shots for students to perform clinical rotation in that facility. If the student does not want the flu shot they will be required to put this in writing with the reason why. It is up to the affiliated clinical site whether or not the student will be able to attend clinical at the site. If the student is denied attendance at the scheduled site, every effort will be made to place the student at another location, if one is available. This will be a case by case basis and depends on available clinical sites.

**Exemptions**

There are two types of exemptions to the immunization requirements.

- **Medical** – this exemption requires a licensed physician to provide a signed statement that a medical condition prevents the student from complying with this regulation.
- **Religious** – this exemption requires a statement from the student that the vaccines are contrary to his/her religious beliefs.

*The HSHS Department and facility reserves the right to restrict clinical placements of students who are not fully immunized for any reason.*

**CPR CARD (Cardio-Pulmonary Resuscitation)**

Proof of current adult, child, and infant CPR certification must be in the student’s record. It is the responsibility of the student to attend a health care provider certification class and be certified before being allowed in the clinical areas. **It is the student’s responsibility to maintain current certification throughout their program.** If the CPR card is not current during clinical rotations, the student will not be allowed to attend clinical experience.

**Insurance**

**Health Insurance**
Students are required to have health insurance throughout their tenure in the HSHS programs.

**Liability Insurance**
Students are covered by the Nevada System of Higher Education’s liability insurance. Students may purchase their own liability through various companies on an annual renewal basis and are encouraged to do this.

Students are not covered by Worker’s Compensation in any of the clinical facilities.

**Background Reports and Drug Testing**

Clinical affiliation agreements require that Great Basin College must assure that its students participating in all clinical/practicum rotations shall have a background and drug screening reports completed. These reports will be done by an external vendor prior to admission to the HSHS Program with results disclosed to the participating clinical facility/agencies. Clinical personnel will evaluate the information they receive and in their sole discretion, make the final determination as to each student's ability to participate in patient care in their agency. **If a student is denied clinical placement by any clinical agency due to unacceptable criminal history information, that student may be dismissed from the HSHS program.**

If requested by the clinical facility/agency, Great Basin College students may be asked to submit to “for cause” drug and/or alcohol screening in a similar manner and under policies similar to those affecting employees of the participating clinical facility/agency. The results of the drug and/or alcohol screening may be disclosed in the event of a claim against the clinical facility/agency arising out of the acts of the student.

**Substance Abuse**

Great Basin College maintains a zero tolerance position with regard to the use, sale and possession of any illegal drug. Violation of any state or federal drug laws will subject the student to disciplinary action, which may include legal action concurrently. Illegal use or abuse of legal and/or prescription drugs will subject the student to similar disciplinary action.

**Marijuana**

Federal law prohibits the use of marijuana on college and university campuses that receive federal funding (Board of Regents Handbook, Title 4, Chapter 1, Page 30). The following provisions shall govern the possession and use of marijuana on NSHE property.

- The use, possession, or cultivation of marijuana, including for medical purposes, on any NSHE or NSHE foundation owned or leased property, or at any NSHE sponsored or authorized activity, is expressly prohibited.
- Students, employees, faculty, guests, and/or visitors who violate this policy are subject to applicable disciplinary, legal and/or administrative action.

**Blood Borne Pathogen Exposure and Prevention Policy**


The HSHS Department has developed a Bloodborne Pathogen Exposure and Prevention Policy to be in compliance with the Occupational Safety and Health Administration (OSHA) Standards. The policy is
intended to provide direction to students and faculty to help prevent exposure to blood-borne pathogens and guidance should such exposure occur. (See Appendices Section for policy and form).

Health and Injury Policies

First Aid, Accidents, and Injuries

- A student who is injured in a clinical facility during a clinical course must report the incident to their instructor immediately. If indicated, the student will be seen in the hospital emergency room at no expense to the clinical site. The decision to send the student to the emergency room will be made by the faculty, student, and HSHS Dean, if indicated.

- In the event of a student injury in a classroom, the Practice Lab, or in a clinical agency, the student and faculty must also complete the Injury Report form (see Appendices Section) and submit it to the HSHS Dean. If an injury occurs in a clinical agency, the student and faculty must also adhere to the agency’s injury policies and complete any reports or forms required by the facility.

- All Elko site safety and security officers are CPR and first responder trained. The security patrol vehicles contain first response/emergency accident response equipment. For minor injuries each building is equipped with a first aid kit, which the responding staff may use to take care of the injury.

- An Automatic External Defibrillator (AED) is located at all GBC locations: Elko: in the Health Science building hallway by the front offices; Pahrump: in the main office; Winnemucca: in the main office.

Other Health Policies and Information

- The HSHS programs require clinical work performed in hospitals and other facilities that involves providing direct care or exposure to clients with a variety of illnesses and diseases, including the handling of and/or contact with human body fluids. Therefore, students should understand that they may or will be exposed to disease-carrying bacteria and microorganisms and come in contact with patient situations that could be hazardous to individuals who are pregnant or immune compromised.

- Students who have a latex allergy must inform their instructor at the beginning of each semester so arrangements can be made to protect the student from exposure.

- After hospitalization, surgery, serious illness, injury, childbirth, etc. a student must submit a release statement from a health care provider indicating their medical clearance to return to full time status to the program. A copy of this medical release statement will be placed in the student’s file.

Appearance Standards

Students are expected to maintain a professional, well-groomed, non-revealing appearance in representation of GBC’s Health Science and Human Services Programs. Safety and cultural awareness are extremely important considerations in appearance standards. The standards below must be followed by both students and faculty. Students must adhere to any additional standards that may be required by some clinical agencies or faculty.
Cleanliness/Hygiene

Hygiene and personal cleanliness are crucial in presenting a professional appearance and essential in protecting the health of patients, staff, and other students.

- Special care should be taken to avoid body odor and bad breath. Students who smoke should have no detectable order of smoke on their person in clinical settings.
- Hair should be clean and neat for both men and women. Hair should be secured so that it does not fall forward over the face or shoulders. Hair longer than shoulder length should be contained with a clip or elastic band. Only conventional hair styles are permitted. Facial hair must be neatly trimmed and kept short (3/4 inch long or less).
- Use only fragrance free body products. Perfumes and body fragrances are not permitted.
- Nails must be clean, short, and free of any polish. Artificial nails cannot be worn in clinical areas. This includes wraps, inlays, and decals.
- Gum chewing or tobacco chewing/dipping is prohibited and excessive makeup is not acceptable.

Jewelry and Body Art

- One small stud earring per ear may be worn. No loop or dangling earrings, bars, or gauges are allowed in clinical settings or the Practice Lab.
- Additional jewelry must be minimal. A watch and one or two small rings are acceptable. Students may be asked to remove rings that may scratch or injure patients, or if it may harbor bacteria.
- No tongue, nose, eyebrow rings, or other visible body piercings are allowed in clinical settings or the Practice Lab. Tattoos and other body art must covered as much as possible in clinical settings.

Student Uniform:

1. The uniform and college name pin is to be worn in every clinical setting unless otherwise stated in course syllabus uniform requirements.
2. The student uniform consists of a scrub top and pants. Color and design may change from year to year or by program, so be sure to verify what is required for your class. A plain white, cotton knit, short or long-sleeved tee may be worn underneath the scrub top. The white lab coat may be worn for warmth. Absolutely no sweatshirts or hoodies may be worn in the clinical setting.
3. For community-based clinical settings a program polo shirt with khaki slacks should be worn along with the college name pin. Jeans are not allowed.
4. A white lab coat is to be worn over the community uniform with the GBC name pin when students are in the clinical area collecting information for patient assignments.
5. White or flesh colored hose or socks are to be worn with uniforms. Shoes are to be clean and white with white shoelaces. White, clean athletic shoes, with minimal colored decorations, are acceptable. Canvas or open toed shoes are not acceptable. Black or brown shoes are required while wearing the community uniform.
6. The uniform should be washed daily to prevent cross infection/contamination and to control odors. No head gear or hats are allowed. Clothes should be pressed and in good repair. Do not wear your GBC uniform as your work uniform.
7. It is essential that uniforms and other attire fit well so it allows effective functioning in the clinical areas. Appropriate underwear is mandatory and at no time should breast or gluteal cleavage be visible.

8. Students are required to have the following equipment for Practice Lab and clinical use:
   a. black ink pen
   b. bandage scissors
   c. wristwatch with a second hand
   d. safety goggles
   e. pen light
   f. stethoscope
   g. hemostat

**Judgment of adherence to appearance standards and the appropriateness of any aspect of appearance are at the discretion of the faculty. Students whose appearance does not meet the standards may be excluded from participation in clinical and receive an F for the day.**

**Student Identification Badges**

The student identification badge is a required part of the uniform. It is to be worn for every clinical rotation unless otherwise stated on the uniform requirements. Two badges are given to the student prior to clinical rotations. If the badge is lost, make arrangements for replacement with the Media Services office. A student will be assessed for the cost of the replacement.

A photograph is required as part of the student identification badge. Students should ensure that the badge is visible at all times and not obscured. Arrangements will be made for students to have these pictures taken on site at the beginning of each academic year. Only first name and last initial of the student will appear on their badge.

**Student Evaluations of Faculty and Learning Outcomes**

Toward the end of each program course, students will be asked to complete evaluation instruments. An analysis of the student responses is sent to faculty members after the completion of the term and the recording of grades. This data assists the faculty in self-improvement of their teaching and helping future students achieve course learning outcomes. The information is also used as part of the determination of the faculty member’s tenure and salary increases. Students are expected to carefully weigh their assessments and evaluate the faculty member fairly and accurately.

Student Learning Outcomes surveys are also required after each program course. These are also important surveys to ensure the rigor of the program. Students are encouraged to submit feedback that will strengthen the program.

**Gifts**

It is the faculty policy that students shall not purchase gifts for them at the end of a particular course. Please adhere to this policy when thanking faculty for their support and guidance.
Policies and Guidelines for Nondiscrimination for Disability

Great Basin College is committed to providing equal educational opportunities to qualified students with disabilities in accordance with state and federal laws and regulations, including the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973. A qualified student must furnish current verification of disability. The Students with Disabilities Office, located in Berg Hall, will assist qualified students with disabilities in securing the appropriate and reasonable accommodations, auxiliary aids, and services. For more information or further assistance, please call 775.753.2271.

Procedure for Accommodation on the Basis of Disability

The ADA Officer will assist qualified students with disabilities in securing the appropriate and reasonable accommodations, auxiliary aids and services.

Questions regarding appropriate accommodations should be directed to the GBC’s ADA Officer in Elko at 775.753.2271.

Sexual Harassment

The Nevada System of Higher Education (NSHE) is committed to providing a place of work and learning free of sexual harassment. Where sexual harassment is found to have occurred, the NSHE will act to stop the harassment, to prevent its recurrence, and to discipline those responsible in accordance with the NSHE Code or, in the case of classified employees, the Nevada Administrative Code. Sexual harassment is a form of discrimination; it is illegal.

The radiology program requires each student accepted into the program to complete the GBC sexual harassment seminar within the first semester. Dates and times of the seminar will be announced in class. No employee or student, either in the workplace or in the academic environment, should be subject to unwelcome verbal or physical conduct that is sexual in nature. Sexual harassment does not refer to occasional compliments of a socially acceptable nature. It refers to behavior of a sexual nature that is not welcome, that is personally offensive, and that interferes with performance.

It is expected that students, faculty and staff will treat one another with respect. Refer to the GBC general catalog for the entire policy. Each case of accused sexual harassment will be reviewed on a case by case basis.

GBC Academic Regulations

All faculty and students are responsible for following the Great Basin College regulations and guidelines as printed in the Great Basin College Catalog.

Academic and Professional Dishonesty

Academic dishonesty (“cheating”) involves all methods or techniques that enable a student to gain unfair advantage in the clinical or classroom setting (see the Great Basin College Catalog for the definition of cheating in the Academic Honesty section). Cases of academic dishonesty ordinarily result in a grade of F for the assignment and/or the course, in accordance with published course policies. The violation may lead to the student’s dismissal from the Great Basin College HSHS Programs and, in some cases,
dismissal from Great Basin College. Students who are dismissed from the program for violation of academic integrity are not eligible for readmission into the program. The student will also be referred to the Vice President of Student Services for appropriate disciplinary action.

GBC and NSHE policies and procedures related to student conduct and academic honesty will be followed. Academic and/or professional dishonesty may occur in a variety of situations, including but not limited to the following:

**Individual Assignments, Quizzes, Tests, and Examinations:** copying from a neighbor's paper during the exam (quiz or test); talking or sharing information during an exam; using crib notes when taking a closed book examination; arranging for another person to substitute in taking an examination; giving or receiving unauthorized information when taking an examination.

**Plagiarism:**
Plagiarism is knowingly representing the work of another as one's own, without proper acknowledgement of the source. The only exceptions to the requirement that sources be acknowledged occur when the information, ideas, etc., are common knowledge. Plagiarism includes, but is not limited to, submitting as one's own work the work of another person or work obtained from a commercial writing service; quoting directly or paraphrasing closely from a source (including the Internet) without giving proper credit; using figures, graphs, charts, or other such material without identifying the sources.

Faculty expects that students will demonstrate professional and academic integrity at all times. Faculty will explain their course expectations and students are expected to ask questions when clarification is needed.

Great Basin College Student Conduct Policy

All students are held accountable for their behavior under GBC's Standards of Conduct for Students located in the college catalog and NSHE Code, Title 2, Chapter 6. Section 6.2.2 regarding misconduct. Nursing, Paramedic, and Radiology students are also responsible for additional standards of conduct (see Appendices Section).

Distance Learning

All courses in the Health Science and Human Services Department are internet enhanced. Some are completely online. It is the intent of all programs to keep access to student information private. The sign on to the course content is available through www.gbcnv.edu and is password protected for student confidentiality. It is the student's responsibility to have compatible internet access to the GBC website to complete the courses. If you are having problems with the access or have concerns about privacy and security, please contact the Help Desk at (775)753-2167.

Working While in the Program

The Nursing and Radiology Programs are physically, emotionally, and academically demanding. Students may work during the programs, but it is recommended that they do not work full time since it is virtually impossible for students to work full-time and successfully complete the program. Students are encouraged to apply to the financial aid office to determine their eligibility. If employment is interfering with meeting the objectives of the program, faculty may recommend that a student with a heavy work schedule modify their working commitments.

Students who are employed by a health facility while enrolled in these programs must be aware of changing student/employee roles. For example, a student who is employed on week-ends as a ward clerk, CNA, Apprentice Nurse, LPN, or Radiology Technologist Assistant should never exceed the responsibilities of that position relating to facility protocol, even though students have learned new
procedures as a result of being a student. It is imperative that a student accepts assignments within his/her scope of practice as outlined in the specific job description. An unlicensed student should not accept employment that requires him/her to perform duties that should be performed only by a licensed registered nurse or radiology technologist. Students are accountable for their actions and are urged to use reasonable and prudent care in accepting a position and in fulfilling their responsibilities as employees.

**Students are not considered official representatives of the Great Basin College AAS Programs. Neither Great Basin College nor the Health Sciences and Human Services Department accept responsibility for the actions of students working in healthcare agencies in an employee or volunteer status.**

If the student is falling asleep during class or interrupting class due to being tired from work or other reasons, the student will need to leave class when asked and schedule an advisement session with the Program Director prior to being permitted back to class.

**Written Paper Expectations and Format**

The American Psychological Association format is required for written papers. Citations and references used in any assignment should be written in APA format.

Faculty expect papers and other written assignments to be written at a college level and to reflect professional communication. Detailed written expectations can be found in the document titled *Writing Expectations for Great Basin HSHS Students* in the Appendices Section.

**Textbooks and Other Course Materials**

Textbooks may be purchased at the Great Basin Book Store, 1500 College Parkway, Elko, NV 89801 (775) 753-2270. Students may purchase through the website at

http://www.bkstr.com/CategoryDisplay/10001-9604-10075-1?demoKey=d

Students also have the option to purchase books through outside sources.

Syllabi are available online on individual WebCampus course web sites the day before the course starts.

**Drop/Withdraw Policy**

According to GBC policy, if you do not complete the course and do not formally withdraw by the set drop deadline, your instructor will automatically assign you a grade of “F” for the course. The drop deadline for each course will be stated in the course syllabus. If you are dismissed or withdraw from the program after that date, this rule will also apply.
Grading

The following grading scale will be applied to all HSHS Programs coursework:

- 100 - 94 % = A
- 93 - 90 % = A-
- 89 - 87 % = B+
- 86 - 84 % = B
- 83 - 80 % = B-
- 79 - 77 % = C+
- 76 % = C
- 75 - 70 % = C-
- 69 - 67 % = D+
- 66 - 64 % = D
- 63 - 60 % = D-
- Below 59 = F

Note: Student grades will be calculated out to two decimal places (to the hundredth). There will be no rounding up of scores. Criteria for grading will be given to the student in writing at the beginning of each course. It is the student’s responsibility to know his/her grade point average throughout the course.

- Students are responsible for all written/verbal information that is shared in scheduled classes.
- Students must submit all theory or clinical written assignments on the day they are due. Students are responsible for complying with assignment submission guidelines as outlined in each course syllabus.

Class Attendance

Attending class is an integral part of the program and critical in successful completion of each course. Whether the class is traditional or virtual in its delivery, it is EXPECTED that each student ATTEND ALL CLASSES and arrive for class ON TIME. In the event of an absence, it is the student’s responsibility to obtain the announcements, information and any handouts provided by the instructor. Except for emergencies, missed tests, quizzes, or class work (random or scheduled) may NOT be made up.

Students with a pattern of absences from class (i.e., emergency or otherwise), will receive a Notification of Unsatisfactory from the instructor. Any subsequent absences may be referred to the Admission and Progress Committee and evaluation by the Department Dean.

After hospitalization, surgery, serious illness, injury, childbirth, etc. a student must submit a release statement from a health care provider indicating their medical clearance to return to full time status to the program. A copy of this medical release statement will be placed in the student’s file.

Civility in the Classroom

Successful learning experiences require mutual respect. The faculty has primary responsibility for and control over classroom/clinical behavior and maintenance of academic integrity. Student behaviors that demonstrate civility include:

1. Arriving for class/clinical early and/or on time.
2. Treating everyone in class or clinical with courtesy and respect.
3. Refraining from packing up belongings before class/clinical ends.
4. Turning off all electric devices that could cause disruption to the class or clinical area.
5. Being quiet and giving full, respectful attention while the faculty or another student is speaking.
6. When speaking, using courteous, respectful language and keeping comments and questions relevant to the topic.
7. Following any additional classroom rules established by individual faculty.
GBC Cares - a guide to engaged learning:

- **Civility** — have respect for others: students, faculty, staff, and the campus community. Be respectful, polite, and considerate in any classroom, live or digital.
- **Active** — embrace the active process of learning. To maintain a class environment that is conducive to learning: Be diligent, engaged, and committed.
- **Responsibilities** — you are accountable for your actions, work, words, and behavior. Courteous behavior and responses are expected: Be honorable, conscientious, truthful, and dependable.
- **Excellence** — in the classroom, optimizes an atmosphere of teaching and learning. Classroom discussion is meant for everyone’s viewpoint to be expressed on the topic at hand. All students should be afforded the courtesy and opportunity to be heard: Be exceptional.
- **Success** — successful college students embrace all of the educational experience and welcome diversity and different ideas. Embrace challenges.

Great Basin College states: “messages, attitudes, or any other form of communication deemed outside the bounds of common decency/civility as judged by common standards of classroom behavior (determined as they would in a regular classroom by the instructor) will not be tolerated.”

At GBC, students are expected to assist in maintaining a class environment that is conducive to learning. It is required that students conduct themselves in a manner that does not disrupt the teaching or learning atmosphere. All classroom participants have the responsibility to maintain classroom and online discussions that are civil and not disruptive by being courteous and using respectful language. This courteous behavior continues beyond the classroom to any community interactions as a GBC HSHS student.

Be an engaged learner and encourage your fellow students to do so as well.

**ANY STUDENT ENGAGING IN INAPPROPRIATE BEHAVIOR WILL BE REMOVED FROM THE CLASSROOM. COUNSELING MAY OCCUR WITH THE FACULTY AND OTHER DEPARTMENT OR GBC PERSONNEL. REFER TO STUDENT CONDUCT POLICIES IN GBC GENERAL CATALOG.**
Unsatisfactory Student Progress Policy

Students who are admitted to an HSHS Program must maintain their status as a student in good standing in both academic and academic-related areas based on the following criteria. Failure to do so may result in dismissal from the program:

**Unsatisfactory Progress for Academic Reasons**

Students who are admitted to any of the HSHS Programs must maintain their status as a student in good standing in both academic and academic-related areas based on the following criteria. Failure to do so may result in dismissal from the program:

Students

a. who are not maintaining a minimum average of 76% on clinical or academic assignments,

b. who have not met expected performance, safety, or conduct standards, or

c. earning less than 76% on any exam at any time during a course (or two exams if so indicated in the course syllabus)

must meet with faculty member(s) to complete a Notification of Unsatisfactory Student Progress form.

**Unsatisfactory Progress for Academic-Related Reasons**

Conduct consistent with professional standards of ethical, academic, and clinical behaviors must be exhibited at all times, including within classrooms. See Appendices Section for additional information on what constitutes inappropriate conduct in these areas.

a. In a clinical course, if a student’s performance is determined by faculty to be unsafe, the student may be removed from the clinical setting and given a failing grade for the course prior to the end of the semester.

b. If at any time a student’s observed behavior or performance raises any questions on the part of faculty about the student’s physical, emotional, cognitive, and/or emotional status and/or ability to perform or behave safely and/or appropriately, the faculty will meet immediately with the student, document their observations and notify the Dean. A student may be asked to leave a clinical or classroom setting, if the faculty determines it is warranted. When appropriate, site security or its equivalent in clinical settings may be called, in addition,

c. If the student is determined to be unable or unwilling to perform or behave appropriately, the student’s emergency contact will be notified. The student’s emergency contact is responsible for taking the student home.

**Voluntary Withdrawal**

Students who for personal reasons need to voluntarily withdraw from the program must immediately notify their instructor(s) and the Admission and Progression Committee in writing. Students have the option of withdrawing from a course prior to completion of 60% of that course (specific date disclosed in the syllabus). It is the student’s responsibility to formally withdraw at the Registrar’s office from a course. After that date, a grade of “F” will automatically be assigned as per Nevada System of Higher Education Board of Regent’s Policy, Chapter 6.
Unsatisfactory Progress Procedure:

Students failing to meet any of the criteria above will receive a written Notification of Unsatisfactory Student Progress (See Appendices Section).

Faculty will identify area(s) of performance needing improvement in either academic or academic-related (clinical/simulation/skill performance) areas and outline recommendations and suggest an action plan for improvement. Students will also provide input for an action plan. Documentation of poor performance must be included with the unsatisfactory student progress form. The completed form will be signed by faculty member(s) and student. Copies will be distributed to: faculty member(s), student, student file, student's advisor, and the Admission and Progression Committee Chair.

- **The Admission and Progression Committee will review student's academic or clinical performance to determine if the student can continue progression in the program or is dismissed from the program.** Students who receive three (3) Notifications of Unsatisfactory Student Progress forms within one semester must meet with the Admission and Progression Committee.

- Students who receive a total of four (4) Notification of Unsatisfactory Student Progress forms over the course of the HSHS program must meet with the Admission and Progression Committee. Students may at any time be referred to the Admission and Progression Committee for serious infraction(s) of professional, academic, or academic-related performance.

- Upon receiving the sixth (6) Notification of Unsatisfactory Student Progress at any time during the program, the student will be dismissed from the program without appearing before the Committee. This number will be different for students re-entering the program. See below for Notification of Unsatisfactory Student Progress limitations in those circumstances

Process for Admission and Progression Committee Review

One of the responsibilities of the Admission and Progression Committee is to review student academic problems referred by faculty and on matters related to progression, dismissal or reinstatement of students. The purpose and functions of the Admission and Progression Committee can be found in the Appendices Section.

a. All students undergoing review by the Admission and Progression Committee must submit a letter to the Committee describing their plan for correcting deficiencies. The letter must be received as soon as possible prior to the next scheduled meeting of the Admission and Progression Committee.

b. The committee will review the student’s course grades and overall academic and academic-related (clinical/ simulation/ skill performance) record, the course faculty’s evaluation, and the student’s written plan for improvement. Course faculty whose students are undergoing review by the Admission and Progression Committee are requested to be available to consult with the committee if needed during the review.

c. The Admission and Progression Committee reviews all the information received and recommends to the Dean that:
   1. The student shall implement their plan for improvement and be allowed to continue in the program. The Committee may require additional steps or conditions the student must meet after reviewing the student’s plan for improvement. Or,
   2. The student should be dismissed from the program.
d. The Dean notifies the student and faculty member(s) of the decision in writing.
e. Students who do not request to meet with the committee (for voluntary withdrawal) or submit their letter and plan for improvement to the committee will be recommended for dismissal from the program.

**Dismissal and Readmission to the Program**

Students who have failed any program course will be dismissed from the program and may request readmission through the Admission and Progression Committee. If readmission is granted by the Committee, the student must meet all required specifications for re-entry as stated below along with any additional remediation recommendations made by the Committee. All requirements and recommendations must be completed by the date specified by the Committee.

Students who have been dismissed from the program due to academic reasons may apply once for program readmission. The student must indicate in writing to the Admission and Progression Committee desire to be considered for readmission no later than **May 31** for Fall semester and **September 1** for Spring semester and follow all procedures for appealing to the Committee.

Students who have been out of the program for more than one year must re-apply. Students who have been out of the program for less than one year will be considered for readmission on a space available basis and will not need to submit a full application. Specific competency guidelines for readmission to each program are outlined in the following program-specific area of this student handbook.

**Unsatisfactory Progress after Readmission Limitations**

Students being readmitted to the program in the first semester will be accountable to the same Notification of Unsatisfactory Student Progress limitations as new students. Students re-entering the program in the second, third, or fourth semester will go before the Admission and Progression committee upon receiving two (2) Notifications of Unsatisfactory Student Progress in one semester or a total of three (3) throughout the remainder of the program. Readmitted students will be dismissed from the program upon receiving the fourth (4) Notification of Unsatisfactory Student Progress without an option for readmission.

**Student Appeal of Admission and Progression Committee Decision**

Decisions of the Admission and Progression Committee may be appealed directly to the Dean in writing within 3 working days after written notification of the decision is received. If the issue is not resolved after appealing to the Dean, the student may proceed to Step III of the Grievance Procedure described in the next section.

**Grievance Procedure**

The procedure described here differs from and supersedes the GBC procedure described in the college Catalog. The divergence from GBC policy is justified by the sequential nature of the program curriculum and the safety and well-being of patients a student may care for.

Students who wish to explore problems that have not been resolved to their satisfaction can initiate the appeal process described below. Because faculty have an obligation to safeguard patients and other individuals, a student in the appeal process might not be allowed to continue in the clinical component of a course until the issue is resolved.
Grievance Procedure Steps

Step I:
Schedule an appointment and discuss issue with faculty member(s) within 3 working days of the alleged occurrence. Within 3 working days of the scheduled meeting, the faculty member(s) shall issue a written decision. The decision may be delivered to the student by email, U.S. Mail, or personally delivered.

↓
Resolution → Stop

No resolution → Proceed to Step II

↓

Step II:
If the student is aggrieved by the resolution made in Step I, the student may file a written appeal with the Dean within 3 working days of receiving the written decision in Step I. The Dean shall meet with the student within 3 working days of receiving the appeal unless the student requests more time and this request is approved by the Dean. The Dean may invite the faculty member(s) to this meeting. The Dean may permit the student to bring someone to advise the student at this meeting. The Dean shall issue a written decision within 3 working days of the meeting. The decision may be delivered to the student by email, U.S. mail, or personally delivered.

↓
Resolution

(Note: Dates given in this procedure may be adjusted if the Dean is not available due to absence or semester break.)
HIPAA

The National HIPAA regulations apply in all school settings and students must demonstrate knowledge of the regulations prior to entering the clinical setting. This is the security and privacy accountability for healthcare information. Some items in didactic and all of clinical rotation are considered confidential and the health care worker/student will be held accountable for release of the patient’s information. HIPAA training will be maintained with documentation in each student file.

Mandatory In Service

All program students are required to attend annual mandatory blood borne pathogens, OSHA, AND HIPAA in-service sessions. This will be scheduled prior to your clinical rotations. This is a requirement by the hospitals and must be completed by you prior to performing clinical rotations. There may be additional mandatory in service at each facility and this may be completed upon arrival at the clinical site.

Clinical Assignments

Site Selection
In planning clinical learning experiences for HSHS courses, the faculty tries to assure that each student is scheduled for the clinical facilities that are most likely to provide a variety of learning situations appropriate to the unit or course content currently being studied. Clinical site selection is based on the following criteria:

- Type of facility/agency and accreditation status
- Type of experiences available
- Adequacy of staffing and staff preparation for their roles
- Average daily census or clients
- Available equipment, supplies, learning resources, etc.
- Receptiveness to students and faculty
- Number of students who can be accommodated at one time
- Number of faculty to accommodate an additional clinical site

Scheduling and Transportation

- Scheduling students to be in the right place at the right time for the best possible experiences is a priority for faculty. As a result, there will be occasions when temporary irregularities in a student’s schedule are necessary. Every attempt will be made to notify students of these changes so that they can make necessary plans and adjustments in their personal schedules.
- Students may be assigned day, evening, or weekend clinical experiences.
- Transportation to clinical facilities is the responsibility of the student. Some clinical facilities may require as much as sixty (60) minutes traveling time from campus. Many of the students have been able to meet their transportation needs by making arrangements with others in the class.
**Attendance**

Clinical attendance is mandatory. Students are required to attend every clinical rotation on the scheduled date and time.

1. Students are expected to report on time for scheduled clinical experiences and be willing, capable, and prepared to participate in assignments. Tardiness is defined as one minute or more past the designated start time. Arriving late for a clinical will result in student being sent home at the discretion of the instructor. Being sent home will result in a grade of zero (0) for that clinical assignment.

2. If clinical is to be missed for any reason, the instructor and the clinical area must be notified before report time. Please telephone the faculty office at least one hour before the clinical begins. It is the student's responsibility to notify the faculty and the clinical area of expected absence.

3. There are no excused absences from clinical.

4. There are no makeup days provided.

5. Each clinical absence will result in a grade of zero (i.e., 0) for the clinical assignment.

6. A student who works the night shift or the previous eight hours prior to a scheduled clinical experience will be dismissed from the clinical site. This will result in a clinical absence.

*See additional attendance guidelines for students in the Radiology Technology Program in the Radiology Specific Section of this handbook.

**Authority and Responsibility in Clinical Settings**

- Students are legally responsible for their actions as a student in clinical settings. The professional working with a student is legally responsible for the patient. Students fall under the legal jurisdiction of their clinical faculty's license and the college.

- Clinical faculty are responsible for assigning duties, providing opportunities for demonstration of progression, and serving as a guide in achieving objectives. It is necessary that the instructors be used as a guide to facilitate learning.

Students are subject to the rules and regulations defined in the personnel policies of the facilities with which the GBC HSHS Program affiliates. It is the student's responsibility to be aware of the facilities' policies. If policies are not followed clinical rotation experiences will be discontinued until there is evidence that the student's progress meets the criteria for competent clinical performance.

Remember you are a guest at the clinical sites. Students are not allowed to leave the clinical sites during scheduled hours without permission. There is not early release from the clinical setting.

**Communication in Clinical Settings**

Communication in health care facilities must be on-going. Although students assume responsibility for their assigned patient while in clinical settings, the facility staff does not relinquish total patient responsibility. The student is required to obtain information from the staff regarding a patient before giving care. Prior to leaving the facility or the assigned unit, the student is required to give a report on each patient to the staff or team leader who is responsible for the coordination of care.
Preparation for Clinical Experiences

Some clinical rotations require students to prepare and research information about their assigned patient on site in the clinical facility prior to the clinical date. Students will be notified of their assignment and must review patient information only during the hours specified by the faculty. While doing clinical site patient preparation the student must wear the scrub jacket or white lab coat over the specified community uniform. A student name tag is required. The student must identify him/herself to the facility staff and state the purpose for being there. Students must have completed the HIPAA certification and signed the confidentiality agreement prior to reviewing any charts at any facility.

Performance of a New Skill

Students must be supervised by their clinical instructor when performing a procedure in a clinical setting that has not been performed outside of the Practice Laboratory. If the instructor is not available, the RN assigned to care for the patient may supervise a student with the instructor’s permission.

Students are required to review facility policy/procedures prior to performing any new skill and must be prepared to answer any questions from the instructor and the RN assigned to care for the patient. Students must plan their work carefully before they begin.

The student is expected to verbalize his/her plan to the instructor and/or RN assigned to care for the patient.

Students must have their skills book at clinicals, at all times, and will be required to turn in the checklist at the end of the program.

Safe Practice Policy

1. Safe practice in a clinical setting includes those patterns of professional behavior that follow legal and ethical codes and promote well-being of clients and self. This will be demonstrated through accountability in preparation, documentation, and continuity of care, as well as in showing respect for the rights of individuals.

2. Unsafe practice includes those behaviors which may endanger a patient, family member, staff, peer, or faculty in the physiological, psychological, spiritual, or cultural realm. Specific behaviors of endangerment may include acts of commission or omission in the clinical agency and/or behavior that causes the faculty to question the student’s potential for safe practice.

3. The student whose actions or omissions endanger a patient, family, peer, staff member, or faculty will receive verbal and written documentation of the event. The student may be removed from the clinical setting.

4. Based on the severity and nature of the unsafe practice, the student may receive a failure for that clinical experience, for the course or be dismissed from the Program.

5. Documented evidence from faculty, staff, clients, families, or peers may be used in the decision process.

Unsafe Practice Policy

If a student is deemed to be unsafe by clinical faculty, the student will be excluded from clinical rotation, may not self-drop the course, will be assigned a grade of F, and will fail the course. This is applicable at any time during a semester. Behaviors that may result in immediate dismissal include, but are not limited to:
1. Performing acts beyond the scope of practice
2. Unauthorized use or distribution of equipment or drugs
3. Falsification or alteration of agency documents
4. Patient abuse, neglect, or abandonment
5. Engaging in criminal activities
6. Violation of ethical principles
7. Violation of the GBC AAS Standards of Conduct policy

If an agency refuses to allow a student to continue in clinical rotation, the student may not self-drop, will be assigned a grade of F and will fail the course.

Incident and Quality Assurance Reports

- For incidents that occur in clinical facilities and/or on the GBC site an incident report must be completed per facility policy. Incidents include injuries to a patient, visitor, or staff, and errors in treatment or medication. Facility regulations usually require students to fill out a quality assurance form (incident report) for any untoward happening. Completing the form does not automatically mean a person is responsible for the incident.
- Instructors will refer the student to the appropriate facility or department for incidents that result in exposure or injury. Documentation of the incident will also be recorded by the clinical faculty and kept at GBC.
- Most facility incident reports have a section on follow-up that should be regarded as protection for both the patient and the student. Clinical faculty must see all reports prior to being turned in by students.
- Failure to report an incident of which the student is aware is a serious error in judgment and a breach of student conduct subject to the faculty issuing a Notice of Counseling.
- The policy for reporting medication errors will be strictly followed by any student who has made a medication error.

Skill Remediation

Students who are unprepared when completing a required skill/procedure in the clinical area will need to return to the Practice Lab for practice and remediation. The clinical instructor will give the student a remediation request slip. If remediation is required, the student must set up an appointment with the Practice lab instructor who will assist in correcting the skill. Students are responsible for having the remediation slip completed prior to the next clinical rotation, and to bring the completed remediation slip to clinical. Failure to complete the remediation prior to the next assigned clinical rotation will result in an unexcused absence from clinical.

Dishonesty in the Clinical Setting

If the faculty determines that a student has been dishonest in representing the facts regarding their clinical assignment, the student may receive a failure for that day, for the entire clinical rotation and/or be dismissed from the program. Examples of dishonesty during clinical instruction include but are not limited to: charting observations or interventions in a client record that, in fact, were not made (i.e., charting vital signs that were not taken); failing to report an error in medication or treatment.
The purpose of the Health Science and Human Services Practice Labs is to provide students with the appropriate environments and equipment to engage in safe, high quality, structured clinical experiences. The labs are designed to:

- Provide a safe and supportive learning environment in which students can become competent in psychomotor and clinical reasoning skills in realistic situations before those skills are applied with patients in actual clinical settings.
- Provide simulated clinical experiences with situations and patients problems not usually available in students’ regular practice sites.
- Model quality and safety in clinical environments reflecting current evidence and best practices.
- Enable reflective practice free from the distractions of normal clinical environments.
- Allow participation in situations and scenarios that are dependent upon interdisciplinary collaboration.
- Provide clinical experiences structured to build confidence and development of increasing complex skills and clinical reasoning competency.

The Nursing and Paramedic Practice Lab is a single location, but provides two separate areas in which clinical learning occurs. Those are the Practice Lab itself, and the simulation area, a small portion of the Practice Lab located in Room 101. The Practice Lab is used for learning a wide range of focused clinical tasks requiring specialized procedure and/or equipment. It is considered “low” or “medium” fidelity and provides learning opportunities focused primarily on psychomotor skills.

The Radiology Practice Lab is located in Room 102. The Practice Lab is used for learning a wide range of focused clinical tasks requiring specialized procedures and/or equipment.

All practice/simulation areas are comprised of highly specialized, high fidelity equipment and simulators that closely resemble actual patients and patient situations. The simulators (such as SimMan®) and equipment are very expensive computer operated, complex electronic equipment that must be programmed and controlled by specially trained faculty or Practice Lab personnel.

**Practice Lab Policies**

Each student will be asked to sign a form documenting their agreement to allow student classmates to perform procedures on them, including injections and IV insertion.

*The policies described below apply to ALL AREAS of the Practice Labs at all times. An additional set of policies that apply specifically to the simulation area are included later in this document.*

The following rules must be followed at all times in the Practice Labs:

**Strictly Enforced:**

- Only authorized persons are allowed in the Practice Labs and no students can be in the labs without an instructor.
- Children are not allowed in the laboratories under any circumstances.
- Eating and drinking are not permitted in the laboratories at any time.
- No cell phones and other electronic devices may be used the Practice Labs only for the purpose of accessing clinical resources when specific permission has been granted by
the Practice Lab Manager and/or course faculty. All electronic devices must be muted at all times in the labs.

- All accidents, no matter how minor, MUST be reported to the instructor and/or the Practice Lab Manager.
- No pens are to be used near the simulators.

Appropriate Use and Behavior for Students in the Practice Labs

- Hands must be washed thoroughly upon entering and before leaving the Labs.
- Students must wear lab coats, rubber sole and closed-toe shoes for scheduled sessions in the Practice Labs. Program scrubs must be worn during skills check-off and simulation in the Labs.
- Standard precautions must be practiced at all times.
- Students must come to the Practice Labs with a watch with a second hand and any other equipment necessary to practice and perform a specific skill.
- All needles and sharps must be properly disposed in SHARPS CONTAINERS (according to CDC guidelines). Students who do not dispose of needles and syringes appropriately will receive a Letter of Unsatisfactory Progress and may be excluded from use of the labs.
- After a learning experience, students should not share details and activities with other students who have not participated in the learning experience.

Scheduling Practice Time in the Labs

- All students who use any part of the Practice Labs during open lab time must sign in when entering the lab and sign out upon leaving.

- Assigned lab time (e.g., skills check-off, skills demonstration and simulation) is considered clinical time. A student is expected to arrive at the scheduled check-off time ready to demonstrate competency in specific skills. Failure to attend an assigned lab time will result in a Letter of Unsatisfactory Progress and meeting with the instructor. Remediation and/or disciplinary action may also occur.

- Open lab time gives the student additional opportunities to practice skills. Students are required to sign up for practice and check off of specific, required skills in the Practice Labs (refer to Skills Check-off List and course schedule). In the event a student is unable to attend any scheduled session in the practice lab, the student must notify the course instructor and/or Practice Lab Manager at least two hours before the scheduled lab time.

- Students who are tardy will forfeit their time and will need to reschedule their session if space is available. Being tardy for any demonstration, skills check-off or simulation will be considered a clinical absence which will result in a Letter of Unsatisfactory Progress. This might affect the student’s eligibility to participate in a clinical assignment which, in turn, might affect their status in the program.

Skills Check Offs

- Students who have failed a skill twice will receive a Letter of Unsatisfactory Progress which will affect their eligibility to participate in a clinical assignment and status in the program.

- Students are expected to attend their practice lab group session prepared to have a scholarly conversation regarding the content for that session. Faculty are authorized to exclude a student from participation in clinical laboratory sessions when the student is unprepared, when the student is tardy, when performance falls below a competent level, when the Standards of Conduct policy is violated.

- When attending skills check-off, the student will be graded pass/fail for each required skill. Grading will include attendance, student preparedness, skill performance, and participation.
Simulation Policies

Use of this highly technical and specialized area of the Practice Lab is a privilege and all activity in the area should be undertaken as if it were occurring in an actual clinical facility.

The following policies will be strictly enforced:

1. All students will wear scrubs, closed toe shoes, or the clothes worn normally during their clinical activities when participating in simulations.

2. **Absolute no pens of any kind are to be used near the simulators.**

3. Learners must bring standard equipment (watch with second hand, stethoscope, etc.) required for clinical during simulator experience.

4. Learners will wash their hands to remove stains, ink or oils prior to entering the simulation area, even if they have washed their hands previously for work in another area of the Practice Lab.

5. No food or drink is allowed in the simulation area of the Practice Lab.

6. Standard precautions will be followed at all times in the simulation area of the Practice Lab. Simulator-learner contact will be adhered to as in the clinical environment.

7. To maximize learning opportunities during the simulation, conversation and discussions will be limited to the scenario itself.

**Safety in the Simulation Area**

1. Safety of all participants must be of highest priority because the simulator can be cardioverted and defibrillated (ALL DEFIBRILLATORS ARE ACTIVE & DELIVER AN ELECTRICAL CHARGE). ACLS guidelines for the use and safety of these interventions must be followed.

2. During certain scenarios, learners may be using gases such as oxygen (O2). Standard safety precautions are to be followed.

3. For safety, closed toe shoes must be worn when in the simulation area.

**Simulation Confidentiality**

1. Consent to record the simulation will be obtained and kept on file from all members participating in the simulation experience.

2. After a learning experience, students should not share details and activities with other students who have not participated in the learning experience.

**Appropriate Use of the Simulation Area**

1. The simulation area will not be used for task training experiences.
2. Simulators shall not be scheduled for clinical make-up days, unless arranged by instructor.
3. Once the simulation experience is completed, learners must restore the simulator and environment to the baseline status.
4. Learners who are assessed by the instructor during simulation exercises to need additional practice or remediation for a skill will be referred to the instructor and/or Practice Lab Manager for follow up.

Academic Advising

HSHS students will be assigned a faculty advisor upon admission to the program. During enrollment in the program, each student should make an appointment with his/her advisor at least one time per semester to review their progress.

Academic advisors will receive a copy of any Notice of Unsatisfactory Performance given to their advisees. However, whenever possible, students experiencing academic problems should be encouraged to meet with their advisor when problems first become apparent rather than waiting until they receive a Notice of Unsatisfactory Performance.

Contact the HSHS Administrative Support at 775-753-2301 for assistance in making an appointment with your advisor.

Students experiencing non-academic health or emotional issues which require professional care should be referred for help outside the Health Sciences and Human Services Department. The Student Services Office is the contact for students who need counseling available through UNLV. Contact Director of Disability Support, 775-753-2271 or Vice President of Student Affairs, 775-753-2282 with any questions or additional information.

Learning Resources

Students must purchase required texts and other learning resources (e.g., online access codes and other learning resources.) A list of required learning resources will be provided to all students enrolling in the health science programs. These can be purchased through the GBC Bookstore or through another source. Students should be very careful that all components needed for their classes are included if they purchase from an outside source. Students will be notified if additional learning resources are required prior to the beginning of each subsequent semester.

Library Services

Media required for HSHS courses are located in the Library. These materials are not to be checked out but must be viewed at the Library.
GBC library hours are:
- Monday - Thursday: 8 am to 6 pm
- Friday: 8 am to 5 pm

Financial Assistance

Financial Aid is intended to help students pay for their education after high school. The aid available at Great Basin College includes grants, loans, employment and scholarships, some of which are specifically designated for health science students. Students are encouraged to contact Student Financial Services at 775-753-2399 for further information.

Copying

Copying can be done at the GBC High Tech Center or the Library. The copy machine in the office area is for faculty use only. Computer copies made from the office printer are $.10 per page. Additional copies of assignment forms are the student’s responsibility.

Technology Assistance

GBC offers a Help Desk for students experiencing problems with WebCampus access. The Help Desk is available by phone (775-753-2167) or by email (helpdesk@gbcnv.edu)

- **Summer Hours**
  - Weekdays: 7 am to 4 pm

- **Fall - Spring Hours**
  - Weekdays: 7:30 am to 9 pm
  - Saturday: Noon to 5 pm

Student Representatives

Student representation is encouraged during program meetings and Health Science and Human Services Advisory Group meetings. Two volunteer representatives from each class are selected. These students are asked to bring questions, comments and concerns of their class to these meetings and are expected to take information back to their group for discussion and follow-through.

- **Student Nurses’ Organization (SNO)**
- **Radiology Student Organization (RAD)**
- **Paramedic Student Organization (PARM)**
- **Human Services Student Organization (SOAP)**

Students are invited to be an active member of their program student organization. Election of officers is held during the fall semester. A president, vice-president, secretary, treasurer, Winnemucca and Pahrump senators, and activities coordinator(s) may be elected.

Student Government Association (SGA)

Students are encouraged to be an active part of the Student Government Association (SGA). A variety of activities are provided throughout the school year. Students have the opportunity to participate individually or as a group. There may be some scholarship opportunities for participating in the SGA.
Scholarships & Financial Aid

Financial Aid is intended to help students pay for their education after high school. Scholarship/Grant criteria varies for each program. The aid available at Great Basin College includes grants, loans, employment and scholarships, some of which are specifically designated for HSHS students. Awards are made in the fall and spring semesters. Only students who have completed the application will be considered for a scholarship. Federal Student Aid Programs become available after you complete the FAFSA application. Submit a Free Application for Federal Student Aid (FASFA) at www.fafsa.ed.gov. Students are encouraged to contact Student Financial Services at 775-753-2399 for further information.

Specific Program Costs can be found in the Program Specific section of this handbook.

Building Hours

Building hours vary based on classes and locations. Health Science faculty offices close at 5 pm.

Building Use Guidelines

Great Basin College maintains open centers available to faculty, staff, students and the local community during normal hours. During those days and hours classes, meetings and special events are scheduled security will have staff on site to provide assistance.

Open access to site facilities is provided with the understanding that:

- All persons will be treated with courtesy and respect;
- All buildings and equipment are used in the manner originally anticipated;
- All persons will comply with any posted signage;
- All persons will follow normally accepted safety and behavior standards.

The offer of open access may be revoked should any person be found to cause damages to any Great Basin College property or be involved in harmful, unsafe or illegal behavior while on GBC property.

Security

Security and law enforcement on all Great Basin College centers is dependent upon GBC personnel working well with their respective local law enforcement agencies. Knowledge of any crime or emergency should be reported to the center security or center director immediately. Any crime or emergency requiring immediate assistance should be reported immediately to the police or sheriff by dialing 911 on any center phone.
Security may be contacted by dialing the Elko site operator (Dial "0") from any extension and requesting assistance. On the Elko site assistance may be obtained by activating any of the call boxes located on the pathways or phoning the security cell phone at 934-4923. If the police department, fire department or ambulance are required dial, 9-911 from any extension and tell the dispatcher of the emergency.

Fire Evacuation Plan

Before a fire happens know the following:

- Know the location of the exit nearest your area (evacuation maps posted).
- Know the location of the fire alarm pull box nearest your area.
- Know the location of fire extinguishers in your area.
- Know how to use a fire extinguisher.

Upon discovery of a fire:

1. Pull fire alarm and give verbal warning.
2. Call 911.
3. Follow evacuation procedures.
4. Close doors to contain fire and smoke.
5. If it is safe to do so, and you have been properly trained, you may attempt to extinguish the fire.
6. Determine if it is safe to re-enter the building.
7. On the Elko site, notify your respective Vice President. On all other centers notify the Director and the Vice President of Academic Affairs (Elko Center 775.753.2266).

Food and Beverages in Classrooms

Rooms 109 and 110 in the Dorothy Gallagher Health Science Building have coffeemakers, microwaves and a refrigerator for student use. According to State Health Department regulations, anything placed in the refrigerator must be dated and removed within one week. Open food items left longer or that are not dated will be discarded.

Similar appliances may be available at other centers. Please request assistance from the Center Director or other center personnel.

Personal Computer Use

GBC is not responsible for loss or damage to personal property owned by faculty, staff, or students, including personal computers, which are used or left in the building. The college is also not responsible for any thefts or damages done to vehicles parked on the premises. Most areas of the parking lot and the interior of the building are under video surveillance. If a student’s personal computer is used in one of the buildings, a multi-dimensional surge protector (common and transverse spikes) should be purchased and utilized to prevent electrical damage.
Children and Non-Students in Campus Facilities

Great Basin College is committed to providing a place of instruction that is conducive to learning; and that is, to the greatest extent possible, free from distractions. Only enrolled students should be present in classrooms, field trips, fitness center(s) and lab facilities.

Pets

The only pets (dogs, cats, birds, rabbits, ferrets, etc.) that are allowed anywhere on our campus and inside the buildings are those trained and licensed as service animals. Please do not bring any type of animal into any GBC building or clinical-related facility you enter. We will have Security help you remove your animal if needed. Please be courteous to our faculty, staff and students and leave your pets at home.

Tobacco Use / Smoking

Tobacco use and smoking is prohibited in GBC buildings. Please use outdoor designated areas only. In addition, students must comply with all clinical agency policies regarding use of tobacco and smoking while on site.

Application for Graduation

The GBC graduation is the ceremony that celebrates graduation from the college. It is a cap and gown ceremony held at the Convention Center. Nursing, Radiology, and Paramedic students receive an Associate of Applied Science degree. You MUST submit an application for graduation before the set deadline in order to participate and receive a degree. Please refer to the Great Basin College catalog for further information.

Graduation Requirements

Students must complete all program and general education courses by the end of the fourth semester to be eligible for graduation. The general education courses have been placed in the curriculum to augment the program course content. Scheduling arrangements are made with other GBC faculty to assure there will be no time conflict with program classes. If a program course is taken out of sequence, there is no guarantee it will be taught at a time that does not conflict with other required program courses.

Students are responsible for ensuring that Admission and Records receives an official transcript for transfer courses one month prior to graduation. It is also each student’s responsibility to know and to meet all course requirements and to maintain a 2.5 or high GPA throughout the program.

The Office of Admission and Records uses the year of your admission to the program to determine catalog year and course requirements for graduation.

Any student taking a general education course during the fourth semester of the program at another college or university must have the course work completed and an official transcript sent to the Admission and Records Office no less than one month prior to final examinations.

It is the student’s responsibility to make certain all graduation requirements are met. Failure to complete requirements will delay your application to take the National Council Licensure Examination for Registered Nurses (NCLEX-RN), American Registry of Radiologic Technology (ARRT), or the National
Registry for Paramedics – See Appendices Section. Each situation will be dealt with on an individual basis by the faculty.

**Caps and Gowns**

Cap and gown orders are placed with the GBC Bookstore. The cost is approximately $25.00.

**Pinning Ceremonies**

Upon successful completion of a Great Basin College Health Science and Human Services Program, students are eligible to purchase Program pins. The Administrative Assistant will provide the necessary order form and will facilitate the ordering of the pins. Students will not be able to purchase a pin without the required permission form. Pins must be ordered by March 15th of the year of graduation.

The pinning ceremonies held in the GBC Theatre are ceremonies separate from the GBC graduation. In order to participate in the pinning ceremony, a student must have completed all program requirements. Because the pinning ceremony is a time honored tradition, certain guidelines regarding student appearance, program format and reception activities are followed. Graduating students, with assistance from the Student Organization officers and faculty representative will collaborate in planning the pinning ceremony. Date and time will be chosen to accommodate graduating students without conflicting with the GBC graduation and other activities held on site. First year students assist with the reception held after the pinning ceremonies.

**Pinning/Graduation Cost Estimates**

- Graduation fee (apply in January) $20.00
- Pinning ceremony announcements $0.25 each
- Pinning ceremony uniform, if applicable Individual amount
- School pin (order in February) $40.00-200.00
- GBC graduation announcements $1.00 each
- Cap and gown $25.00
- Other possible requirements $38.00
ASSOCIATE OF APPLIED SCIENCE NURSING PROGRAM

PROGRAM SPECIFIC POLICIES AND PROCEDURES

2017-2018

Associate Degree and Baccalaureate Degree Nursing Programs
Accredited by the Accreditation Commission for Education in Nursing, Inc. (ACEN)
(Formerly NLNAC, National League for Nursing Accrediting Commission, Inc.)
3343 Peachtree Road NE, Suite 850, Atlanta, GA 30326
404-975-5000

Associate Degree and Baccalaureate Degree Nursing Programs
Approved by the Nevada State Board of Nursing
5011 Meadowood Mall Way, Suite 300
Reno, NV 89502-6547
775-687-7700
# PROGRAM SPECIFIC SECTION

## Nursing Program Foundations 3 - 8

- GBC Mission Statement
- Nursing Mission Statement
- Philosophical and Conceptual Basis for Achievement of College and AAS Missions
- AAS Nursing Program Student Learning Outcomes
- Program Student Learning Outcomes and Competencies
- Definitions of Major Concepts Used in the Program Student Learning Outcomes and Competencies
- Essential Eligibility Guidelines for Participation in the AAS Nursing Program
- Ethical Conduct

## Nursing Specific Academic and Clinical Policies and Procedures 9 - 15

- Mail Boxes
- Testing Policy
- Medication Dosage Calculations Testing
- Exam Process
- Table of Conversions by Semester
- Clinical Grading
- Specific Requirements for Readmission to the Nursing Program
- Telephone and Verbal Orders by Second Year Students in Clinical Settings
- Medication Error Policy and Procedure

## Nursing Curriculum Information 16 - 20

- Basic AAS Program Four Semester Plan – All Courses
- Basic AAS Program Four Semester Plan – Nursing Courses Only
- Course Descriptions

## Nursing Specific Financial Information 21

- Nursing Program Costs and Fees
- Licensure
Great Basin College Mission Statement

Great Basin College enriches people's lives by providing student-centered, post-secondary education to rural Nevada. Educational, cultural, and related economic needs of the multicounty service area are met through programs of university transfer, applied science and technology, business and industry partnerships, developmental education, community service, and student support services in conjunction with certificates and associate and select baccalaureate degrees.

Mission of the Associate of Applied Science in Nursing Program

To provide an accessible, student-centered, post-secondary nursing education that prepares graduates for entry level nursing practice in a variety of structured healthcare settings.

Philosophical and Conceptual Basis for Achievement of College and AAS Missions

Nursing faculty endorse the mission, goals, and outcomes of Great Basin College. The nursing faculty act on the college mission and values through the pursuit of excellence in teaching, promoting student success, and providing service to rural Nevada citizens to enhance their health and quality of life. The philosophy of the nursing faculty is rooted in the core values of holism, caring, diversity, advocacy, integrity, and excellence. Student learning outcomes of the Associate of Applied Science Degree Nursing Program curriculum are based on competencies determined by the faculty to be necessary for safe and effective nursing care.

The faculty designed the associate degree nursing education program to prepare graduates as providers of basic nursing care in structured settings for individuals and families experiencing common, acute, and chronic health problems. As an entry level nurse, the AAS graduate can apply best evidence, available resources, and information technology to assure high quality and safe nursing care. The AAS graduate can manage direct care for small groups of patients and participate as a member of nursing and interprofessional teams to achieve positive health outcomes for patients. Standards of practice and professional nursing values are used to guide practice by the AAS graduate.

The AAS Nursing program is built on competencies derived from the major concepts the nursing faculty consider to be central to associate degree nursing practice. Those concepts are:

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<tr>
<th>Patient-centered care</th>
<th>Professionalism</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teamwork</td>
<td>Environment and context</td>
</tr>
<tr>
<td>Evidence-based practice</td>
<td>Clinical reasoning</td>
</tr>
<tr>
<td>Quality improvement</td>
<td>Safety</td>
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The faculty value nursing education as a life-long dynamic process in which the learner is an active participant, and in which education is the responsibility of both the learner and the nursing faculty. The faculty provide a learning environment that is responsive to a range of individual learning styles, needs, rates of learning, and abilities. The curriculum, teaching strategies, and educational experiences are evidence-based and support the development of critical thinking, problem solving, and analytical reasoning. The faculty value open, honest communication with students and strive to provide a culture of learning in which guidance and evaluation promote self-esteem and confidence in the student. The faculty based the curriculum on the guidelines that learning best occurs when instruction is organized in a manner that leads the learner from simple to complex concepts and skills with experiential opportunities to apply learning throughout the process.
Nursing faculty have considered professional standards, best practices, guidelines and competencies in developing an evidence-based curriculum to prepare graduates of the Great Basin College AAS Nursing program as entry-level Registered Nurses. The curriculum is designed and organized using the program student learning outcomes listed below as the basis for all activities related to the teaching/learning process, including delivery of instruction, learning activities, and evaluation of student progress.

**AAS Nursing Program Student Learning Outcomes**

Upon completion of the AAS Nursing Program the graduate will have accomplished the following six program student learning outcomes:

1. Provide safe, quality, evidence-based, patient-centered nursing care in a variety of healthcare environments to diverse patient populations across the lifespan.
2. Use clinical reasoning when engaged in the work of a professional nurse.
3. Participate in quality improvement processes to improve patient care.
4. Engage in teamwork with members of the interprofessional team, the patient, and the patient’s support persons when managing patient care.
5. Apply management, legal, ethical, and professional guidelines in practice as a professional nurse.
6. Use information management principles, techniques, and systems, and patient care technology to communicate, manage knowledge, mitigate error, and support decision-making.

Student achievement of the program learning outcomes is demonstrated through competencies that are comprised of the knowledge, skills, and attitudes students must attain for each student learning outcome. Competency statements at both the program and course level are used to evaluate students’ achievement of course and program student learning outcomes. Competencies required for each Program Student Learning Outcome are listed below.

**Program Student Learning Outcomes and Competencies**

The six program student learning outcomes along with their related competencies are:

1. Provide safe, quality, evidence-based, patient-centered nursing care in a variety of health care environments to diverse patient populations across the lifespan.
   a. Conduct comprehensive and focused physical, behavioral, psychological, and spiritual assessment of health and illness parameters in patients, using developmentally and culturally appropriate approaches.
   b. Identify patient needs based on the assessment findings.
   c. Develop an individualized plan of care implementing evidence-based and best practice standards.
   d. Implement patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, nutrition, medical management, and nursing management across the lifespan, and in a variety of healthcare settings.
   e. Promote factors that create a culture of safety.
   f. Provide patient teaching that reflects patient-centered concepts including developmental stage, age, culture, patient preferences, and health literacy consideration.
g. Implement nursing interventions directed at the attainment, intervention, and maintenance of physical and mental health and the prevention of illness across the life span in a variety of clinical settings.

h. Monitor patient outcomes to evaluate the effectiveness and impact of nursing care.

i. Deliver care within expected timeframe.

j. Provide patient-centered transitions of care and hand-off communications, including discharge planning, to ensure safe, uninterrupted nursing care.

k. Revise the plan of care based on an ongoing evaluation of patient outcomes including recognition of alterations to previous patient conditions.

l. Demonstrate safe performance of psychomotor skills for efficient, safe, and compassionate patient care.

m. Accurately document all aspects of patient care.

2. Use clinical reasoning when engaged in the work of a professional nurse.

a. Use clinical reasoning to make management decisions to ensure accurate and safe care in all nursing actions, including addressing anticipated changes in the patient’s condition.

b. Anticipate risks, and predict and manage potential complications.

c. Prioritize patient care.

d. Analyze the clinical microsystem and its impact on the nurse’s ability to provide safe, quality care.

3. Participate in quality improvement processes to improve patient care.

a. Interpret information about outcomes of care for populations served in a variety of healthcare systems.

b. Provide recommendations to close identified gaps between local and best practice.

c. Apply quality improvement processes to effectively implement patient safety initiatives and monitor performance measures, including nursing-sensitive indicators in the microsystem of care.

d. Implement National Patient Safety Goals in all applicable patient care settings.

4. Engage in teamwork with members of the interprofessional team, the patient, and the patient’s support persons when managing patient care.

a. Communicate effectively with all members of the health care team, including the patient and the patient’s support network when making decisions and planning care.

b. Identify to which interprofessional healthcare professional, and when, to communicate patient assessment data collected.

c. Evaluate inter and intraprofessional communication and teamwork for the purpose of delivering safe, evidence-based, patient-centered care.

d. Implement conflict resolution principles as needed.

5. Apply management, legal, ethical, and professional guidelines in practice as a professional nurse.

a. Apply management skills and knowledge of the rules and principles of delegation when working with other health care team members.

b. Apply management and supervisory skills to the care of diverse patients in a variety of healthcare settings.

c. Practice within the legal and ethical frameworks of nursing practice.

d. Analyze planned patient care within the context of the ANA Standards of Practice.

e. Serve as a patient advocate.

f. Initiate a plan for ongoing professional development and lifelong learning.

6. Use information management principles, techniques, and systems, and patient care technology to communicate, manage knowledge, mitigate error, and support decision-making.

a. Use patient care technologies, information systems/technologies, and communication devices to support safe nursing practice.

b. Apply patient care technologies as appropriate to address the needs of a diverse patient population.
Definitions of Major Concepts Used in the Program Student Learning Outcomes and Competencies

**Caring:** In nursing, those values, attitudes, and behaviors that engender feeling cared for. (Duffy, 2010). Also, “promoting health, healing, and hope in response to the human condition” (NLN, 2010, p. 65).

**Clinical judgment:** A process of observing, interpreting, responding, and reflecting situated within and emerging from the nurse’s knowledge and perspective (Tanner, 2006). Involves ways in which nurses come to understand the problems, issues, or concerns of clients and patients, to attend to salient information, and to respond in concerned and involved ways (Benner, Tanner, & Chesla, 2009).

**Clinical microsystem:** A small group of people who work together on a regular basis – or as needed – to provide care and the individuals who receive that care (who can also be recognized as members of a discrete subpopulation of patients) (Trustees of Dartmouth College, 2004, p. 5).

**Clinical reasoning:** An iterative process of noticing, interpreting, and responding – reasoning in transition, with a fine attunement to the patient and how the patient responds to the nurse’s actions. (Benner, Tanner, & Chesla, 2009, p. 230).

**Collaboration:** “Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.” (Quality and Safety Education for Nurses [QSEN], 2007). Collaboration also includes communication and partnerships with providers, patients, families, and stakeholders.

**Cultural competence:** Cultural competence is the ability to respect the beliefs, language, interpersonal styles, and behaviors of individuals, families and communities receiving services as well as the health care professionals who provide the services. Culture is the integrated patterns of human behavior that include the language, thoughts, actions, customs, beliefs, and the institutions of racial, ethnic, social, or religious groups (www.cultural-competence-project.org/en/faq.htm, retrieved February 17, 2011)

**Diversity:** “Recognizing differences among persons, ideas, values, and ethnicities, while affirming the uniqueness of each (NLN, 2010, p. 12).

**Ethics:** “Involves reflective consideration of personal, societal, and professional values, principles, and codes that shape nursing practice. Ethical decision making requires applying an inclusive, holistic, systematic process for identifying and synthesizing moral issues in health care and nursing practice, and for acting as moral agents in caring for patients, families, communities, societies, populations, and organizations. Ethics in nursing integrates knowledge with human caring and compassion, while respecting the dignity, self-determination, and worth of all persons” (NLN, 2010, p. 13).

**Evidence-based care:** Care that integrates the best research with clinical expertise and patient values for optimum care (IOM, 2003).

**Excellence:** creating and implementing transformative strategies with daring ingenuity. A culture of excellence reflects a commitment to continuous growth improvement, and understanding. It is a culture where transformation is embraced, and the status quo and mediocrity are not tolerated (NLN, 2010).

**Informatics:** The use of information and technology to communicate, manage knowledge, mitigate error, and support decision making (Quality and Safety Education for Nurses [QSEN], 2007).

**Information management:** Refers to “the processes whereby nursing data, information, knowledge, and wisdom are collected, stored, processed, communicated, and used to support the delivery of health care” (Nelson, 2010, p. 653).

**Integrity:** “Representing the dignity and moral wholeness of every person without conditions or limitation” (NLN, 2010, p. 13).
**Nursing**: Nursing is the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities, and populations (ANA, 2010, p. 10).

**Nursing-sensitive indicators**: Nursing-sensitive indicators reflect the structure, process and outcomes of nursing care. The structure of nursing care is indicated by the supply of nursing staff, the skill level of the nursing staff, and the education/certification of nursing staff. Process indicators measure aspects of nursing care such as assessment, intervention, and RN job satisfaction. Patient outcomes that are determined to be nursing sensitive are those that improve if there is a greater quantity or quality of nursing care (e.g., pressure ulcers, falls, and intravenous infiltrations). Some patient outcomes are more highly related to other aspects of institutional care, such as medical decisions and institutional policies (e.g., frequency of primary C-sections, cardiac failure) and are not considered “nursing-sensitive”. (ANA’s Nursing World: [http://www.nursingworld.org/MainMenuCategories/ThePracticeofProfessionalNursing/PatientSafetyQuality/Research-Measurement/The-National-Database/Nursing-Sensitive-Indicators_1.aspx](http://www.nursingworld.org/MainMenuCategories/ThePracticeofProfessionalNursing/PatientSafetyQuality/Research-Measurement/The-National-Database/Nursing-Sensitive-Indicators_1.aspx), Retrieved February 17, 2011).

**Patient**: The recipient of nursing care or services. Patients may be individuals, families, groups, communities, or populations (American Association of Colleges of Nursing [AACN], 2008, p. 38).

**Patient-centered care**: Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient’s preferences, values, and needs (Quality and Safety Education for Nurses [QSEN], 2007).

**Personal and professional development**: “A lifelong process of learning, refining, and integrating values and behaviors that (a) are consistent with the profession’s history, goals, and codes of ethics; (b) serve to distinguish the practice of nurses from that of other health care providers; and (c) give nurses the courage needed to continually improve the care of patients, families, and communities and to ensure the profession’s ongoing viability” (NLN, 2010, p. 68).

**Quality improvement**: “Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems” (Quality and Safety Education for Nurses [QSEN], 2007). Also relates to the improvement of healthcare processes and at the local, state, and federal levels to affect positive outcomes from the impact of economics on healthcare quality.

**Safety**: Minimizes risk of harm to patients and providers through both system effectiveness and individual performance (Quality and Safety Education for Nurses [QSEN], 2007).

**References**


Essential Eligibility Guidelines for Participation in the AAS Nursing Program

The functional abilities adopted by Great Basin College’s AAS Nursing Program are defined by the National Council of State Boards of Nursing and related to the behavioral components of competence, which has been defined by the National Council of State Boards of Nursing as “the application of knowledge and the interpersonal, decision-making, and psychomotor skills expected for the nurse’s practice role, within the context of public health, safety and welfare” (1966).

The functional abilities refer to those physical, cognitive and behavioral abilities and competencies required for satisfactory completion of all aspects of the nursing program. These functional abilities are non-domain specific (i.e., physical and mental activities and attributes needed by a nurse to practice safely in terms of essential nursing functions, with or without accommodations). Applicants to the AAS Nursing Program and students continuing through the nursing program must demonstrate competence in the following categories of behavior in order to successfully meet program learning objectives:

<table>
<thead>
<tr>
<th>Physical Abilities:</th>
<th>Cognitive Abilities:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross motor skills</td>
<td>Reading</td>
</tr>
<tr>
<td>Fine motor skills</td>
<td>Arithmetic</td>
</tr>
<tr>
<td>Physical endurance</td>
<td>Emotional stability</td>
</tr>
<tr>
<td>Physical strength</td>
<td>Analytical thinking</td>
</tr>
<tr>
<td>Mobility</td>
<td>Critical thinking</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sensory Abilities:</th>
<th>Interactive Abilities:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Visual</td>
<td>Interpersonal skills</td>
</tr>
<tr>
<td>Tactile</td>
<td>Communication skills</td>
</tr>
<tr>
<td>Olfactory (smell)</td>
<td>Integrity</td>
</tr>
<tr>
<td>Hearing</td>
<td></td>
</tr>
</tbody>
</table>

Ethical Conduct

The Code of Ethics for Nurses (American Nurses Association, 2001) addresses your responsibility to behave in a manner consistent with professional ethics and values in relation to human dignity and maintaining health care and work environments conducive to health care quality. The nursing faculty expects students to adhere to that code in all matters related to their classroom and clinical experiences, as well as working relationships, both in person and through social media and online communications. (See Appendices Section)
Mail Boxes

Each student has a student mailbox. These mailboxes are private and only the student or students assigned to the mailbox should remove items. If a classmate is sent to get something from a student’s mailbox, a faculty member or the Administrative Assistant must be the one to do this. **Putting school related items into another student’s mailbox is appropriate, but removing anything, even just to look at and replace it, will be considered a violation of the GBC Student Conduct Policy.** All alleged violations of the Student Conduct Policy will be handled according to the procedures outlined in the GBC Catalog.

All other areas within the Health Sciences and Human Service Department office suite are off limits to students, including cabinets, drawers, coffee maker, microwave, copy and fax machines.

Testing Policy

**Course Exams**

Exams will be taken during prearranged times and dates. Specific information will be provided to students by the faculty member responsible for a particular course. Unless otherwise indicated, all exams will be closed book, timed and monitored.

**Testing Procedures**

a. All student possessions (backpacks, cell-phones, water bottles, hats, etc.) must be left at the front of the room.

b. Students are not permitted to sit at their desk with notes prior to the test. Any last minute studying must be conducted outside the classroom.

c. The procedure for proctored tests should be as follows:

   i. Students take the test and submit it online.

   ii. If Cooperative Testing is utilized it will be carried out as follows:

      1. Students will work in groups of 3-6 to take a Cooperative Test.
      2. The time allowed for the Cooperative test will be half the time that was provided for the individual test.
      3. Students earning an A on the group test will have 3 points added to their individual grade; those earning a B on the group test will have 2 points added to their individual grade; those earning a C on the group test will have 1 point added to their individual grade. A grade less than 76% on the group test will earn no points.
      4. Answers and rationales will only be provided after the Cooperative test.

   iii. Students who disagree with the correct answer may complete a Student Test Query Form (see Appendix H-3) to explain their rationale for their chosen answer. **These forms will be submitted to the faculty within 72 hours of the exam.**

   iv. There will be no discussion of test items between students and faculty on the day of the test, during the test, or after the test is completed.

   v. If a student is absent from a test, it will be up to the discretion of the instructor as to whether the same test may be used to make-up the test or a different test will need to be administered. A different test may be of a different format as well (essay, short-answer, etc.).
vi. Simple, non-graphing, calculators without memory can be used for dosage calculations if necessary. No cell phones are permitted.

**Reviewing Tests with Faculty**

a. It is at the faculty’s discretion if a group review is conducted. If so, the students will not be allowed to take any notes; they can only review the exam and discuss questions with other students or faculty.

b. All students earning less than 76% on any exam at any time during a course (or two exams if so indicated in the course syllabus) must make an appointment with the faculty to complete a Notification of Unsatisfactory Student Progress form. Students may be required to counsel prior to unsatisfactory exams per the discretion of the instructor.

c. The faculty will discuss with the student the results of the test and assist the student with strategies for improvement on the next test.

d. Students who do not follow this policy will be contacted by the faculty for a discussion of the importance of remediation for success in the nursing program.

e. Once a student has received three Notifications of Unsatisfactory Student Progress forms within one semester or a total of four over the course of the ADN program, they will be required to appear before the Admissions and Progressions committee to determine progression in the program and discuss an individual plan for progression.

**Medication Dosage Calculations Testing**

Students will be required to pass a dosage calculation exam each semester. These will be short paper and pencil exams that will be scheduled by the instructor. Students will take the dosage calculation exam after completing the required ATI Modules and corresponding module post-tests listed below.

1 Semester One:
   a. Safe Dosage
   b. Medication Administration
   c. Oral Medications
   d. Injectable Medications
   e. Case Study – Diabetes: Oral medications

2 Semester Two:
   a. Safe Dosage
   b. Parenteral (IV) medications
   c. Powdered medications
   d. Case Study – Leukopenia
   Review all modules from semester one

3 Semester Three:
   a. Safe Dosage
   b. Critical Care Medications
   c. Dosage by Weight
   d. Pediatric Medications
   Review all modules from semesters one and two

4 Semester Four:
   a. Safe Dosage
   Review all modules from semesters one, two, and three.

Each semester students must pass the ATI Safe Dosage module post-test with a 100%. Additional ATI module post-tests listed will require a 90% pass rate. Transcripts are required prior to taking the dosage calculation exam. Students will submit transcripts of module (lesson and test) on date indicated by instructor.
Exam Process

The exam format will be paper and pencil. Simple, non-graphing calculators will be permitted during the exam. Use of calculators on cell phones or PDAs is NOT permitted. Using these types of calculators will cause the student to forfeit the exam. Students may miss one question on this exam. Students will have three chances to pass this exam. After the second failed exam, the student will receive a Notification of Unsatisfactory Student Progress and will be required to repeat the ATI modules and corresponding post-tests before their third attempt. If the student fails their third attempt, they will appear before the Admission and Progression Committee.
Table of Conversions by Semester

**Note:** Student grades will be calculated out to two decimal places (to the hundredth). There will be no rounding up of scores. Criteria for grading will be given to the student in writing at the beginning of each course. It is the student’s responsibility to know his/her grade point average throughout the course.

- Students are responsible for all written/verbal information that is shared in scheduled classes.
- Students must submit all theory or clinical written assignments on the day they are due. Students are responsible for complying with assignment submission guidelines as outlined in each nursing course syllabus.

<table>
<thead>
<tr>
<th>Semester</th>
<th>Dosage Category</th>
<th>Drug Types</th>
<th>Question Types</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>Adult Geriatrics</td>
<td>Fundamentals</td>
<td>mg/tab tsp/ml mg/ml mEq/ml mg/tsp g/ml mg/g unit/ml mcg/ml/mg</td>
</tr>
<tr>
<td>2nd</td>
<td>Adult Geriatrics</td>
<td>Medical-Surgical Mental Health</td>
<td>Semester 1 materials plus: mg/ml ml/hr gtt/ml gtt/min g/ml units/ml mcg/ml</td>
</tr>
<tr>
<td>3rd</td>
<td>Adult Geriatrics Pediatric</td>
<td>Medical-Surgical Obstetrics Pediatrics</td>
<td>Semester 1 &amp; 2 materials plus: mg/min ml/hr mg/g mcg/kg/min kg/lb units/kg/hr mcg/min g/hr mcg/kg/day mg/kg/day mg/ml mEq/kg mEq/ml mg/kg units/kg ml/kg ml/kg/day mg/kg/dose lb oz kg</td>
</tr>
<tr>
<td>4th</td>
<td>Adult Geriatrics Pediatric</td>
<td>Medical-Surgical</td>
<td>Semester 1, 2, &amp; 3 materials.</td>
</tr>
</tbody>
</table>

**Clinical Grading**

a. A mid-term and final clinical evaluation will be done collaboratively by faculty and student. The student must achieve a “Satisfactory” performance level by the final evaluation.

b. Student must achieve a “Satisfactory” summative rating (i.e., 76% or greater) on all clinical written assignments.

c. At any point during the semester, the student must demonstrate the ability to achieve a final nursing course grade of “C” (i.e., 76%) or better.
Specific Requirements for Readmission to the Nursing Program

Students who have failed any nursing course will be dismissed from the program and may request readmission through the Admission and Progression Committee. If readmission is granted by the Committee, the student must meet all required specifications for re-entry as stated below along with any additional remediation recommendations made by the Committee. All requirements and recommendations must be completed by the date specified by the Committee.

Students who have been dismissed from the program due to academic reasons may apply once for program readmission. The student must indicate in writing to the Admission and Progression Committee desire to be considered for readmission no later than May 31 for Fall semester and September 1 for Spring semester and follow all procedures for appealing to the Committee.

Students who have been out of the program for more than one year must re-apply to the nursing program. Students who have been out of the program for less than one year will be considered for readmission on a space available basis and will not need to submit a full application.

Any student requesting readmission to the program will be required to demonstrate competency in skills and knowledge specified for each semester of re-entry as listed:

Second Semester

Testing requirements

- Obtain a Level 2 or higher competency rating on ATI RN Fundamentals Proctored Assessment
- Pass with no less than a 76% on comprehensive final exam for NURS 154 – Introduction to Pharmacology
- Complete ATI Safe Dosage Module post-test with a 100%
- Miss no more than one question on the First Semester Medication Dosage Calculation Exam

Skills requirements

Safe and accurate demonstration of the following skills according to the criteria set on the checklist for each of the following separate skills is required:

- Foley catheter insertion
- Administration of oral and injectable medications
- IV administration bag and tubing set-up
- Administration of medication via IVPB
- IV pump rate, volume, and volume history programming
- Discontinuing peripheral IV
- Patient assessment with vital signs

Third Semester

Testing and skill requirements for readmission to the second semester must be met in addition to the following:

Testing requirements

- Obtain a Level 2 or higher competency rating on ATI RN Nutrition Proctored Assessment
- Obtain a Level 2 or higher competency rating on ATI RN Mental Health Proctored Assessment
• Pass with no less than a 76% on comprehensive final exam for NURS 158 - Nursing Care of Adults in Health and Illness
• Miss no more than one question on the Second Semester Medication Dosage Calculation Exam

Skills requirements
Safe and accurate demonstration of the following skills according to the criteria set on the checklist for each of the following separate skills is required:
  • Peripheral IV insertion
  • IV push medication administration through a saline lock
  • Insulin mixing and administration

Fourth Semester
Testing and skill requirements for readmission to the second and third semesters must be met in addition to the following:

Testing requirements
  • Obtain a Level 2 or higher competency rating on ATI RN Maternal Newborn Proctored Assessment
  • Obtain a Level 2 or higher competency rating on ATI RN Nursing Care of Children Proctored Assessment
  • Obtain a Level 2 or higher competency rating on ATI RN Pharmacology Proctored Assessment
  • Pass with no less than a 76% on comprehensive final exam for NURS 257 - Nursing Care of Adults with Acute and Chronic Illness
  • Miss no more than one question on the Third Semester Medication Dosage Calculation Exam

Skills requirements
Safe and accurate demonstration of the following skills according to the criteria set on the checklist for each of the following separate skills is required:
  • Blood administration and monitoring
  • Surgical scrub
  • Donning sterile gown and closed gloving

Every element of each requirement must be met in order to be eligible for readmission. Scheduling for testing will be arranged after the May 31 or September 1 deadlines.

Students are not guaranteed readmission to the program.

Telephone and Verbal Orders by Second Year Students in Clinical Settings
Nursing students may take TELEPHONE or VERBAL ORDERS from physicians if the following conditions are met:

  • Must be a 2nd year student.
  • Student must have been caring for that patient and know the situation.
  • For a telephone order, primary nurse or faculty must be on extension phone or with the student to
verify order.

- For verbal order, primary nurse or faculty must hear the physician’s verbal order.
- Student will repeat the orders to physician to verify correctness.
- Student will write orders on order form and faculty/primary nurse will countersign the order.

Medication Error Policy and Procedure

1. All medication errors must be reported to the nursing instructor and staff nurse responsible for the patient immediately on discovery of the error. After the patient is assessed, the error will be reported to the charge nurse or unit manager and to the physician.

2. Documentation of what medication was or was not given must be properly recorded in the patient’s medical record. Seek guidance from your clinical instructor before documenting in the medical record. This documentation includes the name of the drug, the patient’s response and any interventions.

3. All medication errors should also be documented on the appropriate quality assurance form or equivalent per facility protocol where the error occurred.

Definition of medication errors:

- Medication given to the wrong patient
- Wrong medication given to patient
- Medication given at the wrong time
- Medication given via the wrong route
- Medication given in the wrong dose
- Medication omitted
- Administration of medication not documented properly
- Medication administered after patient refusal
- Administration of a medication that has already been given
- Giving a medication that has been discontinued
- Medication left at the bedside without an order to do so
- Failure to check physician’s orders or complete necessary assessment interventions prior to administering the medication; For example, failure to: take an apical pulse, take a blood pressure, or check appropriate lab levels
- Failure to calculate correct dosages.
- Administering medication prior to skills check-off.

4. Medication errors that endanger the patient’s life or actually cause the patient harm can be grounds for immediate termination from the course.

5. Documentation of medication errors will be maintained in the student’s file.

6. Students giving medications under the supervision of an instructor will still be held accountable for medications errors even if the instructor prevents the error from occurring.
All nursing courses must be taken in required sequence. Because of the critical relationship between time and learning, the nursing faculty believes students must make full use of classroom, lab, and clinical experiences. Students are expected to meet all class, lab, and clinical requirements. Course work not completed will negatively impact student grades. Students are required to seek assistance promptly from the nursing faculty when and if they experience any degree of academic or clinical difficulty. If personal matters are interfering with academic or clinical efforts, the classroom and/or clinical instructor should be kept informed.

The faculty reserves the right to change certain aspects of the course syllabus, such as the schedule of assignments, grading procedures, or course materials. However, no changes will be made without informing students in a timely and clear manner. It is not anticipated there will be major changes in the content of a syllabus once a course begins.
## Four Semester Curriculum Pattern – All Courses

<table>
<thead>
<tr>
<th>PREREQUISITE COURSES</th>
<th>CREDITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>INT 100</td>
<td>GBC Orientation 0.5</td>
</tr>
<tr>
<td>BIOL 223₁</td>
<td>Anatomy &amp; Physiology I 4</td>
</tr>
<tr>
<td>BIOL 224₁</td>
<td>Anatomy &amp; Physiology II 4</td>
</tr>
<tr>
<td>BIOL 251₁</td>
<td>Microbiology 4</td>
</tr>
<tr>
<td>MATH 120</td>
<td>Fundamentals of College Mathematics OR</td>
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<tr>
<td>MATH 126</td>
<td>Precalculus 3</td>
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<tr>
<td>PSY 101</td>
<td>General Psychology 3</td>
</tr>
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<td>Current Nursing Assistant Certification 6</td>
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</table>

### FIRST SEMESTER

<table>
<thead>
<tr>
<th>COURSE</th>
<th>CREDITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 135</td>
<td>Fundamental Concepts in Nursing 8</td>
</tr>
<tr>
<td>NURS 154</td>
<td>Introduction to Pharmacology 1</td>
</tr>
<tr>
<td>ENG 101</td>
<td>Composition I 3</td>
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### SECOND SEMESTER

<table>
<thead>
<tr>
<th>COURSE</th>
<th>CREDITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 155</td>
<td>Clinical Decision Making in Drug Therapy 1</td>
</tr>
<tr>
<td>NURS 158</td>
<td>Nursing Care of Adults in Health &amp; Illness 5</td>
</tr>
<tr>
<td>NURS 159</td>
<td>Nursing Care of Individuals with Mental Health Problems 3</td>
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<tr>
<td>ENG 102</td>
<td>Composition II 3</td>
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### THIRD SEMESTER

<table>
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<th>COURSE</th>
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<tbody>
<tr>
<td>NURS 252</td>
<td>Nursing Care of the Childbearing Family 3</td>
</tr>
<tr>
<td>NURS 253</td>
<td>Nursing Care of Children and Adolescents 3</td>
</tr>
<tr>
<td>NURS 257</td>
<td>Nursing Care of Adults with Acute and Chronic Illness 5</td>
</tr>
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</table>

### FOURTH SEMESTER

<table>
<thead>
<tr>
<th>COURSE</th>
<th>CREDITS</th>
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<tbody>
<tr>
<td>NURS 258</td>
<td>Patients with Complex Health Problems 4</td>
</tr>
<tr>
<td>NURS 273</td>
<td>Professional Development and Transition to Practice 2</td>
</tr>
<tr>
<td>NURS 280</td>
<td>Evidence Based Practice for Quality Improvement Seminar 2</td>
</tr>
<tr>
<td>PSC 101</td>
<td>Principles of American Government 3</td>
</tr>
<tr>
<td>HUMANITIES or FINE ARTS (Recommended: PHIL 102 – Critical Thinking and Reasoning)</td>
<td>3</td>
</tr>
</tbody>
</table>

The total prerequisite general education and nursing courses is 70.5 credits. Of that total, 37 credits are in nursing course credits. The total number of clinical credit hours included in the nursing credits is 13. The program clinical hours total 585 contact hours in clinical settings.

₁ Science department prerequisite of BIOL 190.
## Curriculum Pattern – Nursing Courses Only
### Four Semesters

<table>
<thead>
<tr>
<th>First Semester</th>
<th>Credits</th>
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<tbody>
<tr>
<td>NURS 135 Fundamental Concepts in Nursing</td>
<td>8</td>
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<tr>
<td>NURS 154 Introduction to Pharmacology</td>
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<table>
<thead>
<tr>
<th>Second Semester</th>
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<tbody>
<tr>
<td>NURS 155 Clinical Decision Making in Drug Therapy</td>
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<tr>
<td>NURS 158 Nursing Care of Adults in Health &amp; Illness</td>
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<tr>
<td>NURS 159 Nursing Care of Individuals with Mental Health Problems</td>
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<thead>
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<th>Third Semester</th>
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<tr>
<td>NURS 252 Nursing Care of the Childbearing Family</td>
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</tr>
<tr>
<td>NURS 253 Nursing Care of Children and Adolescents</td>
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<tr>
<td>NURS 257 Nursing Care of Adults with Acute and Chronic Illness</td>
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<tr>
<td>NURS 258 Patients with Complex Health Problems</td>
<td>4</td>
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<tr>
<td>NURS 273 Professional Development and Transition to Practice</td>
<td>2</td>
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<tr>
<td>NURS 280 Evidence Based Practice for Quality Improvement Seminar</td>
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Description of Required ADN Nursing Courses

NURS 135  Fundamental Concepts in Nursing (8)
Introduction to basic concepts and competencies for the application of the nursing process in the care of diverse patients with common health alterations and to promote the health of individuals. Introduction to basic concepts of safe, patient-centered, evidence-based nursing care considering legal and ethical responsibilities of the nurse. Also introduces caring, clinical reasoning, quality improvement, communication, and teamwork when interacting with patients and members of the interprofessional team. Emphasis on essential psychomotor skills and obtaining patient information relevant to care planning.

NURS 154  Introduction to Pharmacology (1)
Basic principles of safe and effective medication administration and pharmacology of major drug classifications. Principles of medication administration including aspects of best practice for safe, quality, patient-centered care. Includes the use of informatics and media to obtain evidence-based drug information.

NURS 155  Clinical Decision Making in Drug Therapy (1)
Common drug therapy regimen and application of clinical reasoning in management and monitoring of drug effects in acutely ill patients for safe, quality, evidence-based nursing care. Focuses on patient teaching and the nurse as a member of the interprofessional team when providing pharmacological interventions.

NURS 158  Nursing Care of Adults in Health and Illness (5)
Building on fundamentals of nursing, this course provides for the acquisition and application of basic adult health nursing theory by applying clinical reasoning and safe, evidence-based, patient-centered, holistic nursing care to diverse patients with common acute health problems. Incorporates a focus on health promotion. Includes the application of the concepts of caring, clinical reasoning, quality improvement, communication, and teamwork, considering legal and ethical responsibilities of the nurse when caring for adults.

NURS 159  Nursing Care of Individuals with Mental Health Problems (3)
Provides for the acquisition and application of mental health nursing theory for safe, evidence-based, patient-centered, holistic nursing care for diverse patients experiencing common acute and chronic mental health disorders and treatment modalities. Includes the application of the concepts of caring, clinical reasoning, quality improvement, communication, and teamwork, considering legal and ethical responsibilities of the nurse when working with patients with mental health disorders.

NURS 252  Nursing Care of the Childbearing Family (3)
Provides for the acquisition and application of maternal/child nursing theory for safe, evidence-based, family-centered nursing care for diverse patients. Includes a focus on health promotion and the application of the concepts of caring, clinical reasoning, quality improvement, communication, and teamwork, considering legal and ethical responsibilities of the nurse when working with the childbearing family.

NURS 253  Nursing Care of Children and Adolescents (3)
Provides for the acquisition and application of pediatric nursing theory by applying clinical reasoning and safe, evidence-based, family-centered, holistic nursing care to diverse children and adolescents with acute and chronic health problems. Includes a focus on health promotion, and the application of the concepts of caring, clinical reasoning, quality improvement, communication, and teamwork, considering legal and ethical responsibilities of the nurse when caring for children and adolescents.
NURS 257  Nursing Care of Adults with Acute and Chronic Illness (5)
Provides for the acquisition and application of adult health nursing theory by applying clinical reasoning and safe, evidence-based, patient-centered, holistic nursing care to diverse adults with acute illnesses and long-term management of chronic illnesses. Includes a focus on health promotion and the application of the concepts of caring, clinical reasoning, quality improvement, communication, and teamwork, considering legal and ethical responsibilities of the nurse when working with adults.

NURS 258  Patients with Complex Health Problems (4)
Provides for the acquisition and application of nursing theory for patients experiencing physiological crisis and end of life. Applies clinical reasoning and safe, evidence-based, patient-centered, holistic nursing care to diverse patients with complex health problems. Includes a focus on collaboration and care management, and the application of the concepts of caring, clinical reasoning, quality improvement, communication, and teamwork, considering legal and ethical responsibilities of the nurse in the management of patients in crisis and at the end of life.

NURS 273  Professional Development and Transition to Practice (2)
Provides for an examination of the impact of clinical microsystems and organizational culture on patient care delivery and nursing practice. Incorporates an analysis of professional development resources for nurses upon entry into practice to facilitate progress from novice to expert.

NURS 280  Evidence-Based Practice for Quality Improvement Seminar (2)
This seminar course focuses on the study of collecting and using evidence as a tool for microsystem change and promotion of quality and safety in a variety of healthcare environments. Takes a project-focused approach to collaboration and problem-solving for quality improvement.

NURS 312  Health Assessment and Health Promotion (optional RN to BSN course)
Explores assessment of the healthcare needs of diverse and underserved populations. The importance of the nurse in identifying health promotion and disease prevention issues for individuals and commands the nurse’s perspective on health assessment through integration of an expanded knowledge base in ethnic and cultural variations, risk behaviors, and common health deviations of populations.
Nursing Program Costs and Fees

AAS Nursing Program costs over the two years will vary from year to year. Differential fees cover the cost of lab and some student supplies. Uniforms are purchased prior to entering the first year. The majority of nursing textbooks are purchased prior to the first semester to enhance learning throughout the two years. Additional expenses in the second year include the cost of the NCLEX-RN licensing and examination fees, college nursing pin, pinning ceremony and graduation fees.

Approximate Program Related Costs:

Estimated total program tuition based on fall 2016 fee structure .......................................................... $9,600.00
Textbooks & online access fees .................................................................................................................. $2,000.00
Uniforms and supplies .......................................................................................................................... Paid for by GBC Foundation
Student Background Check and Drug Screening (required for clinical rotation) ................................ $95.50
Immunizations (estimate) ....................................................................................................................... $300.00
Physical Examination .......................................................................................................................... Individual amount
Health Insurance ........................................................................................................................................ Individual amount
Clinical support items (e.g., watch with second hand, hemostat, bandage scissors, pen light, safety goggles, white nursing shoes, khaki slacks) ........................................................................ Individual amount
Travel to clinical facilities ...................................................................................................................... Individual amount
NCLEX-RN application and license fees:
  * NCLEX-RN Testing Center ........................................................................................................ $200.00
  * Nevada State Board of Nursing licensing fee ........................................................................... 105.00
  * Fingerprinting fee ..................................................................................................................... 51.25
*This process can take 4-6 months. Fingerprint forms are good for 6 months

Licensure

In the fall semester of the second year, students begin the process of applying for licensure with the State Board(s) of Nursing. Applications for licensing in Nevada will be provided. Students planning to license in another state are responsible for obtaining the necessary application. **Fingerprint forms should be completed and mailed by February 1st of the year of graduation.**

Students should be aware of the Eligibility Screening Questions on the Nevada Application for License (see Nevada State Board of Nursing website). If you can answer any question with a “YES”, meet with the Nursing Dean and call the Nevada State Board of Nursing (888-590-8726) for clarification to determine what will be required to make you eligible to take the NCLEX-RN exam post graduation.
APPENDICES

Functional Abilities
Bloodborne Pathogen Exposure and Prevention Policy
Health Sciences Admission and Progression Committee
Writing Expectations for Nursing Students
National Student Nurses Association
GBC Standards of Conduct for Nursing Students
ANA Code of Ethics for Nurses
American Registry of Radiologist Technologists Code of Ethics
Code of Ethics for EMS Practioners
Nevada State Board of Nursing – Conduct of Nursing
NSNA Bill of Rights and Responsibilities for Students of Nursing
NSNA Code of Academic and Clinical Conduct
Nursing Program Injury Report
Exposure to Bloodborne Pathogen Form
Student Test Query Form
Notification of Unsatisfactory Student Progress Form
Radiology Student Clinical Evaluation Form
Radiology Competency Form
Radiology Clinical Orientation
Radiology Student Exam Log
Radiology Attendance Form
Radiology Voluntary Declaration Form  Appendix - 35
Radiology Prior Conviction Statement of Understanding  Appendix - 37
Radiology Release Form  Appendix - 39
Radiology Monitoring Form  Appendix - 41
Previous Radiation Exposure Form  Appendix - 43
Radiology Clinical Documentation Checklist  Appendix - 45
Radiology Student Health Form  Appendix - 47
Radiation Advisory Statement  Appendix - 49
Radiology Safety Policies  Appendix - 50
Student Agreement for the 2013-2014 Academic Year  Appendix - 55
Agreement to Participate in Practice Lab Procedures  Appendix - 57
Confidentiality Agreement and Consent for Photography and Video Recording  Appendix - 59
Functional Abilities (Technical Standards)

The Health Science and Human Services Programs require the following functional abilities with or without reasonable accommodations:

1. **Visual acuity** must be adequate to assess patients and their environments, as well as to implement the nursing care plans that are developed from such assessments. Examples of relevant activities (nonexclusive):
   a. Detect changes in skin color or condition
   b. Collect data from recording equipment and measurement devices used in patient care
   c. Detect a fire in a patient area and initiate emergency action
   d. Draw up the correct quantity of medication into a syringe

2. **Hearing ability** must be of sufficient acuity to assess patients and their environments and to implement the nursing care plans that are developed from such assessments. Examples of relevant activities (nonexclusive):
   a. Detect sounds related to bodily functions using a stethoscope
   b. Detect audible signals generated by mechanical systems that monitor bodily functions
   c. Communicate clearly in telephone conversations
   d. Communicate effectively with patients and with other members of the healthcare team

3. **Olfactory ability** must be adequate to assess patient and to implement the nursing care plans that are developed from such assessments. Examples of relevant activities (nonexclusive):
   a. Detect foul odors of bodily fluids or spoiled foods
   b. Detect smoke from burning materials
   c. Detect ketones on a client’s breath

4. **Tactile ability** must be sufficient to assess patient and to implement the nursing care plans that are developed from such assessments. Examples of relevant activities (nonexclusive):
   a. Detect changes in skin temperatures
   b. Detect unsafe temperature levels in heat-producing devices used in patient care
   c. Detect anatomical abnormalities, such as subcutaneous crepitus, edema, or infiltrated intravenous fluid
   d. Perform techniques such as the insertion of urinary catheters

5. **Strength and mobility** must be sufficient to perform patient care activities and emergency procedures. Examples of relevant activities (nonexclusive):
   a. Safely transfer patients in and out of bed and assist them with ambulation using appropriate assistive devices
   b. Safely control the fall of a patient, by slowly lowering the patient
   c. Turn and position patients as needed to prevent complications due to bed rest
   d. Hang intravenous bags at the appropriate level
   e. Accurately read the volumes in body fluid collection devices hung below bed level
   f. Perform cardiopulmonary resuscitation

6. **Fine motor skills** must be sufficient to perform psychomotor skills integral to patient care. Examples of relevant activities (nonexclusive):
   a. Safely dispose of needles in sharps containers
   b. Accurately place and maintain position of stethoscope for detecting sounds of bodily functions
   c. Manipulate small equipment and containers, such as syringes, vials, ampoules, and medication packages, to administer medications

7. **Physical endurance sufficient to complete assigned periods of clinical practice and to function effectively under stress in acute health care situations.**
8. Ability to speak, comprehend, read, and write English at a level that meets the need for accurate, clear and effective communication.

9. Emotional stability to function effectively under stress, to work as a part of a team and to respond appropriately to supervision; to adapt to changing situations, to respond appropriately to patients and families under stress, and to follow through on assigned patient care responsibilities.

10. Cognitive ability to collect, analyze, and integrate information and knowledge to make clinical judgments and management decisions that promote positive patient outcomes.

11. Other abilities sufficient to demonstrate competencies such as the ability to arrive to a clinic on a timely basis; to meet the demands for timely performance of duties; to meet the organizational requirements to perform these duties in a professional and competent manner.
Bloodborne Pathogen Exposure and Prevention Policy

The HSHS Programs have developed a Bloodborne Pathogen Exposure and Prevention Policy to be in compliance with Occupational Safety and Health Administration (OSHA) Standards. The policy is intended to provide direction to students and faculty to help prevent exposure to bloodborne pathogens and guidance should such exposure occur.

The purpose of this policy is to reduce the risk of student exposure to air and body substance pathogens such as, but not limited to, Tuberculosis, Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), and the Human Immunodeficiency Virus (HIV).

HIV Screening

The GBC HSHS programs will not undertake any program of screening faculty or students for antibody to HIV. Any student or faculty wishing to be tested will be referred to his/her private physician.

Standard Precautions

Standard Precautions is an approach to infection control that requires the application of blood and body fluid precautions for all patients and patient specimens regardless of diagnosis. Standard precautions will be the minimum standard of practice throughout courses offered in the HSHS programs at GBC where bloodborne pathogen exposure could occur.

Methods of Compliance

Students must become familiar and comply with the GBC HSHS Pathogen Exposure and Prevention Policy. Students must also become familiar and comply with the exposure plan (needle stick policy) of the clinical sites to which they are assigned.

Prevention of Bloodborne Pathogen Exposure

- Students are required to participate annually in Bloodborne Pathogen Exposure Prevention and Control Class. The student must also have satisfactorily demonstrated skill in using protective equipment and procedures before receiving a patient care assignment.
- Students must have documented immunity to hepatitis B, Measles, rubella, varicella, and diphtheria prior to going to any clinical site.
- The decision to exempt a student from clinical experience will be made on a case-by-case basis by the faculty responsible for the clinical course.
- All students must have medical insurance upon entering and throughout their enrollment in the HSHS programs. It is the student’s responsibility to obtain and pay for this insurance, as well as to understand the benefits and limitations of any insurance they maintain or is maintained on their behalf.

Occurrence of Exposure or Incident

Student

A student in the GBC HSHS programs who has exposure to blood, body fluid or other potentially infectious material to non-intact skin or mucous membranes from a needle stick, sharps injury or other cause must immediately:
• Wash needle stick and cuts with soap and water
• Flush splashes to the nose, mouth or skin with copious amounts of water
• Irrigate eyes with clean water, saline or sterile irrigants
• Remove soiled personal protective equipment and/or clothing as soon as possible.

After washing, flushing and/or irrigating the exposed area, the student must immediately:
• Notify the appropriate registered nurse at the clinical facility AND
• Notify clinical faculty who will then implement the process below. (If there is a witness to the incident, have them do this immediately if possible.)

Faculty

The clinical faculty will be responsible for coordinating the following procedures:
• Identify the source of the exposure.
• Obtain consent from source client, if not in chart.
• Determine who will be the health care provider for the student for counseling and treatment if needed.
• Send the student to their health care provider to obtain medical evaluation and post-exposure follow-up within 1 to 2 hours of the exposure.
• Student should bring a copy of the documents with as much completed information as possible related to the incident to their health care provider. They should also have the contact number for source information (such as employee health office) so that the health care provider may obtain results.
• Initiate the documentation needed for GBC and the clinical agency.

NOTE:
The National HIV/AIDS Center provides a PEPline, a Clinicians’ Post-Exposure Prophylaxis Hotline which offers up-to the minute advice on managing occupational exposures (needlesticks, etc.) to HIV, hepatitis and other blood borne pathogens. It is offered 24 hours a day, 7 days a week at 1-888-488-4911.

Documentation and Follow-up:

Student and Faculty

• Notify the Dean of Health Science and Human Services of the incident as quickly as possible
• Complete an incident report at the clinical facility, if required; and be aware of and follow any reporting and follow-up requirements of the clinical facility.
• Complete a GBC HSHS Exposure to Bloodborne Pathogens form.
• It is the student’s responsibility to make his/her healthcare provider aware of the result of any blood panel drawn as a result of an exposure.

The National HIV/AIDS Center provides a PEPline, a Clinicians’ Post-Exposure Prophylaxis Hotline which offers up-to the minute advice on managing occupational exposures (needlesticks, etc.) to HIV, hepatitis and other blood borne pathogens. It is offered 24 hours a day, 7 days a week at 1-888-488-4911.
Department of Health Science and Human Services

HEALTH SCIENCE ADMISSIONS AND PROGRESSION COMMITTEE

Membership:

1. Six (6) Faculty:
   a. One (1) teaching in the AAS Nursing Program, one (1) teaching in the RN-BSN Program, one (1) teaching in the AAS Radiology Technology Program, one (1) teaching in the EMS/Paramedic Program, one (1) teaching in the Human Services Program, and one (1) at-large Health Science and Human Services Department faculty member.
   b. At least one of the faculty must be tenured.
   c. Faculty members of the committee will be elected spring semester at the last departmental faculty meeting.
   d. In the event that a committee member cannot attend an Admission and Progression meeting, that member shall find a representative from within their program, if possible, to serve as proxy for that meeting. If there are no student appearances expected for the meeting, written proxy of vote(s) on the issues addressed on the agenda for that meeting is also an acceptable substitute.

2. The Dean will serve as an ex-officio member of the committee with voting privileges.

3. The Administrative Assistant for the department will service as an ex-officio member of the committee without voting privileges and will coordinate staff support for the committee.

Term of Service:

1. Faculty serve a two-year term and may serve additional terms.

Functions:

1. Make recommendations to Department of Health Science and Human Services faculty regarding policies and procedures for student admission to department health science degree programs.

2. Review applications and select students for admission to departmental health science degree programs, including review of appeals for admission.

3. Review and make decisions related to progression or reinstatement of individual students in health science degree programs.

4. Assure the collection and dissemination of formative and summative data for evaluation of admission and progression; use relevant data admission and progression decisions.
Writing Expectations for Great Basin
Health Science and Human Services Students

Purpose:

- Articulate writing competencies required of HSHS students.

Expectations for Written Assignments:
All written assignments are to be in APA 6th Edition format and submitted by Word document on the due date, unless otherwise specified by faculty. Writing competencies to be demonstrated by students are as follows:

- Use terminology, sentence construction, citation style, formatting, grammar, and punctuation consistent with scholarly writing.

- Write content that is purposeful, logically sequenced, organized, and, derived from evidence-based materials such as peer reviewed journals, course textbooks, best practice guidelines, outcomes management reports or other scientifically based literature.

- Reference scholarly content consistent with APA 6th Edition; refrain from using web sites intended for layman, medical consumers, marketing sites, or references less rigorously reviewed for scientific merit, unless appropriate for specific purposes such as patient education. Deviation from required APA formatting will be indicated by faculty when warranted.

- Document reflective thought, thinking, reasoning and judgment when responding to specific questions and assignments such as patient education, journaling, and peer evaluations.

- Pursue academic writing in a manner consistent with the standards of academic integrity adopted by Great Basin College. This includes scrutinizing written materials to assure that authors, sources and websites are properly cited.

- Acknowledge late assignments will not be accepted or will be penalized unless prior arrangements are made with faculty.

- If the writing requirements are not met for an assignment then points may be deducted, the assignment may need to be rewritten, or the assignment may receive a failing grade.
NATIONAL STUDENT NURSES’ ASSOCIATION

Nursing students are encouraged to belong to the National Student Nurses Association. This program offers the student many opportunities. Dues for the 2009-2010 year are: New membership $20, Renewal $30 and two-year membership $50. Review the Bill of Rights and Responsibilities for Students of Nursing (Appendix F-4).

What is the National Student Nurses' Association (NSNA)? The NSNA is a pre-professional association for nursing students. Involvement in NSNA prepares students for involvement in professional associations upon graduation.

The mission of the NSNA is to:
- Organize, represent and mentor students preparing for initial licensure as registered nurses, as well as those nurses enrolled in baccalaureate completion programs
- Promote development of skills needed to be responsible and accountable members of the nursing profession
- Advocate high quality health care
- Advocate for and contribute to advances in nursing education
- Develop nursing students who are prepared to lead the profession in the future

Why People Join Professional Societies
There are several reasons why people join associations. The American Society of Association Executives conducted a survey of professional membership associations to determine why members join. The top answers, in order of preference, were:
- The ability to make professional contacts and the opportunity to network with people who can impact your profession and give you access to new opportunities, friends, jobs and information.
- Being part of the profession and peer recognition.
- Specific member benefits.

Why Students Join NSNA
NSNA conducted a comprehensive survey of its membership to find out why students joined NSNA, what programs members liked best, and what new services and benefits members would like to receive. The following reasons for belonging to NSNA were ranked high by respondents:
- Receiving Imprint magazine.
- Availability of low-cost malpractice insurance, group health insurance and student education loan program.
- Participation in Breakthrough to Nursing, community health, legislative and recruitment projects
- Discounts on nursing-related items, state board review courses, publications, textbooks and journals
- Reduced registration fees for the Annual Convention and MidYear Conference
- NSNA Foundation Scholarship Program that offers scholarships annually.

NSNA members were asked to indicate the value of membership. NSNA:
- Gives nursing students the opportunity to meet and exchange ideas with other nursing students from around the country.
- Increases nursing students’ awareness of issues confronting the nursing profession today.
- Provides information about changing political and career trends in nursing.
- Prepares students for entry into the profession by providing access to state board reviews, study tools while still in school, involvement in projects which enhance knowledge gained in class (i.e. Community Health).
- Promotes student interaction with professional and student leaders from across the country at conventions and conferences.
GBC STANDARDS OF CONDUCT
FOR HEALTH SCIENCE AND HUMAN SERVICES STUDENTS

All HSHS students are held to the GBC and NSHE Student Conduct Policies as published in the GBC Catalogue.

It is expected that HSHS students will come to class, practice lab, clinical assignment and/or testing sessions in a condition conducive to competent and safe performance. Faculty are held legally and professionally accountable for taking prompt, appropriate, and decisive action if a student is unable to perform the essential functional abilities required for satisfactory completion of all aspects of the program.

Examples of physical, cognitive, behavioral problems and lack of competency which may be questioned include, but are not limited, to:

- Frequent absenteeism and/or tardiness (no documented medical reason for absence).
- Drowsiness or sleepiness.
- Smell of alcohol on the breath/body.
- Increased inability to meet schedules and deadlines.
- Slurred/incoherent speech or speech pattern different from normal speech.
- Unusually aggressive behavior.
- Unexplained change in mood.
- Change in appearance.
- Lack of manual dexterity.
- Lack of or decreased coordination in body movement.
- Inappropriate responses to stimuli.
- Unexplained work-related accident or injury.
- Inattentiveness to work.

Students who arrive to class, practice lab, clinical assignment and/or testing sessions who are considered by their instructor to be unable to safely or effectively carry out required program related activities may be subject to:

1. having their work performance and behavior witnessed and documented
2. questioning in private as to the nature of the problem
3. meeting with the Dean
4. referral to the appropriate GBC administrative staff member
5. receiving a failing grade and dismissal from the program.
6. possible ineligible for readmission.
The ANA House of Delegates approved these nine provisions of the new Code of Ethics for Nurses at its June 30, 2001, meeting in Washington, DC. In July 2001 the Congress of nursing Practice and Economics voted to accept the new language of the interpretive statements, resulting in a fully approved revised Code of Ethics for Nurses with Interpretive Statements, as follows.

1. The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.

2. The nurse's primary commitment is to the patient, whether an individual, family, group, or community.

3. The nurse promotes, advocates for, and strives to protect the health, safety, and rights of the patient.

4. The nurse is responsible and accountable for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse's obligation to provide optimum patient care.

5. The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.

6. The nurse participates in establishing, maintaining, and improving health care environments and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action.

7. The nurse participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.

8. The nurse collaborates with other health professionals and the public in promoting community, national, and international efforts to meet health needs.

9. The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy.
AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS  
CODE OF ETHICS

1. The Radiologic Technologist conducts himself/herself in a professional manner, responds to patient needs, and supports colleagues and associates in providing quality patient care.

2. The Radiologic Technologist acts to advance the principle objective of the profession to provide services to humanity with full respect for the dignity of humankind.

3. The Radiologic Technologist delivers patient care and service unrestricted by concerns of personal attributes or the nature of the disease or illness, and without discrimination, regardless of sex, race, creed, religion, or socioeconomic status.

4. The Radiologic Technologist practices technology founded upon theoretical knowledge and concepts, utilizes equipment and accessories consistent with the purpose for which it has been designed, and employs procedures and techniques appropriately.

5. The Radiologic Technologist assesses situations, exercises care, discretion and judgment, assumes responsibility for professional decisions, and acts in the best interest of the patient.

6. The Radiologic Technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment management of the patient, and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.

7. The Radiologic Technologist utilizes equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in minimizing the radiation exposure to the patient, self and other members of the health care team.

8. The Radiologic Technologist practices ethical conduct appropriate to the profession and protects the patient’s right to quality radiologic technology care.

9. The Radiologic Technologist respects confidences entrusted in the course of professional practice, respects the patient’s right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individuals or the community.

10. The Radiologic Technologist continually strives to improve knowledge and skills by participating in educational and professional activities, sharing knowledge with colleagues and investigating new and innovative aspects of professional practice. One means available to improve knowledge and skills is through professional continuing education.

11. Any student acting individually or in concert with others, who violates any part of the code of ethics, shall be subject to disciplinary procedures, including possible termination from the program.
Code of Ethics for EMS Practitioners

Professional status as an Emergency Medical Services (EMS) Practitioner is maintained and enriched by the willingness of the individual practitioner to accept and fulfill obligations to society, other medical professionals, and the EMS profession. As an EMS practitioner, I solemnly pledge myself to the following code of professional ethics:

to conserve life, alleviate suffering, promote health, do no harm, and encourage the quality and equal availability of emergency medical care.

to provide services based on human need, with compassion and respect for human dignity, unrestricted by consideration of nationality, race, creed, color, or status; to not judge the merits of the patient’s request for service, nor allow the patient’s socioeconomic status to influence our demeanor or the care that we provide.

to not use professional knowledge and skills in any enterprise detrimental to the public well being.

to respect and hold in confidence all information of a confidential nature obtained in the course of professional service unless required by law to divulge such information.

to use social media in a responsible and professional manner that does not discredit, dishonor, or embarrass an EMS organization, co-workers, other health care practitioners, patients, individuals or the community at large.

as a citizen, to understand and uphold the law and perform the duties of citizenship; as a professional, to work with concerned citizens and other health care professionals in promoting a high standard of emergency medical care to all people.

to maintain professional competence, striving always for clinical excellence in the delivery of patient care.

to assume responsibility in upholding standards of professional practice and education.

to assume responsibility for individual professional actions and judgment, both in dependent and independent emergency functions, and to know and uphold the laws which affect the practice of EMS.

to be aware of and participate in matters of legislation and regulation affecting EMS.

to work cooperatively with EMS associates and other allied healthcare professionals in the best interest of our patients.

to refuse participation in unethical procedures, and assume the responsibility to expose incompetence or unethical conduct of others to the appropriate authority in a proper and professional manner.

**CONDUCT OF NURSING**

*(Adopted from the Nevada State Board of Nursing 2002, Nevada Administrative Code)*

Definition: Nursing behavior (acts, knowledge, and practices) which fails to conform to accepted standards of the nursing profession and which could jeopardize the health and welfare of people constitutes unprofessional conduct and includes but is not limited to the following:

1. Discriminating on the basis of race, religious creed, color, national origin, age, disability, ancestry or sex in the rendering of nursing services.
2. Performing acts beyond the scope of the practice.
3. Assuming duties and responsibilities without adequate training.
4. Assigning or delegating functions, tasks or responsibilities to unqualified persons.
5. Failing to safeguard a patient from the incompetent, abusive or illegal practice of any person.
6. Practicing nursing while, with or without good cause, his physical, mental or emotional condition impairs his ability to act in a manner consistent with established or customary nursing standards, or both.
7. Practicing nursing, if any amount of alcohol or a controlled substance or dangerous drug that is not legally prescribed is present in the body of the nurse as determined by a test of the blood, saliva, breath or urine of the nurse while on duty.
8. Failing to respect and maintain a patient's right to privacy.
9. Violating a patient's confidentiality.
10. Failing to document properly the administration of a controlled substance.
11. Soliciting services or soliciting or borrowing money, materials or other property, from a:
   (a) Patient
   (b) Family member of a patient;
   (c) Person with significant personal ties to a patient
12. Diverting supplies, equipment or drugs for personal or unauthorized use.
13. Inaccurate recording, falsifying or otherwise altering or destroying records.
14. Leaving an assignment without properly notifying the appropriate personnel or abandoning a patient in need of care.
15. Failing to collaborate with other members of a health care team as necessary to meet the health needs of a patient.
16. Failing to observe the conditions, signs and symptoms of a patient, to record the information or to report significant changes to the appropriate persons.
17. Failing to perform nursing functions in a manner consistent with established or customary standards.
18. Causing a patient physical, mental or emotional harm by taking direct or indirect actions or failing to take appropriate actions.
19. Engaging in sexual contact with a patient or client.

In addition to the Conduct of Nursing requirements of the Nevada Administrative Code, dismissal can result from misconduct in either or both of the following areas:

- **Academic misconduct** ➔ cheating, fabrication, plagiarism, interference with the work or progress of another student, violation of course rules, and academic dishonesty.
- **Personal misconduct** ➔ false accusation against other students or faculty, release of computer passwords, physical or verbal abuse, damage to university property, failure to comply with university regulations, possession or distribution of illegal drugs, and possession of weapons against university regulation.
BILL OF RIGHTS AND RESPONSIBILITIES
FOR STUDENTS OF NURSING (NSNA)

An NSNA Student Bill of Rights and Responsibilities was initially adopted in 1975. The following updated version was adopted by the NSNA House of Delegates in San Antonio, Texas (1991). Item #4 was revised by the NSNA House of Delegates in Baltimore, Maryland (2006).

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

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

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

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

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

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

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

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

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

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

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

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

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

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

15. As citizens and members of an academic community, students are subject to the obligations which accrue to them by virtue of this membership and should enjoy the same freedoms of citizenship.
16. Students have the right to belong or refuse to belong to any organization of their choice.
17. Students have the right to personal privacy in their living space to the extent that the welfare and property of others are respected.
18. Adequate safety precautions should be provided by nursing programs, for example, adequate street lighting, locks, and other safety measures deemed necessary by the environment.
19. Dress code, if present in school, should be established with student input in conjunction with the school director and faculty, so the highest professional standards are maintained, but also taking into consideration points of comfort and practicality for the student.
20. Grading systems should be carefully reviewed periodically with students and faculty for clarification and better student-faculty understanding.
21. Students should have a clear mechanism for input into the evaluation of nursing faculty.
NSNA CODE OF ACADEMIC AND CLINICAL CONDUCT

Preamble

Students of nursing have a responsibility to society in learning the academic theory and clinical skills needed to provide nursing care. The clinical setting presents unique challenges and responsibilities while caring for human beings in a variety of health care environments. The Code of Academic and Clinical Conduct is based on an understanding that to practice nursing as a student is an agreement to uphold the trust with which society has placed in us. The statements of the Code provide guidance for the nursing student in the personal development of an ethical foundation and need not be limited strictly to the academic or clinical environment but can assist in the holistic development of the person.

A Code for Nursing Students

As students are involved in the clinical and academic environments we believe that ethical principles are a necessary guide to professional development. Therefore within these environments we:

1. Advocate for the rights of all clients.
3. Take appropriate action to ensure the safety of clients, self, and others.
4. Provide care for the client in a timely, compassionate and professional manner.
5. Communicate client care in a truthful, timely and accurate manner.
6. Actively promote the highest level of moral and ethical principles and accept responsibility for our actions.
7. Promote excellence in nursing by encouraging lifelong learning and professional development.
8. Treat others with respect and promote an environment that respects human rights, values and choice of cultural and spiritual beliefs.
9. Collaborate in every reasonable manner with the academic faculty and clinical staff to ensure the highest quality of client care.
10. Use every opportunity to improve faculty and clinical staff understanding of the learning needs of nursing students.
11. Encourage faculty, clinical staff, and peers to mentor nursing students.
12. Refrain from performing any technique or procedure for which the student has not been adequately trained.
13. Refrain from any deliberate action or omission of care in the academic or clinical setting that creates unnecessary risk of injury to the client, self, or others.
14. Assist the staff nurse or preceptor in ensuring that there is full disclosure and the proper authorizations are obtained from clients regarding any form of treatment or research.
15. Abstain from the use of alcoholic beverages or any substances in the academic and clinical setting that impair judgment.
16. Strive to achieve and maintain an optimal level of personal health.
17. Support access to treatment and rehabilitation for students who are experiencing impairments related to substance abuse and mental or physical health issues.
18. Uphold school policies and regulations related to academic and clinical performance, reserving the right to challenge and critique rules and regulations as per school grievance policy.

Adopted by the NSNA House of Delegates, Nashville, TN, on April 6, 2001
GREAT BASIN COLLEGE
HEALTH SCIENCE AND HUMAN SERVICES PROGRAMS
INJURY REPORT

Name of Person(s) Injured: ___________________________________________________

Person Completing this Form (if different from above): ___________________________

Date & Time of Incident/Accident: _____________________________________________

Exact location of the Incident/Accident: ________________________________________

Description of the injury: ____________________________________________________

__________________________________________________________________________

Were there witnesses to this accident? If yes, list below:

Describe the circumstances in which the incident/accident occurred:

Describe follow-up care:

Was person injured referred for follow-up care? If yes, which facility? _____________

__________________________________________________________________________

Any further comments:

________________________________  _________________________________
Signature of Injured/Person Completing Form  Signature of Dean

NOTE: Emergency first aid treatment may be given by the clinical faculty. However, neither the affiliated clinical agencies nor the college assumes the cost of the treatment and students should report to their own physician for care as needed.
EXPOSURE TO BLOODBORNE PATHOGEN FORM

Complete the following form and return it to the Dean of Health Science and Human Services.

Student Name: ________________________________ Faculty Name: __________________________

Exposed Individual’s Name: ___________________________ Date of Birth: ____________________

Address: __________________________________________________________________________

Telephone number   Home: _____________________________ Cell: __________________________

Source of exposure (state name of person if applicable): ____________________________________

Date of occurrence: _________________ Time occurred: ___________ Time reported: ____________

Name and title of person initially notified: _________________________________________________

Location of occurrence: ______________________________________________________________

Check the following that apply to the occurrence:

___ percutaneous exposure (break in the skin that causes bleeding)
___ Mucous membrane contact (eyes, mouth, nose)
___ chapped skin, abraded skin, dermatitis
___ exposure to chemical
___ other, explain: ___________________________________________________________________

Were bloodborne pathogens (blood, saliva, body fluids, contaminated solutions, etc…) involved?

Yes    No   (circle 1)

Explain: ___________________________________________________________________________

Describe the incident precisely: __________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________
What did you do after being exposed?

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

How do you feel this incident can be prevented in the future?

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

Signature of person making report: ___________________________ Date: __________________

Signature of faculty if applicable: ___________________________ Date: __________________

Dean of Health Science & Human Services: __________________ Date: _________________
**Student Test Item Query Form**

<table>
<thead>
<tr>
<th>Student Name:</th>
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<tr>
<th>Class:</th>
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<tr>
<th>I am protesting the test item:</th>
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<tr>
<th>Rationale: (Explain why you believe the test item is incorrect)</th>
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</table>

<table>
<thead>
<tr>
<th>Reference Source: (Cite three published resources, including the page number, to validate your protest.)</th>
</tr>
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<tbody>
<tr>
<td>1.</td>
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<td>2.</td>
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<tr>
<td>3.</td>
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</table>
Great Basin College
Department of Health Science and Human Services

CONFIDENTIAL NOTIFICATION OF UNSATISFACTORY STUDENT PROGRESS

Student Name: __________________________ Date: __________________________ Advisor: __________________________
Course: __________________________ Grade: __________________________ Instructor(s): __________________________

Areas Needing Improvement (documentation required):

Instructor Recommendations/Student Remedial Plan:

Student Response: (Optional):

Follow-up appointment with Instructor (date/time): Date/Time
Follow-up appointment with Advisor (date/time): Date/Time

Student Signature: __________________________________ Date: __________________________
(Signature signifies acknowledgement of this notification only)

If a student believes that he/she is being treated unfairly or that an injustice of substantial proportion has occurred, the student should refer to the student handbook for information regarding grievance of this notice.

Instructor Signature: __________________________________ Date: __________________________

Instructions:
1. Instructor prints two (2) copies.
2. Instructor and student sign both copies. Instructor gives one copy to the student and one copy to the Administrative Assistant for the student’s records.
3. The Administrative Assistant will notify the student’s advisor and the Admission/Progression Committee Chair.
4. If the student is not in Elko, the Faculty or, if requested, the Administrative Assistant will mail the form to the student for their signature or fax it to their location for their signature.
5. THIS INFORMATION IS HIGHLY CONFIDENTIAL. In the event this form must be emailed, the email subject line must contain the wording CONFIDENTIAL DOCUMENT. The form must be attached to the email and the email must contain the following confidentiality notice: Confidentiality Notice: This message and any attachments are for the sole use of the intended recipient and may contain confidential and privileged information that is exempt from public disclosure. Any unauthorized review, use, disclosure or distribution is prohibited. If you have received this message in error please contact the sender immediately (by phone or reply electronic mail) and then destroy all copies of the original message.
**GREAT BASIN COLLEGE**  
**RADIOLOGY STUDENT CLINICAL EVALUATION FORM**

The supervising technologist or clinical instructor is to evaluate the student’s clinical performance by completing this form. It will be used to determine the student’s clinical grade.

Student Name_______________________ Date_____________ Clinical Site__________________

<table>
<thead>
<tr>
<th>Skills</th>
<th>3</th>
<th>2</th>
<th>1</th>
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</thead>
<tbody>
<tr>
<td>1. Properly identifies patients, exams and evaluates orders</td>
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<tr>
<td>2. Obtains patient history</td>
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<tr>
<td>3. Demonstrates knowledge of exam</td>
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<tr>
<td>4. Demonstrates good patient relationships and education</td>
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<tr>
<td>5. Completes proper documentation for medical records</td>
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<tr>
<td>6. Adheres to college and facility’s repeat policy (should be supervised on all repeats)</td>
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<tr>
<td>7. Applies standard precaution measures consistently</td>
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</table>

**Critical Thinking Skills**

| 1. Demonstrates proper positioning techniques |  |  |  |
| 2. Selects appropriate technical factors |  |  |  |
| 3. Practices radiation protection principles |  |  |  |
| 4. Modifies exams according to patient condition |  |  |  |

**Personal Qualities**

| 1. Demonstrates initiative and effort |  |  |  |
| 2. Follows instructions and is always prepared to work |  |  |  |
| 3. Uses time efficiently and responsibly |  |  |  |
| 4. Appropriately interacts with staff and patients |  |  |  |
| 5. Punctual and dependable |  |  |  |
| 6. Accepts and learns from constructive criticism |  |  |  |
| 7. Maintains a clean and professional appearance |  |  |  |
| 8. Communicates effectively |  |  |  |
| 9. Sensitive to patient needs and modesty |  |  |  |
| 10. Conducts self in a professional manner |  |  |  |

**Total (63 pts. Possible)**

Technologist Signature___________________________________     Date ______________

Technologist Comments:________________________________________
________________________________________________________________________
________________________________________________________________________

Area of Excellence: ___________________________________________
________________________________________________________________________
Areas of Improvement:
GREAT BASIN COLLEGE—RADIOLOGY STUDENT COMPETENCY FORM

Student _____________________ Date ___________________ Pt. MR# _______________________
Evaluator ________________________ (Must be registered tech) Exam ______________________


Passing Criteria: If all starred items are marked ‘yes’ (or N/A) the competency is passed. If repeat is necessary due to student error, competency is failed.

The following is only to be completed by Technologist:
Were you asked to evaluate this exam for competency prior to the beginning of the exam?  
( )Yes  ( )No

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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</table>

Patient/ Room Prep
1. *Two identifiers were used in identifying the patient
2. *Patient was asked for possibility of pregnancy
3. *Patient history was obtained
4. Properly identified self to patient
5. Patient was properly dressed for the exam
6. Room was clean
7. Appropriate equipment was prepared
8. Clear directions were given to the patient

ALARA
1. *Shielding was used
2. *ALARA technique was selected
3. Collimation was used

Technical Factors
1. * Proper marker placement
2. Proper technique selected (Sensitivity or exposure index is within acceptable parameters)

Positioning
1. *Proper SID and Central Ray position used
2. *All required images obtained
3. *Adjustments were made for patient condition
4. *All required anatomy was imaged

Patient Care
1. * Student interaction with patient and team members was courteous and professional.
2. *Post procedure instructions/expectations were explained
3. Proper breathing instructions were given
4. Patient was observed for physical changes

Image Evaluation
1. *Diagnostic quality images were produced
2. Were any repeat films necessary? (If due to student error comp is failed, if due to patient, it may be passed)
   Please specify reason for repeat here:
3. *Student can identify appropriate anatomy and quality points on image
4. Image is free of artifacts

Technologist’s Signature _________________________  I was present for the entire exam (yes/no)
Technologist Remarks

For Student Use

Patient History

( ) AEC ( ) Manual Technique Technical Factors Used _____mAs _____kVP DI or SI Value____

Remarks
GBC RADIOLOGY STUDENT ORIENTATION

It is the student’s responsibility to use this tool when starting a new clinical rotation. It is to be completed by the second week of the clinical rotation and kept in the student clinical handbook.

<table>
<thead>
<tr>
<th>EVALUATION</th>
<th>DATE</th>
<th>STUDENT INITIALS</th>
<th>EDUCATOR INITIALS</th>
<th>COMMENTS</th>
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<tbody>
<tr>
<td>Equipment:</td>
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<tr>
<td>a. Telephone</td>
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<td>b. Portable Machines</td>
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<td>c. C-Arms</td>
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<td>d. Imaging Receptors</td>
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<tr>
<td>e. Darkroom (if applicable)</td>
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<tr>
<td>f. Wheelchairs/Stretchers</td>
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<td>g. Technique Charts</td>
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<td>h. Other:</td>
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| Scheduling / Procedures: | | | | |
| a. Knows where protocol book is for procedures and scheduling | | | | |
| b. Knows where to find preps | | | | |
| c. Knows where to locate orders and what has to be on a patient’s order to be valid. | | | | |
| d. Patient: Confidentiality / HIPAA Guidelines | | | | |
| e. Obtaining previous exam results, films, etc. | | | | |

| Introduction of Personnel: | | | | |
| a. Dept. Director | | | | |
| b. Radiologist | | | | |
| c. Front office staff | | | | |
| d. Technologists | | | | |
| e. Other: | | | | |

| Helping Families and Public: | | | | |
| a. Nearest public restroom location | | | | |
| b. Nearest public telephone | | | | |
| c. Nearest public waiting area | | | | |
| d. Directions to public elevators | | | | |
| e. Directions to the main entrance | | | | |
| f. Directions to the cafeteria | | | | |
| g. Other: | | | | |

<p>| Department: | | | | |
| a. Nearest fire alarm and extinguisher | | | | |
| b. Describe emergency evacuation route | | | | |
| c. Location of the oxygen and medical gas shut-off valve | | | | |
| d. Shortest route to stairwell | | | | |
| e. How to call a code or procedure for medical | | | | |</p>
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<tr>
<th>Emergencies</th>
<th>Facility Specific Areas:</th>
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<tbody>
<tr>
<td>f. Policy and procedure location</td>
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<tr>
<td>g. MQSA information location</td>
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<tr>
<td>h. Substance abuse information</td>
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</table>
# GBC Radiology Student Log of Clinical Exams

<table>
<thead>
<tr>
<th>Date of Exam</th>
<th>Accession Number</th>
<th>Description of Exam</th>
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<tr>
<td>Date</td>
<td>Time In / Out</td>
<td>Technologist’s Signature</td>
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</table>
GREAT BASIN COLLEGE
RADIOLOGY STUDENT VOLUNTARY DECLARATION FORM

I, _____________________________________, understand there may be times throughout the Radiology Technology Program in which I may be presented with the opportunity to work more than 10 (10) clinical hours in any one day; and I declare that I voluntarily will choose to work more than ten (10) hours a day if given the opportunity.

I also understand that there may be occurrences during the semester where didactic and clinical hours combined may exceed forty (40) hours per week and I gladly volunteer to participate in all of those hours if given the opportunity.

_________________________________________   ___________________________
Student Signature      Date
I, _________________________________, understand that graduation from the GBC Radiology Technology program does not guarantee certification as a Radiology Technologist. Certification is granted by the American Registry for Radiology Technologists and they have the final determination of eligibility or ineligibility to take the ARRT examination for radiographers.

I also understand that prior felony or misdemeanor conviction(s) may affect my eligibility status and that it is my responsibility to request and submit a pre-application screening by the ARRT regarding prior felony or misdemeanor conviction(s).

_________________________________________   ___________________________
Student Signature      Date
GREAT BASIN COLLEGE
RADIOLOGY TECHNOLOGY PROGRAM
RELEASE FORM

I, ______________________________________, give the R.T. program permission to do the following:

(Please print name)

• Post the radiation exposure record which will include my name and ID number in the clinical online course.

• Release my training information (OSHA, HIPPAA, Blood Borne Pathogens), immunization information, CPR, and insurance verification to the clinical education facilities as mandated by the facility contract.

• Release my name and social security number to the clinical education site when needed for clinical site security access.

• Post clinical schedules in the clinical site which will include my name, initials, and clinical hour.

• Include my name with other students on clinical education site schedules which will be released to other RT program students, RT program clinical sites, and RT program faculty. Include my name and contact information for class information contacts.

_________________________________________   ___________________________
Student Signature      Date

_________________________________________   ___________________________
Program Faculty Signature     Date
### GREAT BASIN COLLEGE
#### RADIATION MONITORING INFORMATION REQUEST

<p>| | | | | |</p>
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<tbody>
<tr>
<td>1. (Last Name)</td>
<td>(First Name)</td>
<td>(Middle)</td>
<td>(Maiden)</td>
<td>2. Birth date</td>
</tr>
</tbody>
</table>

4. Have you previously had a film badge or been on a radiation monitoring program at the University of Nevada System / GBC?

5. Have you worked with or have you received occupational exposure to non-ionizing radiation?

6. Have you worked with radioactive materials or with radiation producing equipment or in areas requiring the wearing of a radiation measuring device at locations other than at the University of Nevada System / GBC?

7. If you checked YES above list the organization(s) where radioactive work was done. Please print and provide COMPLETE mailing address including zip code. Do not abbreviate.

<table>
<thead>
<tr>
<th>ORGANIZATION</th>
<th>MAILING ADDRESS / ZIP CODE</th>
<th>Period of Employment From</th>
<th>To</th>
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</table>

I certify that the above information is correct and complete to the best of my knowledge. I HEREBY AUTHORIZE, RELEASE MY FORMER EMPLOYERS OF MY OCCUPATIONAL RADIATION EXPOSURE HISTORY (FROM INTERNAL AND/OR EXTERNAL SOURCES) TO GREAT BASIN COLLEGE.

Signature _________________________________ Date __________________________

The above information is used to develop a data of your exposure history. The information is used for your protection, is confidential and is released to others under controlled circumstances. Personal information (name, age, Social Security Number, etc.) will be used to develop an accurate and unique identification.
Complete this form only if you have had previous occupational exposure to radiation.

Date: ________________________________

To Whom It May Concern:

You are hereby authorized to release my radiation exposure records to the Nevada System of Higher Education, Great Basin College, Radiology Technology Program, 1500 College Parkway, Elko, NV 89801.

Please include any records of radiation exposure you may have accumulated concerning my previous employment.

Please supply the radiation exposure records for the individual indicated below. He/She has reported working at your installation for the period __________________ to __________________.

Thank you for your cooperation.

Sincerely,

____________________________________________  ___________________________
Signature       Date

Name: ________________________________________________________________
Social Security Number: _________________________ Birthdate: _________________________
Date(s) of employment at your institution:       From ________________    To _________________
Department in which employed: ________________________________
GREAT BASIN COLLEGE
Radiology Clinical Documentation Checklist

All of the below must be completed prior to start of clinical rotation.

Student Name: _______________________________________________

Date: ______________________________________________________

FILES:

1. □ CPR: Copy of card. Expiration Date: ________________________
2. □ Background and Drug Screening Reports completed. Do not hand in a copy to the college. Please Note: Banner will have a separate background and drug screening.
3. □ Immunization Record: Copies of TB, Hepatitis B, MMR, Tetanus, Chicken Pox
4. □ Health Insurance: Copy of card.
5. □ Health Physical Form
6. □ Ordered Uniforms: Put down date ordered.
7. □ Malpractice Insurance Proof. This can be purchased through ASRT online.
8. □ Sexual Harassment Education
9. □ Hospital Orientation
10. □ Banner Churchill County Hospital (This is only needed if you are schedule for a Fallon rotation)
11. □ Small passport photo
12. Emergency contact information
   Name: ______________________________________________________
   Relationship: _______________________________________________
   Contact Phone Number: _______________________________________
   Address: ____________________________________________________

This form with accompanied documentation must be submitted to the Program Director by May 1 prior to clinical assignment.
GREAT BASIN COLLEGE
RADIOLOGY TECHNOLOGY PROGRAM
STUDENT HEALTH FORM

To Be Completed by Student:

NAME ____________________________  DOB __________________
ADDRESS __________________________________________________________________________
CITY ___________________  STATE _________  ZIP __________

If you answer ‘yes’ to any of the following, please give an explanation.

<table>
<thead>
<tr>
<th>DO YOU NOW OR HAVE YOU EVER HAD:</th>
<th>NO</th>
<th>YES</th>
<th>EXPLANATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcoholism or drug dependency</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Allergies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Back disorder</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chronic headaches or migraines</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Communicable disease</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diabetes mellitus</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heart disease</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Hepatitis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hernia</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hypertension or hypotension</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychiatric illness or mental health issues</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seizure disorder</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skin disease</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Smoking habit</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tuberculosis or positive skin test</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I consider my general health status to be:  ☐ Excellent  ☐ Good  ☐ Fair  ☐ Poor

STUDENT'S SIGNATURE: ___________________________________________
**To be completed by Physician:**

If you answer ‘yes’ to any of the following, please give an explanation.

<table>
<thead>
<tr>
<th>Does this patient now have or ever had:</th>
<th>NO</th>
<th>YES</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcoholism or drug dependency</td>
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<tr>
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</tr>
<tr>
<td>Tuberculosis or positive skin test</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**The following requirements must be validated:**

<table>
<thead>
<tr>
<th>Is able to:</th>
<th>NO</th>
<th>YES</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assess clients through auscultation, percussion, palpation, and other diagnostic maneuvers</td>
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<td></td>
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</tr>
<tr>
<td>Manipulate equipment necessary to assist the individual, family and/or group to desired outcomes.</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Lift and move individuals and/or groups of individuals to provide safe care and emergency treatment.</td>
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<tr>
<td>Perform cardiopulmonary resuscitation</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Perform independently of others</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Possess cognitive abilities to measure, calculate dosages, reason, analyze and synthesize.</td>
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</tbody>
</table>

Comments: ______________________________________________________

PHYSICIAN’S SIGNATURE: ______________________ DATE________________
RADIATION ADVISORY STATEMENT

The GBC Radiology Technology Program would like to inform female students using onizing radiation of the radiation hazard to the fetus in cases of pregnancy. The following excerpt from the National Council on Radiation Protection and Measurements (NCRP) report #105, Radiation Protection for Medical and Allied Health Personnel, outlines the hazard more completely:

### 3.6 Embryonic and Fetal Effects

The embryo or fetus is comprised of large numbers of rapidly dividing and radiosensitive cells. The amount and type of damage which may be induced are functions of the stage of development at which the fetus is irradiated and the absorbed dose.

<table>
<thead>
<tr>
<th>Radiation received during the pre-implantation period can result in spontaneous abortion or resorption of the conceptus. Radiation injury during the period of organogenesis (2-8 weeks) can result in developmental abnormalities. The type of abnormality will depend on the organ system under development when the radiation is delivered. Radiation to the fetus between 8 and 15 weeks after conception increases the risk of mental retardation (Otake and Schull, 1984) and has more general adverse impact on intelligence and other neurological functions. The risk decreases during the subsequent period of fetal growth and development and, during the third trimester, is no greater than that of adults.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special limits have been established for occupationally exposed pregnant women to ensure that the probability of birth defects is negligible.</td>
</tr>
</tbody>
</table>

The NCRP recommends the dose equivalent to the fetus not exceed 0.5 mSv (0.05 rem) in a month and the total dose equivalent not exceed 5 mSv (0.5 rem). These recommendations are easily achievable if the pregnant individual practices the —Cardinal Principles of Radiation Protection‖ of time, distance, and shielding. This should include but is not limited to:

1. Keeping the time of exposure to radiation as short as possible. This can be achieved by not holding patients, and limiting time spends in the radiographic room during fluoroscopy.

2. Maintaining a large distance between the source of radiation and the exposed individual. The technologist should stand as far from the radiographic table as possible during fluoroscopic examinations. Increasing the distance between the patient and self during portable and surgical examinations will reduce exposure as well.

3. Using appropriate shielding material between the source of radiation and the exposed person. Standing behind a primary protective barrier or using lead protective apparel when unable to leave the area of radiation (fluoroscopy, surgery, etc.) are means of reducing overall exposure.

4. Fetal radiation exposure is most frequently monitored by issuing the individual a second radiation monitoring device (known as the fetal monitoring device) to be worn under the apron at the waist when a protective apron is needed. This monitor reading shall not exceed

Also, female student disclosure of suspected or confirmed pregnancy is strictly voluntary and may be withdrawn at anytime during pregnancy.
GBC RADIOLOGY TECHNOLOGY PROGRAM
RADIATION SAFETY PROGRAM

Great Basin College (GBC) will implement the following radiation safety program and maintenance: The following will be provided to workers/faculty (workers and faculty involved will be those who a radiation dosimeter has been issued) and students who will be working within the radiology lab (Health Sciences and Human Services Building, room 102).

STUDENTS:

Students who have been accepted into the Radiology Technology (RT) Program will be educated upon acceptance to the program, during the orientation meeting and throughout their time in the GBC Radiology Technology Program. The following information is also obtained within the R.T. program student handbook:

ALARA-As Low As Reasonably Achievable (R.T. Student Handbook)

“ALARA-All students when working with ionizing radiation must adhere to the ALARA concept, which means as low as reasonably achievable. All students must make the attempt to minimize the time or duration of an exposure, maximize distance for personnel and others in the exposure area, and shield patient or others when possible (time, distance, shielding). This is a concept the students will learn, be evaluated on and utilize during the education process of becoming a Radiology Technologist. At no time should a student hold an image receptor or patient during clinical rotation.”

RADIATION MONITORING-(R.T. Student Handbook)

“The Radiation Monitor/Film Badge is a part of the student uniform and must be worn at collar level at all times during clinical rotation. If wearing a lead apron, the monitor should be worn at the collar level outside the lead apron. See Radiation Monitor Policy.”

RADIATION MONITOR POLICY-(R.T. Student Handbook)

“A copy of the radiation monitoring report will be filed in the clinical coordinator’s office for confidentiality. It is the student's responsibility to review report. The students are notified through the clinical online course the report is available for the student to review.

The radiation monitoring report will be reviewed upon arrival by the clinical coordinator. If the a student's radiation limits are outside of the programs designated exposure limit of 5 mSv (0.5 rem), the clinical coordinator is to notify the Program Director, verbally and in writing immediately. The Program Director will notify the student. At this time the student upon direction from faculty may be asked to:

1. cease clinical assignment until investigation into the radiation monitoring report is completed to insure accuracy.
2. schedule an appointment to meet in person with the Program Director, Clinical Coordinator, and/or Dean of Health Sciences and Human Services for necessary course of actions and radiation counseling. At this time a radiation physicist will possibly be contacted for input depending on the radiation exposure amount.

A course of action and documentation of the meeting outcome will be given to the student and placed into the student's file to insure the health and safety of the student.”

RADIATION MONITORING DEVICE-(In the R.T. Student Handbook)
“Students cannot participate in any clinical experience or energized laboratory experience without the radiation monitoring device on their person. The student will be issued a radiation monitoring device (film badge) for use in the clinical education setting.

If a student becomes pregnant and discloses pregnancy, an additional fetal monitor will be ordered. The fetal monitor should be worn at the waist level. Please see radiation advisory statement located inside this handbook for further information.”

RADIATION MONITORING DEVICE — LOST-(In the R.T. Student Handbook)

“Students who have lost their radiation monitoring device are required to do the following: Report the loss to a program faculty member (not the clinical instructor). A new radiation monitoring device will be provided. The lost radiation monitoring device will be replaced at the student's expense (a $30.00 fee).

Prepare and deliver a letter addressed to the GBC Radiology Technology Program Director explaining how the radiation monitoring device was lost. A statement regarding the proper way to handle and store the radiation monitoring device must be addressed as well as the steps that will be taken to assure the incident will not happen again.

Pick up the replacement radiation monitoring device as directed by the faculty. Once step three is completed, the student will be allowed to return to clinical. Time missed during this process will be made up at the end of the program if applicable.

The student's GBC radiation monitoring device cannot be worn if the student is working for pay.

PREGNANCY POLICY-(R.T. Student Handbook)

Student disclosure of suspected or confirmed pregnancy is strictly voluntary. Students choosing to inform the program faculty of a pregnancy MUST DO SO IN WRITING and must include the projected delivery date. It is recommended the student meet with program faculty to discuss program completion options, and appropriate personal radiation protection methods (See Radiation Advisory Statement).

RADIATION ADVISORY STATEMENT-(R.T. Student Handbook)

Please see statement attached at the end of the policy.

RELEASE OF INFORMATION FORMS FOR RADIATION MONITORING RECORDS

Radiology Technology Program Release Form (R.T. Student Handbook)
Radiation Monitoring Information Request- (R.T. Student Handbook)

PROVISION OF RADIATION PROTECTION DEVICES

The student will receive a dose monitoring device during the first semester when lab work begins.

Lead aprons are available for use, but mainly as a student prop. The students are not to be in the radiology lab room during an exposure.

OTHER EDUCATION PROCESSES FOR ALARA

Completion of RAD238, Radiation Protection in the Fall of the first year of the Radiology Technology Program.
Clinical Competency – documented by the clinical competency form and student evaluation form completed in clinical rotations during RAD225, RAD226, and RAD227.

WORKERS/FACULTY – PEOPLE WHO ARE ISSUED DOSE MONITORING DEVICES

Personnel Monitoring equipment will be supplied to workers, to include the radiation monitoring device, who may be exposed to radiation over the 10% of the annual dosage limit of occupation exposure of 5 Rem annually.

Radiology Technology Faculty - All faculty working in the lab with students will be ARRT registered technologists who have documentation of radiation protection knowledge through the ARRT registry process. Documentation of current ARRT registry is required and updated annually.

All faculty will need to obtain their life-time maximum dosage from previous employment within the first semester of employment.

PUBLIC

GBC will prevent any member of the public from entering the radiology lab without a radiology technology faculty.

Radiology maintenance/engineer by the company who installed the equipment is not included in the “public”.

GENERAL INFORMATION

GBC Radiology Technology Faculty and Students will adhere to radiation safety guidelines as follows:

ALARA concept of exposures to be “as low as reasonably achievable.”

DISTANCE - all personnel should be behind a lead shield or as far away from the radiation source as possible.

TIME - Use the lowest exposure time as possible.

SHIELDING - Lead shield (Aprons) should be worn anytime personnel are in the radiology room during an exposure.

Radiographic room doors must be closed during an exposure.

Annual review of the radiation safety program will be completed annually by the Radiology Technology Program Director and will be documented in a sign off sheet on the front of this radiation safety book.

All student and faculty radiation monitoring reports will be reviewed with each individual at a minimum, annually. The students monitoring report should be reviewed at each clinical site visit with the most current report. Each student should sign the report. Annually, a State of Nevada, Cumulative Occupational Dose History will be given to the students and faculty. This will be signed by the individual and a copy will be made for the program and individual records.
GREAT BASIN COLLEGE

HEALTH SCIENCE AND HUMAN SERVICES PROGRAMS

STUDENT AGREEMENT FOR THE 2017-2018 ACADEMIC YEAR

I have read, understand and agree to abide by the policies and guidelines stated in the Great Basin College Health Science and Human Services Programs 2017-2018 Student Handbook.

I understand that as a condition of enrollment in a program offered through the Great Basin College Health Science and Human Services Department, I agree that a clinical facility/agency may, at any time, require a “for cause” drug and/or alcohol screen. I agree to execute a consent for release of the results of the drug and/or alcohol screening information to the clinical facility/agency should they request such information.

I authorize Health Science and Human Services Department to release my immunization, CPR, background and drug screening reports to the clinical education facilities as mandated by the affiliation contract.

I understand and acknowledge that once admitted to one of programs offered by the Great Basin College Health Science and Human Services Department, failure to maintain the professional and/or ethical standards of the program may result in dismissal from the program. I also understand that the Health Science and Human Services Department Admission and Progression committee may at any time request information from the Administrative Officer of Great Basin College to determine whether I have ever violated NSHE (Nevada System of Higher Education) Code.

I understand and acknowledge that no resources or information from any Health Science and Human Services course can be shared outside the classroom or lab.

My emergency contact person(s) are listed below. I understand that this individual or individuals are responsible for ensuring that I am transported home in the event one of my faculty or the Health Science and Human Services Department Dean determines that I am not able to continue being present in the classroom, lab, or clinical setting.

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone #</th>
<th>Relationship</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

Printed Name                       Student Signature    Date

Witness: (Faculty / Dean)                       Date

Complete this copy of the Agreement and return to the GBC Health Science and Human Services Department.
GREAT BASIN COLLEGE
HEALTH SCIENCE AND HUMAN SERVICES DEPARTMENT
Agreement to Participate in Practice Lab Procedures
For the 2017-2018 Academic Year

During my enrollment in one of the programs offered by the GBC Health Science and Human Services Department and under the direct supervision of a faculty member, I agree to allow a student classmate to perform the following procedures on my person:

6. Subcutaneous injection  (For Nursing and Paramedic Programs Only)
7. Intradermal injection   (For Nursing and Paramedic Programs Only)
8. Intramuscular injection (For Nursing and Paramedic Programs Only)
9. Intravenous catheterization (peripheral)  (For Nursing and Paramedic Programs Only)
10. Positioning           (For Radiology Program Only)

I agree to hold harmless and waive the liability of the student and/or students performing the procedure(s), the supervising instructor and Great Basin College for any injuries incurred as a result of my agreeing to have these procedures performed on my person.

___________________________________________________________________________
Printed Name      Student Signature               Date
__________________________________________________________________________
Witness: (Faculty / Dean)                    Date

Complete this copy of the Agreement
and return to the
GBC Health Science and Human Services Department.
During your participation at the Great Basin College Practice Labs, you will be an active participant and observer of the performance of other individuals in the management of acute medical, surgical, and other health care events in simulated experiences.

The objective of the simulation experience program is to educate pre-licensed and licensed health care practitioners to better assess and improve their performance in evolving health care situations. Simulations are designed to challenge a healthcare professional’s response and judgment in stress environments.

Due to the unique aspects of this form of training, you are required to maintain and hold confidential all information regarding the performance of specific individuals and the details of the scenarios.

There is continuous audiovisual digital recording during all simulations which will be used for educational purposes. This video recording is considered a QUALITY ASSURANCE TOOL and is protected by Federal Law.

By signing this agreement, you agree to maintain strict confidentiality regarding both your and others’ performance, whether seen in real time, on video, or otherwise communicated to you. Failure to maintain confidentiality may result in unwarranted and unfair defamation of character of the participants.

To maintain optimal simulation experiences for other learners who will be following you in the center, you are to maintain strict confidentiality regarding the specifics of the scenarios. A breach of confidentiality may result in loss of privileges in the Practice Labs.

By signing below, you acknowledge you have read and understand this statement and agree to maintain the strictest confidentiality about the performance of individuals and the simulation scenarios you observe.

I agree to maintain strict confidentiality about the details of the scenarios and the performance of other participants during scenarios at Great Basin College Practice Labs.

I authorize the Great Basin College Practice Labs to use the video recording(s) and photographs made in the Practice Labs for the following purposes:

1) Debriefing scenario participants,
2) Administrative review,
3) Educational research,
4) Commercial purposes, which can include public relations, promotional advertisements, and/or fund raising activities. I understand that, unless otherwise approved by me, I will not be specifically identified.

Last Name, First Name (Please Print) Date

Signature Witness

Complete this copy of the Agreement and return to the GBC Health Science and Human Services Department.
Notes