



DOCTOR OF NURSING PRACTICE PROGRAM STUDENT/PRECEPTOR/FACULTY MANUAL FOR

NURSE ANESTHESIA PROGRAM

2018-2019

Dear Preceptors and Clinical Coordinators,

Thank you for the time, effort, expertise and mentorship you provide for our students. Your ability to mentor our Nurse Anesthesia students is extremely valuable to our students and to the University of Tennessee Health Science Center, College of Nursing, (UTHSC, CON) Nurse Anesthesia Program!

The UTHSC CON developed the Nurse Anesthesia Preceptor Guide to provide guidance for students, preceptors and faculty from the CON. The preceptor guide contains documents that establish the Student-Preceptor-College relationship. This relationship provides students with an opportunity to practice their newly acquired skills under the guidance of expert professionals. It is every student's responsibility to work with the clinical faculty to create the best clinical experience by negotiating the agreement that matches the course requirements. The Nurse Anesthesia Program assigns students with the assistance of the designated Clinical Site Coordinator to the clinical site. It is every student's responsibility to work with the Preceptor, Clinical Site Coordinator and Anesthesia Faculty to meet all requirements to enter each institution as a student.

The UTHSC CON Preceptor Guide is constantly under review. The content contained in this version should be used for students enrolled in any graduate clinical courses. Should you have any suggestions that will make the clinical experience more valuable, please convey this information with any UTHSC Nurse Anesthesia Faculty. We appreciate the time and expertise that you share with our students.

Student Responsibilities for Clinical Experiences

Nurse Anesthesia courses promote the development of specialized knowledge and skill set beginning with the application of basic principles and skills transitioning to the application of complex principles and skills in the delivery of anesthesia. Preceptors are selected on the basis of their qualifications to support student achievement of course objectives. Student rights and responsibilities are listed in the Nurse Anesthesia Handbook.

Clinical contracts are obtained between the clinical site and the College of Nursing Nurse

Anesthesia Concentration. The site designates a clinical coordinator which can be either a CRNA or an
anesthesiologist whose letter of agreement and CV is kept on file in the Nurse Anesthesia offices.

Preceptor credentialing information is kept at the clinical sites and verification of current credentials is
confirmed by the Clinical Site Coordinator.

Clinical hours are scheduled collaboratively by Nurse Anesthesia Faculty and the Clinical Site Coordinator. Students will work with the preceptor's schedule and will not ask the preceptor to meet the personal needs of the student's schedule. Any change in the student's schedule must be agreed upon by the Clinical Site Coordinator and Nurse Anesthesia Faculty.

Appropriate attire for the Nurse Anesthesia Student is covered in the UTHSC CON Nurse

Anesthesia Dress Code Policy. This policy can be found in the Nurse Anesthesia Handbook. Additionally,
guidelines for expectations of the student by the clinical sites are provided in the handbook as well.

Student attendance is covered in the UTHSC CON Nurse Anesthesia Attendance Policy, Inclement Weather, and Sick Policy which can be found in the Student Handbook.

Dwayne Accardo, DNP, CRNA

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UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER NURSE ANESTHESIA CONCENTRATION POSITION DESCRIPTION CLINICAL COORDINATOR

<u>Depatment:</u> Nurse Anesthesia Concentration

Position Title: Clinical Coordinator

Description: A Certified Registered Nurse Anesthetist or Anesthesiologist who coordinates the clinical

education of students enrolled in the Nurse Anesthesia Concentration.

Qualifications:

1. CRNAs must maintain Registered Nurse Licensure and Authorization as an Advanced Practice Nurse by the Tennessee Board of Nurse Nursing. Physicians must maintain medical licensure with the Tennessee Medical Board.

- 2. CRNAs must be certified by the Council on Certification of Nurse Anesthetists and maintain that certification as required by the Council on Recertification of Nurse Anesthetists.
- 3. Minimum of 1 year of experience as a CRNA or Anesthesiologist.
- 4. Currently active in clinical anesthesia practice.
- 5. Managerial skills and experience necessary to coordinate student clinical activities.
- 6. Analytical skills necessary to plan, prioritize, and direct appropriate activities within the department.
- 7. Effective interpersonal and leadership skills necessary to foster productive working relationships.
- 8. Effective oral and written communication skills.

Position Summary:

- 1. Assist the Nurse Anesthesia Faculty in the coordination of clinical education of students enrolled in the Nurse Anesthesia Program.
- 2. Develops and communicates clinical schedules for SRNAs.
- 3. Directs and participates in the education of SRNAs.
- 4. Represents program at local, state and national meetings.
- 5. Continually maintains communication regarding student education issues with Nurse Anesthesia Faculty.
- 6. Oversees the quality of education students are receiving in the clinical area.
- Responsible for communicating student issues with clinical preceptors at site and with nurse anesthesia faculty.

Position Responsibilities:

- 1. Coordination of the anesthesia case assignments of each graduate student registered nurse anesthetist in order to:
 - a. Maximize the student's clinical experience.
 - b. Facilitate the student's learning in a progressive manner.
 - c. Assist the Nurse Anesthesia Faculty to assure the student obtains the required number of clinical experiences, which will enable them to be eligible to sit for the Certifying Exam.
- Insure that each student has immediate supervision during each of the clinical rotations.
 Immediate supervision is defined as a CRNA or anesthesiologist with staff privileges within the suite of rooms in which the student is performing an anesthetic who is free to respond immediately to a summons by the student.

- 3. Insure that students are ONLY supervised by a CRNA or Anesthesiologist.
- 4. Define and insure that supervision is exercised during the following Practica:
 - a. DNP Anesthesia Practicum A
 - b. DNP Anesthesia Practicum B
 - c. DNP Anesthesia Practicum C
 - d. DNP Specialty Practicum A
 - e. DNP Specialty Practicum B.
 - f. Residency Practicum
- 5. The preceptor can determine the student is able to function safely within the student's scope of practice limitations. Reduction of supervision may occur after discussion of the student's performance with preceptor and Nurse Anesthesia Program Faculty occurs. The Clinical Preceptor RETAINS full responsibility and accountability for the anesthesia care AT ALL TIMES.
- Insures that at no time the ratio of students to Preceptor exceed two (2) students to a faculty member.
- 7. Maintaining the quality and standard of anesthesia care of students by:
 - Discharging the student from the clinical rotation should the student fail to demonstrate patient safety, written care plans, inadequate knowledge, and/or lack of professional demeanor or behavior.
 - b. Evaluating student clinical performance for competency and reporting any patterns of difficulty in student's behavioral objectives.
 - c. Notifying Nurse Anesthesia Faculty of discharge or patterns of difficulty within **three (3) working days** of all problems.
- 8. Maintains case assignment records for the students.
- 9. Guides and directs the graduate student registered nurse anesthetist and/or Preceptor.
- Assures that confidentiality is a key issue in the education of any student. Patterns of difficulty should be identified to any Preceptor working with a student and/or the Nurse Anesthesia Faculty.
- 11. Recognizes that any other information, gossip, rumors or personal feelings expressed interfere with a student's ability to learn in an unbiased setting.
- 12. Insures that student time commitment consists of a reasonable number of hours and does not exceed 64 hours per week including student study time.
- 13. Insures that supervision at clinical sites is limited to CRNAs and anesthesiologists who are institutionally credentialed to practice and immediately available for consultation.
- 14. Insures that instruction by graduate registered nurse anesthetists or physician residents never occurs if they act as the sole agents responsible for the students.
- 15. Provide students with orientation to the clinical site either prior to or upon arrival that details role expectations and responsibilities and identifies available learning resources.

UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER NURSE ANESTHESIA PROGRAM POSITION DESCRIPTION CLINICAL PRECEPTOR

<u>Department:</u> Nurse Anesthesia Concentration

Position Title: Clinical Preceptor

Description: A Certified Registered Nurse Anesthetist or Anesthesiologist who supervises the student

nurse anesthetist during the administration of anesthesia.

Qualifications:

1. Be currently certified or recertified by the Council on Certification of Nurse Anesthetists or licensed in medicine holding anesthesia specialty training.

- 2. Maintain a current, valid, professional / registered Tennessee nursing/physician license in one jurisdiction of the United States, which satisfies the requirements of the applicable state board of nursing or medicine.
- 3. Participate in continuing education / faculty development activities, which enhance their role as CRNA or MD educators.
- 4. Demonstrate competency in their area of responsibility and be knowledgeable in the teaching / learning process.

Position summary and responsibilities:

- Supervises the student nurse anesthetist during the administration of anesthesia.
- 2. Recognizes pathophysiology states of the patient that are pertinent to the anesthetic.
- 3. Discusses the patient's status and rationale for the anesthetic management with the student and the anesthesiologist.
- 4. Evaluates the student's clinical performance and constructively discusses this performance with the student and faculty of the Nurse Anesthesia Program.
- 5. Teaches by discussion and by demonstration.
- 6. Informs the Clinical Coordinator, Program Director and/or Associate Program Director of pertinent student performances.
- 7. Supervises the student anesthetist in the immediate post-operative care and evaluation of the patient.
- 8. Encourages the student to ask questions and think critically.
- Discharging the student from the clinical area should the student fail to demonstrate patient safety, written care plans, inadequate knowledge, and/or lack of professional demeanor or behavior.

Legal Liability while Precepting Students

Preceptors are liable for the care provided to their patients during a preceptorship arrangement.

Patients should be informed that the preceptor remains the primary anesthesia provider and is responsible for decisions related to patient care during the perioperative experience.

Legal and reimbursement guidelines require that preceptors validate findings on physical examination, review laboratory tests, and confirm differential diagnosis (es) and management plans with students prior to the perioperative management of the patient. Review by the preceptor must be

documented in the record indicating that the preceptor has examined the patient, is in agreement with the findings and plan as written by the student and is responsible for care. It is customary that the preceptor co-signs all records in which the student has provided documentation. Third party payers, government, and insurance companies cannot reimburse for care provided by the student.

Liability Insurance

Preceptors assume the same liability for their patients as other practitioners in clinical practice and have the added liability of closely supervising the student.

Registered Volunteers

The University of Tennessee recognizes the valuable contributions of those persons giving freely of their time and talents for the benefit of the University without compensation. These persons are "VOLUNTEERS" in every sense of the word. The State legislature in the enactment of the Tennessee Claims Commission Act of 1984 recognized the need the protection of volunteers from legal actions while performing their service on behalf of the University. As such, the volunteers who are registered with the University receive the same civil immunity from liability, as does an employee of the University under the Act. Volunteers under the Claims Commission Act are not covered for Worker's Compensation.

The term "Registered Volunteer" means those persons who are not employees of the University who provide service to the University in an approved program that are listed and reported to the Division of Claims Administration. State of Tennessee.

To become a "Registered Volunteer", the individual must be designated as a clinical site coordinator for the Nurse Anesthesia Program.

Evaluation of Students

Preceptors meet with the student formally at the beginning of the day to review the student's plan of care. The preceptor will provide both formative and summative evaluation. The summative student clinical evaluation form provided by the UTHSC CON Nurse Anesthesia Program should also be reviewed with the student at this time.

Two types of evaluation are important in the Nurse Anesthesia program, formative and summative evaluations:

Formative evaluation is an assessment by the preceptor in the form of feedback to the student regarding their performance during the clinical experience. Ongoing feedback provides the student with the opportunity to enhance their performance during the day and the course of the clinical practicum. Role performance areas in which the student has achieved competence should be discussed with the student, as well as those areas that have been identified as weak, and needing improvement. Specific recommendations from the preceptor on strategies for improving clinical performance will be helpful to the student and can be documented in anecdotal notes and midterm evaluation.

Summative evaluation is the assessment of the student's performance at the end of the clinical day. The summative evaluation describes the student's performance, development, and improvement. The summative evaluation of performance is based on the criteria indicated on the clinical evaluation tool provided by the Nurse Anesthesia program faculty. Although students are often not able to meet the performance competencies immediately, they should be able to demonstrate progression of skills and competencies. The written narrative is an extremely important part of the evaluation. Comments are valuable in assessing the student's knowledge, skill level, and immersion in the course. Clarity of comments and specific examples of situations that illustrate the comments written on the evaluation form are important to learning. Written comments are particularly valuable if the student needs remediation in a specific competency area, if the student is for any reason reviewed by the Progressions Committee, or if faculty are asked for a recommendation of the student's clinical ability. The evaluation should be reviewed with and returned to the student at the end of the day. The student's self-evaluation is also important to incorporate during the preceptor/student evaluation discussions.

Summative and formative evaluations provide the preceptor with the tools to identify and discuss deficiencies that may indicate patterns of difficulty in clinical performance. It is strongly recommended that preceptors inform faculty of clinical performance deficiencies and/or problems at the time they occur. In this way, faculty can assist both preceptor and student in optimizing the educational process.

Preceptors should document anecdotal notes that can be used to develop the mid-semester and end of semester evaluation. Student strengths, as well as challenges, should be documented. In the event that a student's behavior is unprofessional, or the student places the patient in danger (e.g. patient safety concerns), an anecdotal note should document the event and the course faculty must be contacted. The course faculty will meet with the clinical preceptor and student. The Faculty will decide if take further action is appropriate.

Faculty will provide preceptors with the appropriate evaluation tools before the start of the semester. The evaluation tools should be reviewed and clarified; examples should be used to demonstrate different levels of student's abilities as reflected in the written evaluation. The preceptor may seek clarification about the evaluation process with faculty members. Please contact Faculty with any questions, concerns, suggestions or comments

Preceptor Benefits

Outstanding Undergraduate and Graduate Preceptor Awards

Each year, the College of Nursing acknowledges preceptors who make outstanding contributions to the clinical education of students. Preceptors are nominated by faculty and supported by individual students who have been taught by the outstanding clinical preceptor.

Graduating nurse anesthesia students select an outstanding preceptor. This individual is invited to the Nurse Anesthesia Student's Ether Ball and presented a plaque recognizing the preceptor's significant contribution to nurse anesthesia education.

Under the new NBCRNA recertification rules, precepting Nurse Anesthesia students provides continuing education credits that can be used in partial fulfillment of reaccreditation.

Nurse Anesthesia Evaluation Tools

Evaluation is an essential component of the educational and accreditation process. The UTHSC CON Nurse Anesthesia Concentration General Policy on Self-Assessment in the Nurse Anesthesia Student Handbook covers this. Students are required to complete their portion of the daily evaluation tool prior to giving it to their preceptor. Completion of the student's daily evaluation is critical.

Preceptor-related Web-based Resource

Resources and Links for preceptors can be found on the home page of the Preceptor Development Program from the Southern New Hampshire Area Health Education Center, http://www.snhahec.org/preceptor_development.cfm (website supported by HRSA Family Medicine Training Grant) Link was checked for function on May 31, 2018.

Useful Websites

Organization	Website
American Academy of Nurse Practitioners	http://www.aanp.org
American Association of Nurse Anesthetists	http://www.aana.com
American College of Cardiology	http://www.acc.org
American Diabetes Association	http://www.diabetes.org/home.jsp
American Heart Association	http://www.americanheart.org
Anesthesia Patient Safety Foundation	http://www.apsf.org/
Center for Disease Control	http://www.cdc.gov
Index of clinical trials: The Cochrane Library	http://www.cochrane.co.uk
National Library of Medicine Medline searches	http://www.ncbi.nlm.nih.gov/PubMed
National Guideline Clearinghouse	https://www.ahrq.gov/
Pulmonary assessment:	
1) Chest PE	http://www.meddean.luc.edu/lumen/MedEd/medicine/pulmonar/pulmonar.htm
Preventive Medicine: Report of the U.S. Preventive Serves Task Force	https://www.ahrq.gov/professionals/prevention-chronic-care/decision/uspstf/index.html

Virtual Anesthesia Textbook	http://www.virtual-anesthesia-textbook.com/index.shtml
Internet addresses are case-sensitive. Web addre 2018	sses may change; links checked for functionality May 31,

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University of Tennessee Health Science Center Nurse Anesthesia Concentration Alumni Evaluation Form

Date:	July 2, 2018	Name:	Туре	of Facility:						
Work	Model (Please	circle one):	CRNA-only	MD Supervisi	on I	MD Me	dica	l Di	rect	ion
Please	e respond to eac	ch statement in	a manner which	ı best reflects yo	ur though	nts and f	feeli	ngs:		
1=Str	ongly Disagree	2=Disagree	3=Unsure	4=Agree	5=Stron	gly Agr	ee			
Over	all, my didactic	instruction prepare	ared me to functi	on as a CRNA.		1	2	3	4	5
Over	all, my clinical p	practicum experi	ences prepared r	me to function as	a CRNA.	1	2	3	4	5
I und	lerstand and fulf	ill the practice st	tandards of the pr	rofession.		1	2	3	4	5
I take	e responsibility f	For and I am acco	ountable for the o	care I provide.		1	2	3	4	5
I den	nonstrate sound	professional and	ethical standard	s of practice.		1	2	3	4	5
After	graduation, I fe	lt confident adm	ninistering and m	anaging general a	anesthetics	s. 1	2	3	4	5
After	graduation, I fe	lt confident adm	ninistering and m	anaging IV sedat	ion.	1	2	3	4	5
After	graduation, I fe	lt confident adm	ninistering and m	anaging spinal ar	nesthesia.	1	2	3	4	5
After	graduation, I fe	lt confident adn	ninistering and m	anaging epidural	anesthesia	ı. 1	2	3	4	5
After	graduation, I fe	lt confident adm	ninistering and m	anaging regional	blocks.	1	2	3	4	5
After	graduation, I fe	elt confident inse	rting & managin	g invasive lines/r	nonitors	1	2	3	4	5
Мус	linical practicun	n experiences ac	lequately prepare	ed me for the pace	of the OF	R. 1	2	3	4	5
I am	able to organize	and set up for c	ases quickly and	independently.		1	2	3	4	5
	curriculum prepa ions related to th		• • •	em solve, and mal	ke appropr	riate 1	2	3	4	5
I am	able to function	comfortably in	a variety of settir	igs.		1	2	3	4	5
I beh with.		ful, culturally se	nsitive manner w	ith all individual	s I interact	1	2	3	4	5
I hav	e adjusted well f	from being a stu	dent to a CRNA.			1	2	3	4	5
I am	satisfied with m	y career as a CR	NA.		<u>-</u>	1	2	3	4	5

Please provide specific comments for any item rated a 3 or less:

I am involved in professional activities and/or organizations

What are your strongest skills since graduation?

What areas do you feel weak in? Please explain.

How can we enhance the program to improve the transition from student to CRNA?

We welcome any additional feedback, suggestions, or comments: (continue on additional page if needed) All information will remain confidential and will be used to improve the program. Thank you!

University of Tennessee Health Science Center Nurse Anesthesia Option

Summative Semester Evaluation

Name:		Date	Semester	.:
Standards for evaluations w	valuations of each student or Accreditation of Nur rill remain in the student courses Academic Eval	se Anesthesia Educ 's permanent file.		
	Course			Grade
Semester GPA	A:	Cumı	ılative GPA:	
Comments:				
	Patient safety Individualized periane Critical thinking Communication skill Professional role			m evaluations, Met Unmet
Strengths:				
Weaknesses:				
Comments:				

Student's Signature	Date
Clinical Faculty's Signature	Program Faculty Signature

UTHSC Exit Interview Form Anesthesia Concentration

Please carefully evaluate your abilities in the following areas.

BE VIGILANT IN PATIENT CARE DELIVERY B. PROTECT PATIENTS FROM LATROGENIC COMPLICATIONS C. PARTICIPATE IN PATIENT SPOM LATROGENIC COMPLICATIONS C. PARTICIPATE IN PATIENT PROBLEMS OF PROPERINT COMPLICATIONS C. PARTICIPATE IN PATIENT PROBLEMS OF PROPERINT COMPLICATIONS CONDUCT A COMPREHENSIVE AND APPROPRIATE C. CONDUCT A COMPREHENSIVE AND APPROPRIATE C. UTILIZE UNIVERSAL PRECAUTIONS AND APPROPRIATE B. UTILIZE UNIVERSAL PRECAUTIONS AND APPROPRIATE C. UTILIZE UNIVERSAL PRECAUTIONS AND APPROPRIATE B. PROVIDE CARE THROUGHOUT PERIANESTHETIC CONTINUUM CONTINUUM C. ADMINISTER GENERAL ANSHESIA TO ALL AGES, PHYSICAL CONDITIONS FOR A VARIETY OF SURGICAL ANDINISTER GENERAL ANSHESIA TO ALL AGES, PHYSICAL CONDITIONS FOR A VARIETY OF REGIONAL AND MEDICAL PROCEDURES, TRAUMA AND EMERGENCIES C. ADMINISTER AND MANGAGE A VARIETY OF REGIONAL AND MEDICAL PROCEDURES, TRAUMA AND EMERGENCIES C. PROVIDE CARE SHORE AND APPROPRIATE CRITICAL THINKING BY THE ABILITY TO: CRITICAL THI	PATIENT SAFETY IS DEMONSTRATED BY THE ABILITY TO:	Below Average	Average	Above Average	Excellent
C. PARTICIPATE IN PATIENT POSITION TO PREVENT INJURY d. CONDUCT A COMPREHENSIVE AND APPROPRIATE EQUIPMENT CHECK UTILIZE UNIVERSAL PRECAUTIONS AND APPROPRIATE EQUIPMENT CHECK UTILIZE UNIVERSAL PRECAUTIONS AND APPROPRIATE ENDIVIDUALIZED PERIANESTHETIC MANAGEMENT BY THE ABILITY TO: Average A PROVIDE CARE THROUGHOUT PERIANESTHETIC CONTINUUM B. USE A VARIETY OF TECHNIQUES, AGENTS, ADJUVANT DRUGS, AND EQUIPMENT C. ADMINISTER GENERAL ANESTHESIA TO ALL AGES, PHYSICAL CONDITIONS FOR A VARIETY OF SURGICIAL AND MEDICAL PROCEDURES, TRAUMA AND EMERGENCIES ADMINISTER AND MANGAGE A VARIETY OF REGIONAL AND MEDICAL PROCEDURES, TRAUMA AND EMERGENCIES ADMINISTER AND MANGAGE A VARIETY OF REGIONAL AND MEDICAL PROCEDURES, TRAUMA AND EMERGENCIES ADMINISTER AND MANGAGE A VARIETY OF REGIONAL AND MEDICAL PROCEDURES, TRAUMA AND EMERGENCIES ADMINISTER AND MANGAGE A VARIETY OF REGIONAL AND MEDICAL PROCEDURES, TRAUMA AND EMERGENCIES ADMINISTER AND MANGAGEMENT POSSESS ACLS AND PALS RECOGNITION CRITICAL THINKING BY THE ABILITY TO: A APPLY THEORY TO PRACTICE IN DECISION-MAKING AND PROBLEMS JOLVING PROBLEMS JOLVING BEOW AVERAGE AVERAGE AVERAGE AVERAGE Excellent COMPONENT THE ABILITY TO: A PROBLEMS JOLVING DESTRUCTED AND TAKE APPROPRIATE ACTION WITH EQUIPMENT MALF LUNCTIONS INTERPRET AND UTILIZE DATA FROM NON-INVASIVE AND INVASIVE MONOTORING COMPONENT THERAPY BRECOGNIZE AND APPROPRIATELY RESPOND TO PERIOPERATIVE AND APPROPRIATELY RESPOND TO PERIOPERATIVE AND SKILLS BY THE ABILITY TO: ABELOW AVERAGE Excellent COMMUNICATIONS SKILLS BY THE ABILITY TO: BELOW AVERAGE AVE	a. BE VIGILANT IN PATIENT CARE DELIVERY				
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	a. PARTICIPATE IN QUALITY MANAGEMENT ACTIVITIES			0	

b.	FUNCTION WITH APPROPRIATE LEGAL REQUIREMENTS AS A REGISTERED PROFESSIONAL NURSE, ACCEPTING RESPONSIBILITY AND ACCOUNTABILITY		
c.	INTERACT ON A PROFESSIONAL LEVEL WITH INTEGRITY		
d.	TEACH OTHERS		
e.	PARTICIPATE IN CONTINUING EDUCATION ACTIVITIES TO		
	ACQUIRE NEW KNOWLEDGE AND IMPROVE HIS/HER		
	PRACTICE		

- 1. What do you consider the greatest strength of your educational experience at UTHSC's Nurse Anesthesia Option?
- 2. What do you consider the greatest weakness of your educational experience at UTHSC's Nurse Anesthesia Option?
- 3. Do you have any recommendations for improving the educational experience at UTHSC's Nurse Anesthesia Option?
- 4. Would you recommend the Program to other people?
- 5. Are you pleased with the decision you made to go to UTHSC's Nurse Anesthesia Option?
- 6. Are you pleased with the decision you made to become a Nurse Anesthetist?
- 7. Would you be interested in alumni functions for UTHSC's Nurse Anesthesia Option? If yes, what type of functions?
- 8. Which clinical facilities do you consider good educational sites and why?
- 9. Which clinical facilities do you consider poor educational sites and why?
- 10. Would you be interested in an alumni newsletter? If yes, would you like to participate in the creation?
- 11. What is your study plan for the Certification Exam?
- 12. When do you plan to take the Certification Exam after graduation?
- 13. When do you plan to begin your employment after graduation?
- 14. Is there anything else you believe would be beneficial to UTHSC's Nurse Anesthesia Option, other students or graduates?
- 15. What is the name and address of your employer?

- 16. What is the name and address of the facility (ies) in which you will practice?
- 17. What email address do you plan to use after you graduate?