BOSTON COLLEGE
WILLIAM F. CONNELL SCHOOL OF NURSING

NURSE ANESTHESIA
GRADUATE STUDENT HANDBOOK
ADDENDUM
2022-2023

Doctor of Nursing Practice
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IMPORTANT CONTACTS

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INTRODUCTION

These pages are meant to serve as an addition to the Graduate Student Handbook published by Boston College School of Nursing. All of the information contained in the handbook pertains to students in the Program in Nurse Anesthesia, however, because the Program in Nurse Anesthesia requires additional matters specific to the specialty to be addressed, this addendum has been developed.

MISSION STATEMENT

The mission of the Boston College School of Nursing is to prepare professional nurses whose practice reflects a humanistic ethic and is scientifically based, technically competent, and highly compassionate. The Boston College nurse learns to think critically and to develop leadership skills. The faculty of the school aim to develop and disseminate knowledge for the advancement of professional practice and the improvement of health care by providing an environment that supports the personal development and scholarship of its faculty and students. The mission of Boston College School of Nursing is congruent with that of its parent institution, with an emphasis on the development of the whole person. The School of Nursing focuses on preparing each student as a lifelong learner, as a health professional and as a person who will use knowledge in service to others.

The mission of the Boston College Program in Nurse Anesthesia is to prepare graduates to excel as advanced practice care-givers and leaders. It is the belief that the role of the nurse anesthetist is based upon a foundation of ethical principles and patient advocacy. The goal of the program is to provide a climate of professional growth through the marriage of strong academics and clinical practice. The advanced practice nurse anesthetist is prepared to promote nursing through leadership, mentorship, and research-based practice. Fundamental to the mission of the program is the inherent value of the individual and the commitment to society.

EDUCATIONAL PHILOSOPHY

Nursing is the art and science of human caring for patients. The recipients of nursing care are individuals, families, aggregates of people, and communities who are sick and well; culturally and linguistically diverse; within all socioeconomic strata; and at all stages in the life cycle. The study of nursing is based on a common intellectual heritage transmitted by a liberal education and the art and science of nursing. Nursing activities focus on the life processes and patterns of the individual in the context of family and community. Nursing recognizes the contribution of cultural diversity and social environments to the health/illness beliefs, practices, and behavioral responses of individuals and groups.

Nurse anesthesia education prepares students for the appropriate level of knowledge and skills by building on the liberal arts and sciences. The nurse anesthesia curriculum is logically ordered to provide core knowledge and the application of that knowledge. Specialty courses prepare students for holistic care and require a holistic approach in education. Students are supported in developing clinical skills as well as the ability to think and act ethically. Students are active participants in shaping the learning environment within the School of Nursing and the Program in Nurse Anesthesia.
The Boston College School of Nursing instills the values of service to others, truth through scholarly inquiry, and justice through promoting equal access to care for all people. Service, scholarship, and justice in caring include all people in the global community, particularly the under-served. The faculty believe that promoting the physical, psychological, and spiritual aspects of health are essential to understanding the human dimension. The nurse respects the uniqueness of the person and the individual’s right to choose and actively participate in decisions about health care. Nursing promotes self-determination by empowering clients and advocating for those who cannot do so independently.

DOCTOR OF NURSING PRACTICE PROGRAM OBJECTIVES

1. Generate a personal philosophy of nursing congruent with the Judeo-Christian values that support the intrinsic worth of each human being.

2. Synthesize knowledge, skills, and attitudes to promote personal and professional growth and lifelong learning in service to others.

3. Translate knowledge from sciences, humanities, nursing and other clinical disciplines to inform the development of a conceptual framework that guides the art and science of advanced practice nursing.

4. Develop strategies to manage organizational, business, and financial systems to ensure the delivery of safe, high quality and cost-effective person-entered care.

5. Critically evaluate and translate research findings into practice to improve and transform health care and patient outcomes.

6. Participate in the design, selection, and implementation of information systems and utilize data to monitor and evaluate programs, outcomes, and systems of care.

7. Lead in the development and evaluation of health care policy that advocates for social justice, equity, and ethical decision-making for the care of diverse populations.

8. Lead interprofessional health care teams in diverse and complex health care settings and systems.

9. Use evidence to design, implement, and evaluate programs that promote and sustain the health of individuals, families, communities, and populations.

10. Deliver knowledge driven, evidence based, comprehensive, person-centered care according to the standards and competencies of specialty practice.
NURSE ANESTHESIA PROGRAM OBJECTIVES

1. Conduct a thorough pre-anesthesia assessment synthesizing data obtained through patient history and physical examination together with that available through facility information systems.

2. Create a patient-specific and evidence-based plan of anesthesia care incorporating the requirements of the planned surgical procedure.

3. Actualize a plan of anesthesia care incorporating various techniques according to established guidelines and current research.

4. Demonstrate leadership with regard to patient safety standards in all aspects of anesthesia care.

5. Critically analyze patient response to anesthesia and surgery and modify the plan accordingly.

6. Discriminate among various anesthetic techniques, selecting the best approach for all patients across the lifespan.

7. Evaluate the need for and interpret information from various monitoring modalities for each individual patient.

8. Formulate and implement a strategy for maintaining perioperative homeostasis through the use of adjunctive medications, fluid replacement, and thermoregulation.

9. Provide anesthesia care across the perioperative continuum insuring safety, comfort, and consultation for other professionals.


11. Utilize current evidence from the literature as a basis for clinical decision-making.

12. Integrate professional, legal and ethical standards of care acknowledging personal accountability for decision-making in nurse anesthesia practice.

DOCTOR OF NURSING PRACTICE WITH NURSE ANESTHESIA SPECIALTY

SUMMER Year One CREDITS

<table>
<thead>
<tr>
<th>Course</th>
<th>Credits</th>
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<tr>
<td>Epidemiology</td>
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<tr>
<td>Pharmacotherapeutics in Advanced Practice Nursing</td>
<td>3</td>
</tr>
<tr>
<td>Advanced Physiology &amp; Pathophysiology across the Life Span</td>
<td>3</td>
</tr>
<tr>
<td>Chemistry, Biochemistry &amp; Physics for Nurse Anesthesia Practice</td>
<td>3</td>
</tr>
<tr>
<td>Respiratory Physiology &amp; Pathophysiology for Nurse Anesthesia Practice</td>
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Total 15 Credits
### FALL Year One

Examining Diversity in Nursing and Health Care  
Nursing Ethics and Professional Responsibility in Advanced Practice  
Population Health Principles, Program Planning and Evaluation  
Nurse Anesthesia Care for Patients with Co-Existing Disease  
Foundations of Nurse Anesthesia Practice  

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<th>Course</th>
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<tr>
<td>Examining Diversity in Nursing and Health Care</td>
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<tr>
<td>Nursing Ethics and Professional Responsibility in Advanced Practice</td>
<td>3</td>
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<tr>
<td>Population Health Principles, Program Planning and Evaluation</td>
<td>3</td>
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<tr>
<td>Nurse Anesthesia Care for Patients with Co-Existing Disease</td>
<td>3</td>
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<tr>
<td>Foundations of Nurse Anesthesia Practice</td>
<td>3</td>
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<td><strong>Total</strong></td>
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### SPRING Year One

Health Care Information Technology Management  
Nursing Leadership in Complex Health Care Settings  
Advanced Health/Physical Assessment across the Lifespan  
Cardiovascular Physiology & Pathophysiology for Nurse Anesthesia Practice  
Pharmacotherapeutics in Nurse Anesthesia Practice  

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<tr>
<td>Health Care Information Technology Management</td>
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<tr>
<td>Nursing Leadership in Complex Health Care Settings</td>
<td>3</td>
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<tr>
<td>Advanced Health/Physical Assessment across the Lifespan</td>
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<tr>
<td>Cardiovascular Physiology &amp; Pathophysiology for Nurse Anesthesia Practice</td>
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<td><strong>Total</strong></td>
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### SUMMER Year Two

Health Care Quality Management  
Advanced Practice Nursing Role  
Advanced Practice Principles for the Nurse Anesthetist I  
Nurse Anesthesia Clinical Practice I  

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<tr>
<td>Advanced Practice Nursing Role</td>
<td>2</td>
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<tr>
<td>Advanced Practice Principles for the Nurse Anesthetist I</td>
<td>3</td>
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<tr>
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<td>5</td>
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<td><strong>Total</strong></td>
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### FALL Year Two

Foundations of Evidence Based Advanced Practice Nursing  
Advanced Practice Principles for the Nurse Anesthetist II  
Nurse Anesthesia Clinical Practice II  

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<thead>
<tr>
<th>Course</th>
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<tbody>
<tr>
<td>Foundations of Evidence Based Advanced Practice Nursing</td>
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<tr>
<td>Advanced Practice Principles for the Nurse Anesthetist II</td>
<td>3</td>
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<td>5</td>
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<td><strong>Total</strong></td>
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### SPRING Year Two

Health Care Policy for Nursing Leaders  
Methods of Advanced Scholarly Inquiry  
Nurse Anesthesia Clinical Practice III  

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<tr>
<td>Health Care Policy for Nursing Leaders</td>
<td>3</td>
</tr>
<tr>
<td>Methods of Advanced Scholarly Inquiry</td>
<td>3</td>
</tr>
<tr>
<td>Nurse Anesthesia Clinical Practice III</td>
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### SUMMER Year Three

DNP Project Seminar I  
Nurse Anesthesia Clinical Practice IV  

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<td>DNP Project Seminar I</td>
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<tr>
<td>Nurse Anesthesia Clinical Practice IV</td>
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<td><strong>Total</strong></td>
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FALL Year Three

DNP Project Seminar II  1
Nurse Anesthesia Clinical Practice V  5

SPRING Year Three

DNP Project Seminar III  1
Nurse Anesthesia Clinical Practice VI  5

Total credits = 98

ACCREDITATION

The DNP program is accredited by the Commission on Collegiate Nursing Education.

Commission on Collegiate Nursing Education
One Dupont Circle, NW, Suite 530
Washington, D.C.  20036
Tel:  202-887-6791

The DNP Program in Nurse Anesthesia is accredited for 10 years by the Council on Accreditation of Nurse Anesthesia Educational Programs effective June 3, 2016.

Council on Accreditation of Nurse Anesthesia Educational Programs
222 S. Prospect Ave.
Park Ridge, IL  60068-4001
Tel:  847-692-7050

POLICIES (Reviewed May 2022)

These policies are not meant to replace but rather be in addition to policies of the Boston College School of Nursing.

Academic Progression

All graduate students in the William F. Connell School of Nursing are expected to maintain a GPA of 3.0 in order to remain in good academic standing. The minimum acceptable passing grade for graduate courses is a B- (80). Students will undergo academic review if they have a GPA of less than 3.0 or earn a grade less than a B- (80) in a course. If a student does not meet the minimum of a B- (80) in any graduate NURS course(s), they will be required to retake the course before advancing in the curriculum. Additionally, the student will be placed on academic probation and will be unable to progress until the deficit is remediated. Graduate students may repeat a nursing course only once after withdrawing from it or not achieving a B-.
Unsafe clinical practice and/or unprofessional conduct are grounds for failure in any clinical course and may result in immediate removal from the clinical site. Students who demonstrate unsafe or unprofessional conduct in a clinical practice site will undergo academic review and may be dismissed from the program.

**Admission Requirements**

To be considered for admission to the Program in Nurse Anesthesia, candidates must meet the following criteria:

1. Possess a B.S. in Nursing from a nationally accredited program
2. Be licensed as a Registered Nurse with the Commonwealth of Massachusetts
3. Possess a minimum of 1 year of critical care experience as an RN in the United States, its territories, or a U.S. military hospital outside of the U.S. Acceptable critical care experience includes ICU, SICU, CCU, MICU, PICU, or NICU. High acuity surgical ICU in a tertiary medical center is strongly preferred.
4. Obtain official transcripts of all prior post-secondary academic work
5. Demonstrate an undergraduate scholastic average of B or better
6. Provide a statement of goals pertaining to career objectives and how the program will help in achieving those goals.
7. Provide 3 letters of reference pertaining to academic ability and professional competency.
8. Provide an official report of GRE scores (taken within 5 years).
9. Successful completion of an undergraduate statistics course
10. Possess current ACLS and PALS certification

A personal interview will be scheduled only after all documentation is complete. Immunizations and health clearance are required prior to enrollment. Clinical sites may require additional documentation which must be obtained by the student at their own expense. Individual RN coverage by professional liability insurance is mandatory for all clinical practica. This requirement is met by the purchase by the student of student nurse anesthetist liability insurance.

**Anesthesia Care Plans**

A plan of anesthesia care is to be completed on all patients the form of which is dictated by the student’s level of experience. Beginning students will follow the established written format directly while more experienced students may present a verbal plan to the CRNA or MD preceptor.

**Assignments**

To the Facility:

Student assignment to the facility will be the responsibility of the Program Director and Assistant Program Director to insure completion of all required experiences. Although most clinical sites are commuting distance from Boston College, some clinical sites may require that the student secure housing nearer to the facility at their own expense. New clinical sites may be developed at any time to allow students to obtain required cases and experiences.
Daily Assignments:
The daily assignment of the student to specific cases is the responsibility of the Clinical Coordinators in conjunction with the Chairperson of Anesthesia at the facility or his/her designee.

Attendance
It is the belief of the faculty of the Nurse Anesthesia Program that participation in all classroom and clinical activities is essential to successful completion of the program. Students are expected to be present for all didactic classes, clinical experiences, and clinical conferences. Any unexplained absence will be brought to the attention of the Program Director. Illness, environmental (weather), and family emergencies will be taken into consideration.

Blood Born Pathogen
Pathogen Exposure:
As part of their clinical nursing courses, students are responsible to use precautions to prevent exposure to or transmission of pathogens. It is the student’s responsibility to put the appropriate techniques into practice when caring for patients in the specific clinical setting. The Kennedy Resource Center has information about the latest policies and procedures from OSHA and CDC. If exposure occurs, the student must immediately inform her/his preceptor and faculty advisor and follow agency protocols. A written report of the incident also must be provided to the Graduate Office.

Needlestick Injuries:
Students are expected to take precautions to prevent needlestick injury in the clinical area. If such an injury occurs, the faculty member should be notified immediately and a written report should be provided to the Graduate Office.

Exposure to Blood Born Pathogen:
Immediate assessment and confidentiality are critical issues and direct the following actions:
If a student, or faculty member, while engaged in clinical practice activities has an exposure to potentially infected body fluid from a client, the first action is to:

a. IMMEDIATELY remove soiled clothing and wash the exposed area with soap and water.
b. Notify faculty member.
c. Report to nearest emergency room on site at the agency or as directed by the University Health Service.
d. Identify self as student/faculty with a possible HIV/HBV exposure.
e. Give close attention to filling out the Accident Report for the agency, School of Nursing and University Health Services. A copy of the agency report form must be forwarded to the Office of the Dean, School of Nursing within 72 hours of exposure.

Boston College, in the position of guarantor, will assume the financial responsibility, if necessary, for emergency assessment and interventions through the first 72 hours after the exposure incident occurs.

No member of the Boston College community, either student or faculty, shall be denied medical evaluation and counseling based on immediate fee-for-service.
**Call**
Invaluable experience can be gained by providing anesthesia care during off-shift hours. For this reason students will be assigned to these shifts during select rotations. These on-call assignments may include an evening or weekend shift; however at no time will the student be assigned to either the clinical area or the classroom on a day following an overnight call. A CRNA or MD preceptor will be present at all times within the operating room suite when the student is on call.

**Clinical Affiliations**
Clinical experiences will be coordinated utilizing multiple facilities in both Massachusetts and New Hampshire. These sites include Mt. Auburn Hospital, Boston Medical Center, New England Baptist Hospital, Cambridge Hospital, Boston Children’s Hospital, Holy Family Hospital, North Shore Medical Center/Salem Hospital, Dartmouth-Hitchcock Medical Center, Brigham and Women’s Hospital, Tufts Medical Center, Beth Israel Deaconess Milton Hospital, Elliot Hospital, Beth Israel Deaconess–Plymouth, St. Elizabeth’s Hospital, Massachusetts General Hospital, and South Shore Hospital, University of Massachusetts/Memorial Medical Center, Massachusetts Eye and Ear, West Roxbury VA, Milford Regional Medical Center, New London Hospital. Students are required to know and adhere to all facility specific policies while on site. New clinical sites may be added at any time. The burden of travel, parking, and housing related to clinical site assignments is borne by the student.

**Clinical Hours**
Clinical time should not exceed 50 hours per week averaged over 4 weeks. Students are expected and encouraged to avail themselves of appropriate educational experiences and should complete each anesthetic unless the case extends significantly beyond 5:30 pm. At no time should the student continue to provide anesthesia care beyond 7:30 pm without the permission of the Program Director or Assistant Program Director. A break of at least 10 hours between scheduled shifts is mandatory. Compensatory time is not routinely granted.

**Committee Participation**
Each year a student will be appointed to the Doctor of Nursing Practice Committee. Students will be asked to volunteer and program administration will select one student from the group of volunteers. The student is expected to be present at all meetings except in the case of illness. If necessary the student will be relieved of clinical responsibilities to attend the meetings.

**Costs**
Additional costs for which the student is responsible include, but are not limited to: student nurse anesthetist malpractice insurance, Typhon Case Tracking System, BLS, ACLS, PALS recertification’s, transportation and parking at Boston College and clinical sites, housing convenient to Boston College and clinical sites as assigned. Students must maintain RN licensure in the Commonwealth of Massachusetts and the State of New Hampshire. There is always the possibility that licensure in other states may be required.
Dress
It is expected that students will dress appropriately at all times. Proper operating room attire will be adhered to, based on individual hospital policy. The attire for students outside the operating room at the clinical site should reflect the professional nature of nurse anesthesia practice.

Electronic Devices
With the exception of the computerized anesthesia record, the student is prohibited from the routine use of electronic devices such as computers, tablets, and smart phones in the operating room except as permitted by individual clinical sites for patient care purposes.

Employment
Students may be employed during the program as long as there is no conflict in time between employment and student responsibilities. The decision of a student to work as a registered nurse during the program is the student’s alone but is not encouraged. Should a student’s academic or clinical performance appear to suffer from such employment, the student will be counseled to work less or not at all as acceptable performance will be essential to success and progression in the program. Students may not work the shift prior to a clinical anesthesia commitment and will not be excused from a call assignment because of outside employment. **Students may not be employed to practice anesthesia and at no time is a student to perform a skill attained as an anesthesia student while functioning as a registered nurse.**

Evaluations

Daily Clinical Evaluation:
Students will be evaluated daily by the preceptor while in the clinical area. All evaluations are meant to be constructive and are designed to help the student to grow and develop as a nurse anesthesia student. The daily evaluation must be written by the preceptor. These evaluations will be kept on file in the Program Director’s Office. Any recurrent problem will be brought to the attention of the Program Director.

Summative Evaluation:
Students will be evaluated at the completion of each term in the clinical area. These evaluations will be coordinated by the Clinical Faculty in conjunction with the Program Director and Assistant Program Director. They are based on data from a variety of sources including but not limited to daily evaluations, simulation performance, and performance on the Objective Structured Clinical Examination. The summative evaluation should identify both strengths and learning needs. A satisfactory evaluation is necessary for progression in the program. Student self-evaluations will be an integral part of the process. Final course grade is the responsibility of program faculty.

Health Insurance
The Commonwealth of Massachusetts has mandated that all students, graduate and undergraduate, taking at least 75% of full-time credit hours must be covered by medical insurance providing a specified minimum coverage. Students in the School of Nursing who register for 7 or more credits are considered 75% full-time. Boston College will offer all students the option of participating in the plan offered at the University or submitting a waiver. Students are not employees of the clinical site and therefore are not covered by Worker’s Compensation.
Holidays
The following holidays will be observed by the Boston College Program in Nurse Anesthesia during the clinical phase of the program:

- New Year’s Day
- Martin Luther King Day
- Patriots’ Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Christmas Day

Because each facility determines its own operating room schedule for other minor holidays, students will receive a day off in compensation for a minor holiday worked.

Leave of Absence
Leaves of absence are not normally granted for more than 1 semester at a time. Students may obtain the Leave of Absence Form from the Graduate Programs Office and submit this form to that office for the Dean’s approval. Leaves of absence for students in the Program in Nurse Anesthesia are not encouraged and should be discussed with the Program Director. The full-time nature of the curriculum and the limited clinical sites necessitates careful planning if all students are to be placed in the clinical practica. In addition, specialty courses are only offered one semester per year.

Liability Insurance
Students in the Program in Nurse Anesthesia will participate in the Professional Liability Insurance Program for Student Nurse Anesthetists and Nurse Anesthesia Education programs provided by the AANA Insurance Services. The cost of such liability insurance will be borne by the student.

Monthly Case Records
Students will be required to maintain a daily record of all anesthesia experiences utilizing the Typhon Group: Anesthesia PRO Tracking Administration system and the cost for this will be borne by the student.

Parking and Transportation
Students are expected to comply with all rules and regulations regarding parking while at the Boston College campus or at the various clinical sites. Students must provide their own transportation to the clinical sites. A fee for parking may be required and facilities may require the student to park off-site.

Personal Time
Students are given a total of 15 personal days once the clinical portion of the program has begun which may be utilized for illness, weather, interviews, re-certifications, or other personal needs. It is advisable that where possible these days are not taken during a specialty rotation. Mondays are also
included once the clinical phase has begun. Whole days only are permitted. No partial days will be
granted and personal appointments are not allowed during a clinical day. Any time in excess of the
15 days must be made up prior to the conclusion of the program as scheduled by program
administration. The need for excessive absence from program responsibilities should be proactively
discussed with the program director. Excessive absence may result in failure to meet program
objectives and therefore failure to progress in the program.

Planned time off should be requested by e-mail to both Susan Emery (emerysu@bc.edu) and Cheryl
Walrod (walrodc@bc.edu) Program Assistant a minimum of 1 month in advance. Notification of
approval of time off must precede the making of travel plans.
The program reserves the right to assign personal days in the case of inclement weather and other
situations beyond the control of the program. Please note that in the rare event that Boston College
closes as a result of weather or other environmental conditions, students are expected to be present
in the clinical area unless specifically notified to the contrary.

Students who are ill on a day when they are assigned to the clinical area must notify their clinical
sites as directed by the clinical coordinator. They must also email both the Program Assistant for the
Nurse Anesthesia Program and Susan Emery (emerysu@bc.edu) prior to 6 am. Excessive absences
will be brought to the attention of the Program Director including absences from class.

Policy Revisions
All policies contained in the Boston College Program in Nurse Anesthesia Graduate Student
Handbook Addendum will be reviewed annually and as needed. Any changes to these policies will be
determined by the Nurse Anesthesia Program Administration. Policy changes which may have
substantive impact on the School of Nursing or the college will be brought to the Educational Policy
Committee and/or the Faculty Assembly as appropriate for a vote.

Post-Anesthesia Visits
The student will visit all patients in the PACU for whom they have provided anesthesia care. In
addition, they are responsible for completing a post-operative visit on any patient who is admitted to
the hospital overnight.

Pre-Anesthesia Visits
The student is responsible for identifying the location of his/her patient. All in-house patients will be
seen the evening prior to surgery for the purpose of performing a pre-anesthesia assessment. In the
case of same day surgical admissions, the student is responsible for the information located on the
pre-anesthesia assessment form completed during the pre-admission testing center visit. The student
will also interview the patient in the preop holding area and note any interval changes in patient
assessment. The student may also be assigned preop visits during the course of their clinical day by
the clinician in charge.

Safety
All students must complete 3 modules related to medication safety prior to entering the clinical area.
In addition the following program policies apply.
1. Know…..
   a. You carry malpractice insurance because you are liable. As an experienced registered
      nurse you are responsible for your actions and are expected to function safely within
      that scope
   b. Your limitations
      i. You are not the “go to” person in a crisis.
      ii. Ask for help and consultation: if you question if you should ask, the answer is
          always yes
   c. Program and hospital policy
      i. You must always be aware of who to call for what
      ii. You are never the one to decide your level of supervision
2. Avoid distraction
   a. Focus on the task at hand
   b. Do not engage in conversation with OR staff when checking equipment or preparing
      medication
   c. Reading in the OR is **NEVER ACCEPTABLE**
   d. Routine use of an electronic device such as a cell phone, smart phone, texting, or email
      in the OR is **NEVER ACCEPTABLE**
3. Medication safety
   a. 5 rights of medication administration
      i. Right patient
      ii. Right drug
      iii. Right dose
      iv. Right time & frequency
      v. Right route
   b. Double check
      i. Verify correct drug by checking drug name on vial
         *** **CAUTION!!! Look-alike, sound-alike medications**
         Many medications have similar packaging and/or similar names (generic or
         trade). You MUST carefully and thoroughly read the name on the vial and be
         certain you have selected the correct drug
      ii. Prior to placing vial back on cart, verify again that name on syringe matches
          name on vial
   c. Save vials on the cart until the end of the case
   d. If an unexpected reaction occurs, immediately consider that the wrong medication was
      given and check the empty vial
4. Should a student become aware of a risk to patient safety, the student **MUST**
   **IMMEDIATELY** report this to his/her preceptor, the clinical coordinator, and program
   administration. There are **NO** exceptions to this policy.
**Supervision**

The ratio of students to instructors in the clinical area is based on the student’s knowledge and ability, the physical status of the patient, the complexity of the anesthetic and/or surgical procedure, and the experience of the instructor. At no time will the ratio of student to instructor exceed 2:1 (students:instructor).

The program restricts clinical supervision in non-anesthetizing areas to credentialed experts who are authorized to assume responsibility for the student.

**Vacation Time**

Program administration reserves the right to assign/approve vacations in order to insure that all students obtain necessary clinical experiences. There is an intentional balance between time off and the continuity of clinical experience. Students will have sufficient vacation during the 27 month program. This may be subject to change by program administration.

For the class of 2025 the following are vacation weeks:

August 22, 2022
November 23 – 25, 2022 (Wednesday – Friday)
December 19, 2022, December 26, 2022, January 2, January 9 (return January 17, 2023)
March 6, 2023

**Vacation time for academic year 2023-2024 will be announced when Boston College publishes the academic and summer calendar for that year.**