REQUEST FOR IMPLEMENTATION AUTHORIZATION
NEW NURSING ACADEMIC Degree PROGRAM: UNIQUE

Doctor of Nursing Practice (DNP)

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REQUEST FOR IMPLEMENTATION AUTHORIZATION
NEW NURSING ACADEMIC DEGREE PROGRAM: UNIQUE

<table>
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<th>Program Name / Degree:</th>
<th>Doctor of Nursing Practice (DNP)</th>
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<tr>
<td><strong>Type of Request</strong></td>
<td>Authorization to Implement New Academic Program: Unique</td>
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<tr>
<td><strong>Requested by</strong></td>
<td>Marjorie Isenberg, DNSc, RN, FAAN</td>
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<td>Dean &amp; Professor</td>
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<tr>
<td><strong>CIP Code</strong></td>
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**Purpose of Program**

This proposal is to request implementation authorization for a new academic degree program, the Doctor of Nursing Practice (DNP) in the University of Arizona College of Nursing (UA CON). The nature of the DNP is similar to other practice doctorates such as the M.D., J.D., Pharm.D., Psy.D., O.D., and Au.D. The DNP program is designed for nurses seeking a terminal degree in nursing practice, and is an alternative to research focused doctoral programs (i.e. PhD programs). The impetus for the UA CON to develop the DNP is in response to the call for the adoption of the DNP by 2015 by the American Association of Colleges of Nursing (AACN) in October 2004. AACN recommendations for moving to the DNP are an outcome of the reviews of many current masters’ level programs that found that many master’s programs have expanded curricula in response to changes in the health care delivery system and these master’s programs often exceed the expected credit level for a traditional master’s degree. The current Master of Science (M.S.) degree offered by the College of Nursing does not meet the new DNP criteria adopted by AACN. The DNP degree will require significant academic requirements beyond what is currently required for the M.S.

Students may be admitted to the DNP program through the following three pathways: 1) Bachelors in Nursing to Doctor of Nursing Practice; 2) Master’s Degree in Nursing to Doctor of Nursing Practice; and 3) Master’s Degree in Nursing to Doctor of Nursing Practice with an option to obtain nurse practitioner preparation. Each DNP plan of study requires 9 units of doctoral internship that includes a culminating scholarly project requirement. Each DNP study option also requires 9 units of coursework in a cognate area of study. Option #2 does not require students to be prepared as nurse practitioners, however students must have a master’s level advanced practice nursing background to be admitted through option #2 (advanced practice nursing includes nurse practitioners, nurse anesthetists, nurse midwives, clinical nurse specialists and clinical nurse leaders).

**Learning Outcomes and Plan for Assessment**

The American Association of Colleges of Nursing (AACN) essential areas of content for Doctor of Nursing Practice programs provide the foundation for assessing intended student outcomes. Practice-focused doctoral programs, similar to current master’s programs, will prepare graduates for specialized professional practice and will be regulated by agencies charged...
to protect public safety (e.g. State Boards of Nursing). Such programs will also be scrutinized and ensured by professional nursing accrediting bodies such as the AACN. Additional stakeholders that may also have future impact on assuring the quality of program graduates include certifying bodies such as the American Nurses Association and the American Academy of Nurse Practitioners. The College of Nursing has a systematic program evaluation plan and evaluation of student outcomes of the practice doctorate will be incorporated into the overall College of Nursing program evaluation plan. The CON has extensive experience preparing advanced practice nurses as the nurse practitioner options at the College date to 1970. Graduates will be eligible to take national board certifying examinations administered by the American Nurses Credentialing Center and the American Academy of Nurse Practitioners and these national examinations are an external measure of program quality.

<table>
<thead>
<tr>
<th>Projected Student Demand</th>
<th>5-year projected annual enrollment</th>
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<tr>
<td></td>
<td>Year 1</td>
</tr>
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</table>

**Job Prospects**  

**Academia.** Arizona is facing a critical shortage of registered nurses (RNs). While the nursing shortage is a national problem, in Arizona the need is significant. In acute care settings throughout the United States the average number of RNs are 3.3 per 1,000 people, but are only 1.9 RNs per 1,000 people in Arizona. Nationally, there are 782 RNs per 100,000 people, but again, in Arizona there are only 628 RNs per 100,000 people. Between 1996 and 2000 there was a 2% decline in the ratio of RNs to the population throughout the United States, however Arizona experienced a 12.9% decline in the ration of RNs to the population. While these changes in RNs to population ratios changed the growth of the healthcare industry also was unprecedented, and since the 1990s, healthcare employment within Arizona has grown 20% faster than total Arizona jobs. The DNP improves the nursing workforce in Arizona and also responds to Senate Bill 1260 that called for the doubling of the capacity of Arizona’s RN education programs by 2007. As a concomitant shortage of qualified nursing faculty compounds the overall nursing shortage, some DNPs may be employed to alleviate faculty shortages.

**Health Service Industry.** Approximately 106,000 NPs are practicing in the USA and 5,000 to 6,000 new NPs are prepared each year. Practices are diverse and varied among NPs with the greatest percentage prepared as family nurse practitioners (FNP) at 41.2%, followed by adult nurse practitioners (ANP) at 19.5%, women’s health nurse practitioners (WHNP) at 11.3% and pediatric nurse practitioners (PNP) at 10.9%. The majority of all NPs prescribe medications (96.5%) and two-thirds practice in at least one primary care site and another 31% practice in non-primary care sites such as inpatient units, emergency or other specialty services.

These data support that the nurse practitioner role is well established in the health care industry. There is no reason to anticipate that the demand for nurse practitioners will decline, and the proposed DNP program retains the nurse practitioner preparation. The DNP degree adds to the complexity of advanced nursing practice preparation, and will enhance the capacity of the graduate.
### Sources of Funding

<table>
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<tr>
<th>Budget Summary Bottom Line</th>
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<tr>
<td>Increments</td>
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<td>+ Previous Year</td>
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<td>Total Yearly Budget</td>
<td>$380,455</td>
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REQUEST FOR IMPLEMENTATION AUTHORIZATION FOR

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Request for Implementation Proposal
Prepared by Sally Reel, Nov. 4, 2005
NEW NURSING ACADEMIC DEGREE PROGRAM

I. PROGRAM NAME

Doctor of Nursing Practice (DNP)

A. DEGREE(S), DEPARTMENT AND COLLEGE AND CIP CODE

This proposal is to request the implementation authorization for a new academic degree program, the Doctor of Nursing Practice (CIP Code: 51.1699, Nursing Other) in the University of Arizona College of Nursing.

B. PURPOSE AND NATURE OF THE PROGRAM

The purpose of the DNP is to create the practice doctorate degree program for nurses at the University of Arizona, the Doctor of Nursing Practice (DNP). The nature of the proposed program is similar to other practice doctorate degree programs such as the M.D., J.D., Pharm.D., Psy.D., O.D., and Au.D.

The University of Arizona College of Nursing (UA CON) is a national leader in graduate nursing education. The UA CON is ranked among the top 4 percent of graduate nursing programs in the country with a long standing history of responding to changes in scientific knowledge and technologies that drive the nursing practice environment. For example, our Master of Science with a major in nursing program was approved in 1967 and the Doctoral of Philosophy with a major in nursing in 1975. Nurse practitioner education at the Master of Science level was founded in 1970. The development of the Doctor of Nursing Practice is consistent with the mission of the College of Nursing. The Mission of the College of Nursing is to provide undergraduate and graduate education, generate and expand nursing knowledge, and provide service to the community. Its communities of interest include both external and internal constituencies.

Background

The impetus for the UA CON to develop the DNP is in response to the call for the adoption of the DNP by 2015 by the American Association of Colleges of Nursing. By way of history, in October 2004, the membership of the American Association of Colleges of Nursing (AACN) adopted the Doctorate of Nursing Practice (DNP) Position Statement that called for

“…a transformational change in the education required for professional nurses who will practice at the most advanced level of nursing practice. This recommendation was the result of extensive study, review, and consultation with multiple stakeholders and is based upon multiple concerns. Practice demands associated with an increasingly complex health care system created a mandate for reassessment of the education for clinical practice among all health professionals, including nurses. The recommendation that nurses practicing at the highest level should receive doctoral level preparation emerged...
from multiple factors including the expansion of scientific knowledge and growing concerns regarding the quality of patient care delivery and outcomes."

The Doctor of Nursing Practice (DNP) program is designed for nurses seeking a terminal degree in nursing practice, and is an alternative to research focused doctoral programs (i.e. PhD programs). A practice-focused doctorate prepares nursing graduates for the highest level of nursing practice beyond the initial preparation in the discipline. This degree will target nurses who want to pursue doctoral education, but who want to focus on practice rather than research. The DNP is recognized as the highest level of preparation for clinical practice. AACN member institutions voted to move the current level of preparation necessary for advanced nursing practice roles from the master's degree to the doctorate level by the year 2015, however AACN has not specifically stipulated how the new degree should be structured. AACN has recommended essential competencies for DNP graduates that serves to guide curriculum development and these are described elsewhere in this document.\(^1\)

AACN recommendations for moving to doctoral education for nursing practice are an outcome of review of many current masters’ level programs. Program review found that many master’s programs have expanded curricula in response to changes in the health care delivery system and these master’s programs often exceed the expected credit level for a traditional master’s degree. Part of the debate and concern about current master’s preparation is that “…professional nurse graduates are not receiving the appropriate degree for a very complex and demanding curricular experience. Many of these programs, in reality, require a program of study closer to the curricular expectations for other professional doctoral programs rather than master’s level study.”\(^4\)

The current Master of Science (M.S.) degree offered by the College of Nursing does not meet the new DNP criteria adopted by AACN. The College of Nursing proposed DNP degree will be a practice doctorate, modeled after other disciplines such as audiology, pharmacy, law and medicine (see Appendix C, Table 10, pg. 40, for comparison of the DNP). The DNP degree will require significant academic requirements beyond what is currently required for the M.S. degree (DNP core curriculum concepts shown in Appendix B, pg. 38). Yet, because M.S. nursing graduates may still obtain nurse practitioner credentials including state licensure and national certification (e.g. through American Nurses Credentialing Center; American Academy of Nurse Practitioners) the option for receiving the M.S. degree will be retained.

C. PROGRAM REQUIREMENTS—List the program requirements, including minimum number of credit hours, required courses, and any special requirements, including thesis, internships, etc.

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DNP Admission Options: Students may be admitted to the DNP program through the following three pathways:

1. Bachelors in Nursing to Doctor of Nursing Practice
2. Master’s Degree in Nursing to Doctor of Nursing Practice
3. Master’s Degree in Nursing to Doctor of Nursing Practice with an option to obtain nurse practitioner preparation

The requirements for each admission track vary by entry pathway and by type of nurse practitioner preparation (e.g. the clinical nature of the nurse practitioner options have some variations in coursework and clinical requirements that are driven by national standards). Regardless of study option, each DNP plan of study requires 9 units of doctoral internship that includes a culminating scholarly project requirement. Each DNP study option also requires 9 units of coursework in a cognate area of study. Option #2 does not require students to be prepared as nurse practitioners; students must have a master’s level advanced practice nursing background to be admitted through option #2. Advanced practice nursing includes nurse practitioners, nurse anesthetists, nurse midwives, clinical nurse specialists and clinical nurse leaders. The College of Nursing recognizes that DNP programs throughout the United States may evolve differently and prepare nurses with practice doctorates that are not advanced practice nurses. However, limiting admission in option #2 to nurses with advanced practice preparation is consistent with the Commission on Collegiate Nursing Education (CCNE) (CCNE is the autonomous accrediting body of the American Association of Colleges of Nursing) decision that only practice doctoral degrees with the Doctor of Nursing Practice (DNP) title will be eligible for CCNE accreditation.5

The doctoral level internship will be a scholarly plan of study that leads to the completion of a scholarly project such as a thesis or other scholarly work that is based on inquiry and application of evidence within a specific area of nursing practice. The doctoral level internship is a synthesis experience and the focus is development and completion of a scholarly project. The doctoral level internship is designed to demonstrate synthesis between practice and knowledge obtained throughout the Doctor of Nursing Practice program. Students will demonstrate scholarly application of knowledge within a practice setting that reflects their individual program of study. This scholarly experience will be supervised by a faculty advisor and doctoral level internship committee and will culminate in a written work that may be application, translation or research based. While students may provide patient care in the doctoral level internship (see discussion about examinations in the DNP program to follow on the next page) direct patient care is not the primary purpose of the doctoral level internship and practice alone will not satisfy the doctoral

5 The CCNE Board of Commissioners reached this unanimous decision on September 29, 2005 as part of its continuing work to develop a process for accrediting clinically-focused nursing doctorates. For more information see Commission on Collegiate Nursing Education Moves to Consider for Accreditation Only Practice Doctorates with the DNP Degree Title. Available Online: http://www.aacn.nche.edu/Media/NewsReleases/2005/CCNEDNP.htm. Accessed: 10-20-05
level internship coursework requirements. Courses that include supervised clinical practice will focus on knowledge and skills for direct patient care earlier in the program.

Full time BSN to DNP nurse practitioner students and Master’s in Nursing to DNP with option to obtain nurse practitioner preparation will begin their clinical rotations in the second semester of the first year of full-time study. The program has a total of 720 to 810 supervised clinical direct patient care practice hours (# of clinical hours depends on nurse practitioner major such as family, adult, psychiatric mental health or acute care) and an additional 810 supervised doctoral level internship hours for a total of 1620 clinical hours.

The first two years of the BSN to DNP curriculum resembles the current Master’s curriculum for students pursuing nurse practitioner education. The current Master’s curriculum has developed over time to meet State of Arizona professional licensure and national certification requirements for advanced practice nursing. The DNP curriculum is designed to fulfill all established criteria for nurse practitioner preparation plus the greatly expanded essential competencies of the DNP endorsed by AACN. The 3rd and 4th year courses of the DNP program involves increased emphasis on knowledge needed for scholarship and practice at the highest level of nursing practice, which culminates in the DNP internship. The 3rd year specifically is designed to provide a compendium of method-based skills that serve as the foundation for developing an evidenced based practice, quality improvement and evaluative methods, as well as preparation in new and emerging diseases and genetics. The 4th year, which terminates in December rather than May, is an application of methods through a nursing practice-based scholarly project conducted during the DNP internship within a health service agency. The DNP internship requires the execution of a scholarly project within a health care agency that reflects the student’s individual plan of study. As noted, the DNP internship project may be application, translational or research based, and is not contingent upon direct patient care. Students must submit a DNP internship plan approved by the advisory committee no later than December 1st of the Fall Term that precedes the summer term when the DNP internship is scheduled to begin.

Satisfactory performance must be demonstrated on two major examinations in addition to those normally associated with formal coursework and clinical practicum. One examination is required for program progression and one exam is optional. Progression to the 3rd and 4th year of BSN to DNP or the DNP internship course (NURS 9XX DNP Internship) for Master’s in Nursing to DNP options will require satisfactory performance of a comprehensive examination consisting of written and oral components and congruent with Graduate College policies and procedures for doctoral examination prior to the start of the DNP internship course.

The second examination is optional examination and is the national nurse practitioner certifying examination for family, adult, psychiatric mental health, or acute care nurse practitioners that is administered by the American Nurses Credentialing Center or the American Academy of Nurse Practitioners. This national board examination will coincide with completion of the first two years of study in the BSN to DNP option where students may achieve the Master’s degree and have met all requirements for licensure and certification as a nurse practitioner. For Master’s in Nursing to DNP degree students who are also obtaining nurse practitioner preparation, a postmaster’s nurse practitioner certificate may be awarded after successful completion of the
course NURS 693 Internship. At this point the student will be eligible for licensure and certification as a nurse practitioner and the national examination may be taken.

**Program Length:** The DNP has three admission points and the length to DNP degree completion and number of credit hours varies by admission point. As noted, sample curriculum plans are shown in Appendix D, Pg. 42, Tables 11 to 19. A summary of the program requirements is as follows:

<table>
<thead>
<tr>
<th>Admission Entry Point</th>
<th>Length to Completion</th>
<th>Credit Hours</th>
<th>Clinical Hours</th>
<th>DNP Internship</th>
</tr>
</thead>
<tbody>
<tr>
<td>BSN to DNP</td>
<td>10 semesters (includes three summer sessions)</td>
<td>87-90 depending on major</td>
<td>810</td>
<td>810 (9 credits of clinical DNP internship at 1:6 didactic to clinical ratio)</td>
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<tr>
<td>Master’s to DNP</td>
<td>5 semesters (includes two summer sessions)</td>
<td>45</td>
<td>none</td>
<td>810 (9 credits of clinical DNP internship at 1:6 didactic to clinical ratio)</td>
</tr>
<tr>
<td>Postmaster to DNP with option to obtain nurse practitioner preparation</td>
<td>8 semesters (includes three summer sessions)</td>
<td>69-71 depending on major</td>
<td>810</td>
<td>810 (9 credits of clinical DNP internship at 1:6 didactic to clinical ratio)</td>
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D. CURRENT COURSES AND EXISTING PROGRAMS—List current course and existing university programs which will give strength to the proposed program.

The existing master’s (M.S.) and PhD nursing programs provide a wealth of coursework, research and scholarly educational opportunities, cognates and clinical practice experiences upon which the DNP degree will be based. In Appendix C, those courses marked with an asterisk are currently offered as part of the Master’s or PhD nursing programs.

Courses offered in other departments, particularly those associated with cognates, will be accepted for the DNP with advisor review and approval by the College of Nursing Doctoral program committee and approval also by the Associate Dean for Academic Affairs. For example, epidemiology is offered in another department (e.g. EPID 573A Basic Principles of Epidemiology) that meets program criteria and will be one of the core DNP courses. However, the majority of new DNP courses do not have equivalents outside the College of Nursing; thus the intent is to offer all courses, with the exception of Epidemiology, within the College of Nursing. This also reflects the online nature of the graduate programs at the College of Nursing and assures that students have access to all necessary courses from remote geographic locations (Note: EPID 573A will be offered online).
As previously noted, 9 hours of coursework are required for the cognate. Cognate areas suggested that are well supported and in place already at the College of Nursing include rural health care, border health care, aging and gerontology, health care delivery systems and informatics as well as vulnerable populations, injury mechanisms and bio-behavioral responses. Students may also take cognate coursework outside the department with a program of study that is approved by the faculty advisor, the College of Nursing Doctoral Program Committee and the Associate Dean for Academic Affairs.

E. NEW COURSES NEEDED—List any new courses which must be added to initiate the program; include a catalog description for each of these courses.

A course description of each new course is provided in Table 21, pg. 57. Abbreviated course syllabi for all new nursing courses to be offered in the College of Nursing are also shown in Appendix D beginning on page 58.

The program requires 810 supervised direct patient care clinical hours for students completing requirements for family and acute care nurse practitioner options and 720 supervised direct patient care clinical hours for students completing requirements for adult and psychiatric mental health nurse practitioner options. All DNP majors also have a clinical DNP internship as described earlier. All supervised direct patient care clinical hours for nurse practitioner programs are already established, meet national standards, and are well supported as these are current requirements for master’s preparation. The DNP internship is a synthesis experience, as noted, that incorporates application, translation or a research-based scholarly project as part of a health care industry immersion experience. It builds upon the earlier thesis or scholarly project done by year two of the BSN to DNP curriculum (Note: the thesis or scholarly project NURS 910 is a current requirement of the Master of Science degree. The College of Nursing intends to retain a Master of Science exit point in the BSN to DNP option, and the decision to retain the thesis or scholarly project at this point in the curriculum is consistent with our already approved Master of Science degree. As it is possible within the health care industry for nurse practitioners to be licensed and nationally certified with Master’s preparation, retaining the Master of Science exit point accelerates the time a DNP student can provide direct patient care and provides the clinical foundation for the final DNP internship—something analogous to residencies experienced by Medical Doctors after graduating from medical school, however DNP residencies may or may not include direct patient care so the DNP internship is different from medical residencies in this respect).

F. REQUIREMENTS FOR ACCREDITATION—Describe the requirements for accreditation if the program will seek to become accredited. Assess the eligibility of the proposed program for accreditation.

The coursework and clinical requirements meet or exceed the requirements for accreditation by the Commission on Collegiate Nursing Education. Also, the College of Nursing undergraduate and graduate curriculum was evaluated and reapproved by the Commission on Collegiate Nursing Education during the fall of 2001 and accreditation is current through 2010. Once ABOR approves the implementation of the DNP application to the Commission on Collegiate Nursing Education (CCNE) will be made for program review and accreditation.
II. STUDENT LEARNING OUTCOMES AND ASSESSMENTS

A. What are the intended student outcomes, describing what students should know, understand, and/or be able to do at the conclusion of this program of study?

Within the AACN DNP Essentials draft, nursing practice is broadly defined as follows:

"any form of nursing intervention that influences health care outcomes for individuals or populations, including the direct care of individual patients, management of care for individuals and populations, administration of nursing and health care organizations, and the development and implementation of health policy. Preparation at the practice doctorate level includes advanced preparation in nursing, based on nursing science, and is at the highest level of nursing practice."\(^6\)

It is anticipated that DNP graduates will be prepared for many different roles. The AACN Essentials draft describes core DNP competencies that underpin curriculum. These are briefly described as follows and the complete DNP essentials draft is shown in Appendix F.

Core Competencies: As noted, specific core competencies for graduates of the Doctor of Nursing Practice program are identified by the American Association of Colleges of Nursing (AACN) in the DNP Essentials (http://www.aacn.nche.edu/DNP/pdf/DNPEssentialsDraft_8-18-05.pdf). A series of regional hearings are underway throughout the nation between September 2005 and January 2006 to obtain broader stakeholder input and a final draft document will be presented to the AACN members in 2006 for review and confirmation. Meanwhile, the August 18, 2005 draft serves as to inform the curriculum model proposed by the UA CON.

There are eight (8) essential areas for Doctor of Nursing Practice programs identified by AACN and these 8 essentials drive the curriculum plan proposed for our DNP program.\(^7\) A synopsis of the eight AACN essentials includes the following:

- **Scientific underpinnings for practice:** The DNP program prepares the graduates to integrate nursing science with knowledge from biophysical, psychosocial, analytical, and organizational sciences as the basis for the highest level of nursing practice. Graduates use evidence-based theories and concepts to determine the nature and significance of health and health care delivery phenomena, describe the actions and advance strategies to alleviate and ameliorate the phenomena and evaluate outcomes.

- **Advanced Nursing Practice for Improving the Delivery of Patient Care:** DNP nursing education prepares graduates with distinct, in-depth knowledge in a specific area of health care. Specialization is a hallmark of the DNP and goes beyond the notion of direct or indirect care provider or the advanced practice roles of clinical nurse specialist, nurse anesthetist, nurse midwife, or nurse practitioner. DNP graduates are expected to

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demonstrate highly refined assessment skills and their practice is based upon the application of biophysical, psychosocial, behavioral, sociopolitical, cultural, economic, and nursing science as appropriate in their specific areas of specialization.

- **Organization and system leadership/management, quality improvement and system thinking:** These essential skills for DNP graduates reflect the need for doctoral level knowledge and skills to improve clinical care and health outcomes. Advanced skills in these make it possible to create and sustain improvements in quality of health care delivery, health outcomes for all groups and promote patient safety and excellence in clinical care.

- **Clinical Scholarship and Analytical Methods for Evidence-Based Practice:** Practice-focused nursing doctoral programs focus on the skills and knowledge necessary for evidence-based nursing practice at the highest level. DNP graduates use analytical methods to develop best practices and practice guidelines and to facilitate the evaluation of systems of care to improve patient outcomes.

- **Technology and Information for the Improvement and Transformation of Health Care:** Technologies and informational content at the DNP level are designed to prepare the graduate to be proficient in the evaluation and utilization of technology and information systems supportive of clinical and administrative decision-making, care systems, nurse-sensitive outcomes, and quality improvement.

- **Health Care Policy for Advocacy in Health Care:** The graduate of the DNP program must have the capacity and desire to engage proactively in the crafting and implementation of health policy at all levels and provides a critical interface between practice, research and policy. DNP graduates also need the ability to contrast the major contextual factors and policy triggers that influence health policy-making at the various governmental levels. These graduates also need to be able to analyze health policies from the perspective of consumers, nursing, and other health professions to improve health care outcomes.

- **Interprofessional Collaboration for Improving Patient and Population Health Outcomes:** DNP graduates will be expected to advance beyond participation in, and meaningful contribution to, interprofessional teams to one of establishing interprofessional teams and providing the leadership and direction of the work of the team; thus functioning on a par with other health care professionals.

- **Clinical Prevention and Population Health for Improving the Nation’s Health:** The highest level of preparation for DNP practice should include a strong foundation in clinical prevention and population health. The DNP graduate should have strong conceptual foundation in clinical prevention and population health.

It should be noted that other key national professional standards also drive the curriculum model including entry-level competencies as outlined by the following documents. These standards are
an inherent component of program requirements and accrediting standards. These include
curriculum concepts and competencies as defined by the following as well:

American Association of Colleges of Nursing, Essentials for Master’s Education
American Association of Colleges of Nursing, Essentials for Doctoral Education
American Association of Colleges of Nursing, Essentials for Practice Doctoral Programs
National Organization of Nurse Practitioner Faculties, Practice Doctorate Competencies
National Organization of Nurse Practitioner Faculties, Competencies for Nurse Practitioners
(acute care, primary care & psychiatric mental health)

AACN recognizes that the depth and focus of content will change based on the particular role for
which the student is preparing. To illustrate, students preparing for administrative roles will
have increased depth in organizational and systems’ leadership, where as those preparing for
advanced practice roles (e.g. nurse practitioners, clinical nurse specialists, nurse anesthetists, and
nurse midwives) will have more clinical specialty content in the area of advanced nursing
practice.⁸

**DNP Program at the University of Arizona.** At the UA CON, our DNP program will focus on
advanced practice nursing education, specifically nurse practitioner (NP) education. However,
DNP programs throughout the country will vary and many DNP programs will not be nurse
practitioner focused. Considering that masters’ degree nurses may be prepared for advanced
practice that does not include direct patient care (e.g. in nursing fields such as health care
systems or informatics) and potential students to our program may not be nurse practitioners or
other advanced practice nurses, the UA CON DNP curriculum is structured in a manner that will
allow non-advanced practice nurses with masters’ degrees to obtain the DNP (see admission
option #3, pg. 8 and see Appendix D, Part 2, pg. 48, Tables 15 to 18 for sample plans of Master’s
NP/DNP preparation).

Currently, the UA CON offers four options for graduate nurse practitioner education: Family
Nurse Practitioner (FNP), Adult Nurse Practitioner (ANP), Psychiatric Mental Health Nurse
Practitioner (PMHNP) and Acute Care Nurse Practitioner (ACNP) (sample BSN to DNP plans of
study as well as sample plans for Master’s in Nursing to DNP plans of study for each NP major
are shown in Appendix D). Presently, students may become a nurse practitioner through either
the Master of Science or postmaster’s’ certificate plan of study. While current master’s and
postmaster’s programs meet all state and national standards for accreditation, certification and
licensure, changes in the health care environment that demand increased knowledge and
competencies of our graduates are not addressed and will cause the UA CON nursing programs
to fall behind rather than lead national changes in graduate preparation for nurses seeking a
terminal degree for practice.

The DNP proposed curriculum, as noted, offers a practice doctorate, modeled after other
programs such as medicine, law, pharmacy and audiology. The DNP curriculum will
substantially differ from the Master of Science requirements for nurse practitioner preparation.

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⁸ AACN. (Aug. 18, 2005). DNP Essentials. Draft available online:
The program requirements for entry, coursework, practica, thesis and/or scholarly project work, DNP internship, cognate field of study, comprehensive and board exams, and the possibility for further study for the Ph.D. in nursing are shown in Appendix C, pg. 39.

The AuD and PharmD programs are used as comparison degree programs because four years are required to complete professional training, and both include a curriculum that combines basic and applied sciences with clinical practice experiences. One significant difference between the PharmD and the DNP is that the PharmD does not require a bachelor’s degree for entry into the program whereas the DNP and AuD do require bachelor’s degrees for program entry. A Master’s in Nursing entry point is an option for DNP study for both those seeking nurse practitioner preparation and those who are not.

Both the College of Pharmacy and the Department of Speech and Hearing Sciences offer professional training through their PharmD and AuD programs while offering academic credentials through the Master of Science and Doctor of Philosophy programs. This is similar to the model proposed by the UA CON. The UA CON currently provides advanced practice nursing education through the Master of Science and postmaster’s certificate study options. Again, we will continue to offer the Master of Science option.

In addition to the AuD and the PharmD, the law degree, Juris Doctor (JD), is another comparison for the DNP. The JD is a professional training program that includes courses in theory and practice as well as practical application. The JD is a three year program whereas the DNP is a 3.5 year program (3.5 years does include some summer semesters). However, the College of Law has eight established dual degree programs: the J.D./Ph.D. in Philosophy, Psychology or Economics; the J.D./M.A. in Economics; the J.D./M.A. in American Indian Studies; the J.D./M.A. in Latin American Studies; the J.D./M.B.A.; and the J.D./Master’s in Public Administration; and the J.D./M.A. in Women’s Studies. It is anticipated that some DNP students may at some point want to consider research careers. In those cases, students would complete the full curriculum for the DNP and then enroll in a PhD nursing program. Courses for the DNP may fulfill some but not all of the requirements for the PhD. For example, NURS 730 Quantitative Methods, NURS 731 Qualitative Methods and NURS 631 Advanced Statistics are required courses in the PhD Nursing Program. Some courses that DNP students may take as cognates are also courses that may satisfy Substantive or minor areas within the PhD program (e.g. see example courses listed in Table 23, pg. 75). However, the ability of the DNP to move into the PhD program will require the same review and recommendation for admission to the PhD as any other student seeking PhD admission (e.g. having a DNP or being in the DNP program would not automatically provide an entry into a PhD Nursing program). The program of study for the DNP seeking the PhD would have to meet all the standards for the PhD curriculum and whether courses taken satisfy a portion of the PhD curriculum will be determined by advisor review and approval by the Doctoral Program Committee and also by the Associate Dean for Academic Affairs.

It is also possible to compare the DNP degree to the M.D, a professional degree. The first two years of the medical degree emphasizes basic sciences with some introduction to clinical work. In the last two years of medical school, emphasis is on clinical practice through clerkships. The
DNP also progresses from foundational courses to more applied clinical work including a terminal DNP internship in years 3 and 4.

The scholarly project requirement that is the focus of the DNP internship distinguishes the DNP from the JD or MD and aligns the DNP more closely with the AuD and PharmD. The justification for the scholarly project requirement is twofold. First, the UA CON recognizes that the scholarly project demonstrates mastery of a subject area beyond that obtained at the bachelor’s level and includes a master’s thesis and/or scholarly project already at the Master of Science preparation level. Second, the AACN Essential Draft for the DNP recognizes that nursing practice doctorate education prepares nurses with distinct, in-depth knowledge in a specific area of health care. AACN recognizes specialization as a hallmark of the DNP. This specialization goes beyond the notion of direct or indirect care provider or the advanced practice roles of the nurse practitioner, and DNP graduates carve out “…a distinct domain of knowledge in which expertise, in-depth knowledge, and mastery are obtained.”9 Thus, the scholarly project is a culminating and synthesizing DNP internship experience designed to produce a graduate with the ability to carve out, synthesize and apply a distinct knowledge domain consistent with mastery at the graduate DNP level of education.

While other disciplines may consider a clinical PhD, such as psychology, we did not consider this as a terminal practice option for nursing. The principal reason that we did not choose this pathway is because the DNP is endorsed by our major professional nursing organization (AACN) as a distinct educational path for nurses who want a terminal degree for practice. Should we offer the clinical PhD we risk losing students to other DNP programs. We also risk losing the primary purpose of each degree: research for the PhD and practice for the DNP.

The UA CON proposes to admit students to the DNP program in the summer II term 2006. The College of Nursing will admit BSN to DNP students in 2006 and MSN to DNP students with an option to obtain nurse practitioner preparation (Admission options #1 & 3, pg. 8). Students who begin in the summer 2006 the Master’s to DNP with an option to also obtain nurse practitioner preparation will be eligible for graduation with full time study in December 2008. Students that enter the BSN to DNP pathway will be eligible for graduation with full time study by December 2009.

Master’s to DNP students who are not seeking nurse practitioner preparation (Admission option #2, pg. 8) will be admitted in the summer 2007. With full time study, these students will graduate in December 2008. The admission timeline plan is summarized in Table 2, pg. 22.

Consequently, with the admission schedule and study plans as described, the College of Nursing will have graduates seven (7) years before the time for conversion adopted by AACN and this will place the UA CON in a leadership position during this transitional period.

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B. Provide a plan for assessing intended student outcomes.

As noted, the AACN essential areas of content for Doctor of Nursing Practice programs will provide the foundation for assessing intended student outcomes. Practice-focused doctoral programs, similar to current master’s programs, will prepare graduates for specialized professional practice and will be regulated by agencies charged to protect public safety (e.g. State Boards of Nursing). Such programs will also be scrutinized and ensured by professional nursing accrediting bodies such as the American Association for Colleges of Nursing. Additional stakeholders that may also have future impact on assuring the quality of program graduates include certifying bodies such as the American Nurses Association and the American Academy of Nurse Practitioners.²

The College of Nursing has a systematic program evaluation plan and evaluation of student outcomes of the practice doctorate will be incorporated into the overall College of Nursing program evaluation plan. The CON has extensive experience preparing advanced practice nurses as the nurse practitioner options at the College date to 1970. At the master’s level the Curriculum Evaluation Plan for the College of Nursing includes specific evaluation of each course including student outcomes after completing each course. Using the standardized university teaching evaluation forms (TCE), students also evaluate instruction and the individual course at the end of each term. Evaluations of clinical practice sites are conducted prior to their use and on a regular on-going basis once utilized. The Coordinator of Clinical Affairs, under the direction of the Associate Dean for Academic Affairs maintains the clinical database and collects evaluations of clinical agencies to ensure ongoing improvement of clinical learning opportunities. The Division Chair also evaluates faculty annually for teaching effectiveness. Program evaluation for the practice doctorate will also incorporate published core competencies by AACN as these become available. Graduates and alumni of the programs are also surveyed periodically to determine how well the program prepared them for practice.

Graduates will be eligible to take national board certifying examinations administered by the American Nurses Credentialing Center and the American Academy of Nurse Practitioners and these national examinations are an external measure of program quality.

III. STATE’S NEED FOR THE PROGRAM

A. How does this program fulfill the needs of the State of Arizona and the region?

Several forces within the State of Arizona and the nation drive the need for the Doctor of Nursing Practice program. Health care is undergoing dramatic and turbulent changes impacted by a profound growth in knowledge and technologies. Despite the explosive growth of knowledge and technology, the health care delivery system has floundered in its ability to provide consistently high-quality care to all Americans. Research about the quality of health care reveals a system that frequently fails to translate knowledge into practice, and to apply new technology safely and appropriately. Fundamental changes in health professions education is needed to address health system turmoil and rapid change. Within medical education, for example, traditional clinical education emphasizes teaching a core of knowledge, much of it focused on the basic mechanisms of disease and pathophysiological principles. Given the expansiveness and dynamic nature of the science and evidence base in health care, educational
approaches need to expand and teach students how to manage knowledge, as well as use effective tools that can support clinical decision making, and apply methodological rules to the evaluation and understanding of evidence. Health care education also needs to include the development of enhanced clinical leadership skills which will be required to direct and lead the changes needed in our complex health care delivery systems.\textsuperscript{10}

Graduates of the Doctor of Nursing Practice program have potential to significantly impact overall patient health and safety outcomes, both nationally and throughout the State of Arizona. For example, within the nation’s health care system, nurses are the largest number of health care providers. Safety can sometimes be a matter of life or death because how well patients are cared for by nurses affects patient health.\textsuperscript{11} Nationally, serious quality challenges are present in the health care system including a high incidence of medical errors as well as gaps in health care quality that place patients at risk. Several recent reports from the Institute of Medicine underscore the need for an appropriately trained health care workforce to meet the challenges of the 21\textsuperscript{st} century.\textsuperscript{4,12}

Arizona, like the nation at-large, is facing a shortage of registered nurses (RNs) that is reaching a crisis of critical proportion. Moreover, a significant nursing faculty shortage exists as well. A recent survey conducted by AACN found that while both enrollments and graduations increased in master’s and doctoral degree nursing programs in 2004, only 8 additional graduates (representing 2\%) received doctoral degrees.\textsuperscript{13} Since the doctoral degree is the terminal degree desired for nursing faculty, the practice doctorate is another appropriate alternate terminal degree for educating nursing faculty. Specifically, the DNP improves the nursing faculty pool by providing access to an alternative terminal degree to the PhD. The DNP may potentially attract nurses into doctoral programs who otherwise may not seek terminal degrees because they do not want research preparation.

Moreover, Arizona has some unique health care challenges that demands quality educated nursing leadership. Arizona is the nation’s 6\textsuperscript{th} geographically largest state and most of its acreage is frontier and rural. While seventy-six percent (76.3\%) of Arizona’s total population is congregated in two urban counties (Maricopa and Pima Counties), this percentage is deceptive in terms of populations per square mile and sheer geography. Each county in Arizona, even the urban counties, have significant health professional shortage areas.\textsuperscript{14} In addition, Arizona’s population is characterized by great and growing ethnic diversity with Hispanics, predominantly

of Mexican descent, comprising the largest ethnic minority group. Arizona is home to 21 sovereign Indian nations and currently there are about 252,000 Indians that live predominantly in rural communities and in impoverished conditions. American Indian tribes as well as many Hispanic people face significant health disparities. These groups also often lack culturally competent care, inadequate funding for health care and poor access to care that compound disparities.¹⁵

The DNP graduates have potential to improve overall patient care and safety in the State of Arizona by applying enhanced nursing practice skills, theoretical knowledge and research findings across populations and geographic settings. Thus, a well-planned nursing response to address the needs of Arizona must include producing nurses capable of providing visionary responses in areas of direct patient care, health system leadership and management, health policy development, and overall capability to improve and transform the State’s health care, within the unique geographies and diversity of State residents. The College of Nursing is uniquely poised to provide health care leadership as the College of Nursing already has graduate initiatives that target rural health care, border health, workforce, and informatics that are at the forefront of changes needed within Arizona and the nation at-large.

B. **Is there sufficient student demand for the program?**

The College of Nursing has a proven track record of successful educational innovation. In 2002, our doctoral program was transformed for online delivery. Today, this is the largest graduate program at the College (in 2005 we have received 63 applications for 20 slots—the most robust applicant pool of any Nursing PhD program in the country). Our nurse practitioner programs were transformed to online delivery methods in 2004. With both programs successfully online, development of a practice doctorate with online methodologies is a logical fit. Our practice doctorate will merge the knowledge gained about advanced practice nursing preparation with innovations in doctoral education.

1. What is the anticipated student enrollment for this program?

<table>
<thead>
<tr>
<th>5-YEAR PROJECTED ANNUAL ENROLLMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1&lt;sup&gt;st&lt;/sup&gt; Yr</td>
</tr>
<tr>
<td>----</td>
</tr>
<tr>
<td># of Students</td>
</tr>
</tbody>
</table>

**Sources for Projected Annual Enrollments.** Currently, approximate 25 students are admitted annually to either the family, adult and psychiatric mental health nurse practitioner options (note: 25 admissions represent both Master of Science and Postmaster’s Certificate options). The College of Nursing added the acute care nurse practitioner track in August 2005 and will admit up to 10 students annually to this option (again, these 10 admissions include both Master of

Science and Postmaster’s Certificate options). The practice doctorate will target this student pool, which is currently at the master’s and postmaster’s certificate level.

Given that the practice doctorate has been adopted by the American Association of College of Nursing as the entry degree for advanced practice by 2015, and our current enrollments, projected enrollments reflect a logical transition from master’s preparation to doctoral preparation for the nurse practitioner program and previously described advance practice nurses.

2. What is the local, regional and national need for this program? Provide evidence of the need for this program. Include an assessment of the employment opportunities for graduates of the program during the next three years.

State/Local/Regional Need: Arizona is facing a critical shortage of registered nurses (RNs). Unlike shortages of the past, today’s nursing shortage is fundamentally different. Fewer people are choosing nursing as a career coupled with an increasing demand for RNs related to statewide population growth, a disproportionate increased in an aging population and healthcare and technological advances has created an unprecedented and persistent nursing shortage. While the nursing shortage is a national problem, in Arizona the need is significant. In acute care settings throughout the United States the average number of RNs are 3.3 per 1,000 people, but are only 1.9 RNs per 1,000 people in Arizona. Nationally, there are 782 RNs per 100,000 people, but again, in Arizona there are only 628 RNs per 100,000 people. Between 1996 and 2000 there was a 2% decline in the ratio of RNs to the population throughout the United States, however Arizona experienced a 12.9% decline in the ration of RNs to the population. While these changes in RNs to population ratios changed the growth of the healthcare industry also was unprecedented, and since the 1990s, healthcare employment within Arizona has grown 20% faster that total Arizona jobs. The Governor’s Task Force on the Nursing Shortage identified four strategic themes that categorize those factors that contribute to Arizona’s nursing workforce shortage: attracting people into the profession, educating more nurses, improving the work environment, and removing regulatory barriers.16

While all of the above themes are relevant for why the DNP is needed, educating more nurses is a significant opportunity for the DNP to improve the nursing workforce in Arizona and it another response to Senate Bill 1260 that called for the doubling of the capacity of Arizona’s RN education programs by 2007. Nationally, 2004 data show that nursing school entry-level baccalaureate enrollments increased in all regions of the United States with the greatest enrollments occurring in the North Atlantic states (22.2 percent). While enrollments also increased the South, Midwest, and West enrollments rose by 16.7 percent, 15.9 percent, and 8.6 percent, respectively. Unfortunately, a concomitant shortage of qualified nursing faculty compounds the nursing shortage despite interest in baccalaureate and graduate nursing education being high. Qualified applicants to nursing schools are not being accepted at four-year colleges and universities because there are insufficient numbers of faculty, clinical placement sites, and classroom space among other factors. The faculty shortage is compounded by a rapidly aging

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nursing faculty as well. The mean age across all faculty ranks in 2004 was 51.5 years. Moreover, the average age of doctorally prepared faculty by rank was 56.8 years for professors, 54.6 years for associate professors, and 50.8 years for assistant professors, which further compounds the ability to educate the nursing workforce.\(^{17}\)

Increasing the number of nursing faculty is part of the strategic plan identified by the Arizona Governor’s Task Force on the Nursing Shortage. Thus, implementing the practice doctorate in nursing degree program at the University of Arizona College of Nursing is another opportunity in addition to traditional research doctoral degree to prepare nursing faculty with doctorates who may teach in undergraduate nursing programs in community colleges, four-year colleges and universities.

**National Advanced Practice Opportunities:** According to a U.S. Nurse Practitioner Workforce survey published by the American Academy of Nurse Practitioners (2004) the following describe current characteristics of NPs:

- 88% have graduate degrees
- 92% are nationally certified
- 39% have hospital privileges
- 20% practice in rural or frontier settings

Approximately 106,000 NPs are practicing in the USA and 5,000 to 6,000 new NPs are prepared each year. Practices are diverse and varied among NPs with the greatest percentage prepared as family nurse practitioners (FNP) at 41.2%, followed by adult nurse practitioners (ANP) at 19.5%, women’s health nurse practitioners (WHNP) at 11.3% and pediatric nurse practitioners (PNP) at 10.9%. The majority of all NPs prescribe medications (96.5%) and two-thirds practice in at least one primary care site and another 31% practice in non-primary care sites such as inpatient units, emergency or other specialty services.\(^{18}\)

These data support that the nurse practitioner role is well established in the health care industry. Practice outcomes data also support the positive impact that nurse practitioners also have on patient outcomes. There is no reason to anticipate that the demand for nurse practitioners will decline. The DNP program retains the nurse practitioner preparation and we have the two tracks most in demand—family and adult nurse practitioners—and two recently newer tracks that are also in demand—psychiatric mental health nurse practitioners (PMHNP) and acute care nurse practitioners (ACNP). Of note, in the 2004 AANP survey data, the mean full-time NP salary for all specialties was $73,620 and an average hourly salary rate of $36.44. Currently, in the greater Tucson metro area, our PMHNP faculty is in practice arrangements that pay $67.00 per hour. Full time salaries for PMHNPs are as high as $120,000 annually, which reflects industry demand. These salaries are generated at the Master of Science or Postmaster’s certificate level of preparation.


Realistically, the DNP is a new degree and there will be a transition period for integrating the DNP into the health care industry. It is not clear how the health care industry will respond to the DNP at this point in professional transition. However, the DNP degree adds to the complexity of advanced nursing practice preparation, and will enhance the capacity of the graduate. It is also unlikely that the demand for nurse practitioners will decrease. Therefore, it is anticipated that the increased preparation through the DNP degree with ultimately increase demand and salary as graduates impact industry.

3. **Beginning with the first year in which degrees will be awarded, what is the anticipated number of degrees that will be awarded each year for the first five years?**

Current plans are to admit students in the Fall Term 2006 (pending funding). As previously noted, the College of Nursing will admit to the BSN to DNP option and the Master’s to DNP program with an option to obtain a postmaster’s certificate as a nurse practitioner. The rationale for admitting to the BSN to DNP and Master’s to DNP with option to study the nurse practitioner certificate first allows two academic years for all the new courses to be developed for the DNP degree. The College will admit students to the Master’s to DNP without the nurse practitioner certificate option in the summer term 2007.

The first graduates of the BSN to DNP will be December 2009 (full-time study). The first graduates of the Master’s students (full-time study) will be December 2008. The first graduates of the Master’s to DNP without the nurse practitioner study option will also graduate in December 2008 (full-time study). As also previously noted, this time line positions the College of Nursing to have graduates 7 years prior to the transition timeline of 2015. By 2015 we will also have evaluative data about the graduates. This enables the College of Nursing to assume a leadership role during this educational shift in graduate nursing education.

**Table 2: Timeline for DNP Program Admission**

<table>
<thead>
<tr>
<th>Program Track</th>
<th>First Students Admitted</th>
<th>Full Time Graduate Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>BSN to DNP</td>
<td>Summer 2006</td>
<td>December 2009</td>
</tr>
<tr>
<td>Master’s to DNP with NP Study Option</td>
<td>Summer 2006</td>
<td>December 2008</td>
</tr>
<tr>
<td>Master’s to DNP without NP study Option</td>
<td>Summer 2007</td>
<td>December 2008</td>
</tr>
</tbody>
</table>

This timeline allows for a two-year period to develop and implement all new courses needed for the DNP. This also fosters a three year plan for recruiting new faculty needed to implement the program.

**PROJECTED DEGREES AWARDED ANNUALLY**

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<th></th>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>#of Awarded Degrees</td>
<td>0</td>
<td>0</td>
<td>12</td>
<td>20</td>
</tr>
</tbody>
</table>
IV. APPROPRIATENESS FOR THE UNIVERSITY

The Doctor of Nursing Practice is an innovative development within the discipline of nursing and endorsed by our most significant accrediting body (AACN). Given the preference to be on the cutting-edge of knowledge development and integration, development of the Doctor of Nursing Practice at the University of Arizona is responsive to the educational changes facing the discipline and enables the College of Nursing to lead and demonstrate to the Nation excellence in this new nursing educational pathway. The significant advantage for our College of Nursing to make the transition now is that the College can lead the national change rather than react to it.

The College of Nursing is well-positioned to meet the objectives of the proposed DNP program. As a professional college of the University of Arizona, the College of Nursing is in accord with the policies and purposes of a public, land-grant, research institution. As one of eighteen UA colleges and schools and one of the five colleges and schools comprising the University of Arizona Health Sciences Center, the College of Nursing offers a wealth of educational resources. Our current clinical practice sites available in the community and surrounding rural areas include nurse-managed clinics, health-maintenance organizations, Indian Health Services sites, community health centers, physician–nurse practitioner practices, mental-health centers, health departments, long-term-care settings, retirement centers, schools, and acute-care settings.

The purposes of the College are defined as education, research and scholarship, and service. The Mission of the College of Nursing is to provide undergraduate and graduate education, generate and expand nursing knowledge, and provide service to the community. Our communities of interest include both external and internal constituencies. The College is a learning community that fosters the development of its constituents through enactment of its values of excellence, creativity, balance and social responsibility. The community professes the beliefs of human dignity, integrity, altruism, autonomy and social justice in nursing practice. The College conducts its Mission to provide nursing education by preparing professional nurses who function in various contexts related to the health care needs of the people in Arizona and society in general. The College already prepares individuals who engage in practice, scholarship and research that advance nursing knowledge and service. The DNP is a proactive response to a national transition in nursing education and the College’s leadership in the endeavor reflects a proven history of academic nursing excellence.

V. EXISTING PROGRAMS AT OTHER CAMPUSES

A. EXISTING PROGRAMS IN ARIZONA

1. For a unique (non-duplicative) program, provide a statement to the effect that there are no existing programs at other Arizona public universities that duplicate the proposed program.

The DNP program is unique for the State of Arizona, although master of science degrees are awarded at other state universities (e.g. ASU, NAU).
PhD nursing education is available at the UA CON. The Doctor of Nursing Science (DNS) degree is available at Arizona State University.

The Dean of the University of Arizona College of Nursing has been in communication with the Dean of Arizona State University regarding potential areas of joint collaboration in relation to the DNP.

2. Other Institutions—If this program is not currently offered at the same academic level by private institutions in the state of Arizona, provide a statement to that effect. If a similar program is currently offered by private institutions, list all programs and indicate whether the institution and program are accredited.

The Doctor of Nursing Practice is a new degree program, and as noted was recently endorsed (Oct. 2004) as the terminal degree for advanced nursing practice by the American Association of College of Nursing (AACN). At the time of this application there are no known DNP programs at private institutions in Arizona.

There are few programs throughout the country. According to AACN, the following universities are currently accepting students into Doctor of Nursing Practice (DNP or DrNP) programs:

**Table 3: Current Practice Doctoral Nursing Programs throughout the USA**

<table>
<thead>
<tr>
<th>Program</th>
<th>Private Institution</th>
<th>NCA Accreditation (Y or N)</th>
<th>Other Accreditation (listed)</th>
<th>Program Accreditation (Y or N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Western Reserve University</td>
<td>Private</td>
<td>Y</td>
<td></td>
<td>National League for Nursing</td>
</tr>
<tr>
<td>Columbia University</td>
<td>Private</td>
<td></td>
<td>Middle States Association of Colleges</td>
<td>Commission on Collegiate Nursing Education</td>
</tr>
<tr>
<td>Drexel University</td>
<td>Private</td>
<td></td>
<td>Middle States Association of Colleges</td>
<td>Commission on Collegiate Nursing Education</td>
</tr>
<tr>
<td>Medical College of Georgia</td>
<td>Public</td>
<td></td>
<td>Southern Association of Colleges</td>
<td>National League for Nursing</td>
</tr>
<tr>
<td>Rush University</td>
<td>Private</td>
<td>Y</td>
<td></td>
<td>Commission on Collegiate Nursing Education</td>
</tr>
<tr>
<td>University of Colorado at Denver</td>
<td>Public</td>
<td>Y</td>
<td></td>
<td>Commission on Collegiate Nursing Education</td>
</tr>
<tr>
<td>University of Kentucky</td>
<td>Public</td>
<td></td>
<td>Southern Association of Colleges</td>
<td>Commission on Collegiate Nursing Education</td>
</tr>
<tr>
<td>University of South Carolina</td>
<td>Public</td>
<td></td>
<td>Southern Association of Colleges</td>
<td>Commission on Collegiate Nursing Education</td>
</tr>
<tr>
<td>College</td>
<td>Type</td>
<td>Accreditation</td>
<td>Commission on Collegiate Nursing Education</td>
<td></td>
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<tr>
<td>--------------------------------------------</td>
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<td>---------------</td>
<td>---------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>University of Tennessee Health Science Center</td>
<td>Public</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Tri-College</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>(Consortia among Concordia College, Minnesota State Univ. and North Dakota State Univ.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Concordia College</td>
<td>Private</td>
<td>Y</td>
<td>Commission on Collegiate Nursing Education</td>
<td></td>
</tr>
<tr>
<td>Minnesota State</td>
<td>Public</td>
<td>Y</td>
<td>Commission on Collegiate Nursing Education</td>
<td></td>
</tr>
<tr>
<td>North Dakota State</td>
<td>Public</td>
<td>Y</td>
<td>Commission on Collegiate Nursing Education</td>
<td></td>
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</table>


In addition to the schools listed in Table 3, Purdue University’s DNP program was approved in January 2005 and funded by the US Dept. of Health and Human Resources in July 2005 (personal communication between Dr. Julie Novak, Head of School, Purdue and Dr. Sally Reel, Associate Dean for Academic Practice, UA College of Nursing).

**B. WICHE States Offering DNP Programs:**

<table>
<thead>
<tr>
<th>PROGRAM</th>
<th>WICHE INSTITUTION &amp; LOCATION</th>
<th>NCA Accreditation? (Y or N)</th>
<th>Program Accreditation? (Y or N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Doctor of Nursing Practice</td>
<td>University of Colorado at Denver</td>
<td>Y</td>
<td>Commission on Collegiate Nursing Education</td>
</tr>
<tr>
<td>2 Doctor of Nursing Practice</td>
<td>Tri-College*</td>
<td>Y</td>
<td>Commission on Collegiate Nursing Education</td>
</tr>
</tbody>
</table>

*see Table 3 for greater detail about Tri-College

In addition to those cited in the above tables, AACN reports more than 40 additional DNP programs are now under development, including programs at Oakland University, Oregon Health & Science University, University of Illinois at Chicago, University of Iowa, University of
Pittsburgh, and University of South Florida. However, as the transition to the Doctor of Nursing Practice degree occurs by 2015, it is anticipated that many additional schools of nursing throughout the country will develop Doctor of Nursing Practice programs.

VI. EXPECTED FACULTY AND RESOURCE REQUIREMENTS

The educational model for the Doctor of Nursing Practice will evolve from our current master of science, nurse practitioner options, and our PhD nursing programs. It is anticipated that some core knowledge and courses will be shared from our current master’s and doctoral programs because the College will transition the current nurse practitioner programs that are at the Master of Science level to the Doctor of Nursing Practice. Further, while the current nurse practitioner program is offered at the master’s degree level, it is important to note that the Doctor of Nursing Practice is a new educational degree. New courses will need to be defined and developed; thus the Doctor of Nursing Practice is its own educational entity and not simply a blending of the master’s and PhD degrees.

A. FACULTY

Current Faculty—List the name, rank, highest degree and estimate of the level of involvement of all current faculty who will participate in the program. If proposed program is at the graduate level, also list the number of master’s thesis and doctoral dissertations each of these faculty as directed to completion. Attach a brief vita for each faculty member listed

The following faculties teach courses relevant to the proposed DNP program. Each faculty member’s credentials and numbers of master’s thesis, master’s projects, doctoral dissertations, honors projects and current project committee advisement are shown in Table 5.

<table>
<thead>
<tr>
<th>Name of Faculty</th>
<th># of Master’s Thesis Supervised to Completion</th>
<th># of Master’s Projects Supervised to Completion</th>
<th># of Doctoral Dissertation Supervised to Completion</th>
<th># Honors Projects</th>
<th># Master’s Committee Membership</th>
<th># Doctoral Committee Membership</th>
</tr>
</thead>
<tbody>
<tr>
<td>Berg, Judith PhD, RN, WNHP, FAAN, FAANP Associate Professor</td>
<td>12</td>
<td>4</td>
<td>0 but have 2 in dissertation phase</td>
<td>4</td>
<td>15</td>
<td>18</td>
</tr>
<tr>
<td>Wung, Shu Fen PhD, RN, ACNP, FAAN, FAANP Associate Professor</td>
<td>3 &amp; 1 in progress</td>
<td>3</td>
<td>5 in progress</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ritter, Leslie</td>
<td>3</td>
<td>7</td>
<td>3 in progress</td>
<td>10</td>
<td>7</td>
<td></td>
</tr>
</tbody>
</table>


26 Request for Implementation Proposal Prepared by Sally Reel, Nov. 4, 2005
<table>
<thead>
<tr>
<th>Name</th>
<th>PhD, RN, APN, CFNP, FAAN, FAANP, Clinical Professor</th>
</tr>
</thead>
<tbody>
<tr>
<td>McArthur, Donna</td>
<td>1 1 2 3</td>
</tr>
<tr>
<td>Reel, Sally</td>
<td>3 3 8</td>
</tr>
<tr>
<td>Phillips, Linda</td>
<td>0 0 6 0 3 6</td>
</tr>
<tr>
<td>Jones, Elaine</td>
<td>70 10 10 20 15 30</td>
</tr>
<tr>
<td>Loescher, Lois</td>
<td>3 (Masters in Genetic Counseling) 0 3 1 (Nursing) 4 (Genetic Counseling) 2 (Public Health) 5</td>
</tr>
<tr>
<td>Davis, Amy Tsang</td>
<td>1 1 2 in progress 1 committee completed 2 6</td>
</tr>
<tr>
<td>Vincent, Deborah</td>
<td>2 9</td>
</tr>
<tr>
<td>Crogan, Neva</td>
<td>4 completed 3 in progress 2 nursing 1 gerontology 11</td>
</tr>
<tr>
<td>Insel, Kathleen</td>
<td>2 8</td>
</tr>
<tr>
<td>Effken, Judith</td>
<td>6 8 None to completion; 2 in progress 2 10</td>
</tr>
<tr>
<td>Crist, Janice</td>
<td>3 11</td>
</tr>
</tbody>
</table>
Currently, as noted in the above table, only two of the nurse practitioner faculty (Ms. Sharon Ewing & Ms. Mary Vincenz) who teach in the Master’s program do not have terminal degrees. As we will continue to award the Master of Science in Nursing degree these faculty will continue to provide course support in those courses that are in nurse practitioner track and at the master’s level of the curriculum (e.g. years 1 & 2 of the BSN to DNP option).

2. Additional Faculty Needed—describe the additional faculty needed during the next three years for the initiation of the program and list the anticipated schedule for addition of these faculties

In addition to current faculty, 3 new FTE will be needed over the next three years as the program is implemented. As the DNP is a terminal degree, faculty also will be needed who have terminal degrees. The nature of the curriculum is supported by a combination of both research (tenure eligible) and clinical (non-tenure eligible) faculty. However, clinical supervision in the specialty area of nurse practitioner practice must be provided by faculty who are also prepared as nurse practitioners (and the CON has faculty with these qualifications). Projected faculty FTE is as follows: 1 FTE in the first year, 1 FTE in the second year and 1 FTE in year three. These new faculties will teach new DNP courses as well as provide support to current courses that may experience an increase in numbers as DNP students enroll in the courses. By year three the new faculty may also be either tenure or non-tenure eligible but must be prepared clinically to provide appropriate DNP internship supervision as well.

Table 6: New Anticipated Faculty FTE needed over the first three years

<table>
<thead>
<tr>
<th>Faculty Needs</th>
<th>Associate/Full Professor</th>
</tr>
</thead>
<tbody>
<tr>
<td>YR 1</td>
<td>1</td>
</tr>
<tr>
<td>YR 2</td>
<td>1</td>
</tr>
<tr>
<td>YR 3</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>3</td>
</tr>
</tbody>
</table>

3. Current FTE Students and Faculty—Give the present numbers of FTE students and FTE faculty in the department or unit in which the program will be offered
**FTE Students.** There are currently 74 students (headcount) enrolled as nurse practitioner students, 62 Master of Science students and 12 Postmaster’s students. There are currently 92 PhD nursing students (headcount), 46 full-time students and 46 part-time students.

**FTE Faculty.** There are currently 21.15 graduate faculty.

4. **Projected FTE Students and Faculty—Give the proposed numbers of FTE students and FTE faculty for the next three years in the department or unit in which the program will be offered** (Student Enrollment FTE is calculated using ABOR Enrollment policy 2-103 that states “dividing total Student Credit Hours by 10 shall determine the number of graduate FTE.” Year 1 is calculated by using the number of students currently enrolled, Fall 2005. DNP is projected. Current MS students will graduate at the end of year two and by year three more students will be matriculated through the DNP rather than the MS degree)

<table>
<thead>
<tr>
<th>Proposed Number of Students</th>
<th>YR 1</th>
<th>YR 2</th>
<th>YR 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Master of Science</td>
<td>50</td>
<td>30</td>
<td>15</td>
</tr>
<tr>
<td>Doctor of Nursing Practice</td>
<td>12</td>
<td>32</td>
<td>52</td>
</tr>
<tr>
<td>Doctor of Philosophy</td>
<td>71</td>
<td>90</td>
<td>90</td>
</tr>
<tr>
<td>*<em>Proposed Number of Faculty</em></td>
<td>22.15</td>
<td>23.15</td>
<td>24.15</td>
</tr>
</tbody>
</table>

*The DNP is a clinical program. The National Organization of Nurse Practitioner Faculties (NONPF) recommended clinical faculty to student ratio is 1 faculty per 6 students. Clinical supervision of students requires that faculty also hold national certification in a relevant advanced nursing practice area. While the CON has 21.15 faculty FTE, of these 6.05 are nationally certified nurse practitioners. Doctorally prepared faculty without certification may lead non-direct patient care scholarly projects and teach courses that are not related to clinical assessment, diagnosis, and management. However, to meet national accreditation standards, the CON will need sufficient doctorally prepared nationally certified nurse practitioners to meet the 1:6 ratio, which is the rationale for needing three additional faculty (one new faculty per each program year).

B. LIBRARY

1. **Current Relevant Holdings—Describe the current library holdings relevant to the proposed program and assess the adequacy of these holdings**

The University of Arizona Library system contains almost 7,000,000 items including books, periodicals, microforms, maps, government publications, manuscripts, and non-book media. The Library is one of about one hundred distinguished libraries in the country that comprise the Association of Research Libraries and the Center for Research Libraries. The Library’s information system is SABIO and includes access to the Internet, commercial databases and an on-line catalog. The Arizona Health Sciences Center Library is adjacent to the College of Nursing in the Health Sciences Center Complex. There are almost 190,000-catalogued holdings including 3,000 periodicals and 70 nursing journal titles. The Library is open 24 hours a day including access to Medline & multiple electronic holdings.

2. **Additional Acquisitions Needed—Describe additional library acquisitions needed during the next three years for the successful initiation of the program**

No immediate library acquisitions are needed to implement the program.
C. PHYSICAL FACILITIES AND EQUIPMENT

1. Existing Physical Facilities—assess the adequacy of the existing physical facilities and equipment available to the proposed program. Include special classrooms, laboratories, physical equipment, computer facilities, etc.

The UA CON, located at 1305 N. Martin, Tucson, AZ 85721, is adequate for the proposed program. Our current nurse practitioner programs and PhD program are delivered through online methodologies. Students have limited physical presence at the UA CON. When students are on campus our facilities are sufficient to provide the educational experiences in the DNP curriculum. We have also enhanced capacity of the current NP program to provide physical examination experiences by utilizing the physical assessment lab at the UA College of Medicine. While we do not pay any fees to the College of Medicine at this time, as our programs grow, in the future fees may be assessed and additional funds needed. In 2005-06 we will complete substantial renovations of the UA CON Patient Care Learning Center, a state-of-the-art clinical laboratory for simulated clinical learning experiences that will be utilized during planned student clinical experiences.

2. Additional Facilities Required or Anticipated—describe physical facilities and equipment that will be required or are anticipated during the next three years for the proposed program.

The existing facility and equipment are adequate for initiation of the DNP program, however some capital equipment such as computers are anticipated needs for new faculty. The College also anticipates needing some educational support materials such as durable medical supplies for laboratory teaching (e.g. suture, casting, intubation, microscopy, radiology, infectious diseases and common lab tests) as well educational software, digital licenses and clinical support systems (e.g. Typhon Group license that supports electronic recording of patient encounters by students).

D. OTHER SUPPORT

1. Other Support Now Available—include support staff, university and non-university assistance

Table 7 below lists all current College of Nursing faculties who teach a course that is relevant to the proposed DNP curriculum. It is important to note, however, that additional faculty who teach relevant cognate courses within the PhD program are not listed in this table nor are all the courses that may be potential DNP cognates as well.

<table>
<thead>
<tr>
<th>Faculty Name</th>
<th>Course</th>
<th>Current Master’s Course</th>
<th>Current PhD Course</th>
</tr>
</thead>
</table>
| Sharon Ewing, MSN, RN, FNP | NURS 620a Primary Care of the Adult  
NURS 620b Advanced Primary Care of the Adult | X                        |                   |
| Donna McArthur, PhD, RN, FNP, FAANP | NURS 609a Health Assessment  
NURS 620b Advanced Primary Care of the Adult | X                        |                   |
<p>| Mary Vincenz, MSN, | NURS 629A – Advanced Psychiatric Mental Health | X                        |                   |</p>
<table>
<thead>
<tr>
<th>Instructor</th>
<th>Course/Topics</th>
<th>Approved?</th>
</tr>
</thead>
<tbody>
<tr>
<td>APRN, PMHNP</td>
<td>Nursing I</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>NURS 629B – Advanced Psychiatric Mental Health Nursing II</td>
<td></td>
</tr>
<tr>
<td>Leslie Ritter, PhD, RN</td>
<td>NURS 501 Advanced Physiology &amp; Pathophysiology</td>
<td>X</td>
</tr>
<tr>
<td>Elaine Jones, PhD, RN</td>
<td>NURS 504 Nursing Conceptual Models</td>
<td>X (for fast-track BSN to PhD students)</td>
</tr>
<tr>
<td>Loescher, Lois, PhD, RN</td>
<td>NURS 530 Methods in Nursing Research</td>
<td>X (for fast-track BSN to PhD students)</td>
</tr>
<tr>
<td>Amy Tsang Davis, PhD, RN</td>
<td>NURS 530 Methods in Nursing Research (course co-chair)</td>
<td>X (for fast-track BSN to PhD students)</td>
</tr>
<tr>
<td>Deborah Vincent, PhD, RN, FNP, FAANP</td>
<td>NURS 505 Health Policy, Finance &amp; Health Promotion</td>
<td>X (for fast-track BSN to PhD students)</td>
</tr>
<tr>
<td>Judith Berg, PhD, RN, WHNP, FAAN, FAANP</td>
<td>NURS 693 Internship</td>
<td></td>
</tr>
<tr>
<td></td>
<td>NURS 689 Issues in Special Populations: Women’s Health</td>
<td>X</td>
</tr>
<tr>
<td>Shu Fen Wung, PhD, RN, ACNP, FAAN</td>
<td>NURS 689 Issues in Special Populations: Cardiology</td>
<td></td>
</tr>
<tr>
<td>Neva Crogan, PhD, RN</td>
<td>NURS 689 Issues in Special Populations: Gerontology</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>NUR 600d Gerontological Nursing</td>
<td>X</td>
</tr>
<tr>
<td>Jacqueline Kelley, DNP, RN, PNP, MPH</td>
<td>NURS 612 Pediatrics in Advanced Practice</td>
<td></td>
</tr>
<tr>
<td>Kathleen Insel, PhD, RN</td>
<td>NURS 730 Quantitative Research Methods</td>
<td>X</td>
</tr>
<tr>
<td>Alice Pasvogel, PhD, RN</td>
<td>NURS 631 Advanced Statistics</td>
<td>X</td>
</tr>
<tr>
<td>Judith Effken, PhD, RN</td>
<td>NURS 646 Healthcare Informatics</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>NURS 634 Data Management in Healthcare Systems</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>NURS 736 Technology to Increase Healthcare Capacity</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>NURS 796S Synthesis Seminar</td>
<td>X</td>
</tr>
<tr>
<td>Janice Crist, PhD, RN</td>
<td>NURS 731 Qualitative Methods</td>
<td>X</td>
</tr>
</tbody>
</table>
2. Other Support Needed, Next Three Years—list additional staff needed and other assistance needed for the next three years

While the CON is supported by the university’s Center for Computing & Information Technology (CCIT) for online course development and management, 1 FTE is anticipated for an instructional course designer. As the College of Nursing moved the PhD program online in 2002 and the nurse practitioner programs online in 2003, the College anticipates offering the DNP online as well. Adding one professional staff member capable of supporting faculty and students enhances support provided through CCIT and the university’s Learning Technology Center as well as internal College of Nursing technology staff. The need exists simply because the graduate programs are large, expanding and have technology support needs on a daily basis. Additionally, as our programs expand, there may be need for funds to support the online course management platform Desire to Learn (D2L), but at the present time the CON courses are supported in D2L by CCIT.

VII. FINANCING

A. SUPPORTING FUNDS FROM OUTSIDE SOURCES—List

The College of Nursing intends to seek partial program support from the U.S. Department of Health and Human Services, Health Resources Service Administration, Division of Nursing through federal Advanced Education Nursing (AEN) grant competition. The application deadline for AEN proposals is Dec. 13, 2005. Should we be successful in obtaining federal funding all approvals must be in place by June 1, 2006, for receipt of the award.

While federal funding will not cover the entire costs of the new program, the UA CON has demonstrated a successful track record of obtaining federal funding for current master’s and PhD programs—of which both programs have foundational components to the DNP program.
Funding in place to support relevant master’s and PhD courses include the following (summary abstracts included). While these projects will not directly fund the DNP program outcomes from these projects will be extended in the DNP program.

**Funding Support:**

**Rural Health for Advanced Practice Nurses.**  
US Department of Health and Human Services, HRSA, Division of Nursing.  
Direct Costs: $840,573  
Grant # 1D09 HP 00497-01  
Funding Period: 7/1/03 through 6/30/06  
PI: Sally Reel, PhD, APRN, FAAN, FAANP

The purpose of the Rural Health for Advanced Practice Nurses project is to improve health care to rural Arizona populations by increasing access to advanced nursing education with an emphasis on rural health knowledge. Specifically, the program expands the knowledge base and competencies of advanced practice nurses to provide care for rural populations by 1) utilizing distributive technologies to extend nurse practitioner education to students in rural settings, 2) adding rural clinical practica for all nurse practitioner students, and 3) adding detailed rural health theory as an option for advanced nursing education within the graduate programs. This initiative is designed to recruit, retain and graduate rural bachelors-prepared nurses into the nurse practitioner programs. The rationale for utilizing electronic methodologies to educate nursing students in their home communities is based on a fundamental premise that they are more likely to stay in the rural area upon graduation. Another premise of this project is that nurses focusing on rural populations need a rural health care paradigm from which to practice. The project goals directly address the National Workforce Goals, the Healthy People 2010 goals, the Healthy Arizona 2010 goals, and the Healthy Gente 2010 goals. The program builds on the well-established advanced practice programs at the College of Nursing including a state-sponsored program to foster rural clinical practice for nurse practitioners known as the Rural Health Professions Program. This proposal describes the rationale and strategies to achieve on-line educational methodologies for rural nursing students, and describes the value of an enhanced rural knowledge paradigm and methods to achieve this as well. Ultimately, the on-line curriculum will enable us to reach rural Arizona and rural America too, strengthening the capability to offer advanced nursing education to improve health care access to primary care providers for rural America at-large. Finally, recognizing the diversity of rural populations, this program will target improving the cultural/linguistic competence of program.

**Funding Support:**

**Distant Acute Care Nurse Practitioner Bridging the Rural-Urban Gap.**  
US Department of Health and Human Services, HRSA, Division of Nursing.  
Grant # 1 D09HP05317-01-00 Direct Costs: $954,042.  
Funding Period: 7/1/05 through 6/30/08  
PI: Sally Reel, PhD, APRN, FAAN, FAANP

The Acute Care Nurse Practitioners (ACNP) is a new nurse practitioner option designed to prepare nurses to care for patients who are acutely and critically ill with multiple complex needs. Graduates will provide care to patients across a broad spectrum of “acute” conditions including
management across the continuum of acute, critical and chronic disease. Graduates will be prepared through one of two options: the Master of Science and Postmasters Certificate. Recognizing the growing and evolving role of the ACNP, this program’s emphasis areas reflect the health indicators of both Arizona and the Nation, specifically, cardiopulmonary, critical care, emergency/trauma, and the unique acute care needs of rural populations. The project will also include optional courses on bioterrorism and rural acute care. Academic preparation includes master's core graduate nursing knowledge, advanced health assessment, pathophysiology, pharmacology, clinical diagnostics and management, and selected invasive and noninvasive procedures. Program graduates may work as ACNPs in multiple settings including inpatient hospital settings, specialty labs or clinics, acute care departments, outpatient facilities, urban and non-metropolitan settings, or any combination of these practice settings. Graduates will be eligible to take the adult ACNP national certifying exam offered by the American Nurses Credentialing Center (ANCC).

**Funding Support**
Enhancing an Online PhD Program
US Department of Health and Human Services, HRSA, Division of Nursing
Grant # D09HP03116
Total Direct Costs: $654,155
PI: Judith Effken, PhD, RN, FAAN

The purpose of this project is to enhance the University of Arizona College of Nursing’s PhD program through the addition of two related cognate concentration areas addressing today’s complex, turbulent healthcare systems. The cognates target two pressing national issues: (a) Workforce and Healthcare Delivery Environments and (b) Border Health. As part of our online PhD program, courses in the cognate options will be available nationwide. The expanded cognates will prepare students for roles as teacher/scientists in an academic setting or translator/scientist in a service setting.

B. NEW ACADEMIC DEGREE PROGRAM BUDGET PROJECTIONS FORM—
Complete the appropriate budget form available at http://www2.nau.edu/academicadmin/UCCForms.htm describing the current departmental budget and estimating additional costs for the first three years of operation for the proposed program. Please note that these costs for each year are incremental costs, not cumulative costs.

See completed budget projections form in Appendix A, pg. 36.

**VIII. OTHER RELEVANT INFORMATION**

See Attached Appendices.
APPENDIX A

Budget
APPENDIX B

DNP Curriculum Core Concepts
### Table 9: DNP Curriculum Core Concepts

<table>
<thead>
<tr>
<th>Graduate Core</th>
<th>Graduate Clinical Core</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human Diversity &amp; Ethics</td>
<td>Assessment</td>
</tr>
<tr>
<td>Nursing Research Methods</td>
<td>Pathophysiology</td>
</tr>
<tr>
<td>Nursing Conceptual Models</td>
<td>Pharmacology</td>
</tr>
<tr>
<td>Health Policy, Finance &amp; Health Promotion</td>
<td>Epidemiology</td>
</tr>
<tr>
<td>Informatics</td>
<td></td>
</tr>
</tbody>
</table>

Total Hours: 15  
Total Hours: 12

<table>
<thead>
<tr>
<th>Advanced Practice Core</th>
<th>Research &amp; Theory Core</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Care of the Adult</td>
<td>Evidence Based Practice Methods</td>
</tr>
<tr>
<td>Advanced Primary Care of the Adult</td>
<td>Patient Safety, Quality Management &amp; Evaluation Methods</td>
</tr>
<tr>
<td>Pediatrics in Primary Care</td>
<td>Quantitative Research Methods</td>
</tr>
<tr>
<td>Women’s Health</td>
<td>Qualitative Research Methods</td>
</tr>
<tr>
<td>Geriatrics</td>
<td>Statistics</td>
</tr>
<tr>
<td>Emerging Diseases, Genetics &amp; Health Trends</td>
<td>DNP internship</td>
</tr>
<tr>
<td>Legal &amp; Business Essentials</td>
<td></td>
</tr>
<tr>
<td>DNP Role</td>
<td></td>
</tr>
<tr>
<td>Internship</td>
<td></td>
</tr>
</tbody>
</table>

Total Hours: 24  
Total Hours: 27

<table>
<thead>
<tr>
<th>Cognate</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(Suggested Cognates)</td>
<td></td>
</tr>
<tr>
<td>Rural Health Care</td>
<td></td>
</tr>
<tr>
<td>Border Health</td>
<td></td>
</tr>
<tr>
<td>Aging</td>
<td></td>
</tr>
<tr>
<td>Health Care Systems &amp; Informatics</td>
<td></td>
</tr>
<tr>
<td>Biobehavioral &amp; Injury Mechanisms</td>
<td></td>
</tr>
<tr>
<td>Vulnerable Populations</td>
<td></td>
</tr>
<tr>
<td>Workplace Transformation</td>
<td></td>
</tr>
</tbody>
</table>

Total Hours: 9

Total Program Units Post BSN to DNP: 84-88 depending on type of NP preparation

Total Program Units Master’s to DNP: 45-88 depending on whether NP preparation is part of the plan of Study
APPENDIX C

Comparison of DNP, AuD, PharmD, JD, EdD, MD, and PhD Degrees
Table 10: Comparison of DNP, AuD, PharmD, JD, EdD, MD, and PhD Degrees

<table>
<thead>
<tr>
<th>Program Requirements</th>
<th>DNP</th>
<th>AuD</th>
<th>PharmD</th>
<th>JD</th>
<th>MD</th>
<th>EdD</th>
<th>PhD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Entrance Requirements</td>
<td>B.S./B.S.N.</td>
<td>B.S./B.A.</td>
<td>67 units of specific pre-pharmacy courses</td>
<td>B.S./B.A.</td>
<td>B.S./B.A.</td>
<td>Master's Degree</td>
<td>B.S.</td>
</tr>
<tr>
<td>Coursework Credits</td>
<td>45-90 units (depends on program admission point &amp; advanced nursing practice study option)</td>
<td>97 units</td>
<td>142</td>
<td>85</td>
<td>2 years (year 1 &amp; 2)</td>
<td>54 units</td>
<td>A minimum of 36 units of coursework in the area of the major subject, 9 units in the minor subject and 18 units of dissertation must be completed</td>
</tr>
<tr>
<td>Clinical Practicum</td>
<td>16 units</td>
<td>40 units</td>
<td>Clinical legal training</td>
<td>- 41 wks for clinical rotations</td>
<td>- 38 wks electives</td>
<td>None</td>
<td>NA</td>
</tr>
<tr>
<td>Thesis Research or Capstone Project</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Substantive project 3 units</td>
<td>No</td>
<td>No</td>
<td>NA</td>
</tr>
<tr>
<td>Dissertation</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Residency (# of units)</td>
<td>9</td>
<td>30% (based on Grad College)</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>30% (based on Grad College)</td>
<td>Yes 30 Units</td>
</tr>
<tr>
<td>Minor</td>
<td>No Minor require but 9</td>
<td>9 units</td>
<td>Not required</td>
<td>Not required</td>
<td>No</td>
<td>12 - 15 units</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Cognate units are required</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
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<td>No</td>
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<td></td>
<td>(4 members for comprehensive exams; 3 for scholarly project advisement)</td>
<td>(3 persons)</td>
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<td>Not required for degree but for professional certification</td>
<td>Not required for degree but for professional certification</td>
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<td>No</td>
<td>No</td>
</tr>
<tr>
<td>PhD Option with Additional Requirements for Research Training</td>
<td>Yes (see discussion for the DNP on pg. 11 of this document)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
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APPENDIX D

DNP Sample Plans of Study

Appendix D Part One: BSN to DNP Sample Plans of Study

Table 11: BSN to DNP (Family NP)
Table 12: BSN to DNP (Adult NP)
Table 13: BSN to DNP (Psychiatric Mental Health NP)
Table 14: BSN to DNP (Acute Care NP)

Appendix D Part Two: Master’s of Science in Nursing to DNP with option for Nurse Practitioner Preparation Sample Plans of Study

Table 15: Master’s to DNP with option for Family Nurse Practitioner Preparation
Table 16: Master’s to DNP with option for Adult Nurse Practitioner Preparation
Table 17: Master’s to DNP with option for Psychiatric Mental Health NP Preparation
Table 18: Master’s to DNP with option for Acute Care Nurse Practitioner Preparation

Appendix D Part One: Master’s of Science in Nursing to DNP without option for NP Preparation Sample Plan of Study

Table 19: Master’s to DNP without Option for NP preparation
Appendix D Part One: BSN to DNP Sample Plans of Study

Table 11: BSN to DNP (Family NP)
Table 12: BSN to DNP (Adult NP)
Table 13: BSN to DNP (Psychiatric Mental Health NP)
Table 14: BSN to DNP (Acute Care NP)
Table 11: BSN to DNP Full Time Plan of Study for Family Nurse Practitioner

<table>
<thead>
<tr>
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<th>Total Clinical Hours: 810</th>
<th>Total DNP internship Hours: 810</th>
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</thead>
<tbody>
<tr>
<td><strong>Summer I</strong></td>
<td><strong>Summer II</strong></td>
<td><strong>Summer III</strong></td>
</tr>
<tr>
<td>NURS 609a Health Assessment*</td>
<td></td>
<td>NURS 7XX DNP Role</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>NURS 7XX Emerging</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Diseases, Genetics &amp;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Health Trends</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Units</strong></td>
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<tr>
<td></td>
<td></td>
<td>NURS 609a Health Assessment*</td>
</tr>
<tr>
<td></td>
<td></td>
<td>NURS 7XX DNP Role</td>
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<tr>
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<td>Health Trends</td>
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<th><strong>Fall IV</strong></th>
<th><strong>Units</strong></th>
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<tr>
<td>NURS 501 Advanced Phys/Patho*</td>
<td>NURS 620b Adv. Primary Care of the Adult*</td>
<td>NURS 730 Quantitative Research Methods*</td>
<td>NURS 9XX DNP internship &amp;</td>
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<td>NURS 631 Statistics*</td>
<td>NURS XXX Cognate*</td>
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<td><strong>Units</strong></td>
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<td>NURS 909/910 Thesis*</td>
<td>NURS 648 Informatics*</td>
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<td>3</td>
<td>3</td>
<td>= 540</td>
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<td>NURS 609a Health Assessment is moved to summer to accommodate the Master’s to DNP nurse practitioner track.</td>
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*Denotes current Master’s or PhD nursing courses. Many courses not listed are available to meet cognate requirements.

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<th><strong>Spring III</strong></th>
<th><strong>Units</strong></th>
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</thead>
<tbody>
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<td>NURS 693 Internship*</td>
<td>NURS 731 Qualitative Methods*</td>
<td>3</td>
</tr>
<tr>
<td>3</td>
<td>6 (1+5)</td>
<td>3</td>
<td><strong>Units</strong></td>
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<td>NURS 630 Statistics for Health Science</td>
<td>NURS 7XX Evidence Based Practice Methods</td>
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<td>3 (2+1)</td>
<td>3</td>
<td>3</td>
<td><strong>Units</strong></td>
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<tr>
<td>NURS 530 Methods in Nursing Research*</td>
<td>3</td>
<td>NURS XXX Cognate</td>
<td></td>
</tr>
<tr>
<td>NURS 505 Health Policy, Finance &amp; Health Promotion*</td>
<td>3</td>
<td>NURS 7XX Patient</td>
<td></td>
</tr>
<tr>
<td>NURS 689 Issue in Special Pop (women and elective)*</td>
<td>1</td>
<td>NURS XXX Cognate &amp;</td>
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</tr>
<tr>
<td>Clinical Hours = 90</td>
<td>Clinical Hours = 450</td>
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Table 12: BSN to DNP Full Time Plan of Study for Adult Nurse Practitioner

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<tbody>
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<td>2</td>
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<td>2</td>
<td>NURS XXX Cognate</td>
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</tr>
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<td></td>
<td></td>
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<td>3</td>
<td>DNP internship</td>
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<tr>
<td></td>
<td></td>
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<td></td>
<td>DNP internship Hours = 270</td>
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</table>

<table>
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<th>Fall III</th>
<th>Fall IV</th>
<th>Units</th>
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<tbody>
<tr>
<td>NURS 501 Advanced Phys/Patho*</td>
<td>4</td>
<td>NURS 620b Adv. Primary Care of the Adult*</td>
<td>4 (2+2)</td>
<td>NURS 9XX DNP internship</td>
<td></td>
</tr>
<tr>
<td>NURS 503 Human Diversity &amp; Ethics*</td>
<td>3</td>
<td>NURS 909/910 Thesis*</td>
<td>3</td>
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<td></td>
</tr>
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<td>NURS 504 Nursing Conceptual Models*</td>
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<td>NURS 689 Issue in Special Pop (women and Gero)*</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Clinical Hours = 180</td>
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<td>DNP internship Hours = 540</td>
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<table>
<thead>
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<th>Units</th>
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<td>NURS 693 Internship*</td>
<td>6 (1+5)</td>
<td>NURS 731 Qualitative Methods*</td>
</tr>
<tr>
<td>NURS 620a Primary Care of the Adult*</td>
<td>3 (2+1)</td>
<td>NURS 630 Statistics for Health Science</td>
<td>3</td>
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</tr>
<tr>
<td>NURS 530 Methods in Nursing Research*</td>
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<td></td>
<td></td>
<td>NURS XXX Cognate</td>
</tr>
<tr>
<td>NURS 505 Health Policy, Finance &amp; Health Promotion*</td>
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<td></td>
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<td>Safety &amp; Quality Management</td>
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Total Units: 88  Total Clinical Hours: 720  Total DNP internship Hours: 810
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<th>Table 13: BSN to DNP Full Time Plan of Study for Psychiatric Mental Health Nurse Practitioner</th>
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<td>NURS 504 Nursing Conceptual Models*</td>
</tr>
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<td>NURS 530 Methods in Nursing Research*</td>
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</tr>
<tr>
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</tr>
<tr>
<td>Fall I</td>
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<td>NURS 505 Health Policy, Finance &amp; Health Promotion*</td>
</tr>
<tr>
<td>NURS 620a Primary Care of the Adult*</td>
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<tr>
<td>NURS 629a Advanced Psych Nursing I*</td>
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<td>Spring I</td>
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<tr>
<td>NURS 505 Health Policy, Finance &amp; Health Promotion*</td>
</tr>
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<tr>
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<tr>
<td>NURS 620a Primary Care of the Adult*</td>
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<tr>
<td>NURS 629a Advanced Psych Nursing I*</td>
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Table 14: BSN to DNP Full Time Plan of Study for Acute Care Nurse Practitioner

| Total Units: 90 | Total Clinical Hours: 810 | Total DNP internship Hours: 810 |

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<th>Units</th>
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<td>NURS 7XX Emerging Diseases, Genetics &amp; Health Trends</td>
<td>3</td>
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<td>DNP internship Hours = 270</td>
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<th>Fall IV</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 501 Advanced Phys/Patho*</td>
<td>NURS 689 Issues in Special Populations (Cardiology, Trauma/ED, Neuro, Rural, Bioterrorism)</td>
<td>NURS 730 Quantitative Research Methods*</td>
<td>NURS 9XX DNP internship</td>
</tr>
<tr>
<td>NURS 503 Human Diversity &amp; Ethics*</td>
<td>NURS 7XX Diagnosis &amp; Management of Chronic and Acute Illness – II</td>
<td>NURS 631 Statistics*</td>
<td>NURS XXX Cognate*</td>
</tr>
<tr>
<td>NURS 504 Nursing Conceptual Models*</td>
<td>NURS 909/910 Thesis*</td>
<td>EPID 573a Epidemiology*</td>
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<td></td>
<td>Clinical Hours = 270</td>
<td>NURS 646 Health Care Information Systems*</td>
<td>DNP internship Hours = 540</td>
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<td>5 (3+2)</td>
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<td>NURS 572 Pharmacology*</td>
<td>NURS 693 Internship*</td>
<td>NURS 731 Qualitative Methods*</td>
</tr>
<tr>
<td>NURS 615 Diagnosis &amp; Management of Chronic &amp; Acute Illness I*</td>
<td>NURS 505 Health Policy, Finance &amp; Health Promotion*</td>
<td>NURS 7XX Evidence Based Practice Methods</td>
</tr>
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<td>NURS 574 Pharmacology in Acute Care</td>
<td>NURS 630 Statistics for Health Science</td>
<td>NURS XXX Cognate*</td>
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<td>NURS 530 Methods in Nursing Research*</td>
<td>Clinical Hours = 180</td>
<td>NURS 7XX Patient</td>
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<tr>
<td></td>
<td>Clinical Hours = 180</td>
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<td>3 (2+2)</td>
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</table>

Clinical Hours = 450
Appendix D Part Two: Master’s of Science in Nursing to DNP with option for Nurse Practitioner Preparation Sample Plans of Study

Table 15: Master’s to DNP with option for Family Nurse Practitioner Preparation
Table 16: Master’s to DNP with option for Adult Nurse Practitioner Preparation
Table 17: Master’s to DNP with option for Psychiatric Mental Health NP Preparation
Table 18: Master’s to DNP with option for Acute Care Nurse Practitioner Preparation
Table 15: Master’s DNP with option for Nurse Practitioner Preparation (Family NP Prototype)  
(A postmaster’s NP certificate could be awarded at the end of spring term year II)  
Full Time Plan of Study:  8 Semesters (includes 3 summers)  
Total Units:  72  Total NP Clinical Hours:  810  Total DNP internship Hours:  810

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<td>NURS 7XX Emerging Diseases, Genetics &amp; Health Trends</td>
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<td>NURS 9XX DNP internship</td>
<td>3 (3)</td>
</tr>
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<td>NURS 7XX DNP Role</td>
<td>2</td>
<td>NURS XXX Cognate</td>
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<td></td>
<td>DNP internship Hours = 270</td>
</tr>
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<td></td>
</tr>
<tr>
<td>Fall I</td>
<td>Fall II</td>
<td>Fall III</td>
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<td>NURS 620b Adv. Primary Care of the Adult*</td>
<td>4 (2+2)</td>
<td>NURS 9XX DNP internship</td>
<td>6 (6)</td>
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<tr>
<td>NURS 730 Quantitative Research Methods*</td>
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<td>3 (2+1)</td>
<td>NURS XXX Cognate</td>
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<td>NURS 631 Statistics*</td>
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<td>NURS 646 Healthcare Information Systems*</td>
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<td>EPID 573a Epidemiology</td>
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<tr>
<td>NURS 620a Primary Care of the Adult*</td>
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<td>NURS XXX Cognate</td>
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<tr>
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<td>NURS 7XX Patient Safety &amp; Quality Management</td>
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<td>NURS 7XX Evidence Based Practice Methods</td>
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</tr>
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<tbody>
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<td>13</td>
<td>12</td>
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Table 16: Master’s to DNP with option for Nurse Practitioner Preparation (Adult NP Prototype)
(A postmaster’s NP certificate could be awarded at the end of spring term year II)
Full Time Plan of Study: 8 Semesters (includes 3 summers)

<table>
<thead>
<tr>
<th></th>
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<th>Summer II</th>
<th>Summer III</th>
<th>Units</th>
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</tr>
<tr>
<td><strong>Summer I</strong></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>NURS 609a Health Assessment*</td>
<td>2</td>
<td>NURS 7XX Emerging Diseases, Genetics &amp; Health Trends</td>
<td>3</td>
<td>NURS 9XX DNP internship</td>
</tr>
<tr>
<td>NURS 7XX DNP Role</td>
<td>2</td>
<td>NURS XXX Cognate</td>
<td>3</td>
<td>DNP internship Hours = 270</td>
</tr>
<tr>
<td><strong>Total Units</strong></td>
<td>4</td>
<td>6</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>Summer II</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>NURS 501 Advanced Phys/Patho*</td>
<td>4</td>
<td>NURS 620b Adv. Primary Care of the Adult*</td>
<td>4 (2+2)</td>
<td>NURS 9XX DNP internship</td>
</tr>
<tr>
<td>NURS 730 Quantitative Research Methods*</td>
<td>3</td>
<td>NURS 646 Healthcare Information Systems*</td>
<td>3</td>
<td>NURS XXX Cognate</td>
</tr>
<tr>
<td>NURS 631 Statistics*</td>
<td>3</td>
<td>NURS 689 Issue in Special Pop (women and elective)*</td>
<td>2</td>
<td>DNP internship Hours = 540</td>
</tr>
<tr>
<td>EPID 573a Epidemiology</td>
<td>3</td>
<td>NURS 7XX Evidence Based Practice Methods</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>NURS 689 Issue in Special Pop (Gerontology)*</td>
<td>1</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Clinical Hours = 180</td>
<td></td>
<td></td>
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<tr>
<td><strong>Spring I</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NURS 572 Pharmacology*</td>
<td>3</td>
<td>NURS 693 Internship*</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>NURS 620a Primary Care of the Adult*</td>
<td>3 (2+1)</td>
<td>NURS XXX Cognate</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>NURS 731 Qualitative Methods*</td>
<td>3</td>
<td>NURS 7XX Patient Safety &amp; Quality Management</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>NURS 7XX Evidence Based Practice Methods</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NURS 689 Issue in Special Pop (Gerontology)*</td>
<td>1</td>
<td>Clinical Hours = 450</td>
<td>12</td>
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<td><strong>Spring II</strong></td>
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<tr>
<td></td>
<td>13</td>
<td>9</td>
<td>9</td>
<td></td>
</tr>
</tbody>
</table>

Total Units: 69  Total NP Clinical Hours: 810  Total DNP internship Hours: 810

Clinical Hours = 360  Total Clinical Hours = 1170
Table 17: Master's to DNP with option for Nurse Practitioner Preparation (Psychiatric Mental Health NP Prototype)
(A postmaster's NP certificate could be awarded at the end of spring term year II)
Full Time Plan of Study: 8 Semesters (includes 3 summers)
Total Units: 70  Total NP Clinical Hours: 810  Total DNP internship Hours: 810

<table>
<thead>
<tr>
<th>Summer I</th>
<th>Units</th>
<th>Summer II</th>
<th>Units</th>
<th>Summer III</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 609a Health Assessment*</td>
<td>2</td>
<td>NURS 7XX Emerging Diseases, Genetics &amp; Health Trends</td>
<td>3</td>
<td>NURS 9XX DNP internship</td>
<td>3 (3)</td>
</tr>
<tr>
<td>NURS 7XX DNP Role</td>
<td>2</td>
<td>NURS XXX Cognate</td>
<td>3</td>
<td>DNP internship Hours = 270</td>
<td></td>
</tr>
<tr>
<td>Summer III</td>
<td>Units</td>
<td>Summer III</td>
<td>Units</td>
<td>Summer III</td>
<td>Units</td>
</tr>
<tr>
<td>Fall I</td>
<td>4</td>
<td>Fall II</td>
<td>6</td>
<td>Fall III</td>
<td>3</td>
</tr>
<tr>
<td>NURS 501 Advanced Phys/Patho*</td>
<td>4</td>
<td>NURS 629b Advanced Psych Nursing II</td>
<td>4 (3+1)</td>
<td>NURS 9XX DNP internship</td>
<td>6 (6)</td>
</tr>
<tr>
<td>NURS 730 Quantitative Research Methods*</td>
<td>3</td>
<td>NURS 646 Healthcare Information Systems*</td>
<td>3</td>
<td>NURS 9XX Cognate</td>
<td>3</td>
</tr>
<tr>
<td>NURS 631 Statistics*</td>
<td>3</td>
<td>NURS XXX Cognate</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EPID 573a Epidemiology</td>
<td>3</td>
<td>NURS 573 Psychopharmacology</td>
<td>1</td>
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<td></td>
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<td>Clinical Hours = 90</td>
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<td></td>
<td>DNP internship Hours = 540</td>
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<tr>
<td>Spring I</td>
<td>13</td>
<td>Spring II</td>
<td>11</td>
<td>Spring III</td>
<td>9</td>
</tr>
<tr>
<td>NURS 572 Pharmacology*</td>
<td>3</td>
<td>NURS 693 Internship*</td>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NURS 620a Primary Care of the Adult*</td>
<td>3 (2+1)</td>
<td>NURS 7XX Patient Safety &amp; Quality Management</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NURS 629a Advanced Psych Nursing I</td>
<td>4 (3+1)</td>
<td>NURS 7XX Evidence Based Practice Methods</td>
<td>3</td>
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<tr>
<td>NURS 731 Qualitative Methods*</td>
<td>3</td>
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<td>Clinical Hours = 180</td>
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<td></td>
<td></td>
<td>Clinical Hours = 450</td>
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</tbody>
</table>
### Table 18: Master’s to DNP with option for Acute Care Nurse Practitioner Preparation

(A postmaster’s NP certificate could be awarded at the end of spring term year II)

<table>
<thead>
<tr>
<th>Full Time Plan of Study:</th>
<th>8 Semesters (includes 3 summers)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Units:</td>
<td>69</td>
</tr>
<tr>
<td>Total NP Clinical Hours:</td>
<td>810</td>
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<tr>
<td>Total DNP internship Hours:</td>
<td>810</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Summer I</th>
<th>Units</th>
<th>Summer II</th>
<th>Units</th>
<th>Summer III</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 609a Health Assessment*</td>
<td>2</td>
<td>NURS 7XX Emerging Diseases, Genetics &amp; Health Trends</td>
<td>3</td>
<td>NURS 9XX DNP internship</td>
<td>3 (3)</td>
</tr>
<tr>
<td>NURS 7XX DNP Role</td>
<td>2</td>
<td>NURS XXX Cognate</td>
<td>3</td>
<td>DNP internship Hours = 270</td>
<td></td>
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<td></td>
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<tr>
<td>Fall I</td>
<td>Fall II</td>
<td>Fall III</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NURS 501 Advanced Phys/Patho*</td>
<td>4</td>
<td>NURS 616 Diagnosis &amp; Management of Chronic &amp; Acute Illness II</td>
<td>5 (3+2)</td>
<td>NURS 9XX DNP internship</td>
<td>6 (6)</td>
</tr>
<tr>
<td>NURS 730 Quantitative Research Methods*</td>
<td>3</td>
<td>NURS 646 Healthcare Information Systems*</td>
<td>3</td>
<td>NURS XXX Cognate</td>
<td>3</td>
</tr>
<tr>
<td>NURS 631 Statistics*</td>
<td>3</td>
<td>NURS 689 Issue in Special Pop (Cardiology, Trauma/ED, Neuro, Rural, Bioterrorism)*</td>
<td>3</td>
<td></td>
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<tr>
<td>EPID 573a Epidemiology</td>
<td>3</td>
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<tr>
<td>Clinical Hours = 270</td>
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<td>Spring I</td>
<td>Spring II</td>
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</tr>
<tr>
<td>NURS 572 Pharmacology*</td>
<td>3</td>
<td>NURS 693 Internship*</td>
<td>6</td>
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<td></td>
</tr>
<tr>
<td>NURS 615 Diagnosis &amp; Management of Chronic &amp; Acute Illness I</td>
<td>4 (2+2)</td>
<td>NURS XXX Cognate</td>
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</tr>
<tr>
<td>NURS 574 Pharmacology in Acute Care</td>
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<td>NURS 7XX Patient Safety &amp; Quality Management</td>
<td>3</td>
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<tr>
<td>NURS 731 Qualitative Methods*</td>
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<td>NURS 7XX Evidence Based Practice Methods</td>
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<td>Clinical Hours = 90</td>
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<tr>
<td>Clinical Hours = 450</td>
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</tbody>
</table>

**Request for Implementation Proposal**
Prepared by Sally Reel, Nov. 4, 2005
Appendix D Part One: Master’s of Science in Nursing to DNP without option for NP Preparation Sample Plan of Study

Table 19: Master’s to DNP without Option for NP preparation
Table 19: Master's to DNP (without option for nurse practitioner preparation)
Full Time Plan of Study: 5 semesters (includes 2 summers); 45 Didactic Units + 810 DNP internship Hours

<table>
<thead>
<tr>
<th>Summer I</th>
<th>Units</th>
<th>Summer II</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 7XX DNP Role</td>
<td>2</td>
<td>NURS 9XX DNP internship</td>
<td>3</td>
</tr>
<tr>
<td>NURS 7XX Emerging Diseases, Genetics &amp; Health Trends</td>
<td>3</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>5</td>
<td></td>
<td>6</td>
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</table>

<table>
<thead>
<tr>
<th>Fall I</th>
<th>Fall II</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 730 Quantitative* Research Methods</td>
<td>3</td>
</tr>
<tr>
<td>NURS 631 Statistics*</td>
<td>3</td>
</tr>
<tr>
<td>EPID 573a Epidemiology</td>
<td>3</td>
</tr>
<tr>
<td>NURS 646 Healthcare Information Systems*</td>
<td>3</td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
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<tr>
<td></td>
<td>12</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Spring I</th>
<th>Spring II</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 731 Qualitative Methods*</td>
<td>3</td>
</tr>
<tr>
<td>NURS 7XX Evidence Based Practice Methods</td>
<td>3</td>
</tr>
<tr>
<td>NURS XXX Cognate</td>
<td>3</td>
</tr>
<tr>
<td>NURS 7XX Patient Safety &amp; Quality Management</td>
<td>3</td>
</tr>
<tr>
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<td></td>
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<td></td>
<td>12</td>
</tr>
</tbody>
</table>
**Table 20: Course Descriptions of Current Master’s & PhD Courses Relevant to the DNP**

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Course Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 501</td>
<td>Advanced Physiology and Pathophysiology (4 units)</td>
<td>Examines selected physiologic and pathophysiologic phenomena that occur in health and illness in the areas of cellular and molecular physiology, immunology, neurophysiology, endocrine, cardiovascular, blood and muscle physiology, and pulmonary, renal, and digestive physiology.</td>
</tr>
<tr>
<td>NURS 503</td>
<td>Human Diversity, Ethics and Advanced Role (3 units)</td>
<td>Articulate the advanced practice roles of advocate, teacher, researcher, clinician, consultant, collaborator, and manager of systems within the context of a multicultural and international perspective utilizing principles of ethics in health care.</td>
</tr>
<tr>
<td>NURS 504</td>
<td>Conceptual Models (3 units)</td>
<td>Theory and research surrounding conceptual models with emphasis on critique of conceptual models as applied to nursing research and practice.</td>
</tr>
<tr>
<td>NURS 505</td>
<td>Health Policy, Finance and Health Promotion (3 units)</td>
<td>Provide an overview to current changes in the organization and financing of health care and their impact on the delivery and outcomes of health care and advanced nursing practice.</td>
</tr>
<tr>
<td>NURS 530</td>
<td>Methods in Nursing Research (3 units)</td>
<td>Course focuses on critical examination of selected problems &amp; methods using the nursing research process. Consideration is given to using research data to answer clinical practice questions, and to evaluation clinical outcomes. Research strategies for dissemination of research findings are examined.</td>
</tr>
<tr>
<td>NURS 572</td>
<td>Pharmacotherapeutics (3 units)</td>
<td>Clinical pharmacology course that provides the student with knowledge about common medications used to treat adults. Primary focus is drug management of chronic and self-limiting acute diseases. Covers representative drugs of a pharmacologic group, indications for use, drug selection, titration of dosage, key adverse effects, monitoring of therapy, alternate drugs and special concerns in prescribing to the older adult.</td>
</tr>
<tr>
<td>NURS 573</td>
<td>Psychopharmacology (1 Unit)</td>
<td>This course examines the neurophysiologic basis for a number of psychiatric-mental health disorders, the rationale for choosing selected medications and the basic and clinical pharmacology of those medications, including: mechanisms of action, side effects, contraindications, discontinuation considerations, and patient/family education.</td>
</tr>
<tr>
<td>NURS 609A</td>
<td>Health Assessment (2 units)</td>
<td>Advanced health assessment of adults and elders with some pediatric content for FNP students. Includes techniques in history taking, physical exams, development of client databases, health risk assessment, implementation and evaluation of health promotion activities.</td>
</tr>
<tr>
<td>NURS 612</td>
<td>Pediatrics in Advanced Practice (3 units)</td>
<td>Primary care course to prepare FNP students with skills in children's health promotion, disease prevention, and assessment/management of common health concerns in individuals and families.</td>
</tr>
<tr>
<td>NURS 620A</td>
<td>Primary Care of the Adult (3 units)</td>
<td>Basic concepts and knowledge needed to assess and manage simple acute and chronic stable health problems prevalent in adults are covered.</td>
</tr>
<tr>
<td>NURS 620B</td>
<td>Advanced Primary Care of the Adult (4 units)</td>
<td>Advanced concepts and knowledge needed to assess and manage simple acute and chronic stable health problems prevalent in adults are covered.</td>
</tr>
<tr>
<td>NURS 629A</td>
<td>Advanced Psychiatric Mental Health Nursing I (4 units)</td>
<td>Maintenance, therapeutic and preventive nursing care of persons in various settings: psychiatric-mental-health.</td>
</tr>
<tr>
<td>NURS 629B</td>
<td>Advanced Psychiatric Mental Health Nursing II (4 units)</td>
<td>Focus on concepts of personality development using psychodynamic &amp; cognitive/behavioral theories oriented to the practice of mental health nursing: employing individual, family &amp; group nursing therapeutic techniques to ameliorate problems.</td>
</tr>
<tr>
<td>NURS 689</td>
<td>Issues in Special Populations (1-3 units)</td>
<td>Integrates knowledge from pathophysiology, pharmacotherapeutics and assessment as it relates to health promotion, disease prevention, and management of health problems in a special population. Students would select either chronic care management strategies or primary care management strategies to apply to a selected special population. Special topics available: Women’s Health, Geriatrics, and Cardiology.</td>
</tr>
<tr>
<td>NURS 693</td>
<td>Internship (1-6 units)</td>
<td>Specialized work on an individual basis, consisting of training and practice in actual service in a technical, business, or governmental establishment.</td>
</tr>
<tr>
<td>NURS 910</td>
<td>Thesis (1-3 units)</td>
<td>Research for the master's thesis (whether library research, laboratory or field observation or research, artistic creation, or thesis writing). Maximum total credit permitted varies with the major department.</td>
</tr>
</tbody>
</table>
| NURS 574   | Pharmacology in Acute Care (1 unit) | Course Description. This course is designed to develop
competency in assessment, prescription and evaluation of pharmacotherapeutic regimens for patients who are acutely or critically ill. Analysis of selected health problems is integrated with the development of evidence based clinical pharmacological management of these problems.

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NURS 615 Diagnosis &amp; Management of Chronic and Acute Illness – I (4 units)</strong></td>
<td>Course Description: This course is designed to develop theoretical and clinical competencies in the care of the chronically and acutely ill adult. The course builds on concepts and skills derived from prerequisite courses and focuses on developing advanced practice skills in comprehensive assessment &amp; management strategies of the chronically and acutely ill adult. This course also includes theoretical and clinical competencies in primary and acute care advanced assessment, diagnosis and collaborative management as well as interpretation of commonly encountered diagnostic tests. There are 180 clinical hours for this course including laboratory training related to acute care diagnostics and procedures.</td>
<td></td>
</tr>
<tr>
<td><strong>NURS 616 Diagnosis &amp; Management of Chronic and Acute Illness – II (5 units)</strong></td>
<td>Course Description: This course is designed to continue the acquisition of knowledge and skills begun in NURS 7XX Diagnosis &amp; Management of Chronic and Acute Illness- I. The focus is on further development of advanced practice skills in the management of chronically and acutely ill patients. Acquisition of collaborative management skills in the care of critically ill patients is also emphasized. Applicable nutritional science concepts are explored. Study of the physiological and biochemical alternations that occur during disease states and their effect on nutritional requirements and methods of providing nutrients is included.</td>
<td></td>
</tr>
<tr>
<td><strong>NURS 689 Issues in Special Populations: Neurology (1 unit)</strong></td>
<td>Course Description: Integrates knowledge from pathophysiology, pharmacotherapeutics and assessment as it relates to health promotion, disease prevention and management of health problems in the special population of patients with neurological injury or disease.</td>
<td></td>
</tr>
<tr>
<td><strong>NURS 689 Issues in Special Populations: Trauma/ED (1 unit)</strong></td>
<td>Course Description: Integrates knowledge from pathophysiology, pharmacotherapeutics and assessment as it relates to health promotion, disease prevention and management of health problems in the special population of patients with traumatic injury or emergent illness.</td>
<td></td>
</tr>
<tr>
<td><strong>NURS 689 Issues in Special Populations: Preparing for &amp; Responding to Bioterrorism (1 unit)</strong></td>
<td>Course Description: “Preparing for and Responding to Bioterrorism and Natural Disasters: Information for Clinicians” is intended to provide clinicians with a basic understanding of bioterrorism and natural disaster preparedness and response, how the individual clinician fits into the overall process, and the clinical presentation and management of diseases produced by agents most likely to be used in a biological attack. The course incorporates information from a variety of sources, including the Centers for Disease Control (CDC), the Department of Homeland Security (DHS), the United States Army Medical Research Institute in Infectious Disease (USAMRIID), the Working Group on Civilian Biodefense, the Federal Emergency Management Agency (FEMA) as well as other civilian and military agencies concerned with bioterrorism and natural disaster threat reduction. Course materials will be updated on an as-needed basis with new information (e.g., research study results, consensus statements) as they become available.</td>
<td></td>
</tr>
<tr>
<td><strong>NURS 689 Issues in Special Populations: Rural Acute Care Considerations (1 unit)</strong></td>
<td>Description: Integrates knowledge from pathophysiology, pharmacotherapeutics and assessment as it relates to health promotion, disease prevention and management of health problems in rural populations and includes management issues related to rural-to-urban transport time, emergency care and unique health issues related to rural trauma, occupations, exposure and other hazards.</td>
<td></td>
</tr>
<tr>
<td><strong>NURS 631 Advanced Statistics</strong></td>
<td>Description: Advanced statistical techniques including multivariate analysis of variance, multiple regression, structural equations modeling, log-linear modeling, factor analysis and discriminant analysis. Students will analyze large data sets using PC and mainframe statistical software to learn techniques.</td>
<td></td>
</tr>
<tr>
<td><strong>NURS 646 Healthcare Information Systems</strong></td>
<td>Description: Focuses on the theoretical basis of healthcare informatics with an emphasis on management and processing of healthcare data, information, and knowledge. Healthcare vocabulary and language systems, and basic database design concepts are addressed.</td>
<td></td>
</tr>
<tr>
<td><strong>NURS 730 Quantitative Methods in Clinical Nursing Research</strong></td>
<td>Description: Investigation of selected quantitative strategies appropriate to researching problems in clinical nursing.</td>
<td></td>
</tr>
<tr>
<td><strong>NURS 731 Qualitative Methods</strong></td>
<td>Description: Application of selected qualitative research methods from the social sciences to clinical nursing.</td>
<td></td>
</tr>
</tbody>
</table>
Table 21: New Course Descriptions to be Offered at the College of Nursing*

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 7XX</td>
<td>Emerging Diseases, Genetics &amp; Health Trends (3 units)</td>
<td>Description: This on-line course reviews three substantive areas. The first area includes emerging infectious diseases and other health problems related to environmental disturbances secondary to human and natural causes, including overpopulation, technology, bioterrorism and natural disaster. The second area includes current and emerging trends related to genetic contributions to human diseases, including common and multifactorial genetic diseases. The third area includes current and emerging health trends related to identified major health problems in the U.S. and Arizona, including (but not limited to) cardiovascular disease and stroke, cancer, diabetes, obesity, and sexually transmitted diseases. The health trend topics will be reviewed in the context of health chronicity, aging, and health behavior and promotion.</td>
</tr>
<tr>
<td>NURS 7XX</td>
<td>Evidence Based Practice Methods (3 units)</td>
<td>Description: This course prepares graduate students in translational methods for evidence-based practice (EBP). Focus will be on informational analysis to improve utilization of scientific evidence to impact clinical safety, quality and efficiency.</td>
</tr>
<tr>
<td>NURS 7XX</td>
<td>Patient Safety, Quality Management &amp; Evaluation Methods (3 units)</td>
<td>Description: This course will prepare students to identify, analyze and evaluate patient safety issues and health care errors, analyze information technologies that support outcome measurement, apply quality improvement methods to improve safety and the quality of health care, and understand methods for conducting program evaluation and performance measurement. Information systems that support safety and quality management, including decision support tools to assist clinicians and patients, will also be reviewed and evaluated.</td>
</tr>
<tr>
<td>NURS 7XX</td>
<td>DNP Role (2 units)</td>
<td>Description: This course emphasizes the role of the Doctor of Nursing Practice (DNP) and includes analysis of those contextual, legal, business and policy factors that influence the definition and implementation of the DNP.</td>
</tr>
<tr>
<td>NURS 9XX</td>
<td>DNP internship (9 units)</td>
<td>Description: The DNP internship and capstone course is a clinical immersion course designed to demonstrate synthesis between practice and knowledge obtained throughout the Doctor of Nursing Practice program. Students will demonstrate scholarly application of knowledge within a clinical agency that reflects their individual program of study and will reflect this knowledge synthesis in a written work that may be application, translation or research based.</td>
</tr>
</tbody>
</table>

*Syllabi for New Courses Offered in the College of Nursing to follow beginning on page 47

Table 22: Course Required for the DNP Offered in the College of Public Health

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPID 573A</td>
<td>Basic Principles of Epidemiology</td>
<td>(3 units) Course will introduce students to the basic concepts and principles of epidemiology and how these concepts are applicable for their own particular interests and careers in epi related fields.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Grading: Regular grades are awarded for this course: A B C D E.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Prerequisite(s): EPI major or cognate, MPH major, or consent of instructor.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>May be repeated: for credit 1 time (maximum 2 enrollments).</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Identical to: CPH 573A.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Usually offered: Fall.</td>
</tr>
</tbody>
</table>
COURSE NUMBER AND TITLE:  NURS 7XX DNP Role

COURSE CREDIT:  2 units

PREREQUISITES:  Admission to Graduate Nursing DNP Program

FACULTY:  TBA

Course Description: This course emphasizes the role of the Doctor of Nursing Practice (DNP) and includes analysis of those contextual, legal, business and policy factors that influence the definition and implementation of the DNP.

Course Objectives: Upon completion of this course students will be able to:

1. Differentiate the role, scope and practice model of the DNP particularly as the DNP role relates to different health professions
2. Integrate the relationship of the scientific underpinnings of practice—biophysical, psychosocial, analytical, and organizational sciences—as the basis for the highest level of nursing practice
3. Assess and evaluate major contextual factors and policy triggers that influence health policy-making at the various governmental levels
4. Analyze health policies from the perspective of consumers, nursing, and other health professions to improve health care outcomes.
5. Apply clinical legal, business and regulatory requirements related to practice, population health, and care delivery
6. Translate knowledge necessary for analyzing and providing cost-effective health care in a variety of settings
7. Develop a professional portfolio

Teaching Strategies: Course delivered online and will include

1. Seminar & Group Discussion
2. Media and reading assignments
3. Case Analysis and Presentations
4. Professional Portfolio development

Topical Outline:

1. Advanced practice roles in nursing and the DNP
   a. The DNP and the Culture of Professions
   b. Knowledge Acquisition, Translation & Clinical Practice Management
c. Consultation, Collaboration and Leadership within an Interprofessional Team Environment

d. Ethical Challenges

e. Effective Communication & Team Building Styles

2. Health Policy and the DNP

a. Healthcare, context and policy triggers
   i. The role of culture, ethnicity and health care outcomes
   ii. Culturally competent health care

b. Policy Analysis

c. Policy Advocacy

d. Individual, Community & Population-based advocacy

e. Consequences of Policy and Advocacy Interventions

f. Global Health

3. Legal and business issues related to the DNP role and clinical care delivery

a. Advanced practice and employment law

b. Scope of Practice, Credentialing & Privileging, Licensure & National Certification

c. Practice Management & Business Strategies

d. Risk Management & Conflict Resolution

e. Reimbursement

f. Cost effective health care delivery models

g. HIPPA

Grading Policies:

A = 90 -100%
B = 80 - 89%
C = 70 - 80%
D = 60 - 69%
F = Below 60%

Grades below “B” constitute unsatisfactory academic performance for graduate students. See “Satisfactory Academic Progress in the Graduate Student Handbook at:

http://www.nursing.arizona.edu/gshV2.htm#AcademicProgress

Evaluation Methods:

Participation in discussion sessions  20%
Case study project (team activity)    25%
Written Scholarly Paper            25%
Portfolio                           30%

Code of Academic Integrity: The faculty supports the Code of Academic Integrity of the University of Arizona available online at: http://w3.arizona.edu/~studpubs/policies/cacaint.htm.
The student will know that plagiarism and other acts in violation of the Code of Academic Integrity are prohibited.

**Textbooks & Required Readings:** TBA
COURSE NUMBER AND TITLE: NURS 7XX Evidence Based Practice Methods

COURSE CREDIT: 3 units

PREREQUISITES: Graduate Nursing Status; NURS 730 Quantitative Methods; NURS 631 Statistics; May be taken concurrently with NURS 731 Qualitative Methods

FACULTY: TBA

Course Description: This course prepares graduate students in translational methods for evidence-based practice (EBP). Focus will be on informational analysis to improve utilization of scientific evidence to impact clinical safety, quality and efficiency.

Course Objectives: Upon completion of this course students will be able to:

1. Access and evaluate evidence designed to improve clinical outcomes
2. Evaluate meta-analysis and other statistical approaches that can be used to develop a single estimate of the effectiveness or safety of an intervention.
4. Evaluate the strength of evidence underlying clinical practice guidelines (CPG) and the consequences of treatment standardization
5. Critique the potential nature and magnitude of the impact of an intervention including the costs of intervening
6. Translate the significance of postmarketing evaluation/evidence to patient safety
7. Translate strategies for the dissemination and implementation of scientific evidence and guidelines to clinicians and the general public, e.g., academic detailing, opinion leaders, accreditation and certification bodies, methods of providing concurrent feedback.
8. Translate evidence-based individual decision making in expanded nursing role.

Teaching Strategies: Course delivered online and will include

1. Seminar
2. Media and reading assignments
3. Case presentations

Topical Outline:

1. Overview of EBP
2. Patient outcome priorities related to IOM aims.
3. Models used for EBP
4. Interdisciplinary partnerships
5. Building the infrastructure for EBP
6. Synthesizing clinical evidence
7. Computer-based clinical decision support systems
8. Evaluating evidence
9. Integrating EBP into advanced practice role
10. Developing strategies for dissemination of EBP into student’s healthcare environment
11. Developing CPG for practice

Grading Policies:

A = 90 -100%
B = 80 - 89%
C = 70 - 80%
D = 60 - 69%
F = Below 60%

Grades below “B” constitute unsatisfactory academic performance for graduate students. See “Satisfactory Academic Progress in the Graduate Student Handbook at: http://www.nursing.arizona.edu/gshV2.htm#AcademicProgress

Evaluation Methods:

Participation in discussion sessions 25%
Case study project (team activity) 25%
EBP project 50%

Code of Academic Integrity: The faculty supports the Code of Academic Integrity of the University of Arizona available online at: http://w3.arizona.edu/~studpubs/policies/cacaint.htm.

The student will know that plagiarism and other acts in violation of the Code of Academic Integrity are prohibited.

Required Text:


Required Readings:


Additional readings related to content areas will be on E-Reserves as well as appropriate Web sites.

Recommended Resources:

COURSE NUMBER AND TITLE:  NURS 7XX Patient Safety, Quality Improvement & Evaluation Methodologies

COURSE CREDIT:  3 units

PREREQUISITES:  Graduate Nursing Status; NURS 730 Quantitative Methods; NURS 731 Qualitative Methods; NURS 631 Statistics

FACULTY:  TBA

Course Description:  This course will prepare students to identify, analyze and evaluate patient safety issues and health care errors, analyze information technologies that support outcome measurement, apply quality improvement methods to improve safety and the quality of health care, and understand methods for conducting program evaluation and performance measurement. Information systems that support safety and quality management, including decision support tools to assist clinicians and patients, will also be reviewed and evaluated.

Course Objectives:

Students will be able to:
1. Detect and categorize, using a taxonomy of errors, patient safety issues in their own practice setting and their antecedent and proximal causes.
2. Analyze available information technology that can be used to measure outcomes and apply it in their own practice
3. Apply theoretically-based quality improvement methodologies to improve safety and quality outcomes within their practice
4. Design an effective program evaluation, including identifying key stakeholders, objectives, indicators, and reporting strategies.

Teaching Strategies:  Online

1. Seminar
2. Media and reading assignments
3. Case presentations

Topical Outline:

Primary Modules:

1. Science and Foundations for Patient Safety & Quality
a. The issue of patient safety:
   b. Taxonomy of Errors
   c. Why errors happen
   d. Adverse Event Analysis
      i. Near Misses
      ii. Errors

2. Outcomes Evaluation and Measurement
   a. Information infrastructure for Improving Safety and Quality Outcomes
      i. Acquiring, collecting, and managing data for outcomes evaluation
      ii. The importance of structured data
      iii. Analyzing data for outcomes evaluation
      iv. Reporting results

3. Quality Improvement
   a. Creating safety systems in healthcare organizations
   b. Building leadership for safety and quality improvement
   c. Process design
   d. Performance improvement
      1. Clinical decision support
      2. Computer-assisted diagnosis and management programs
      3. Integrated systems
   e. Process measurement tools (includes statistical tools)
   f. Closing the loop

4. Program Evaluation and Performance Measurement
   a. Assessing the need for a program
   b. Identifying stakeholders and beneficiaries of a program
   c. Design and measurement in program evaluation
      i. Theoretically vs. goal-based evaluations
      ii. Identifying performance measures and indicators
      iii. Identifying data sources
      iv. Social Context of Evaluation
   d. Social Context of Evaluation
   e. Effective evaluation communication and reporting strategies

Grading Policies:

A = 90 -100%
B = 80 - 89%
C = 70 - 80%
D = 60 - 69%
F = Below 60%
Grades below “B” constitute unsatisfactory academic performance for graduate students. See “Satisfactory Academic Progress in the Graduate Student Handbook at: http://www.nursing.arizona.edu/gshV2.htm#AcademicProgress

Evaluation Methods:

**Code of Academic Integrity**: The faculty supports the Code of Academic Integrity of the University of Arizona available online at: http://w3.arizona.edu/~studpubs/policies/cacaint.htm.

The student will know that plagiarism and other acts in violation of the Code of Academic Integrity are prohibited.

**Required Text:**


**Required Readings**: TBA
COURSE NUMBER AND TITLE:  NURS 7XX Emerging Diseases, Genetics, and Health Trends

COURSE CREDIT:  3 units

PREREQUISITES:  Graduate Status in Nursing

FACULTY:  TBA. This is a team taught course

Course Description: This on-line course reviews three substantive areas. The first area includes emerging infectious diseases and other health problems related to environmental disturbances secondary to human and natural causes, including overpopulation, technology, bioterrorism and natural disaster. The second area includes current and emerging trends related to genetic contributions to human diseases, including common and multifactorial genetic diseases. The third area includes current and emerging health trends related to identified major health problems in the U.S. and Arizona, including (but not limited to) cardiovascular disease and stroke, cancer, diabetes, obesity, and sexually transmitted diseases. The health trend topics will be reviewed in the context of health chronicity, aging, and health behavior and promotion.

Objectives: Upon completion of each section of this course students will be able:

I. Emerging Disease:

1. Analyze the impact of emerging infectious diseases on US/global public health and safety
2. Evaluate significance of infectious agents that could be used in bioterrorism
3. Critically analyze the impact of natural and man-made disasters and the ensuing emergent health problems
4. Link environmental pollution and overpopulation to emergent secondary health problems

II. Genetics:

1. Analyze the patterns of inheritance, clinical manifestations of common mendelian diseases, and the multifactorial nature of most human traits, both normal and abnormal.
2. Explain the scientific basis for techniques used in genetic testing, screening, diagnosis and therapy.
3. Link gene structure and the presence of clinical conditions in common and multifactorial diseases, such as cardiovascular disease and cancer.
4. Examine issues related to genetic testing and counseling, including legal, ethical, psychological issues.
III. Health Trends

1. Analyze major current and emerging health trends in the U.S. and Arizona
2. Appraise and differentiate between specific health trends including cardiovascular disease and stroke, cardiovascular disease and stroke, cancer, diabetes, obesity, sexually transmitted diseases, and mental health
3. Integrate the effects of chronicity, aging, and health behavior and promotion on health trends nationally and internationally

Teaching Strategies & Content Delivery: All sections will be delivered online. Content will be delivered by PowerPoint presentations, journal readings (e.g., from Emerging Infectious Diseases and Diabetes), and by viewing archived and live video-streamed presentations on relevant topics (available through http://video.biocom.arizona.edu). The content will be discussed via weekly informal student work groups and through formal instructor moderated, topic-driven discussions.

Grading and Evaluation: The class will be graded (using a standard online discussion rubric) on participation in discussions and on the completion of a short (5-7 page) concept paper related to each of the sections (emerging diseases, genetics, and health trends), for a total of three papers. Papers will be peer and instructor reviewed, and discussed as a class using an online video conferencing (Breeze).

Topical outline:

Module I
- Emerging Infectious Diseases
- Bioterrorism Agents
- Health Problems and Natural Disasters
- Health Problems Related to Environmental Pollution
- Conference

Module II
- Structure and function of genes and the general organization of the human genome and genetic basis of human disease
- Molecular tools for understanding genetic disease
- Genetics of common disease and multifactorial inheritance
- Population genetics and genetics in clinical practice
- Conference

Module III
- Current and Emerging Health Trends
- Cardiovascular Disease, stroke, obesity
- Diabetes
- Cancer and STD
- Conference
Grading Policies:

A = 90 -100%
B = 80 - 89%
C = 70 - 80%
D = 60 - 69%
F = Below 60%

Grades below “B” constitute unsatisfactory academic performance for graduate students. See “Satisfactory Academic Progress in the Graduate Student Handbook at: http://www.nursing.arizona.edu/gshV2.htm#AcademicProgress

Evaluation Methods:

Code of Academic Integrity: The faculty supports the Code of Academic Integrity of the University of Arizona available online at: http://w3.arizona.edu/~studpubs/policies/cacaint.htm.

The student will know that plagiarism and other acts in violation of the Code of Academic Integrity are prohibited.

Required Text:


Robbins and Cotran Pathologic Basis of Disease, 7th ed, v. Kumar, A. Abbas, and N. Fausto, editors, Elsevier, 2005

Required Readings:

TBA
COURSE NUMBER AND TITLE:  NURS 9XX DNP Internship II

COURSE CREDIT:  9 units

PREREQUISITES:  Admission to Graduate Nursing DNP Program; NURS 646 Healthcare Information Systems; EPID 573a Epidemiology; NURS 631 Advanced Statistics; 7XX DNP Role; NURS 7XX Emerging Diseases, Genetics & Health Trends; NURS 730 Quantitative Methods; NURS 731 Qualitative Methods; NURS 7XX Evidence Based Practice Methods; NURS 7XX Patient Safety & Quality Management

FACULTY:  TBA

COURSE DESCRIPTION:  The DNP internship is a clinical immersion course designed to demonstrate synthesis between practice and knowledge obtained throughout the Doctor of Nursing Practice program. Students will demonstrate scholarly application of knowledge within a clinical agency that reflects their individual program of study and will reflect this knowledge synthesis in a written work that may be application, translation or research based.

COURSE OBJECTIVES:  At the conclusion of this course the student will:

1. Detect a problem or phenomenon encountered in advanced nursing practice requiring change.

2. Critically analyze a problem or phenomenon encountered in advanced nursing practice utilizing research and evidence-based methods

3. Design and implement an evidence-based intervention to address the nursing practice problem or phenomenon.

4. Measure and evaluate the impact of the intervention including the relationship to patient safety and quality management

5. Present the final project in a formal oral session and written paper.

COURSE REQUIREMENTS:

The DNP internship is an application of methods and/or knowledge through a clinically-based scholarly project conducted within a health service agency. The DNP internship requires the execution of a scholarly project within a health care agency that reflects the student’s individual plan of study. The DNP internship scholarly project will be conducted under the supervision of a faculty advisor and committee of three members—faculty advisor, major advisor and cognate
advisor. Students must submit a DNP internship study plan approved by the advisory committee no later than December 1 of the spring term that precedes the summer term when the DNP internship is scheduled to begin.

FACULTY ADVISOR & PROJECT COMMITTEE: Each DNP candidate must have a faculty advisor and two additional committee members who guide and supervise the development, defense and implementation of the scholarly proposal. Faculty supervisors must meet graduate college criteria for approval to supervise graduate scholarly projects.

DNP INTERNSHIP PROJECT PROPOSAL: The DNP internship project proposal will consist of Chapters I, II, and III as outlined below.

WRITTEN DNP INTERNSHIP PROJECT OUTLINE

Chapter I

Introduction to problem
Significance of problem
Background
Purpose and specific aims
Definitions used in the project
Significance to nursing
Relationship of project to student's area of advanced nursing practice
Discussion of how proposed DNP internship clinical area will support project's development
Benefit of project to the clinical area
Summary of Chapter I

Chapter II

Introduction to chapter
Theoretical foundation or framework for the project
Specific link of theory to project
Review and critique of pertinent literature
Summary of Chapter II

Chapter III

Introduction to chapter
Methods for achieving purpose and specific aims of project
Expected outcomes (hypotheses)
Project timeline
Project budget and justification
Other resources needed for project completion
Summary of Chapter III
Chapter IV

- Introduction to chapter
- Project results
- Evaluation and/or plan for evaluation
- Summary of Chapter IV

Chapter V

- Introduction to chapter
- Discussion of project results
- Relate project to theoretical framework
- Discuss significance of results to clinical setting, nursing, health care practice
- Strengths and limitations
- Suggestions for improving project and/or future project needs
- Summary of Chapter V

EVALUATION METHODS

Evaluation for this course is based upon submission of the written project to the faculty advisor and project committee and successful oral defense of the scholarly written project. An oral defense will be conducted by the faculty advisor and project committee at a time and place mutually agreed upon by the DNP student and committee members. Committee members shall have the opportunity to ask questions of the DNP student sufficient to determine the scholarly rigor of the project and the student's competency at understanding the evidence-based literature relevant to the clinical project plus the methods utilized for project completion.

Grading Policies:

Course grade for the DNP internship shall be Superior, Pass, or Fail based upon a vote of the committee. See “Satisfactory Academic Progress in the Graduate Student Handbook at: http://www.nursing.arizona.edu/gshV2.htm#AcademicProgress

Code of Academic Integrity: The faculty supports the Code of Academic Integrity of the University of Arizona available online at: http://w3.arizona.edu/~studpubs/policies/cacaint.htm.
Appendix E

Potential Cognate Courses
Offered in the College of Nursing
Potential DNP Cognates

The College of Nursing PhD Program includes three research emphasis areas: 1) Health Systems, 2) Vulnerable Populations and 3) Injury Mechanisms and Biobehavioral Responses. Table 23 of this appendix lists potential courses that DNP students may take as a cognate study area. Each area is briefly described as follows:

**Health Systems** students study both healthcare delivery systems and healthcare information systems because the two are so tightly connected. Information systems provide the necessary infrastructure for healthcare delivery systems. The focus is on the health care delivery system as the target of change, rather than the individual patient or family. Students are provided with a broad background in systems and information theory, as well as with specific systems management skills (e.g., program management, planning, and evaluation) and informatics skills (e.g., system analysis, design, implementation, and evaluation). Additional breadth of content is available through our partnerships with the School of Information Resources and Library Science (IRLS) and the College of Public Health and through in-house cognates or electives at the College of Nursing (e.g., Vulnerable Populations or Rural Health).

**Vulnerable Populations** students focus on content, theories, and strategies of knowledge development about the promotion of health and well-being across the trajectory of health and illness experiences among vulnerable populations including those individuals or groups identified as: chronically or seriously ill, mentally ill, aging, women and children, and other vulnerable populations. Health experiences currently under study include those related to menopause, depression, pulmonary distress, substance abuse, resilience, spirituality, wasting, and family violence. Community-based and other intervention approaches with these populations may also be a study focus.

**Injury Mechanisms and Biobehavioral Responses** students focus on content, theories, and strategies of knowledge development about the physiologic and pathophysiologic mechanisms of injury and illness conditions, and the biologic and behavioral responses to illness. Faculty research in this area addresses biologic, behavioral, and biobehavioral responses to various health-related areas including: HIV/AIDS, wound healing, cognitive and biological responses to cancer treatment in childhood, pathophysiology of and biologic responses to stroke, biobehavioral responses in pulmonary and cardiovascular problems.
The following table summarizes courses in the College of Nursing that may be taken by DNP students as possible cognates. This is a sample of courses but is not exhaustive. Students with appropriate approvals may also do external cognates as well. To illustrate, several possible courses in aging are offered in various departments and other Arizona colleges including Arizona State University. For students wanting a cognate in aging the Arizona Geriatric Education Center will be consulted on an individual basis to plan an aging cognate for those students seeking this cognate.

**Table 23: Potential (Internal—College of Nursing) Cognate Courses**

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Title</th>
<th>Health Systems</th>
<th>Vulnerable Populations</th>
<th>Injury Mechanisms</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 583</td>
<td>Issues in Frail Elder Care (3 cr)</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>NURS 600D</td>
<td>Theory &amp; Practice: Gerontological Nursing (3 cr)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NURS 607</td>
<td>Transcultural Nursing (3 cr)</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>NURS 736</td>
<td>Technologies for Expanding Healthcare Capacity (3 cr)</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>NURS 737</td>
<td>U.S.—Mexico Border Health Issues (3 cr)</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>NURS 787</td>
<td>Vulnerability: Health Experiences &amp; Research (3 cr)</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>NURS 638</td>
<td>Conceptual Foundations for Rural Nursing (1 cr)</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>NURS 639</td>
<td>Advanced Conceptual Foundations for Rural Nursing (2 cr)</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>NURS 773</td>
<td>Rural Health Systems (3 cr)</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NURS 774</td>
<td>Rural Community Health (3 cr)</td>
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<tr>
<td>NURS 634</td>
<td>Data Management in Healthcare Systems (3 cr)</td>
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<td></td>
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<tr>
<td>NURS 645</td>
<td>Health Care Systems Measurement &amp; Analysis (3 cr)</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>NURS 735</td>
<td>Workforce &amp; Healthcare Delivery Environment (3 cr)</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>NURS 738</td>
<td>Translational Research Methods (3 cr)</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>
APPENDIX F

Faculty Biosketches
BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2.
Follow this format for each person. DO NOT EXCEED FOUR PAGES.

NAME

Judith A. Berg

eRA COMMONS USER NAME

POSITION TITLE

Associate Professor

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)

<table>
<thead>
<tr>
<th>INSTITUTION AND LOCATION</th>
<th>DEGREE (if applicable)</th>
<th>YEAR(s)</th>
<th>FIELD OF STUDY</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Oregon, Portland, Oregon</td>
<td>BSN</td>
<td>1967</td>
<td>Nursing</td>
</tr>
<tr>
<td>University of California, San Francisco, California</td>
<td>MSN</td>
<td>1975</td>
<td>Nursing</td>
</tr>
<tr>
<td>University of California, San Francisco, California</td>
<td>NP</td>
<td>1975</td>
<td>Women’s Health</td>
</tr>
<tr>
<td>University of California, San Francisco, California</td>
<td>PhD</td>
<td>1997</td>
<td>Nursing</td>
</tr>
</tbody>
</table>

A. Positions and Honors.

Positions and Employment

1965-1967 Nursing Student Assistant, Maternity Department, Multnomah County Hospital, Portland, Oregon
1967-1968 RN, Maternity Department, St. Bernardine’s Hospital, San Bernardino, California
1969 RN, Maternity Department, Multnomah County Hospital, Portland, Oregon
1973-1975 RN, Labor & Delivery, Alta Bates Hospital, Berkeley, California
1975-1997 Women’s Health Nurse Practitioner, Planned Parenthood, San Francisco, California
1992-1997 Faculty for Health Assessment, Nursing Leadership, Holy Names College, Department of Nursing
1995-1996 Teaching Assistant, Nursing Leadership & Research Design, UCSF School of Nursing, San Francisco, California
1997-2003 Assistant Professor, The University of Arizona College of Nursing, Tucson, Arizona
2003-present Associate Professor, The University of Arizona College of Nursing, Tucson, Arizona

Other Experience and Professional Memberships

1975-present Association of Women’s Health, Obstetric, and Neonatal Nurses
1989-present Sigma Theta Tau, Nu Xi Chapter-at-Large, now member of Beta Mu
1990-present Association of Reproductive Health Professionals
1993-present American Academy of Nurse Practitioners
1994-present Society for Menstrual Cycle Research
1994-present North American Menopause Society
1995 Virginia Kelley, CRNA Memorial Scholar
1997-present  Arizona Nurses Association; American Nurses Association
1999-present  International Menopause Society
2000-present  International Council on Women’s Health Issues
2000-2006  Women’s Health Nurse Practitioner National Certification, National Certification Corporation

**Honors**

1995  Sigma Theta Tau Award for Excellence in Clinical Practice
1999-2000  Dean’s Research Scholar; Graduate Teaching Award, University of Arizona College of Nursing
2003  Inducted as Fellow in the American Academy of Nurse Practitioners
2000 & 2004  Graduate Excellence in Teaching Award, University of Arizona College of Nursing

**B. Selected peer-reviewed publications (in chronological order).**


**C. Research Support.**

**Ongoing Research Support**

1 R15 NR008003 Berg (PI)

05/01/04-04/30/07

NIH/NINR

Nursing Interventions for Symptoms of Perimenopause

The overall goal of this program of research is to test the effectiveness of commonly available and frequently promoted strategies to reduce symptom-associated distress and to promote health during the perimenopausal transition.
Completed Research Support

Berg (PI) 1997-2000
University of Arizona, College of Nursing
A Multimodel Nursing Intervention for Menopause Symptom Management
Aim #1: To refine a multimodal treatment package for menopause symptom management for Mexican American midlife women that is comprised of diet modification (high fiber, low fat diet,) vitamin supplementation (multivitamin and calcium supplements), exercise, and stress reduction techniques.
Aim #2: To pilot test the feasibility of a multimodal treatment package for menopause symptom management on a group of midlife women over two months.
Role: PI

Berg (PI) 2000-2001
University of Arizona, College of Nursing
Physical Activity Continuation in Mexican American Elder Women
Aim #1: To pilot test theory-driven interventions aimed at promoting long term continuation (12 months) of physical activity (PA) in Mexican American elder women.
Aim #2: To refine interventions and study procedures for an intervention study aimed at promoting long term (12 months) PA continuation in Mexican American elder women.
Role: PI

Berg (PI) 2001-2003
Nursing Society Foundation/Aventis Oncology Nursing Research Grant
Menopause Symptom Management in Breast Cancer Survivors.
Aim #1: To determine the feasibility of a multimodal treatment package (MMTP) for breast cancer survivors.
Aim #2: To determine the effect size of the MMTP on the outcome of perimenopausal symptom experience as measured by symptom perception, severity, distress, and stress perception in breast cancer survivors.
Aim #3: To evaluate the hypothesis that one mechanism by which the MMTP affects the perimenopausal symptom experience is through wellbeing.
Role: PI

Berg (PI) 2002-2003
University of Arizona College of Nursing
Perception of Breathing and Distress Across the Menstrual Cycle
Aim #1: To describe the perception of breathing effort and distress in women with and without a diagnosis of Asthma during the follicular and luteal phases of the menstrual cycle.
Aim #2: To examine differences in the perception of breathing effort and distress in women with and without a diagnosis of Asthma under a controlled condition of loaded breathing during the follicular and luteal phases of the menstrual cycle.
Aim #3: To examine differences in the perception of breathing effort and distress in women with and without a diagnosis of Asthma under a controlled condition of exercise during the follicular and luteal phases of the menstrual cycle.
Role: PI

1 R15 NR07626-01 Cromwell(PI) 2001-2004
National Institute for Nursing Research  Cromwell (PI)
Long-Term Exercise in Mexican-American Sedentary Women.
Aim: To determine if a community-based nursing intervention to enhance physical activity (PA) motivation will result in long-term (1 year) PA continuation at a level adequate to delay physical frailty in sedentary Mexican-American women.
Role: Co-Investigator
BIOGRAPHICAL SKETCH

NAME  Crist, Janice Diane

eRA COMMONS USER NAME

POSITION TITLE  Assistant Professor

EDUCATION/TRAINING  (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)

<table>
<thead>
<tr>
<th>INSTITUTION AND LOCATION</th>
<th>DEGREE (if applicable)</th>
<th>YEAR(s)</th>
<th>FIELD OF STUDY</th>
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<tr>
<td>Texas Christian University</td>
<td>BS</td>
<td>1973</td>
<td>Nursing</td>
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<tr>
<td>University of California, San Francisco</td>
<td>MS</td>
<td>1978</td>
<td>Long Term Care Family Nursing</td>
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<tr>
<td>Oregon Health &amp; Sciences University</td>
<td>PhD</td>
<td>1999</td>
<td>Gerontological Nursing</td>
</tr>
<tr>
<td>University of Arizona</td>
<td>Post Doc</td>
<td>2001</td>
<td>Vulnerable Populations</td>
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</tbody>
</table>

Positions and Employment

1973-1974  Assistant Charge Nurse, Houston Health Department
1974-1976  Respiratory Nurse Specialist, Houston Visiting Nurses Association
1976-1977  Part time Charge Nurse, Community Convalescent Center, Vallejo, CA
1977-1980  Continuity of Care Coordinator, St. Helen Hospital, Chehalis, WA
1980-1981  Manager, Home Health, Southwest WA Health District
1981-1984  Issue Analyst, Department Social and Health Services, WA Nursing Home Licensing
1984-1999  Consultant, Self Care Education, Olympia, WA
1985-1998  On-Call RN, Providence Sound Home Care and Hospice
1986-1989  Nursing Instructor, South Puget Sound Community College, Olympia, WA
1989-1990  Nursing Instructor, City University, Seattle, WA; Assistant Professor, St Martin’s College, Olympia, WA
1993-1999  Public Health Nursing Consultant, WA State Department of Health
1998-1999  Research Assistant, OHSU-Portland
2000-2002  Post-Doctoral Fellowship, College of Nursing, University of Arizona
2002-present  Assistant Professor, College of Nursing, University of Arizona

Other Experience and Professional Memberships

1984-present  Sigma Theta Tau, Beta Mu (Arizona) and Tacoma-Seattle (WA State) Chapters
2000-present  Member, Evaluation Group for Analysis of Data (EGAD), Psychology Department, University of Arizona
2002-present  Member, Exploratory Center of Injury Mechanisms and Related Responses, College of Nursing, University of Arizona

Honors

1992-1998  Clinical Specialist in Medical-Surgical Nursing Certification, American Nurses Association
2001  University of Arizona Women in Science and Engineering Program travel stipend awarded to present a paper at the 34th Annual Communicating Nursing Research Conference, Seattle, WA
2001  University of Arizona International Affairs Foreign Travel Grant awarded to present a paper at the 17th World Congress of the International Association of Gerontology, Vancouver, Canada
2002  Sigma Theta Tau International Beta Mu Chapter Knowledge Dissemination Award
2002-2003  Dean’s Scholars Program, College of Nursing, University of Arizona

D. Selected peer-reviewed publications (in chronological order).


**Selected Abstracts:**


**E. Research Support.**

**Ongoing Research Support**

1 R15 NR009031 Crist (PI) 2004-2006

National Institute of Nursing Research
Mexican American Elders’ Use of Home Care Services
Role: PI

**Completed Research Support**

Crist (PI) 2003–2004
Laurence B. Emmons Award, College of Nursing - University of Arizona
Instrument development: Mexican American elders’ experiences of discrimination
Crist (PI) 2002-2003
University of Arizona Faculty Small Grants
Grounded theory exploratory study of Mexican American elders’ and their family caregivers’ decision-making process whether to use in-home services.
Crist (PI) 2002-2003
Dean’s Research Award, University of Arizona
Pilot testing of interventions to increase Mexican American elders’ use of in-home services: *cafécitos* and a *telenovela*
5 T32 NR07092 Phillips (PI) 2000-2002
College of Nursing, University of Arizona
NRSA T32, Community-Based Interventions for Vulnerable Populations, grant for post-doctoral studies
Role: Fellowship Scholar
Crist (PI) 1998-2000
Individual NRSA for doctoral studies (NRSA #1F31 NR07385-01)
The meaning for elders of receiving family care
BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2. Follow this format for each person. DO NOT EXCEED FOUR PAGES.

NAME
Neva L. Crogan

eRA COMMONS USER NAME
NCROGAN

POSITION TITLE
Assistant Professor

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)

<table>
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<tr>
<td>Eastern Washington University, Cheney, WA</td>
<td>BS</td>
<td>1983</td>
<td>Comm Health</td>
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<tr>
<td>University of State of New York, Albany, NY</td>
<td>BSN</td>
<td>1984</td>
<td>Nursing</td>
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<tr>
<td>Eastern Washington University, Cheney, WA</td>
<td>MN</td>
<td>1992</td>
<td>Gerontology</td>
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<tr>
<td>Washington State University, Pullman, WA</td>
<td>PhD</td>
<td>1998</td>
<td>Nutrition</td>
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</table>

F. Positions and Honors.

Positions and Employment

1977-1979 Staff/Charge Nurse, Othello Community Hospital, Othello, WA
1980 Staff Nurse, Adult Medical-Surgical, Whitman Community Hospital, Colfax, WA
1981 Charge Nurse, Adult Medical-Surgical, Ritzville Memorial Hospital, Ritzville, WA
1981-1987 Nursing Instructor, Big Bend Community College, Moses Lake, WA
1988-1989 Utilization Review Coordinator, Medical Service Corporation, Spokane, WA
1989-1990 Inservice Director, NAC Instructor, St. Brendan Nursing Home, Spokane, WA
1990-1991 Director of Nursing Service, WHCC-Northcrest, Spokane, WA
1994-1996 Clinical Instructor, Washington State University College of Nursing
1994-1997 Regional Nurse Consultant/Director of Nursing, Beverly Health Care, Spokane, WA
1996-1998 Clinical Instructor, Spokane Community College, Spokane, WA
Spring 98 Research Assistant, Washington State University, Pullman, WA
1998-2001 Assistant Professor, Washington State University College of Nursing
2001-present Assistant Professor, University of Arizona College of Nursing, Tucson, AZ
2002-present Core Faculty, Geriatric Education Center, University of Arizona Health Sciences Center, Tucson, AZ

Other Experience and Professional Memberships

2001 Graduate Faculty, Washington State University

Honors

1992 Graduate Scholarship Award, ICNE
1992 Certificate of Recognition Award, Outstanding Surveyor of the Year
1997 DSHS, Nursing Home ANF/Sigma Theta Tau International Scholar
2001 Sigma Theta Tau International, Region 1, Research Utilization Award
2001 Nurse Excellence Award in Research, Delta Chi Chapter-at-Large, Sigma Theta Tau International
2002 Dean’s Research Scholar, University of Arizona College of Nursing
G. Selected peer-reviewed publications (in chronological order).


C. Research Support.

Ongoing Research Support

1 R15 NR008382-01  Crogan (PI)  2004-2006
NIH/NINR
Promoting Elder Health with Nutritional Interventions
The purpose of this study is to test the effect of a prevention-focused nutritional intervention for nursing home residents.
Role: PI

Completed Research Support

Crogan (PI)  2002-2003
National Gerontological Nursing Association
Influencing Influenza Vaccine Responses in the Elderly: A Feasibility Study
The purpose of this study is to test the feasibility of an iron and vitamin C supplementation intervention on enhancing influenza immunity in nursing home residents.
Role: PI

Crogan (PI)  2003-2004
Exploratory Center on Injury Mechanisms and Related Responses
Enhancing immune response with iron and vitamin C
The purpose of this study is to further test the feasibility of an iron and vitamin C supplementation intervention on enhancing influenza immunity in nursing home residents.
Role: PI

Crogan (PI)  2002
Laurence B. Emmons Research Grant/University of Arizona College of Nursing
Measuring resident food satisfaction in nursing homes
The purpose of this study is to develop and initially test the reliability and validity of a resident satisfaction with food and food service questionnaire (FoodEx-LTC) in the context of the “Nutrition Related Outcomes Model for Long Term Care.”
Role: PI

Crogan (PI)  2001-2002
Office of the Vice President for Research/ and Graduate Studies, University of Arizona
The influence of malnutrition on resident outcomes in nursing homes
The purpose of this study is to test an evidence-based theoretical model designed to explain quality of life and nutritional health outcomes in nursing home residents.
Role: PI

Crogan, (PI)  1999-2001
Laura Dustan Research Award/Delta Chi chapter at large, Sigma Theta Tau International
Predictors of Protein-Calorie Malnutrition in Elderly Nursing Home Residents
A longitudinal, descriptive study that examined the prevalence of, risk factors for, and outcome of protein-calorie malnutrition in elderly nursing home residents using data from the Minimum Data Set.
Role: PI

Crogan, (PI)  1999-2000
Department of Social and Health Services, Washington State
Quality Improvement Consultation Program

Program evaluation of a new Quality Improvement Consultation Program for boarding homes and assisted living facilities in Washington State.
Role: PI
Crogan, (PI) 1999-2000
Intercollegiate College of Nursing/Washington State University
The Meaning of Food to Nursing Home Residents
Qualitative study to explore the meaning of food to residents living in nursing homes.
Role: PI
BIOGRAPHICAL SKETCH

NAME
Amy H.(Tsang) Davis

POSITION TITLE
Assistant Professor

EDUCATION/TRAINING

<table>
<thead>
<tr>
<th>INSTITUTION AND LOCATION</th>
<th>DEGREE</th>
<th>YEAR(s)</th>
<th>FIELD OF STUDY</th>
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<tr>
<td>University of Arizona, Tucson, AZ</td>
<td>BSN</td>
<td>12-1989</td>
<td>Nursing</td>
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<tr>
<td>University of California, San Francisco, CA</td>
<td>MS</td>
<td>6-1995</td>
<td>Physiological Nursing</td>
</tr>
<tr>
<td>University of California, San Francisco, CA</td>
<td>PhD</td>
<td>9-2000</td>
<td>Physiological Nursing</td>
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<td>NIH/NINR/Georgetown University, MD</td>
<td>Post-Doctoral</td>
<td>8-2002</td>
<td>Genetics</td>
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<tr>
<td>University of Arizona, Tucson, AZ</td>
<td>Post-Doctoral</td>
<td>9-02 to 03</td>
<td>Advance Statistics</td>
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<tr>
<td>University of Arizona, Tucson, AZ</td>
<td>Post-Doctoral</td>
<td>6-04-present</td>
<td>Cell and Molecular Biology</td>
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A. POSITIONS AND EMPLOYMENT:
1997-1999  Project Director, Treatments for Dyspnea: Education, Exposure or Training, NIH/NINR, RO1, Department of Physiological Nursing, University of California, San Francisco
1999-1999  Teaching Assistant, Preview to Research Course, M.S. program, Department of Family and Community Nursing, University of California, San Francisco
2000-2000  Clinical Instructor, Critical Care, Division of Nursing Practice, University of Arizona
2003-2005  Program Coordinator, Level II, Accelerated BSN Partnership Program, University of Arizona
2001-present Assistant Professor, Division of Nursing Practice, University of Arizona

Honors and Awards 2001-Present
2001  Dean’s Scholar, University of Arizona, College of Nursing.
2001  Sigma Theta Tau Research Dissemination Award.
2001  Emmons Research Award, University of Arizona, College of Nursing.
2001  Vice President of Research, Research Award, University of Arizona.
2001  Invited Speaker, Research Program, Kang Ning Nursing College, Taiwan.
2002  Emmons Research Award, University of Arizona, College of Nursing.
2002  Selected for Genetics Institute Training, one of 18 fellows nationwide, NIH/NINR.
2002  Research abstract selected for highlight by the International Conference Committee, American Thoracic Society, Nursing Assembly, as example of quality of original nursing research.
2003  Invited Speaker, Symptom Management Conference, Center for Symptom Management, University of California, San Francisco, School of Nursing.
2003  Nominated for Excellence in Teaching, BSN, University of Arizona, College of Nursing.
2004  Nominated for Nursing Assembly Program Committee Chair, American Thoracic Society.
2005  Keynote Speaker, Honors Convocation, University of Arizona, College of Nursing.

B. PEER-REVIEWED PUBLICATIONS
2005  **Davis**, Amy H.T., Carrieri-Kohlman, V., Janson, S., Gold, W., & Stulbarg, M. Effects of a Self


2005 Saowapa Dedkhard, Amy H. T. **Davis.** Risk Factors of Cardiovascular Disease in Rural Thai Women. Journal of Transcultural Nursing. (Accepted).


C. RESEARCH SUPPORT

**Ongoing Research Support:**

2004-2007 **Tsang, (PI), 2P20NR007794-04**
National Institutes of Health/National Institute of Nursing Research, Exploratory Center on Injury Mechanisms and Related Responses, Feasibility Study, Genetics Core, “Genetic Influences on Exercise Adherence”.

2005-2006 **Ablin, (PI), Davis, (Co-Investigator), 2P20NR007794-04**
National Institutes of Health/National Institute of Nursing Research, Exploratory Center on Injury Mechanisms and Related Responses, Feasibility Study, Genetics Core, "Bone Marrow Stem Cells in the Injury Repair Response."

2003-2006 **Tsang, (PI), 1 R15 NR008103-01**
National Institutes of Health/National Institute of Nursing Research. “Exercise Adherence in Adults with Chronic Obstructive Pulmonary Disease.”

Percent Effort: 40% in year 1, 25% in year 2, 25% in year 3.

**Completed Research Support:**

12-01 to 6-03 **Tsang, (PI).**
Vice President of Research, University of Arizona. “Improving Physical Activity in Adults with Chronic Lung Disease.”

2-03 to 2-04 Emmons, **Tsang (PI).**
University of Arizona, College of Nursing. “Genetic Influences on Exercise Adherence in Adults with Chronic Obstructive Pulmonary Disease.”

1-01 to 1-02 Emmons, **Tsang (PI).**
University of Arizona, College of Nursing. “Exercise Adherence in Adults with Chronic Obstructive Pulmonary Disease.”

9-96 to 12-99 **Tsang, (PI), 5 NR07088**
National Institutes of Health/National Institute of Nursing Research, Pre-Doctoral Fellowship
“Self-Efficacy for Walking and Dyspnea Management in Adults with Chronic Obstructive Pulmonary Disease.”
9-95 to 12-99 Carrieri-Kohlman, Stulbarg (PIs), RO1-NR02131
National Institutes of Health/National Institute of Nursing Research, “Treatments for Dyspnea: Education, Exposure or Training.” Role: Tsang (Project Director). Responsibilities included: recruitment, data collection, outcomes measurement, data management, dissemination, personnel management, and manage collaboration with chest medical clinic, pulmonary function laboratory and physical therapy departments, of the project.
BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed for Form Page 2.
Follow the sample format for each person. DO NOT EXCEED FOUR PAGES.

<table>
<thead>
<tr>
<th>NAME</th>
<th>POSITION TITLE</th>
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<tr>
<td>Judith A. Effken</td>
<td>Associate Professor</td>
</tr>
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EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)*

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<th>DEGREE</th>
<th>YEAR(s)</th>
<th>FIELD OF STUDY</th>
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<tr>
<td>Evangelical Deaconess School of Nursing, Milwaukee, WI</td>
<td>Diploma</td>
<td>1962</td>
<td>Nursing</td>
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<tr>
<td>University of Hartford, Hartford, CT</td>
<td>BA</td>
<td>1973</td>
<td>Psychology</td>
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<tr>
<td>University of Connecticut, Storrs, CT</td>
<td>MS</td>
<td>1983</td>
<td>Nursing</td>
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<tr>
<td>University of Connecticut, Storrs, CT</td>
<td>PhD</td>
<td>1993</td>
<td>Psychology</td>
</tr>
</tbody>
</table>

A. POSITIONS AND HONORS

Positions and Employment:

1962-1964    Staff Nurse, Lincoln General Hospital, Lincoln, NE
1964-1965    Assistant Head Nurse, Staff Nurse, Uncas-on-Thames, Norwich, CT
1966-1969    Head Nurse, Assistant Head Nurse, Staff Nurse, Lawrence & Memorial Hospitals, New London, CT
1970-1986    Director of Special Projects and Quality Assurance, Clinical Supervisor, Head Nurse, Assistant Head Nurse, Mt. Sinai Hospital, Hartford, CT
1985-1987    Clinical Instructor, University of Connecticut, Storrs, CT
1986         Assistant Instructor, Health Care Management, Hartford Graduate Center, Hartford, CT
1986-1987    Consultant for implementation of Hospital Information System, Bristol Hospital, Bristol, CT
1990-1992    Research Assistant, University of Connecticut, Storrs, CT
1992         Lecturer, Perception and Sensation, Psychology, University of Connecticut, Storrs, CT
1993         Instructional Specialist: Information Systems in Health Care; Guest Lecturer, Management Information Systems, School of Nursing, University of Connecticut, Storrs, CT
1993-1995    Administrative Coordinator, Nursing Systems/Post-doctoral Fellowship in Nursing Administration, Hartford Hospital, Hartford, CT
1996-2002    Assistant Professor, University of Arizona, College of Nursing, Tucson, AZ
2002-present Associate Professor, University of Arizona, College of Nursing, Tucson, AZ

Honors

1959         Regents Scholarship, The University of Nebraska (declined)
1959         National Merit Scholar (declined)
1983         Induction, Sigma Theta Tau, Mu Chapter
1986         ANA Certification in Nursing Administration
1986         Service Award, Sigma Theta Tau, Mu Chapter
1997         Governor’s Spirit of Excellence Recognition Award to Faculty Development Team, University of Arizona
1998-1999    Dean’s Research Scholar
2003         Suzanne Van Ort Peer Award for Graduate Teaching
2004         American Medical Informatics Association Harriet H. Werley Award
2005         Induction as Fellow, American Academy of Nursing
B. SELECTED PEER-REVIEWED PUBLICATIONS


C. RESEARCH SUPPORT

Ongoing Research Support:

Effken (PI) 2004-2007
1D09HP03116-01-00
HRSA
Enhancing an Online PhD Program

The purpose of this project is to develop two additional PhD minors that target pressing national issues: Workforce and Healthcare Delivery Environments and Border Health. The latter will include a course on Technology for Expanding Healthcare Capacity. Awarded $687,790 over 3 years.

Completed Research Support:

R01 HS11973 Verran (PI) 2001-2004
AHRQ
Impact of Nursing Unit Characteristics on Outcomes
Designed to predict the impact of unit characteristics on safety and quality outcomes. The research had two aims: To examine the relationships among patient characteristics, organizational characteristics, unit characteristics and patient outcomes; to modify relationships among significant predictors of safety and quality of care outcomes through computational modeling to create best practice models for future study.

Role: Co-Investigator

Effken (PI) 2002-2004
National Medical Technology Testbed
Clinical Information Displays to Improve Trauma Outcomes
The purpose of this project was to create and evaluate a dynamic working prototype display for presenting clinical data, specifically, oxygenation management data, in ICUs. The aim was to better integrate the data and present it visually in such a way that diagnosis and treatment of critical events is facilitated and errors are reduced. Role: Principal Investigator. Awarded $258,835 for one year with one year no-cost extension.

Meek (PI) 2001-2002
Emmons Award, College of Nursing University of Arizona
Initial Psychometric Testing of Generic Nurse Sensitive Patient Outcomes
The purpose of this research was to test the psychometric properties of nurse-sensitive patient outcome measures.
Role: Co-Investigator

Badger (PI) 2001-2002
Faculty Small Grant Program/
Office of the Vice President for Research and Graduate Studies University of Arizona
Nurse-Sensitive Outcomes across Health Care Setting
The purpose of this award was to describe nurse-sensitive patient outcome indicators across the healthcare continuum and to identify the influence of specific risk adjustment factors on those outcomes
Role: Co-Investigator

Effken (PI) 2001-2002
National Medical Technology Testbed
Clinical Data Displays to Improve Trauma Outcomes
The purpose of this pilot project was to design and test a prototype clinical data display for use by trauma clinicians to support detection of critical events.
Role: Principal Investigator

Effken (PI) 1999-2000
Faculty Small Grant Program/
Office of the Vice President for Research and Graduate Studies University of Arizona and University of Arizona Foundation
Impact of Cognitive Style on Learning with Computerized Instructional Displays
The purpose of this research was to investigate how students’ cognitive style (particularly visual or verbal preferences for learning) affected their performance in a hemodynamic monitoring task using a computer.
Role: Principal Investigator

Effken (PI) 2000-2001
New Learning Environments and Technologies Grant Program,/ University of Arizona
Evaluating the Use of Computer Technology to Improve Communications between Instructors and Nursing Students in Community Settings
The purpose of this research was to test the feasibility of using laptop computers for faculty to supervised students providing care in patients’ homes.
Role: Principal Investigator
BIOGRAPHICAL SKETCH
Provide the following information for the key personnel in the order listed on Form Page 2.
Follow this format for each person.  DO NOT EXCEED FOUR PAGES.

NAME
Sharon W. Ewing

POSITION TITLE
Clinical Assistant Professor

EDUCATION/TRaining
(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)

<table>
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<th>YEAR(s)</th>
<th>FIELD OF STUDY</th>
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<tr>
<td>College of Santa Fe</td>
<td>AA</td>
<td>1985</td>
<td>Nursing</td>
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<tr>
<td>University of NM, Albuquerque, NM</td>
<td>BSN</td>
<td>1989</td>
<td>Nursing</td>
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<tr>
<td>University of NM, Albuquerque, NM</td>
<td>MS</td>
<td>1992</td>
<td>Nursing</td>
</tr>
<tr>
<td>Clayton College of Natural Health, Birmingham, AL</td>
<td>PhD</td>
<td>2000</td>
<td>Natural Health (Nutrition)</td>
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<tr>
<td>COHCC &amp; ANCC End of Life course, Pasadena, CA</td>
<td>Certificate</td>
<td>2003</td>
<td>End of Life Trainer</td>
</tr>
<tr>
<td>University of AZ, Tucson, AZ</td>
<td>Certificate</td>
<td>2004</td>
<td>Clinical Research</td>
</tr>
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</table>

A: Positions and Honors
Positions and Employment
1985-1987  Staff Nurse, OB, Neonatal, Española Hospital, Española, NM
1987-1993  Staff Nurse, OB, Neonatal, St. Vincent's Hospital, Santa Fe, NM
1993-1994  Family Nurse Practitioner, Robert Fritch, DO, Santa Fe, NM
1995-1997  Adjunct Faculty Santa Fe Community College, Santa Fe, NM
1996-1998  Special Faculty to the Nurse Practitioner Program, University of NM, Albuquerque, NM
1996-1998  Family Nurse Practitioner, Santa Fe Family Health Care, Santa Fe, NM
1998-2001  Clinical Instructor, University of AZ College of Nursing, Tucson, AZ
2001-present Clinical Assistant Professor, University of AZ College of Nursing, Tucson, AZ

Other Experience and Professional Memberships
1989-present Sigma Theta Tau
1996-1997  Deputy, Office of Medical Investigation, State of NM, Santa Fe, NM
1997-1998  Sexual Assault Nurse Examiner, Santa Fe, NM
2000-2001  Admission Physicals, Healthy Weight 4 Life Grant, Dept. of Physiology & Nutritional Sciences, University of AZ, Tucson, AZ
2000-present Member of the governing body of the Bahá’ís (Local Spiritual Assembly) of Tucson, AZ
2000-2005  Member of Southern AZ Nurse Practitioners Chapter 10 of ANA, current President
2003-present Board member of Old Fort Lowell Live-At-Home Program, Tucson, AZ
2003-2004  Member, The Institute of Noetic Sciences
2003-2004  Research Board for the AZ Coalition on Adolescent Pregnancy & Parenting

Honors
Dean’s List, College of Santa Fe, 3 years
Clayton College of Natural Health, Ph.D. with Honors
National Certification by ANCC, 1992 - 2007
AZ Clinical Research Training Program Fellow, 2001 to present
Human Subjects Protection Certification, 10/19/01

B. Selected peer-reviewed publications (in chronological order).
SCHOLARLY PRESENTATIONS


C. Research Support

Ongoing Research Support
None

Completed Research Support
MCH/AAP, Duncan (co-PI) 1998-2004
Healthy Tomorrows Partnership for Children Program
The goal of this study is to discover a process that will improve the lives of a group of single Mothers who are currently without social support.
Role: Consultant

Research Support Grant, Gagan, Berg, Ewing (co-PI 02/01-08/01
Southern Arizona Nurse Practitioner Chapter 10
Measuring Nurse Practitioner Outcomes: Applying the Model
The goal of this study was to test an application of our recently developed model of the integration of nurse practitioner education with community needs.
Role: model preparation
BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2. Follow this format for each person. DO NOT EXCEED FOUR PAGES.

NAME
Insel, Kathleen Collins

POSITION TITLE
Assistant Professor

eRA COMMONS USER NAME

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)

<table>
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<tr>
<th>INSTITUTION AND LOCATION</th>
<th>DEGREE (if applicable)</th>
<th>YEAR(s)</th>
<th>FIELD OF STUDY</th>
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<tr>
<td>University of Wisconsin, Madison</td>
<td>BSN</td>
<td>1970</td>
<td>Nursing</td>
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<td>University of Rochester</td>
<td>MS</td>
<td>1976</td>
<td>Nursing</td>
</tr>
<tr>
<td>University of Arizona</td>
<td>PhD</td>
<td>1993</td>
<td>Ed-Psychology, Nursing Community Based Interventions, Gerontology</td>
</tr>
<tr>
<td>University of Arizona</td>
<td></td>
<td>2000</td>
<td></td>
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</table>

H. Positions and Honors.

Positions and Employment

1997-2000 Adjunct, Associate Research Professor, The University of Arizona, Tucson, Arizona.
2000-2002 Assistant Professor, Nursing, University of Texas Health Science Center at San Antonio.
2002-present Assistant Professor, Nursing, The University of Arizona, Tucson, Arizona.

Other Experience and Professional Memberships

2001 Aging Research and Education Center funding award, University of Texas Health Science Center at San Antonio.
2003-present Charter Member of the MESA Center for Health Disparities, a partnership Exploratory Research Center with the University of Michigan and the University of Texas Health Science Center at San Antonio.

Honors

2000 Rosemary McKevitt Award for Excellence in Nursing Research
2001 Castella Faculty Fellowship for Research on Aging 2001-2002

I. Selected peer-reviewed publications (in chronological order).


Recent Scholarly Presentations and Publications in Proceedings Texts:


J. Research Support.

Ongoing Research Support
3 R01 NR008142 Meek (PI) 8/1/04 – 7/31/07
NIH/National Institute of Nursing Research
Cognitive Function and Symptom Self-Management in COPD
The overall goal of this investigation is to examine the relationship between cognitive function and symptom self-management for those with moderate to severe chronic obstructive pulmonary disease. Responsibilities include oversight of the subaward at the University of Arizona including: subject recruitment and testing, budget supervision, assistance with later data analysis and reporting of the findings.

Role: PI for University of Arizona site

**Completed Research Support**

**Insel (PI) 08/01/03 - 03/31/05**

From the Exploratory Center on Injury Mechanisms and Related Responses

University of Arizona College of Nursing

National Institutes of Health/National Institute of Nursing Research

The Association of Frontal Volumes and Everyday Function

This project examines the association of frontal volume, white matter hyperintensities, with performance on cognitive assessments and an everyday memory activity, that of adhering to medications, for individuals with hypertension.

**Insel (PI) 02/01/03 - 12/31/04**

Laurence B. Emmons Award, University of Arizona College of Nursing

The Influence of Personality Factors on Medication Adherence

This project examines the influence of personality factors in addition to other identified important variables including cognitive function, on medication adherence among individuals with hypertension.

**Insel (PI) 08/15/01-10/31/02**

Cognitive Aging and Everyday Remembering

NIH/National Institute on Aging (RO3)

This investigation examined the risk for nonadherence to prescribed medication among older adults and used structural equation modeling to examine a predictive model of adherence with particular focus on two cognitive factors, a prefrontal factor and a medial temporal factor. Findings indicate that the prefrontal factor was the only significant predictor using this iterative analytic procedure ($\beta = .48$). Age was not a significant predictor of nonadherence although age and prefrontal function are mildly correlated ($r = .19$).

**Insel (PI) 09/01/01 - 08/31/02**

Aging Research and Education Center, AREC, University of Texas Health Science Center San Antonio

Medication Adherence In Older Adults

This investigation examined the relationship between resourcefulness as measured by the self control scale and medication adherence. While resourcefulness may be an important aspect of medication adherence prefrontal function may serve as a better indicator of resourcefulness than the self-control scale.

Role: PI

**Insel (PI) 06/00 - 08/02**

Sigma Theta Tau, Beta Mu Chapter and the University of Texas Health Science Center at San Antonio, School of Nursing

Testing the Feasibility of a Nursing Intervention to Improve Medication Adherence among Community Dwelling Older Adults

This investigation used an intraindividual approach to examining the effect of a behavioral intervention to improve medication adherence. The intervention was successful.

Role: PI

**Insel (PI) 06/00 - 08/02**

Sigma Theta Tau, Beta Mu Chapter

Testing the Feasibility of a Nursing Intervention Among Older Adults

This project supported the work of the feasibility study by allowing for the initial pilot testing of the intervention.

Role: PI
**BIOGRAPHICAL SKETCH**

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2. Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

<table>
<thead>
<tr>
<th>NAME</th>
<th>POSITION TITLE</th>
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</thead>
<tbody>
<tr>
<td>Elaine G. Jones</td>
<td>Associate Professor</td>
</tr>
</tbody>
</table>

**EDUCATION/TRAINING** *(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)*

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<th>INSTITUTION AND LOCATION</th>
<th>DEGREE (if applicable)</th>
<th>YEAR(s)</th>
<th>FIELD OF STUDY</th>
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<tr>
<td>University of Arizona, Tucson, Arizona</td>
<td>BS</td>
<td>1974</td>
<td>Nursing</td>
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<tr>
<td>University of Maryland, Baltimore, Maryland</td>
<td>MS</td>
<td>1979</td>
<td>Nursing-Clinical Spec.</td>
</tr>
<tr>
<td>University of Arizona, Tucson, Arizona</td>
<td>PhD</td>
<td>1986</td>
<td>Nursing-Research</td>
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</table>

**K. Positions and Honors.**

**Positions and Employment**

1985-1986 School Nurse, Arizona School for the Deaf and the Blind
1987-2001 Faculty/Staff Nurse, University Medical Center, Arizona Health Science Center, Tucson, AZ
1995-1997 Interim Division Director, Nursing Systems Division, University of Arizona, College of Nursing
1986-1992 Assistant Professor, University of Arizona, College of Nursing
1996-2001 Director of Clinical Scholarship, University of Arizona, College of Nursing
1992-present Associate Professor, University of Arizona, College of Nursing

**Other Experience and Professional Memberships**

1982-present Member, Board of Directors, Community Outreach Program for the Deaf
1988, 1998 Certificate of Appreciation, Community Outreach Program for the Deaf
1995 Award of Distinction for Excellence in Teaching, Sigma Theta Tau, Beta Mu Chapter
1997-2000 Advisory Committee, Deaf Studies (IDP), University of Arizona
1998-1999 Deans Research Scholar, University of Arizona College of Nursing
1999-2001 Member, University Ethics Committee
2000-2002 President Elect, Beta Mu Chapter, Sigma Theta Tau International
2002-2004 President, Beta Mu Chapter, Sigma Theta Tau International
2001-2003 Member, Board of Directors, Adult Loss of Hearing Association
2002 Award: Myerson Disability Research Project – Faculty sponsor for student research with Deaf and Late Deafened Adults
2002 Consultant/Teacher: Parent education for Deaf adults, with Community Outreach Program for the Deaf, Funded by TANFF Foundation.
2003 Excellence in Teaching Award (College of Nursing Graduate Students)
2004 Excellence in Teaching Award (Sigma Theta Tau, Beta Mu Chapter)
2004-present Chair, Research Special Interest Group, American Deafness and Rehabilitation Association

**L. Selected peer-reviewed publications (in chronological order).**

**Substantive:**


**Methods:**


**Selected Presentations:**


Jones, E. (July 23-26, 2002). Planning Health Promotion Interventions with a Deaf Community. 13th International Nursing Research Congress, Sigma Theta Tau International, Brisbane, Australia. (Unable To attend)


**M. Research Support.**

**Ongoing Research Support**
**Completed Research Support**

R15-NR008009 Jones (PI)
National Institute of Nursing Research 05/01/03-08/30/05
Pilot Testing the Deaf Heart Health Intervention (DHHI) (#1-R15-NR008009-01A1)
The long-term objective of this quasi experimental study was to create positive changes in modifiable CVD risk factors. The specific aims were to 1) test the feasibility of conducting the DHHI as planned and 2) test the effectiveness of the DHHI in decreasing modifiable risk factors for CVD among Deaf adults. The intervention was conducted in Tucson and the comparison group was in Phoenix Arizona (total n=105). Results provided the foundation for the proposed RO1: “A Test of the Nurse Designed Deaf Heart Health Intervention” to the National Institute of Nursing Research.
Role: PI

PI: 08/14/02- 07/31/03
National Institute of Nursing Research (5 P20 NR007794)
Center for Injury Mechanisms and Related Responses
Translating and testing measures for use in pilot testing the Deaf Heart Health Intervention
The purpose of this study was to translate and field test five self-report measures related to modifiable cardiovascular disease risk factors from written English into sign language for use in pilot testing the Deaf Heart Health Intervention (DHHI) with Deaf adults. Measures were pilot tested with bilingual subjects (n=24) . These new sign-language versions of the self-report measures were translated, field tested and functioned well in the NINR study listed above.
Role: PI on funding from CIMRR for this pilot study

Jones (PI) 07/01/00- 6/30/01
Arizona Disease Control Research Commission (Contract #5005)
Heart Health for Arizona’s Deaf Communities
The specific aims of this study were to complete an assessment of health concerns and CVD risk status in the Deaf community, develop a heart health intervention for use in the Deaf community, train a Deaf heart-health teacher to conduct the classroom portion of the intervention, and plan a pilot test (above) for the intervention. The PI was responsible for the overall integrity of the project and participants in all phases of the project. Her responsibilities included arranging project team meetings with community partners, training data collectors for the survey of Deaf adults, supervising data collection, data entry and data analysis, developing the heart health intervention in collaboration with consultants and Deaf community members, attending all training sessions for the Deaf Heart Health Teacher, and planning for pilot testing the Deaf Heart Health Intervention.
Role: PI
BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed for Form Page 2. Follow the sample format for each person. DO NOT EXCEED FOUR PAGES.

NAME
LOESCHER, Lois J

POSITION TITLE
Assistant Professor

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)

<table>
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<tr>
<th>INSTITUTION AND LOCATION</th>
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<th>YEAR(s)</th>
<th>FIELD OF STUDY</th>
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<tr>
<td>University of Wisconsin, Madison</td>
<td>BS</td>
<td>1974</td>
<td>Nursing</td>
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<td>University of Arizona, Tucson</td>
<td>MS</td>
<td>1980</td>
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<td>University of Arizona, Tucson</td>
<td>Ph.D.</td>
<td>2001</td>
<td>Nursing, Genetics</td>
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<tr>
<td>Arizona Cancer Center</td>
<td>Postdoctoral</td>
<td>2001-2003</td>
<td>Instrumentation</td>
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EMPLOYMENT

8/74-8/75 Staff Nurse (ICU), University of Minnesota Hospitals, Minneapolis, MN
9/75-12/77 Staff Nurse (Critical Care), Tucson Medical Center, Tucson, AZ
1/78-8/80 Staff Nurse (Oncology), University of Arizona, Arizona Health Sciences Center, Tucson, AZ
9/80-2/81 Head Nurse, 3 North, VA Medical Center, Tucson, AZ
4/81-11/81 Instructor, Nursing Education & Relief Supervisor, VA Medical Center, Tucson, AZ
12/81-6/84 Research Specialist, University of Arizona, College of Medicine, Tucson, AZ
8/84-8/85 Director, Quality Assurance/Risk Management, Dana-Farber Cancer Institute, Boston, MA
10/85-1/90 Research Specialist, University of Arizona, Arizona Cancer Center, Tucson, AZ
1/90-6/97 Advanced Research Specialist, University of Arizona, Arizona Cancer Center, Tucson, AZ
7/97-7/01 Senior Research Specialist, Arizona Cancer Center, Tucson, AZ
7/02-present Postdoctoral Cancer Prevention Fellow, Arizona Cancer Center.
7/02-present Research Assistant Professor, College of Medicine, University of Arizona (non-tenured).
8/03-present Assistant Professor, College of Nursing, University of Arizona (tenure eligible)

HONORS

2003: Oncology Nursing Society Excellence in Cancer Nursing Research Award
2003-2006: American Cancer Society (National) Peer Reviewer for Masters and Doctoral Cancer Nursing Scholarships
2001: Outstanding dissertation award, University of Arizona, College of Nursing
2001: Outstanding graduate student award, University of Arizona College of Nursing Alumni Council
2001-2002: ONS Foundation/OrthoBiotech Research Fellowship
2001-2003: University of Arizona, Arizona Cancer Center, Cancer Prevention and Control Postdoctoral Fellowship, National Cancer Institute (NIH 1 R25 78447)
1999-2000: University of Arizona, Arizona Cancer Center, Cancer Prevention and Control Predoctoral Fellowship, National Cancer Institute (NIH 1 R25 78447)
1996-1999 National Research Service Award, Predoctoral Fellowship, NINR
1996 Oncology Nursing Society Genetics Think Tank Project (invited)
1996 Spring Science Work Group, Opportunities in Genetic Research, National Institute of Nursing Research (invited)
1996-2000 Cancer Nursing Doctoral Scholarship, American Cancer Society
1996 Thomas Jordon Doctoral Scholarship, Oncology Nursing Foundation
1995-now: Comprehensive Member, Arizona Cancer Center

PROFESSIONAL SOCIETIES

1980-Present: Oncology Nursing Society (National)
1990-present: Member, Southern Arizona Chapter of the Oncology Nursing Society
1995-present: Member, International Society of Nurses in Genetics
1994-present: Member, American Nurses Association/ Arizona Nurses Association
2002-present: Member, American Society of Preventive Oncology
2002-present: Member, Society of Behavioral Medicine
SELECTED PEER-REVIEWED PUBLICATIONS (†=data-based)


Ongoing Research Support
Title: Risk Perceptions, Risk Communications and Risk-Control Behaviors in Melanoma Prone Families (L. Loescher, PI)
National Cancer Institute
This career development award focuses on training to learn about mixed methods research, melanoma, development of intervention trials. Research foci are to study risk perceptions, intrafamily and healthcare provider originated risk communications, and specific risk-control behaviors in families with a history of melanoma.
Role: Principal Investigator

Title: Risk Perception & Risk Control Behaviors Following BRCA Analysis
National Institute of Nursing Research (1 P20 NR07794-04, K. Moore, PI)
This was a feasibility study as part of the College of Nursing Center Grant: Center for Injury Mechanisms and Related Responses. Goals were to test feasibility of multi-site distance recruiting, identify factors involved in cancer surveillance and prevention behaviors in women undergoing BRCA analysis for breast/ovarian cancer risk
Role: Principal Investigator (feasibility study)

Title: Hereditary Cancer Risk Database Project (L. Loescher, PI)
University of Arizona Foundation
This project examines genetic, epidemiological, and behavioral risk factors in individuals and families meeting criteria for hereditary predisposition to cancer.
Role: Principal investigator

Completed Research Support
Title: Evaluation of a genetic counseling program for women at high risk for ovarian and breast cancers.
University of Arizona Foundation
Better than Ever
This project assessed uptake of risk-reduction surgery in women undergoing genetic counseling for hereditary breast/ovarian cancer risk.
Role: Co-Investigator

Title: Cancer Prevention R25 Training Grant (D. Alberts, PI)
National Cancer Institute
Role: Post-doctoral fellow

Title: Instrumentation in Cancer Genetics Nursing Research (L. Loescher, PI)
Oncology Nursing Society Foundation/Ortho Biotech, Inc. Research Fellowship
Role: Post-doctoral fellow

Pending Research Support
None
BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2. Follow this format for each person. DO NOT EXCEED FOUR PAGES.

NAME
Donna Behler McArthur

POSITION TITLE
Clinical Professor

eRA COMMONS USER NAME

EDUCATION/TRAINING  (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)

<table>
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<th>INSTITUTION AND LOCATION</th>
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<th>FIELD OF STUDY</th>
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<tr>
<td>Maryland General Hospital</td>
<td>Diploma</td>
<td>1967</td>
<td>Nursing</td>
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<td>University of Maryland</td>
<td>BS</td>
<td>1976</td>
<td>Nursing</td>
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<tr>
<td>Vanderbilt University</td>
<td>MS</td>
<td>1977</td>
<td>Family Nurse Clinician</td>
</tr>
<tr>
<td>University of Maryland</td>
<td>PhD</td>
<td>1997</td>
<td>Nursing</td>
</tr>
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</table>

N. Positions and Honors.

Positions and Employment

1967-1968  Staff Nurse, Medical Surgical, Maryland General Hospital, Baltimore, MD
1968-1970  Staff Nurse, Intensive Care Unit, United States Air Force Nurse, Offutt Air Force Base, Omaha, NE
1972-1973  Clinical Nurse, Dover 72nd Aeromedical Evacuation Squadron, Air Force Base Hospital, Dover, DE
1974      Staff Nurse, Obstetrics, Dover Air Force Base Hospital, Dover, DE
1977-1983  Assistant Professor, School of Nursing, Vanderbilt University, Nashville, TN
1981-1983  Nurse Coordinator, Student Health Service, Vanderbilt University, Nashville, TN
1983-1985  Senior Staff Nurse/Head Nurse, King Faisal Specialist Hospital & Research Centre, Riyadh, Saudi Arabia
1985-1988  Director/Nurse Practitioner, Student Health Service, Gettysburg College, Gettysburg, PA
1988-1990  Adjunct Assistant Professor, School of Nursing, Vanderbilt University, Nashville, TN
1988-1990  Head of Service, Out-Patient Nursing, King Faisal Specialist Hospital and Research Centre, Riyadh, Saudi Arabia
1990-1992  Field Service Assistant Professor of Family Medicine, School of Medicine, University of Cincinnati, Cincinnati, OH
1990-1992  Assistant Professor of Clinical Nursing, College of Nursing and Health, University of Cincinnati, Cincinnati, OH
1993-1994  Chief Area Nurse, Dhahran Health Center, Saudi Aramco, Dhahran, Saudi Arabia
1994-1995  Graduate Assistant/Clinical Instructor, Department of Maternal Child Health, School of Nursing, University of Maryland, Baltimore, MD
1996-1997  Research Assistant, School of Nursing/School of Medicine, University of Maryland, Baltimore, MD
1997-1999  Lecturer, College of Nursing, University of Arizona, Tucson, AZ
2002-present Nurse Practitioner in Council on Aging clinic sites, College of Nursing, University of Arizona, Tucson, AZ
2003-2005  Adjunct Clinical Professor; Program Coordinator, Telephone Support Project for Women and their Partners with Breast Cancer, College of Nursing, University of Arizona, Tucson, AZ
1999-2002  Assistant Professor Program Director, Family Nurse Practitioner Program, School of Nursing, Vanderbilt University, Nashville, Tennessee
2003-2004  Associate Professor, School of Nursing, Vanderbilt University, Nashville, Tennessee
August 2005-present  Clinical Professor, University of Arizona College of Nursing

**Other Experience and Professional Memberships**

American Nurses' Association (ANA)
Arizona Nurses' Association; Vice-President, Chapter 2
Tennessee Nurses’ Association (TNA) Delegate to state convention 1999, 2000
Sigma Theta Tau International, Judging Committee Chair, Region 1 Chapter Research Advancement Award, 1998-99
National Organization of Nurse Practitioner Faculties; Practice Committee, 2000-2004
Penn Macy Institute Fellow, July 2000.
American School Health Association, 2000 - 2001
Western Institute of Nursing

**Honors**

1967  Maryland General Hospital Nurse’s Scholarship Award
1970  Air Force Commendation Medal
1976  Mrs. Charles A. Reifschneider Award, University of Maryland, School of Nursing,
1978/1979  Listed in Outstanding Young Women of America,
1981/1982  Listed in Outstanding Young Women of America,
1995-1996  Graduate Merit Award, University of Maryland at Baltimore
1997  Who’s Who Among Students in American Universities and Colleges
1997  Research Award, Pi Chapter Sigma Theta Tau
1998  Knowledge Dissemination Award, Beta Mu Chapter, Sigma Theta Tau
1998  Dean’s Research Award, University of Arizona, College of Nursing
1999  Excellence in Teaching Award, University of Arizona, College of Nursing
2001  Excellence in Teaching Award for Innovative Teaching Contributions, Vanderbilt University School of Nursing
2001  Inducted as a Fellow of the American Academy of Nurse Practitioners (FAANP)
2002  Julia Hereford Award, Vanderbilt University School of Nursing (VUSN)
2004  Ingeborg Mausch Mentorship Award, VUSN, 2004

**O. Selected peer-reviewed publications (in chronological order).**


BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2. Follow this format for each person. DO NOT EXCEED FOUR PAGES.

NAME: Pasvogel, Alice E.

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)

<table>
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<th>DEGREE (if applicable)</th>
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<th>FIELD OF STUDY</th>
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<tr>
<td>University of Maine, Augusta, ME</td>
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<td>1974</td>
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<tr>
<td>University of Arizona, Tucson, AZ</td>
<td>BS</td>
<td>1986</td>
<td>Nursing</td>
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<tr>
<td>University of Arizona, Tucson, AZ</td>
<td>MS</td>
<td>1988</td>
<td>Nursing</td>
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<tr>
<td>University of Arizona, Tucson, AZ</td>
<td>PhD</td>
<td>1999</td>
<td>Clinical Nursing</td>
</tr>
</tbody>
</table>

P. Positions and Honors.

Positions and Employment
- 1974-1977 Staff Nurse, Medical-Surgical, Augusta General Hospital, Augusta, ME
- 1977-1982 Staff Nurse, Cardiac Care, Northwest Community Hospital, Arlington Heights, IL
- 1982-1988 Clinical Nurse II, Cardiac Intensive Care, Tucson Medical Center, Tucson, AZ
- 1988-1992 Per Diem Nurse, Tucson Medical Center, Tucson, AZ
- 1987-1988 Research Assistant, College of Nursing, University of Arizona, Tucson, AZ
- 1989-1990 Research Associate, College of Nursing, University of Arizona, Tucson, AZ
- 1992-1999 Research Associate, College of Nursing, University of Arizona, Tucson, AZ
- 2001-2004 Research Specialist, Sr., Department of Pediatrics, College of Medicine, University of Arizona, Tucson, AZ
- 2000-present Research Specialist, Sr., College of Nursing, University of Arizona, Tucson, AZ
- 2004-present Adjunct Clinical Assistant Professor, College of Nursing, University of Arizona, Tucson, AZ

Other Experience and Professional Memberships
- 1986-present Member, Beta Mu Chapter, Sigma Theta Tau International
- 1986-present Member, American Association of Critical-Care Nurses
- 1994-present Member, American Association of Neuroscience Nurses
- 1995-present Member, National Neurotrauma Society
- 1996 Summer Research Support, Graduate College, University of Arizona
- 1996 Caldwell Research Fellowship, College of Nursing, University of Arizona
- 1997 Doctoral Student Research Grant, Beta Mu Chapter, Sigma Theta Tau International

Honors
- 1996 Outstanding Graduate Student Award, Alumni Council, College of Nursing, University of Arizona
- 1999 Outstanding Dissertation Award, College of Nursing, University of Arizona

Q. Selected peer-reviewed publications (in chronological order).


**Abstracts**


BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2. Follow this format for each person. DO NOT EXCEED FOUR PAGES.

NAME
Phillips, Linda R.

POSITION TITLE
Professor of Nursing

eRA COMMONS USER NAME
Lphillips

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)

<table>
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<tr>
<th>INSTITUTION AND LOCATION</th>
<th>DEGREE (if applicable)</th>
<th>YEAR(s)</th>
<th>FIELD OF STUDY</th>
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<tr>
<td>University of Pittsburgh, Pittsburgh, PA</td>
<td>BSN</td>
<td>1969</td>
<td>Nursing</td>
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<tr>
<td>University of Pittsburgh, Pittsburgh, PA</td>
<td>MN</td>
<td>1973</td>
<td>Nursing-Medical/Surgical</td>
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<tr>
<td>University of Arizona, Tucson, AZ</td>
<td>PhD</td>
<td>1980</td>
<td>Clinical Nursing Research</td>
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</table>

A. Positions and Honors.

Positions and Employment
1980-1982 Assistant Professor, School of Nursing, Creighton University, Omaha, NE
1982-1985 Assistant Professor, College of Nursing, University of Arizona, Tucson, AZ
1985-1990 Associate Professor, College of Nursing, University of Arizona, Tucson, AZ
1988-1991 Associate Dean for Research, College of Nursing, University of Arizona, Tucson, AZ
1990-present Professor, College of Nursing, University of Arizona, Tucson, AZ
1994-2004 Associate Dean for Research, College of Nursing, University of Arizona, Tucson, AZ
2000-present Co-Director, Arizona Center on Aging, University of Arizona, Tucson, AZ
2002-present Director, Arizona Geriatric Education Center, University of Arizona, Tucson, AZ
2002-present Core Faculty, Arizona Geriatric Education Center, University of Arizona, Tucson, AZ
2004-present Faculty Advisor, Optimal Aging Program, College of Medicine, Univ. of AZ, Tucson, AZ
2005-present Professor, College of Medicine, University of Arizona, Tucson, AZ

Other Experience and Professional Memberships
1986-present Fellow, American Academy of Nursing
1998 Ad Hoc Reviewer Nursing Study Section, NIH
1997-1999 Member, National Institute of Nursing Research Initial Review Group, Study Section, NIH
1997-1999 Vice President, Board of Directors, Handmaker Jewish Services, Tucson, AZ
1999 Ad Hoc Reviewer, Behavioral & Social Studies Study Section, NIH
1999-2003 Chair, National Institute of Nursing Research Initial Review Group, Study Section, NIH
2002 Ad Hoc Proposal Reviewer, Administration on Aging
2000-present Member, TriServices Nursing Research Review Panel
2003 Member, Special Emphasis Panel on Roybal Translational Research Centers, NIA
2001-present Fellow, Gerontological Society of America
2004-present Member, Governor's Aging 2020 Task Force, State of Arizona

Honors
1987 First Award for Excellence in Research, Beta Mu Chapter Sigma Theta Tau Intl. Nursing Society
1997 College of Nursing 40th Anniversary Award for Excellence in Research, Univ. of AZ, Tucson, AZ
2001 1st Western Institute of Nursing/John A. Hartford Fdn. Award for Gerontological Nursing
2005 F-NINR Pathfinder Award, Friends of the National Institute of Nursing Research
2005 Leo B. Hart Humanitarian Award, University of Arizona, Alumni Association
2005 Gerontologist of the Year, Arizona Geriatric Society
B. Selected peer-reviewed publications (in chronological order).


C. Research Support

Ongoing Research Support

5D31 HP80006 Phillips (PI) 07/01/02-06/30/07
HRSA
Arizona Geriatric Education Center
The purpose of this project is to improve health care to older adults in Arizona by improving access to quality health care through appropriate preparation and ongoing education of health professionals in geriatrics and improving access to a diverse and culturally competent and sensitive health professions workforce.
Role: Principal Investigator

3D31 HP80006-02-01 Phillips (PI) 09/01/03-06/03/07
HRSA
Supplement to Arizona Geriatric Education Center
The purpose of this supplemental project is to improve access to quality health care for older adults in Arizona through appropriate preparation and ongoing education of health professionals in geriatrics, focusing on geriatric oral health and geriatric mental health.
Role: Principal Investigator

1R03NR008563-01 Phillips (PI) 09/30/03-05/31/06
NINR
Dilemmas and Decision Making of End-of-Life Caregivers
The purpose of this study is to enhance the theoretical understanding of the decision making process of family caregivers providing end-of-life care to a family member at home.
Role: PI

**Completed Research Support**

5T32NR07092 Phillips (PI) 08/01/97-05/31/02
NIH
Training for Community Based Interventions
The goal of this project was to prepare clinical nurse researchers with a specialty in the design and testing of theory driven community based nursing interventions for rural, minority and underserved populations. Both pre-doctoral and post-doctoral fellows were trained.
Role: PI

Phillips (PI) 02/19/04-09/30/05
John A. Hartford/AACN Pioneer Resource Fund Award
The purpose of this project was to advance health care of older persons and their families by providing enhanced knowledge about the dynamics of aging and evidence-based care of older adults to master’s and post-master’s level graduates in non-gerontological nursing specialties.
Role: PI

Phillips (PI) 09/01/02-10/31/05
SAMSHA, CMHS, DHHS (Sub-Contract)
Evaluation of the Health Improvement Program for the Elderly (HIPE)
The goal of this project was to improve the mental health of community-dwelling elders through the use of evidence-based, in-home therapy. Subcontract to conduct a formative and summative evaluation of the efficacy of the treatment.
Role: PI
**NAME**  
Sally J. Reel, PhD, APRN, CFNP, FAAN, FAANP

**POSITION TITLE**  
Associate Dean for Academic Practice and Clinical Professor

**EDUCATION/TRAINING**  
(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)

<table>
<thead>
<tr>
<th>INSTITUTION AND LOCATION</th>
<th>DEGREE (if applicable)</th>
<th>YEAR(s)</th>
<th>FIELD OF STUDY</th>
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<tbody>
<tr>
<td>Salem College, Salem, WV</td>
<td>ADN</td>
<td>1979</td>
<td>Nursing</td>
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<tr>
<td></td>
<td>(now Salem International University)</td>
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<tr>
<td>Salem College, Salem, WV</td>
<td>BSN</td>
<td>1982</td>
<td>Nursing</td>
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<td></td>
<td>(now Salem International University)</td>
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</tr>
<tr>
<td>West Virginia University, Morgantown, WV</td>
<td>MSN</td>
<td>1986</td>
<td>Nursing</td>
</tr>
<tr>
<td>University of Virginia, Charlottesville, VA</td>
<td>PhD</td>
<td>1994</td>
<td>Nursing</td>
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</table>

**A. POSITIONS AND HONORS**

**Positions and Employment:**

1985-1986  Instructor of Nursing, Salem College (now Salem-International U), Salem, WV
1986-1989  Instructor of Nursing, West Virginia University School of Nursing, Morgantown, WV
1993-1995  Instructor of Nursing, University of Virginia School of Nursing, Charlottesville VA
1995-1998  Asst. Prof. of Nursing, University of Virginia School of Nursing, Charlottesville, VA
1998-2001  Clinical Assoc. Prof. of Nursing, Marshall University School of Nursing Huntington, WV
2001-present  Clinical Assoc. Prof. of Nursing, Marshall University Appalachian Rural Outreach Primary Care Nursing Ctr.
2001-present  Associate Dean for Academic Practice & Clinical Professor of Nursing; Director, Nurse Practitioner Options University of Arizona, College of Nursing, Tucson, AZ

**Honors (selected)**

2004  *Fulbright Senior Specialist.* Awarded by the J. William Fulbright Foreign Scholarship Board, the Bureau of Education and Cultural Affairs of the Department of State, and the Council for International Exchange of Scholars (CIES); to Curtin University of Technology, School of Nursing and Midwifery, Perth, Western Australia to assist with implementation of 1st nurse practitioner program in Western Australia

2004  *Fellow, American Academy of Nurses (FAAN)*

2004  *Fellow, American Academy of Nurse Practitioners (FAANP)*

2004  *Arizona’s Distinguished Educator of the Year.* Awarded by the Rural Health Office, Mel & Enid Zuckerman Arizona College of Public Health & Arizona Rural Health Association

1995  Verhonick Dissertation Award, the University of Virginia

**International Appointments:**

7/5/01 - 8/10/01 Univ. of Stirling, Highland Campus, Dept. of Nursing & Midwifery, Inverness, Scotland; Visiting Lecturer

**Service & Memberships**

2004 - Present  Founding Chair of the Advisory Board, International Council of Nurses Rural and Remote Nurses Network.

2000-2004  Founding chair of the international workforce to charter the International Council of Nurses International Network for Rural and Remote Nurses.

2002-04  Invited Peer Reviewer. US DHHS, HRSA. Advanced Education Nursing grant applications.
2003 & 2005  Invited Peer Reviewer. US DHHS, HRSA. Bioterrorism Education grant applications
2004-05  Invited Peer Reviewer. US DHHS, HRSA, Nursing Education Practice & Retention applications

**B. SELECTED PEER-REVIEWED PUBLICATIONS**


Lauder, W., Sharkey, S., **Reel, S.**. (2003). The development of family health nurses and family nurse practitioners in remote and rural Australia. Aust Fam Physicians 2003; 32 (9); 750-752


**C. RESEARCH SUPPORT**

**Active Support:**

Grant # 1 D09HP05317-01-00 (Reel, PI) 7/1/05 – 6/30/08

HRSA $1,030,365 (total award)

Distant Acute Care Nurse Practitioner Bridging the Rural-Urban Gap

The purpose of the Distant Acute Care Nurse Practitioner Bridging the Rural-Urban Gap project is to improve health care to Arizona populations by increasing access to advanced nursing education with an emphasis acute care nurse practitioner preparation.
Active Support:
1D09HP00497-01 (Reel, PI)  7/1/03 – 6/30/06
HRSA               $840,573 (Direct Costs)
Rural Health for Advanced Practice Nurses
The purpose of the Rural Health for Advanced Practice Nurses project is to improve health care to rural Arizona populations by increasing access to advanced nursing education with an emphasis on rural health knowledge.

Completed Support:
1DU10NU30401-01/5D10HP30401-03  Reel, S. (PI)  8/1/98-7/31/01
US DHHS, HRSA, Division of Nursing    $734,723 (Direct Costs)
Appalachian Rural Outreach Primary Care Nursing Center
The AROPCNC project was a federally funded academic nursing center and collaborative partnership between the university, a public board of education, and a not-for-profit foundation. Advanced nursing practice was the cornerstone of primary health care services, which was provided in two school-based health centers.

D. SELECTED PRESENTATIONS

INTERNATIONAL PRESENTATIONS
Reel, S. October 2004 (paper).  Rural Health for Advanced Practice Nurses.  4th International Rural Nursing Congress.  Sudbury, Ontario, Canada
Reel, S. October 2004 (paper).  Utilizing Online Strategies to Foster Interdisciplinary Rural Community Immersion and Assessment Education.  4th International Rural Nursing Congress.  Sudbury, Ontario, Canada.
Reel, S.  Effectiveness of a Nurse-Managed School-Based Hepatitis B Immunization Program in Rural Appalachia.  Charting the Course for Rural Health in the 21st Century:  Third International Congress of Rural Nurses.  Binghamton, NY, Oct. 2002
Reel, S.  Utilization of Lay Health Promotion Advocates as Health Outreach Workers in Rural Appalachia.  2nd International Congress on Rural Nursing, INFRONT/OUTBACK Conference, Cunningham Centre, Toowoomba, Queensland, Australia, Feb. 2000

NATIONAL PRESENTATIONS
May 2005 (poster).  Utilizing Online Strategies to Foster Interdisciplinary Community Immersion and Assessment Education.  National Rural Health Association, National Conference, New Orleans
May 2005 (poster). Improving Culturally Competent Care through Linguistic Competence: A Collaborative Effort between the University of Arizona College of Nursing and the University of Arizona South, National Rural Health Association, National Conference, New Orleans


June 2005 (poster). Utilizing Online Strategies to Foster Interdisciplinary Rural Community Immersion and Assessment Education, American Academy of Nurse Practitioners, National Convention, Ft. Lauderdale


May 2003 (poster). Depression in a Rural Adolescent Population: Results of a Risk Screening Survey. National Rural Health Association 26th Annual Convention, Salt Lake City, UT

May 2003 (poster). Interpersonal Violence and Perceived Risk Among Rural Appalachian Adolescents. National Rural Health Association 26th Annual Convention, Salt Lake City, UT


June 1999. Appalachian Rural Outreach Primary Care Nursing Center. 1999 National Conference for Nurse Practitioners, Sponsored by the American Academy of Nurse Practitioners, Atlanta, GA.


REGIONAL, STATE & LOCAL PRESENTATIONS

July 2005 (paper). Integrating the Acute Care Nurse Practitioner into Rural Health Care Systems. 32nd Annual Arizona Rural Health Conference. Payson, Arizona

July 2004 (paper). Rural Health for Advanced Practice Nurses. 31st Annual Arizona Rural Health Conference. Phoenix, Arizona

July 2004 (paper). Utilizing Online Strategies to Foster Interdisciplinary Rural Community Immersion and Assessment Education. 31st Annual Arizona Rural Health Conference. Phoenix, Arizona


NAME
Ritter, Leslie S.

POSITION TITLE
Associate Professor College of Nursing and Department of Neurology

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)

<table>
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<th>INSTITUTION AND LOCATION</th>
<th>DEGREE (if applicable)</th>
<th>YEAR(s)</th>
<th>FIELD OF STUDY</th>
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<tbody>
<tr>
<td>The University of Arizona, Tucson, AZ</td>
<td>BS</td>
<td>1974</td>
<td>Nursing</td>
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<td>The University of Arizona, Tucson, AZ</td>
<td>MS</td>
<td>1981</td>
<td>Nursing</td>
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<tr>
<td>The University of Arizona, Tucson, AZ</td>
<td>MS</td>
<td>1992</td>
<td>Exercise &amp; Sport Sciences</td>
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<tr>
<td>The University of Arizona, Tucson, AZ</td>
<td>PhD</td>
<td>1996</td>
<td>Physiological Sciences</td>
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<tr>
<td>The University of Arizona, Tucson, AZ</td>
<td>Postdoctoral Fellow</td>
<td>1997-1998</td>
<td>Nursing/Neurology</td>
</tr>
</tbody>
</table>

A. Positions and Honors

POSITIONS AND EMPLOYMENT
Staff Nurse/Charge Nurse, Coronary Intensive Care St. Mary's Hospital Tucson, AZ 1974-1984
Staff Nurse and Unit Educator, Coronary Intensive Care St. Mary's Hospital Tucson, AZ 1984-1986
Associate Clinical Professor of Nursing, University of Arizona, Tucson, AZ 1985-1986
Associate Clinical Professor of Nursing, Pima Community College, Tucson, AZ 1989
Staff Nurse, Intensive Care Unit, St. Mary's Hospital and Health Center, Tucson, AZ 1986-present
Research Associate, Department of Neurology, University of Arizona, Tucson, AZ 1998-2001
Assistant Professor, College of Nursing, University of Arizona, Tucson, AZ 1999-present
Assistant Professor, Department of Neurology, University of Arizona, Tucson, AZ 2002-present
Associate Professor, College of Nursing, University of Arizona, Tucson, AZ 2004-present
Associate Professor, Department of Neurology, University of Arizona, Tucson, AZ 2004-present

OTHER EXPERIENCE AND PROFESSIONAL MEMBERSHIPS

Professional Certification
RN Licensure: Arizona 1974-present

Professional Memberships
Member, American Physiological Society 1992-present
Member, American Heart Association 1995-present
Member, Microcirculatory Society 1994-present
Chair, Awards Committee, Microcirculatory Society 2003-present
Member, Society for Neuroscience 2000-present
Board of Directors, American Heart Association, Old Pueblo Division 2000-present
Co-Director, Operation Stroke, American Stroke Association 2003-present

Professional Service
Referee of grants or manuscripts for:
Journal of Microcirculation
Journal of Biological Nursing
HONORS
Heart Run Research Fund Recipient, Department of Exercise and Sport Sciences, University of Arizona, Tucson, AZ 1991
First place, Graduate Division, Category of Biological, Biomedical and Health Sciences Student Showcase, University of Arizona, Tucson, AZ. 1993
Society for Leukocyte Biology Travel Award, Tucson, AZ 1994
August Krogh Young Investigator Award, Microcirculatory Society, Atlanta, GA 1995
Mary P. Weiderman Award, Microcirculatory Society, Munich, Germany 1996
Presidential Early Career Award for Scientists and Engineers, Washington D.C. 2000
Suzanne Van Ort Peer Teaching Award, College of Nursing, University of Arizona, Tucson, AZ 2002

B. Selected peer-reviewed publications (in chronological order).

PUBLISHED MANUSCRIPTS


BOOK CHAPTERS


SELECTED RECENT PUBLISHED ABSTRACTS


13. Cohen Z, Feldman L, Davis-Gorman G, Ritter L, McDonagh P. Caspase Inhibition Decreases Platelet Phosphatidylserine Exposure, Microparticle Formation, and Aggregation, but Not Pseudopod Formation in


16. Davidson, L; McDonagh, PF; Nolan, P; Ritter, L. Fucoidan is nearly as effective as aspirin in inhibiting platelet aggregation in whole blood. FASEB J 2005: 19: A45.


18. Pacheco, GS; Davis-Gorman, G; Davidson, L; Miller, L; Finnerty, K, James, Raysenia; Skroback, D; Rittler, L; Nolan, P; McDonagh P. Whole blood platelet aggregation in an animal model of type 2 diabetes. FASEB J 2005; 19, A1531.

C. Research Support

CURRENT RESEARCH SUPPORT
Title: Inflammatory and thrombotic cell interactions in stroke
Sponsor: NIH NINR RO1
Duration: 5/2000-10/2005
Role: Principle Investigator

Title: Center on Injury Mechanisms and Related Responses
Sponsor: NIH NINR P20
Duration: 08/2004-07/2008
Role: Co-Investigator

Title: Injury Mechanisms and Related Responses
Sponsor: NIH NINR T32
Duration: 07/2002-06/2005
Role: Co-Investigator

Title: Ischemia-reperfusion Injury in the Diabetic Heart
Sponsor: NIH HLBI RO1
Duration: 2004-2008
Role: Co-Investigator

PREVIOUS RESEARCH SUPPORT
Title: Inflammation in diabetic mice after stroke
Sponsor: NIH NINR
Duration: 08/2003-07/2004
Role: Principal Investigator

Title: Investigation of a Novel Neuroprotective Agent in Stroke
Sponsor: Arizona Disease Control Research Commission
Duration: 7/2000-7/2003
Role: Co-Investigator
Title: Leukocyte-platelet interactions during early reperfusion after stroke  
Sponsor: American Heart Association, Desert Mountain Affiliate  
Duration: 07/1999-06/2001  
Role: Principal Investigator

Title: Effects of aging on the cerebral inflammatory response after stroke  
Sponsor: University of Arizona Faculty Small Grants Award  
Duration: 12/1999-12/2000  
Role: Principal Investigator

Title: Cerebral vascular leukocyte accumulation after stroke  
Sponsor: American Heart Association, Arizona Affiliate  
Duration: 1998-1999  
Role: Principal Investigator

Title: Cerebral vascular leukocyte accumulation after stroke  
Sponsor: NIH NINR  
Duration: 1998-1999  
Role: Principal Investigator
BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2. Follow this format for each person. DO NOT EXCEED FOUR PAGES.

NAME
Deborah Vincent

POSITION TITLE
Associate Professor

eRA COMMONS USER NAME

NAME
Deborah Vincent

POSITION TITLE
Associate Professor

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)

<table>
<thead>
<tr>
<th>INSTITUTION AND LOCATION</th>
<th>DEGREE (if applicable)</th>
<th>YEAR(s)</th>
<th>FIELD OF STUDY</th>
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<tbody>
<tr>
<td>St. Vincent’s Hospital School of Nursing, New</td>
<td>Diploma</td>
<td>1972</td>
<td>Nursing</td>
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<tr>
<td>Pace University, Pleasantville, New York</td>
<td>BSN</td>
<td>1976</td>
<td>Nursing</td>
</tr>
<tr>
<td>University of Colorado, Denver, Colorado</td>
<td>MS</td>
<td>1977</td>
<td>Adult Nurse Practitioner</td>
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<tr>
<td>University of Michigan, Ann Arbor, Michigan</td>
<td>PhD</td>
<td>1998</td>
<td>Health Systems/Policy</td>
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</table>

NOTE: The Biographical Sketch may not exceed four pages. Items A and B (together) may not exceed two of the four-page limit. Follow the formats and instructions on the attached sample.

A. Positions and Honors. List in chronological order previous positions, concluding with your present position. List any honors. Include present membership on any Federal Government public advisory committee.

Positions and Employment
1972–1976 Staff Nurse, New York Hospital New York, NY
1977–1978 Adult Nurse Practitioner, Geriatric Medical Management Clinic, Denver, CO
1978–1983 Adult Nurse Practitioner, University Hospital, Denver, CO
1983–1984 Adult Nurse Practitioner, Santa Barbara Medical Foundation Clinic, Santa Barbara, CA
1985–1986 Clinical Specialist, Partner’s Home Health, Lakewood, CO
1986–1992 Project Director, SAGE, Saint Joseph Hospital Family Practice Center, Denver, CO
1995–1998 Graduate Student Instructor, University of Michigan School of Nursing, Ann Arbor, MI
1999–2004 Assistant Professor, School of Nursing, University of Colorado Health Sciences Center, Denver, CO
2004-present Associate Professor, University of Arizona College of Nursing, Tucson, AZ

Other Experience and Professional Memberships
2002-2003 Colorado Society of Advanced Practice Nurses, Board member
2000-present American Academy of Nurse Practitioners
1999-present National organization of Nurse Practitioner Faculties, Faculty Practice Committee
1999-present National organization of Nurse Practitioner Faculties, Nurse-Managed Centers Special Interest Group
1999-present Colorado Nurses Association, member
1985-present American Nurses Association

Honors
1988 Virginia Paulson award for leadership in Nursing - Colorado Nurses Association
1988 Nurse of the Year - DNA 30, Colorado Nurses Association
1994 National Research Service Award Traineeship in Health Promotion/Risk Reduction
1994, 1996 Who's Who Among Students in American Universities and Colleges
1995 Elected, Sigma Theta Tau International Nursing Honor Society
1997 Outstanding Student Leadership Award, University of Michigan
1997 The University of Michigan School of Nursing Alumni Class of 1959, New Investigator Award
1997 Ella E. McNeil Memorial Award for excellence in scholarship in Community Health Nursing
1997 Graduate Student Instructor of the Year
1998 Sigma Theta Tau, Rho Chapter, Research Award
2000 Dean’s Award for Excellence in Teaching, University of Colorado School of Nursing
2004 Fellow of the American Academy of Nurse Practitioners

B. **Selected peer-reviewed publications (in chronological order).** Do not include publications submitted or in preparation.

(Publications selected from 14 peer-reviewed publications)


**Ongoing Research Support**

Extramural Award, Vincent (PI) 2004-2005

American Academy Nurse Practitioners

**A Study to Examine the Cross-Cultural Adaptation of the Summary of Diabetes Self-Care Activities Questionnaire.**

The purpose of this study is to translate the Summary of Diabetes Self-Care Activities (SDSCA), which measures diabetes self-care activities and was developed in English, into a valid questionnaire for use with Spanish speakers.

Emmons Award, Vincent (PI) 2004-2005

University of Arizona College of Nursing

**A Culturally Sensitive Diabetes Self-Care Program for Urban Latinos: a Pilot Study of Efficacy**

This purpose of this study is to determine whether this customized diabetes mellitus (DM) education
and behavioral self-management program for urban Latinos can be implemented and to estimate the effect of this program.

**Completed Research Support**

**Intramural Award Vincent (PI) 2003-2004**

*Exploring Nutrition and Health Practices of Urban Latinos with Type 2 Diabetes*

The major goal of this study was to describe factors that facilitate or hinder diabetes self-management and elicit participant’s preferences and recommendations about the essential components of a culturally competent diabetes self-management program.

**U18 HS11093 Jones (PI) 09/2000---08/2003**

*AHRQ*  
*Improving Pain Management in Nursing Homes*

The major goal of this project was to develop generalizable approaches to implementing evidence-based knowledge into pain management in the nursing home setting.

Role: AP Investigator

**Research Assistant Support Vincent (PI) 2/2002-7/2002**

*University of Colorado School of Nursing*  
*Factors Related to Best Birth Outcomes in a Low-Risk Nurse Midwifery Population*

The major goal of this study was to analyze outcomes associated with the nurse midwifery practice at a large metropolitan teaching hospital.
## BIOGRAPHICAL SKETCH

### NAME
Vincenz, Mary C.

### POSITION TITLE
Clinical Associate Professor

### EDUCATION/TRAINING
*(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)*

<table>
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<tr>
<th>INSTITUTION AND LOCATION</th>
<th>DEGREE (if applicable)</th>
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<th>FIELD OF STUDY</th>
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<tr>
<td>Arizona State University, Tempe</td>
<td>BSN</td>
<td>1971</td>
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<td>Arizona State University, Tempe</td>
<td>MS</td>
<td>1978</td>
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<tr>
<td>University of Arizona, Tucson</td>
<td>Post-master’s</td>
<td>1992</td>
<td>Nurse as Therapist Certificate</td>
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<td>University of Arizona, Tucson</td>
<td>PMHNP</td>
<td>2002</td>
<td>Psy Nurse Practitioner</td>
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### EMPLOYMENT

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<tr>
<td>Maricopa County General Hospital</td>
<td>Staff Nurse, ICU/CCU</td>
<td>8/71-3/72</td>
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<td>Phoenix, AZ</td>
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<tr>
<td>Maricopa County General Hospital</td>
<td>Charge Nurse, ICU/CCU</td>
<td>4/72-9/72</td>
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<td>Phoenix, AZ</td>
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<td>Maricopa County General Hospital</td>
<td>Staff Nurse Operating Room</td>
<td>10/72-4/73</td>
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<td>Phoenix, AZ</td>
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<tr>
<td>Maricopa County General Hospital</td>
<td>Evening Charge Nurse, Emergency Department</td>
<td>5/73-9/73</td>
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<td>Phoenix, AZ</td>
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<tr>
<td>Maricopa County General Hospital</td>
<td>Nursing Education Instructor</td>
<td>10/73-4/74</td>
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<tr>
<td>Maricopa County General Hospital</td>
<td>Nurse Educator, Basic &amp; Advanced Cardiac Care</td>
<td>5/74-9/75</td>
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<tr>
<td>Maricopa County General Hospital</td>
<td>Director Patient Education</td>
<td>10/75-4/77</td>
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<td>Phoenix, AZ</td>
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<tr>
<td>Stanford University Hospital</td>
<td>Clinical Specialist &amp; Nurse Educator,</td>
<td>7/77-3/78</td>
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<tr>
<td>Palo Alto, CA</td>
<td>Cardiovascular ICU</td>
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<td>Natividad Medical Center</td>
<td>Consultant, Client/Family</td>
<td>6/80-12/80</td>
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<td>Salinas, CA</td>
<td>Education Program</td>
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<td>CTB/McGraw-Hill</td>
<td>Content Specialist, NCLEX Consultant</td>
<td>2/82-7/89</td>
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<td>Monterey, CA</td>
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<td>Salinas Cardiac Rehabilitation Center</td>
<td>Nurse Consultant</td>
<td>10/87-7/89</td>
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<td>Salinas Valley Memorial Hospital</td>
<td>Staff Nurse</td>
<td>1/89-5/89</td>
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<td>Salinas, CA</td>
<td>ICU, Step-down Unit</td>
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<td>Desert Hills Center for Youth and Families</td>
<td>Psychiatric Nurse</td>
<td>7/92-12/92</td>
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<td>College of Nursing</td>
<td>Senior Lecturer/Clinical Assoc. Prof.</td>
<td>8/95-present</td>
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<td>Codac Behavioral Health</td>
<td>Psychiatric Nurse Practitioner</td>
<td>11/02-present</td>
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### HONORS

Sigma Theta Tau International, Honor Society of Nursing, Member, 1975-present
National Council of State Boards of Nursing
Judge, Panel of Judges, NCLEX, 1992, 1995
Deans’ Teaching Scholar, Arizona Health Sciences Center, 1996-97.
“Development of an interdisciplinary course in pain management.”
McGaffic, Monroe and Rogers Memorial Award for Clinical Teaching
The University of Arizona College of Nursing, Spring 2004
Fabulous 50 Nurse, Tucson Nurses Week Foundation
Tucson, Arizona, May 2004
The University of Arizona Awards of Distinction Ceremony
“In Celebration of Excellence,” Honored April 2005

PROFESSIONAL MEMBERSHIP

American Academy of Nurse Practitioners
American Nurses Association
American Psychiatric Nurses Association
International Society of Psychiatric-Mental Health Nurses:
Society for Education & Research in Psychiatric-Mental Health Nursing (SERPN) Division & Adult & Geropsychiatric Mental Health Nurses Division
Sigma Theta Tau International, Honor Society of Nursing, Beta Mu Chapter
Arizona State Board of Nursing Task Force: Advisory Opinion on Pain Management

PROFESSIONAL CERTIFICATION

Adult Psychiatric and Mental Health Nurse Practitioner Certification (ANCC) exp. 2010

SELECTED PUBLICATIONS/PRESENTATIONS

Text:
Refereed Journals:

Presentations:

GRANTS:
Completed
BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2. Follow this format for each person. DO NOT EXCEED FOUR PAGES.

NAME
Shu-Fen Wung

eRA COMMONS USER NAME
shufen

POSITION TITLE
Associate Professor

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)

<table>
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<th>INSTITUTION AND LOCATION</th>
<th>DEGREE (if applicable)</th>
<th>YEAR(s)</th>
<th>FIELD OF STUDY</th>
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<tr>
<td>Foo-Yin College of Nursing</td>
<td>Diploma</td>
<td>1987</td>
<td>Nursing</td>
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<tr>
<td>University of Dubuque</td>
<td>BS</td>
<td>1991</td>
<td>Nursing</td>
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<tr>
<td>University of California San Francisco</td>
<td>MS</td>
<td>1993</td>
<td>Cardiovascular Clinical Nurse Specialist</td>
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<tr>
<td>University of California San Francisco</td>
<td>PhD</td>
<td>1995</td>
<td>Nursing</td>
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<tr>
<td>George Town University</td>
<td>Postdoctoral Fellowship</td>
<td>2002</td>
<td>Genetics</td>
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<tr>
<td>University of California San Francisco</td>
<td>Post-MS</td>
<td>2003</td>
<td>Acute Care Nurse Practitioner</td>
</tr>
</tbody>
</table>

PROFESSIONAL EXPERIENCE

1987-1988 Staff Nurse, Medical-Surgical Unit, Chung-Kong Medical Center, Tainan, Taiwan
1987-1989 Staff Nurse, Medical-Surgical Unit, Chang’s Hospital, Tainan, Taiwan
1989-1991 Charge Nurse, Cardiac Care Unit, Veterans General Medical Center, Taipei, Taiwan
1993-1998 Research Assistant, Department of Physiological Nursing, UCSF, San Francisco, CA
1996-1999 Teaching Assistant, Department of Physiological Nursing, UCSF, San Francisco, CA
1998-1999 Postgraduate Researcher, Department of Physiological Nursing, UCSF, San Francisco, CA
1999-2001 Assistant Professor, Department of Medical-Surgical Nursing, University of Illinois at Chicago, IL
2001-present Associate Professor, Division of Nursing Practice, University of Arizona, Tucson, AZ
2003-present Acute care nurse practitioner, Tucson Long-term Care, Tucson, AZ

HONORS

1999 Young Investigator Presenter Award, International Society of Computerized Electrocardiology
2000 Martha N. Hill New Investigator Award, American Heart Association
2001 Fellow, American Heart Association
2002 Fellow, Summer Genetic Institute, National Institutes of Health/NINR
2005 Outstanding Faculty Award, University of Arizona Asian American Faculty, Staff and Alumni Association

SELECTED ARTICLES IN PEER REVIEWED JOURNALS (* Data-based article):


2000* Wung SF, Lux RL, Drew BJ. Thoracic location of the lead with maximal ST segment deviation during right ventricular (RV) and posterior wall ischemia: Comparison of right ventricular and posterior leads with estimated body surface leads. *Journal of Electrocardiology*; 33 suppl, 167-174.


**SELECTED ABSTRACTS:**


1999 **Wung SF**, Drew BJ. Value of posterior and right ventricular (RV) ECG leads in diagnosing myocardial ischemia. *American Journal of Critical Care*; 8(4), 8A.

1999 Drew BJ, Pelter MM, Adams MG, **Wung SF**, et al. Is the EASI 12-lead electrocardiogram comparable to the standard 12-lead electrocardiogram for diagnosing cardiac rhythm and myocardial ischemia? *Circulation supplement*; 100(18), I736.


2000 **Wung SF**, Drew BJ. New ECG criteria for acute posterior myocardial ischemia: Validation using a PTCA model of acute myocardial ischemia. *Circulation supplement*; 102 (18), II-367


2001 **Wung SF**. Differentiation between right and left circumflex coronary artery occlusion using noninvasive 18-lead ECG. *Circulation*; 104(17), II-640.


**Selected Accepted Research Abstracts**


2003 Western Institute of Nursing, “Myocardial Ischemia and Arrhythmia in Cardiac Patients with Depression.” Scottsdale, AZ. (April 12th).


2005  American Heart Association Second International Conference on Women, Heart Disease, and Stroke, “Sex Differences in Pharmacological Management of Acute Coronary Syndrome at Hospital Discharge.” Orlando, FL (February 18th, 2005)

2005  American Academy of Nursing 32nd Annual Meeting and Conference, “Knowledge of DM, HTN, and Dyslipidemia Control in Patients with CV Risk Factors.” Scottsdale, AZ (November 11th)

RESEARCH SUPPORT

Ongoing Research Support

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09/01/01-06/30/06
National Institutes of Health/National Institute of Nursing Research

New ECG Criteria for Posterior Myocardial Infarction

The major goals of this project are to establish more sensitive and specific electrocardiographic (ECG) criteria that can be used for early and accurate detection of an acute posterior myocardial infarction (MI). Another goal of this study is to investigate the presenting symptoms in patients with acute posterior wall myocardial infarction. These new ECG criteria and symptoms can be used by nurses and other clinicians to facilitate decision-making in the Emergency Department (ED) and expand the use of revascularization interventions to patients suspected of having an acute posterior MI.

Role: PI

Shu-Fen Wung (2P20NR007794-04, Center PI, Dr. Ida Ki Moore) 08/01/05-07/31/06
National Institutes of Health/National Institute of Nursing Research

Inflammatory Genetic Markers and Acute Coronary Syndrome

The goal of this project is to understand how inflammatory genetic markers contribute to acute coronary syndrome and to provide a mechanistic framework for understanding the clinical benefits of anti-inflammatory therapies.

Role: PI