

Academic Year 2025-2026
Preceptor Packet for:

- Fall: N740B Adult-Gerontology Acute Care Nurse Practitioner Clinical Practicum I
- Spring: N741B Adult-Gerontology Acute Care Nurse Practitioner Clinical Practicum II
- Summer: N741C Adult-Gerontology Acute Care Nurse Practitioner Clinical Practicum III

Course Coordinator:

Alex Menard, DNP, AGACNP-BC

Assistant Professor & Coordinator AGACNP track

Office Address: S1-853

Cell: 774-644-7682

E-mail: Alexander.Menard@umassmed.edu

Overview

Thank you for agreeing to precept this year. As a preceptor you have a unique opportunity to facilitate a student's professional development. This information is intended to assist you in helping your student to meet clinical competency goals.

Since evaluation is an ongoing process, it is recommended that both the preceptor and the student participate in open discussion throughout the semester regarding progress made towards meeting clinical objectives. At the end of the semester you will be asked to perform an evaluation of the student. This will be done electronically and you will be sent information during the semester regarding how to access the online evaluations. Please include validating and constructive comments in the sections provided. We recognize that it is impossible to be outstanding in all areas and hope to use the evaluation tool to build on the areas the student excels in and assist him/her to build strengths in other areas. Your input is a vital tool enabling the student to reach their potential.

	Course Description	Objectives Upon completion of this course the learner will be able to:
Fall: N740B (300 hours)	This is the first of three advanced practice nursing clinical courses to prepare adult-gerontology acute care nurse practitioners. The focus is to develop and refine history taking, physical exam skills, diagnostic reasoning, and to formulate management plans needed by the advanced practice nurse. The course enhances the student's ability to apply theories, standards of care and evidence-based practice to care for adult-older adult patients and their families with acute and complex chronic health problems. The student implements the role activities of the advanced practice nurse through critical thinking, therapeutic intervention, communication, and professional role interaction.	<ol style="list-style-type: none"> 1. Develop therapeutic nurse practitioner-patient/family relationships and collegial relationships with members of the healthcare team. 2. Interpret and evaluate physical exam data, laboratory, radiological, and other technologically acquired data to diagnose acute and complex chronic health problems of the adult-older adult patients. 3. Select therapeutic, evidence-based interventions based on physical exam data, laboratory, radiological, and other technologically acquired data to manage acute and complex chronic health needs of the adult-older adult patients. 4. Identify teaching/coaching activities of the advanced practice nurse in the care of the acutely ill adult-older adult patient and their families. 5. Collaborate with patients, families and members of the health care team in the holistic care of the adult-older adult patient experiencing acute and chronic health problems. 6. Assess and analyze health outcomes for acutely ill adult-older adult patients and their families.
Spring: N741B (300 hours)	This is the second of three advanced practice nursing courses to prepare adult-gerontology acute care nurse practitioners. The focus is on mastering clinical reasoning skills and formulating management plans to care for adult-older adult patients and their families experiencing acute and complex chronic health problems. The course expands the student's ability to apply theories, standards of care and evidence-based practice to the care of adult-older adult patients with acute and complex chronic health problems. The student	<ol style="list-style-type: none"> 1. Enhance and preserve therapeutic nurse practitioner-patient/family relationships and collegial relationships with members of the healthcare team. 2. Interpret and evaluate physical exam data, laboratory, radiological, and other technologically acquired data to diagnose and manage acute and complex chronic health problems of the adult-older adult patients. 3. Identify patient risk factors for development of complications and monitor for over

	implements the role activities of the advanced practice nurse through critical thinking, therapeutic intervention, communication, and professional role interaction.	<p>medicalization hazards (Quaternary prevention).</p> <p>4. Integrate teaching/coaching activities of the advanced practice nurse in the care of the acutely ill adult-older adult patient and their families.</p> <p>5. Collaborate with patients, families, and members of the health care team in the holistic care of the adult-older adult patient experiencing acute and chronic health problems.</p> <p>6. Analyze and modify plans of care to optimize health outcomes and quality of life for the adult-older adult patient experiencing acute and chronic health problems.</p>
Summer: N741C (150 hours)	This is the third of three advanced practice nursing courses to prepare adult-gerontology acute care nurse practitioners. The focus of the course is to actualize the role of the adult-gerontology acute care nurse practitioner. Clinical experiences further refine and enhance diagnostic reasoning and formulation of complex management plans needed by the advanced practice nurse. The student operationalizes standards of care and evidence-based practice to provide direct care to adult-older adult patients with acute and complex chronic health problems. The student expands their capacity to manage additional and more complex patients with maximal independence.	<p>1. Evaluate subjective & objective data to diagnose and generate comprehensive plans of care with minimal supervision.</p> <p>2. Implement teaching/coaching activities of the advanced practice nurse in the care of the acutely ill adult-older adult patient and their families.</p> <p>3. Evaluate health outcomes and modify plan of care to optimize health outcomes and quality of life.</p> <p>4. Engage in self appraisal to identify ongoing learning needs and implement a plan to meet these needs.</p>

Evaluation:

Clinical practicum, case study presentations, weekly logs, weekly clinical seminar, and OSCE comprise the methodology for the clinical practicum.

1. Seminar (pass/fail)
2. Clinical practicum (Pass/Fail)
3. Objective Structured Clinical Examination (OSCE) (Pass/Fail)
4. Simulation (Pass/Fail)
5. Case Presentation(s) in seminar (Pass/Fail)
6. Weekly logs/notes and documentation (Pass/Fail)
7. Submission of all evaluations (including self, site, preceptor, faculty, and course evaluations)

*****Students must pass all evaluation methods to successfully complete this course.**

Program goals for each student include completing N740B with an average passing grade of 3.0 or above and for N741B & N741C average passing grade is 3.5 or above. If students are not meeting these programmatic goals, clinical faculty will meet with students and develop a plan to achieve these goals. Each preceptor, UMass GSN faculty instructor, and student is expected to complete an evaluation and submit this at the end of the semester. Evaluation is an ongoing process; therefore, it is recommended that the student, preceptor, and faculty participate in open discussion regularly throughout the semester regarding progress made towards meeting the clinical objectives. The GSN clinical faculty determines the student's grade for the clinical component.

Guidelines for Clinical hours:

Students should expect to be in clinical 16-24 hours per week, Students are expected to keep up with clinical hours. Problems with keeping up with clinical hours should be reported to the clinical instructor promptly so that a plan can be instituted.

Guidelines for Clinical Placements:

Students are expected to stay in the clinical sites assigned over the specified time period (unless otherwise negotiated with the clinical instructor and course coordinator). Students should not set up multiple individual or one-time clinical experiences on their own.

Placements must meet the following criteria:

- Students must spend a minimum of 16-24 hours per week at the clinical site(s).
- Documentation of the clinical hours are tracked in Typhon.
- Every attempt will be made for 50% or more of total program placement time to be with a nurse practitioner when such placements are available. Other times may be with a physician or PA.
- Preceptors must have a minimum of one year of practice as an NP, PA or physician.
- Placements should not be in the student's department/unit of employment.
- Students may not have a placement or specialty experience with a family member.

Student Clinical Expectations:

1. The student will develop clinical objectives with the preceptor at the beginning of the clinical practicum. A copy of these objectives is to be given to the preceptor and clinical faculty instructor. Objectives are to be reviewed over the course of the practicum to evaluate how they are being met. Objectives may need to be revised throughout the semester.
2. The student will observe the preceptor on the first clinical day with his/her patients. This is not to be solely an observation experience. The expectation is that the student will become more independent as he/she gains experience in the clinical site.
3. The number of patients seen by the student on a daily basis will be determined by the preceptor in collaboration with the student. See guide below. The decision making for this will be guided by both patient acuity and the student's current skill level with that particular patient population. Concerns regarding this can be readdressed with the clinical faculty instructor responsible for the student.
4. Students may see adult patients only. Students in the AG-ACNP track are being prepared as an adult nurse practitioner.
5. Students are expected to do at least one H&P each week. If this objective is not readily available, the students are to ask a current patient if they may interview and assess them, to achieve this goal.
6. If the student is unable to attend clinical due to illness or weather, the student is expected to communicate this to the preceptor, site and clinical instructor prior to the shift.

Patient Care Expectations:

1. Expectations of the patient assessment includes performing histories (including HPI, PMH, PSH, allergies, medications, FH, SH and ROS), physical exam, and review of laboratory and/or other diagnostic testing.
2. The student will then make an Assessment/Diagnosis of the medical problem(s) and needs based on the H & P which will be presented in the history/physical exam format as described above to the preceptor for review.

3. The student will formulate appropriate plan(s) of care with their preceptor. Plans should include: further diagnostic testing, therapeutic interventions, education, and follow-up pertinent to the patient.
4. The student will document a note of the patient interview/assessment based on whether the assessment is episodic or routine. All notes are to be reviewed in clinical by the preceptor. The preceptor is expected to see the patient after reviewing the findings with the student.

Procedures:

Students are permitted to perform ONLY those procedures their preceptor is credentialed to do by the facility. These MUST be done under direct supervision with the preceptor at your side.

******Please note: UMMC does not allow students to place central venous catheters under any circumstances.***

Guide to numbers of patients to be seen in clinical with preceptors for the AGACNP track:

Fall Semester (300 hours)	Cases per week:	Average # of Cases per Month:	ICU rotation Depends on acuity
Week 1	2 patients		1 patient - low
Week 2	3 patients	Sept: 15	2 patients - low
Week 3 - 6	4 patients	Oct: 19	2 patients - higher
Week 7 – 10	5 patients	Nov: 24	2 patients - higher
Week 11- 16	6 patients	Dec: 12	
	Exceptions to the above need explanation to clinical faculty	Minimum 72, Target 80 Cases for the semester	Target 40 cases

Spring Semester (300hours)	Cases per week:	Average # of Cases per Month:	ICU rotation Depends on acuity
Week 1	2 patients	Jan: 11	2 patient - low
Week 2	4 patients	Feb: 21	3 patients - low
Week 3 - 6	5 patients	Mar: 30	3 patients - higher
Week 7 - 10	6 patients	April: 24	3 patients - higher
Week 10-15		May: 12	
	Exceptions to the above need explanation to clinical faculty	Target 100 Cases for the semester	Target 50 cases

Summer Semester (150 hours)	Cases per week:		
Week 1	6 patients		3-4 patients
Week 2	6 patients		3-4 patients
Week 3 - 6	6 patients		3-4 patients
	Exceptions to the above need explanation to clinical faculty	Target 40 Cases for the semester	Target 20 cases

Minimum for AG-ACNP Program:

Semester	Total non-ICU	Total ICU
Fall	80	40
Spring	100	50
Summer	40	20
	220	110

Documentation:

Clinical Logs: Typhon electronic clinical logs are used for tracking hours and clinical notes. Typhon is designed specifically for advanced practice nursing programs where no patient identifiable factors are recorded.

Clinical Notes: Each student is expected to perform a minimum of one H&P or two daily progress notes weekly. The notes will be typed into a word document and submitted electronically via Typhon. If this objective is not readily available, the student is to ask a current patient if they may interview and assess them, to achieve this goal. Students are accountable to maintain all HIPAA guidelines.

Clinical Site Visits:

You will be contacted within the first or second week to discuss student integration into the clinical rotation. Each student will be visited by a UMass faculty twice during the fall semester and once during the spring semester, as well as other times as needed. **The preceptor is encouraged to contact the clinical faculty instructor with any concerns or questions related to the clinical experience.**

During the site visit the student may be expected to perform any of the following activities under the observation of the visiting faculty member.

1. Take a comprehensive history
2. Physical examination
3. Formulate differential diagnoses
4. Present the above information to preceptor in an organized manner
5. Implement a plan of care, incorporating education and health promotion strategies

During an initial visit to a site, time will be set aside to:

1. Meet with the preceptor privately
2. Tour the facility
3. Review the program and/or objectives for the course
4. Meet with the preceptor and student together to discuss progress being made towards meeting clinical objectives

Clinical Faculty Assignments:

For **ANY** clinical issues that arise before or during the semester, please feel free to contact me or the clinical faculty member. Here is our contact info:

Faculty Contact information:

Alexander Menard, DNP, AG-ACNP-BC Course Director Office Address: S1-853 Email: Alexander.Menard@umassmed.edu Cell: 774-644-7682 Office Hours: by appointment	
Johnny Isenberger, DNP, ACNP Assistant Professor Office Address: S1-853 E-Mail: Johnny.Isenberger@umassmed.edu Cell: 978-660-4339 Office Hours: by appointment	Torey Manzi, MS, AGACNP-BC Clinical Instructor Office Address: S1-853 E-mail: torey.manzi@umassmemorial.org Cell: 978-944-0911 Office Hours: by appointment
Kimberly Murchie, MS, FNP-BC, AGACNP-BC Clinical Instructor Office Address: S1-853 E-mail: Kimberly.Murchie@umassmemorial.org Cell: 978-855-1195 Office Hours: by appointment	Henry Ellis, DNP, AGACNP-BC Assistant Professor Office Address: S1-853 E-mail: henry.ellis3@umassmemorial.org Cell: 774-276-5125 Office Hours: by appointment