

*and NIA  
pre requisites*

The University of Maryland School of Nursing currently prepares pediatric nurse practitioners (PNP's) for urban-rural health services and school-based clinics.<sup>1</sup> In the fall of 1994 the School of Nursing proposes to expand and enhance the current PNP training program by adding a program to prepare PNP's for advanced practice positions in the tertiary care setting. The program blends aspects of the clinical nurse specialist and the pediatric nurse practitioner roles.

This expanded program would give the student a core body of knowledge in primary care for children and adolescents, and then prepare the student to transfer primary care skills to hospital environments, where children have documented acute illnesses but where they also have ongoing primary care needs. Graduates of the program could be expected to practice in more than one setting while working for the same employer.

In the tertiary care settings, the PNP's would implement advanced physical assessment skills, provide clinical diagnoses, collaborate with the health team, prescribe therapies, and direct managed care of a select population of pediatric clients.

The proposed program is a response to a need. In March 1993, the School of Nursing conducted a professional needs assessment of four major clinical centers with large pediatric inpatient service areas and sixty pediatric nurses in the Baltimore-Washington area. The findings dramatically described a need for nurse practitioner

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<sup>1</sup> The current PNP programs was certified by the Maryland Board of Nursing in 1978. The National League for Nursing accredited the University of Maryland School of Nursing's clinical masters program in 1994 for eight years.

skills in the tertiary care setting and led the School to develop this proposed program.

### Specifics of Program

#### I. Date of program operation

The program would begin with the Fall semester, 1994.

#### II. Name of approving agency; dates of program accreditation

A. American Nurses' Credentialing Center, approval in progress.

#### III. Organization and administration

##### A. Administration

The program is one of the graduate programs administered by the University of Maryland School of Nursing.

##### B. Faculty, credentials, practice affiliation

See Appendix A.

##### C. Preceptor qualifications

Preceptors are required to be master's prepared nurse practitioners or physicians who are currently licensed and certified in their respective professional areas of expertise. If the preceptor is a physician, the student will have an advanced practice nurse as a joint preceptor.

The preceptors for the proposed program are those clinicians who have been working with the School of Nursing in recent years to prepare advanced practice

pediatric nurses. The clinicians are located at the University of Maryland Hospital, The Johns Hopkins Hospital, Walter Reed Army Medical Center, Children's Hospital, and clinics in the Baltimore-Washington area. Each of the hospitals have acute and ambulatory pediatric care units. There is a written agreement between the School of Nursing and each of these institutions.

For a list of clinical preceptors and clinical sites, see Appendix B.

#### IV. Student qualifications and admission criteria

Successful applicants will be licensed registered nurses with a B.S. in nursing, will have at least two years of pediatric nursing experience, will have successfully interviewed with a faculty member, and will have secured three exemplary letters of recommendation from relevant nursing professionals.

#### V. Number of students

The program will have a minimum of eight students per year.

#### VI. Program of study

##### A. Length

The proposed program is three semesters plus one summer of coursework, including didactic and clinical

instruction.

B. Time span of didactic instruction

Didactic instruction spans more than a calendar year. During the first year, fifteen credits of didactic coursework is required first semester, eleven credits are required second semester and three credits are required in the summer term. The following fall semester, there are three credits of required didactic coursework.

C. Summary of program content

The content of the proposed program includes history-taking, physical examination, health maintenance, care during acute and chronic illnesses, pharmacology, health teaching, role realignment and community resources.

The specific content of the program, roster of hours of instruction and curriculum objectives are described in Appendix C.

D. Provisions for supervision of clinical practice

Students will be supervised by School of Nursing faculty members through weekly conferences. Preceptors will provide daily supervision. Faculty members will make site evaluations at least twice a semester.

APPENDIX A

<u>Faculty</u>	<u>Credentials</u>	<u>Maryland license no.</u>
Cusson, Regina M., BS, MS, PhD, CNNP Associate professor	BS-St. Joseph College MS-University of Maryland PhD-University of Maryland	R046093
Engler, Arthur, BSN, MS, CPNP, CNNP Instructor	BSN-University of Akron MS-University of Maryland	R081009
Feroli, Kathleen L. BS, MS, CPNP Instructor	BS-University of Maryland MS-University of Maryland	R050819
Gibbons, Martha B., BSN, MS, PhD, CS, CPNP Assistant professor	BSN-San Jose State University MS-Medical College of Virginia PhD-University of Maryland	R081887
McFadden, Ellen A., BS, MS, PhD Assistant professor	BS-University of Virginia MS-University of Maryland PhD-University of Maryland	R058734
Michael, Michele, A., BSN, MS, PhD Assistant professor	BSN-Creighton University MS-University of Maryland PhD-University of Maryland	R054681

Miola, Beth, MS, CPNP Instructor	BS-University of Rochester MS-University of Maryland	R083740
Murphy, Kathleen, BSN, MS Instructor	BSN-University of Maryland MS-University of Maryland	R039553
O'Brien, Eileen, L. BSN, MSN, MA, PHD Assistant professor	BSN-University of Pittsburgh MSN-Catholic University PhD-Catholic University	R057657
Papa, Patricia, MS, CPNP Instructor	BSN-Catholic University of America MSN-Catholic University	R043947
Rabin, Nancy, MS, CPNP Instructor	BSN-Georgetown University MN-Emory University	R120088
Winklestein, Marilyn L., BSN, MS, PhD Assistant professor	BSN-University of Maryland MS-University of Maryland PhD-University of Maryland	R031984

## APPENDIX B

### Preceptors

Francine Benjamin, CPNP, Pediatric Clinic, Kaiser Permanente, Gaithersburg, MD

Michael Berman, MD, Department of Pediatrics, University of Maryland Medical System

James Brayton, MD, private practice in pediatrics, Bel Air, MD

Brenda Clark, CPNP, Pediatric Clinic, Columbia Medical Plan, Columbia, MD

Bernard Cohen, MD, Pediatric Dermatolory Clinic, The Johns Hopkins Hospital, Baltimore

Margie Connors, CPNP, Pediatric clinic, The Johns Hopkins Hospital, Baltimore; Prudential/Johns Hopkins Health Plan, Baltimore

Sue Dirkson, CPNP, Kaiser Permanente, Lutherville, MD; Newborn Nursery, Greater Baltimore Medical Center

Margaret Failla, MSN, APNP, Harlem Park Primary Care Center, Baltimore

Jan Feldman, MD, private practice, Feldman and Perlman, Sinai Hospital, Baltimore; Obstetrics Ambulatory Care Center, Washington Hospital Center; Mother-Baby Unit, University of Maryland Hospital, Baltimore

Donna Field, CPNP, Pediatric Clinic, Andrews Air Force Base, MD Baltimore

Jean Findley, MD, private practice, Bel Air, MD

John Gordon, MD, Pediatric Intensive Care Unit, University of Maryland Hospital

Patti Grondi, CPNP, Baltimore County Health Department

Beth Helm, PNP, Pediatric Ambulatory Care, Western District Health Center, Baltimore

J. Laurance Hill, MD, Department of Pediatric Surgery, University of Maryland Medical System

Mary Anne Knott, CPNP, School Health Clinic, Thurgood Marshall Middle School, Baltimore

David Kube, MD, Kennedy Krieger Institute, Baltimore

Carolyn McCready, CPNP, Baltimore City Health Department

Kathleen Murphy, MS, CPNP, Pediatric Clinic, St. Agnes Hospital,  
Baltimore and Pediatric Clinic, Care First, Baltimore

Patricia Papa, CPNP, School Health Clinic, Baltimore County  
Health Department/University of Maryland School of Nursing,  
Landsdowne Sr. High School

Lewis Perry, MD, Cardiology, Rockville Children's Center

Sue Porter, CPNP, Teens and Tots Adolescent Center, The Johns  
Hopkins Hospital

Clare Rogers, MD, Davidson Pediatrics, Annapolis

Marylou Rosenbaum, CPNP, Teens and Tots Adolescent Center, The  
Johns Hopkins Hospital

Laurie Scudder, CPNP, Newborn nursery, Mercy Hospital, Baltimore

Stephen Shapiro, MD, Cardiology, Rockville Children's Center,  
Rockville

Lisa Stamboli, CPNP, House of Ruth, Baltimore; Families in  
Transition, Baltimore

Jane Watts, CPNP, Prudential/Johns Hopkins Health Plan, Baltimore

Teresa Weedon, CPNP, Greenspring Pediatrics, Baltimore

Heidi Wells, CPNP, Hematology/Oncology Clinic, University of  
Maryland Hospital

Heidi Welsey, MS, CPNP, Pediatric Clinic, Kimbrough Army  
Hospital, Ft. Meade

Jean Wheeler, CPNP, Newborn Nursery, The Johns Hopkins Hospital

Nancy Zimmerman, CPNP, Pediatric Ambulatory Care, Children's  
Hospital, Washington, DC



## APPENDIX C

### Required courses

#### Fall semester, year 1

- N611 Introduction to primary care (Advanced health assessment). Students refine assessment skills as they collect and analyze data in the clinical area. Seminar, laboratory and clinical study. 3 credit hours.
- NPhy600 Human physiology. Focuses on selected areas in normal human physiology and pathophysiology. 3 credit hours.
- N710 Health supervision of the well child I. Students assess the physical, personal and cognitive expressions of health of children five and under, and develop care plans which promote health and development. 3 credit hours.
- N713 Common health problems of children I. Students learn to identify selected health problems of children frequently encountered in ambulatory settings and underlying alterations in health equilibrium, apply appropriate regulatory processes and evaluate their interventions. 3 credit hours.
- N602 Critical approaches to nursing theory. Students analyze nursing theories as they apply to practice and apply the principles of critical thinking and scientific inquiry to nursing practice. 3 credit hours.

#### Spring semester

- N701 Research and design analysis I. Students, working in teams, plan and implement a nursing research project. Students learn quantitative research methods beyond the introductory level, the scientific thinking process, and univariate and bivariate research designs. 3 credit hours.
- N711 Health supervision of the Well Child 2. Students assess personal, cognitive and physical health needs of school age children, and develop, implement and evaluate plans of care which promote health and development. 3 credit hours.
- N714 Common health problems of children 2. Students learn to address complex health problems of children and adolescents through problem identification, intervention and evaluation. 3 credit hours.
- N743 Neonatal-pediatric pharmacology. Application of advanced pharmacologic principles utilized in the

therapeutic management of common problems experienced by newborns, infants and children. Emphasis on scientifically based approach to the pharmacological management of such problems. 2 credit hours.

Summer session

- N643 Advanced nursing of children. (Clinical--summer session). Advanced nursing care of acutely ill infants, children and adolescents; specifically, psychophysiological assessment, diagnosis, pharmacologic management and treatment. Clinical sites are hospitals, emergency clinics, and rural or community/school emergent care facilities. 3 credit hours.
- N702 Nursing and research design and analysis 2. Students critique and discuss reports of nursing research, and are introduced to quantitative multivariate and qualitative research designs, principles of appropriate design selection, and procedures for data quality assurance and analysis. 3 credit hours.

Fall semester, year 2

- N645 Advanced practice: Nursing of children. (Clinical) Teaches the student to synthesize all prior coursework, apply critical thinking, implement nursing process, apply advanced assessment skills, diagnose and manage patient illnesses, utilize community referrals, initiate consultation, provide continuity of care, present and document the client's progress, incorporate a family approach to comprehensive care, review and evaluate advanced practice protocols, and provide consultation and education. 5 credit hours.
- N--- Advanced practice role. (Seminar) Role realignment, organizational theory, legal and ethical considerations, management issues in the health care system. 2 credit hours.
- N608 Seminar paper non-thesis option. 3 credit hours.
- N606 Influential forces in nursing and health care. Students learn to analyze health care trends, organizations, settings, provider and consumer roles, and external forces in the financing, legislation, regulation, politics, ethics and evaluation of nursing and health care. Students learn strategies for effecting health care system change and for influencing practice decisions. 3 credit hours.
- TOTAL CREDITS = 45

APPENDIX C, continued

Roster of hours of instruction

	<u>Theory hours</u>	<u>Clinical hours</u>
<u>Fall, year 1</u>		
N611	30	45
N710	30	45
N713	30	45
<u>Spring</u>		
N711	30	45
N714	30	45
<u>Summer</u>		
N643	15	90
<u>Fall, year 2</u>		
N645		225
N--	30	
	<u>195</u>	<u>540</u>

APPENDIX C, continued

Curriculum learning objectives

At the conclusion of the program, the student will:

1. Demonstrate clinical proficiency in assessing and maintaining the health of children.
2. Demonstrate clinical proficiency in assessing and managing selected acute and chronic illnesses of children.
3. Demonstrate appropriate clinical judgment, critical thinking, problem solving and decision-making skills in the care and management of healthy and sick children.
4. Evaluate the student's own clinical interventions and refine such interventions as appropriate to the clinical setting.
5. Describe, evaluate and utilize community resources applicable to the primary care health needs of children.
6. Demonstrate appropriate communication skills, both written and oral, for high-level functioning as a member of a health care team.
7. Develop collaborative relationships with patients, families, physicians, nurses, social workers, other staff and community resources in a primary care or acute care setting.
8. Integrate data, principles and theories from the medical, biological, psychological, social and nursing sciences into advanced nursing practice in the primary care of children in ambulatory and acute care settings.
9. Evaluate and utilize research findings applicable to the management of primary care health needs of children.
10. Identify researchable questions and collaborate with others in designing and conducting research.
11. Make the transition from the role of registered nurse to role of advanced practice nurse and nurse practitioner.