

THE PENNSYLVANIA STATE UNIVERSITY
COLLEGE OF NURSING
PRECEPTOR AGREEMENT FORM
N874: Family Nurse Practitioner Integrative Practicum

Form Instructions: Student will complete the first page. Preceptor will complete and sign the second page. The completed form should be returned to the clinical faculty (by the student) for final signature.

Date: Semester: Year:

Student's Name:

Student Tel #: Student E-mail:

Clinical Faculty Name: Clinical Faculty Email:

Clinical Faculty Phone:

COURSE OBJECTIVES:

Upon completion of the course, the student will be able to:

1. Synthesize theoretical, scientific, and contemporary clinical knowledge for the assessment and management of individuals, families across the life span, communities and underserved populations during health and illness.
2. Integrate comprehensive, individualized health promotion, health protection, disease prevention, and disease management strategies for individuals, families across the life span, communities, and underserved populations during health and illness.
3. Implement a comprehensive plan of care to maximize physical and mental health for individuals, families across the life span, and underserved populations during health and illness.
4. Synthesize personal, biologic, psychologic, social, and cultural factors that impact the assessment and management of individuals, families across the life span, communities, and underserved populations during health and illness.
5. Individualize teaching strategies for individuals, families, and communities during health and/or illness based on collaboration, age, gender, health status, developmental status, culture, the environment, and resources.
6. Utilize a collaborative relationship with individuals, families, communities, health care providers, and agencies to maximize health and coordinate care in and across health care settings.
7. Implement the role of the nurse practitioner to influence health policy, improve quality health care, promote access to care, and promote the role of the advanced practice nurse.
8. Utilize self-evaluation to monitor and evaluate clinical practice, improve practice quality, and improve practice outcomes.

PRECEPTOR NAME:

Clinical Specialty Area:

Years in Advanced Role: Number of students you are supervising this semester concurrently per day: Total:

Pennsylvania RN/MD/DO/CRNP #: Academic Degrees (indicate nursing):

Certifications:

Name of Agency/Clinical Practice:

Address:

Office Telephone # Office Fax #: E-mail:

Accreditation status (if applicable):

Clinical Agency Type

- Birthing center
- Community health center
- Federal and state bureaus of prison
- Health department clinic (state, county or city)
- Home health
- Hospice
- Hospital (community)
- Hospital (federal)
- Hospital (private)
- Long term care facility
- Nurse managed health clinic
- Private practice
- Rural health clinic
- School-based health center
- Other

Clinical Setting

- Federally Qualified Health Center
- Health Professional Shortage Area
- Medically Underserved Communities
- Rural Location

Experience to be provided

- Family
- Pediatrics
- Older Adults
- Women's Health
- Other

Patient Types (List all that apply):

- Acute
- Chronic
- Ambulatory
- In-Hospital
- Out-Patient
- Other

REQUIRED SIGNATURES

Preceptor: _____

Date:

Clinical Faculty: _____

Date:

Program Contact Information:

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