

CAROLINAS MEDICAL CENTER NURSE ANESTHESIA PROGRAM/ UNCC



APPLICANT BROCHURE

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Program Overview

Carolinas Medical Center Nurse Anesthesia Program/UNCC is a nurse anesthesia program offered jointly by Carolinas Medical Center and the University of North Carolina at Charlotte. Carolinas Medical Center is the flagship hospital of Atrium Health, the second largest not for profit HealthCare System in the United States. Carolinas Medical Center is a/n level one trauma center, regional referral center, organ transplantation center, and a provider of anesthesia and surgical services for the Levine Children's Hospital. Carolinas Medical Center Nurse Anesthesia Program/UNCC students are the only anesthesia students educated within this institution. UNC Charlotte is North Carolina's urban research university. It leverages its location in the state's largest city to offer internationally competitive programs of research and creative activity, exemplary undergraduate, graduate, and professional programs, and a focused set of community engagement initiatives. UNC Charlotte maintains a particular commitment to addressing the cultural, economic, educational, environmental, health, and social needs of the greater Charlotte region.

Accreditation

Carolinas Medical Center Nurse Anesthesia Program/UNCC is fully accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs until May 30, 2024 and UNC Charlotte School of Nursing by the Commission of Collegiate Nursing Education until 2021. Upon completion of the thirty-six (36) month program, the graduate, assuming all requirements are met, is eligible to take the certification examination administered by the National Board on Certification and Recertification of Nurse Anesthetists (NBCRNA).

Contact information for the Accreditation Agencies is as follows:

Council on Accreditation of Nurse Anesthesia Educational Programs (COA)

222 S. Prospect Avenue

Park Ridge, Ill. 60068-4001

Main Number: 847-655-1160

Website: <http://www.coacrna.org/Pages/default.aspx>

Commission on Collegiate Nursing Education

One Dupont Circle, NW Suite 530

Washington, DC 20036

Phone: (202) 887-6791

Mission

The mission of the Atrium Health is to improve health, elevate hope and advance healing – for all.

The program is committed to the education of Registered Nurses, with intensive care backgrounds, in the art and science of anesthesia nursing, on a full or part-time basis, and preparing them for practice in rural or urban areas.

Philosophy

The faculty of the Nurse Anesthesia Program, in keeping with the principles, ideals and traditions of Carolinas Medical Center and the UNC Charlotte, believe that the preparation for the varied and changing roles of men and women in nurse anesthesia requires an education process that is competency based and self-directed. This educational process should foster self-awareness as a basis for lifelong personal and professional growth. The Nurse Anesthesia Program is committed to

excellence, the development of the intellect and the encouragement and cultivation of professional and personal values, including sound moral and ethical values.

We believe that man has the capacity for physical, mental, social wholeness. As a thinking rational being, a person has the power to act on his/her own behalf, utilizing their own strengths and limitations to achieve health care goals.

Health is seen as the capacity of man to live within his/her physical, biological and social environments, achieving some measure of human life potential, growth and self-actualization. We view health as a dynamic process progressing toward optimal emotional and physical well-being. We believe that the goal of health is achieved through the exercise of sound health practices.

Man (used as a universal term) has experienced pain virtually since the beginning of time. Motivated by this fear of the pain experience, man has striven to alleviate or avoid pain in response to surgical intervention. Therein lies both the beginning and the purpose of anesthesiology-to alter the perception and response to pain. Utilizing the nursing process, nurse anesthetists collaborate with members of the health care team to provide quality patient care.

The nurse anesthesia program exists to educate registered nurses to administer individualized anesthesia care in a safe and competent manner. This philosophy supports the concept that nurse anesthesia should demonstrate a proficient level of scientific knowledge together with the application of learned skills and sound judgement pertaining to the practice of nurse anesthesia.

We believe that nursing is a scientific discipline. It is a human service health profession, which assists people in meeting their requirements to achieve health by focusing on teaching, caring, guiding, supporting and creating a healthy environment. The interactive process between the nurse and patient/client focuses on the individual's ability to take deliberate action for himself/herself and dependent others in order to obtain and/or maintain optimum wellness. As a disciplined practice, nursing is a practical science a body of knowledge concerned with bringing about practical results.

We believe that nursing is culturally defined and that society is the social system from which nursing evolves. Nurse anesthetists establish contracts with individuals, families and societal groups to help them deal with health problems related to anesthesia within the health care delivery system. In order to accept responsibility to society, nurse anesthetists need to be involved as scholars, researchers, educators, practitioners, teachers and developers of the profession of nurse anesthesia.

The Nurse Anesthesia Program is responsible to society in its commitment to the development of certified registered nurse anesthetists who are capable of performing in the discipline of anesthesiology in accordance with sound and prudent professional, moral and ethical standards.

We believe that the professional nurse anesthetist is educated at the graduate level, is committed to practice with excellence and clinical competence, and is accountable for his or her own practice. The nurse anesthetist collaborates with the patient/client and other members of the health care team. We further believe that the unique contribution that professional nurse anesthetists make, as members of the health care team, is in supporting and assisting individuals to act on their own behalf in matters related to health. We further believe that the program of studies is based upon scientific knowledge acquired in a selective manner from the fields of the biological, physical, chemical and socio-behavioral sciences.

We believe that learning best occurs in an atmosphere of mutual responsibility and respect in which student and teacher share common educational goals. The faculty of the graduate program will serve as facilitators and provide direction and support to students through a variety of educational

experiences. The course of study is designed to prepare the nurse anesthetist for advanced practice in a specialized area of nursing through assumption of a primary role in nurse anesthesia.

Student Terminal Objectives

Upon completion of the nurse anesthesia program and pursuant to the domains of patient safety, perianesthesia, critical thinking, communication, leadership, and professional role, the DNP Nurse Anesthesia graduate will demonstrate the ability to:

Patient Safety

1. Be vigilant in the delivery of patient care.
2. Refrain from engaging in extraneous activities that abandon or minimize vigilance while providing direct patient care such as texting, reading, and emailing.
3. Conduct a comprehensive equipment check.
4. Protect patients from iatrogenic complications.

Perianesthesia

1. Provide individualized care throughout the perianesthesia continuum.
2. Deliver culturally competent perianesthesia care.
3. Provide anesthesia services to all patients across the lifespan.
4. Perform a comprehensive history and physical assessment.
5. Administer general anesthesia to patients with a variety of physical conditions.
6. Administer general anesthesia for a variety of surgical and medically related procedures.
7. Administer and manage a variety of regional anesthetics.
8. Maintain current certification in ACLS and PALS.

Critical Thinking

1. Apply knowledge to practice in decision making and problem solving.
2. Provide nurse anesthesia services based on evidence-based principles.
3. Perform a preanesthetic assessment before providing anesthesia services.
4. Assume responsibility and accountability for diagnosis.
5. Formulate an anesthesia plan of care before providing anesthesia services.
6. Identify and take appropriate action to mitigate anesthetic equipment-related malfunctions.
7. Interpret and utilize data obtained from noninvasive and invasive monitoring modalities.
8. Calculate, initiate, and manage fluid and blood component therapy.
9. Recognize, evaluate, and manage the physiological responses coincident to the provision of anesthesia services.
10. Recognize and manage complications that occur during the provision of anesthesia services.
11. Use science-based theories and concepts to analyze new practice approaches.
12. Pass the National Certification Examination (NCE) administered by the NBCRNA.

Communication

1. Utilize interpersonal and communication skills that result in the effective exchange of information and collaboration with patients and their families.
2. Utilize interpersonal and communication skills that result in the effective interprofessional exchange of information and collaboration with other healthcare professionals.
3. Respect the dignity and privacy of patients while maintaining confidentiality in the delivery of interprofessional care.
4. Maintain comprehensive, timely, accurate, and legible healthcare records.
5. Transfer the responsibility for care of the patient to other qualified providers in a manner that assures continuity of care and patient safety.
6. Teach others.

Leadership

1. Integrate critical and reflective thinking in his or her leadership approach.
2. Provide leadership that facilitates intraprofessional and interprofessional collaboration.

Professional Role

1. Adhere to the Code of Ethics for the Certified Registered Nurse Anesthetist.

2. Interact on a professional level with integrity.
3. Apply ethically sound decision-making processes.
4. Function within legal and regulatory requirements.
5. Accept responsibility and accountability for his or her practice.
6. Provide anesthesia services to patients in a cost-effective manner.
7. Demonstrate knowledge of wellness and substance use disorder in the anesthesia profession through completion of content in wellness and substance use disorder
8. Inform the public of the role and practice of the CRNA.
9. Evaluate how public policy making strategies impact the financing and delivery of healthcare.
10. Advocate for health policy change to improve patient care.
11. Advocate for health policy change to advance the specialty of nurse anesthesia.
12. Analyze strategies to improve patient outcomes and quality of care.
13. Analyze health outcomes in a variety of populations.
14. Analyze health outcomes in a variety of clinical settings.
15. Analyze health outcomes in a variety of systems.
16. Disseminate scholarly work.
17. Use information systems/technology to support and improve patient care.
18. Use information systems/technology to support and improve healthcare systems.
19. Analyze business practices encountered in nurse anesthesia delivery settings.

Expected Outcomes

Based on the Nurse Anesthesia Program's Terminal Objectives, the faculty has identified the following expected outcomes:

1. 90% of the average first time test takers pass rate for the last three classes to graduate, as verified by the certification report from the Council on Certification of Nurse Anesthetists, will pass the NCE on the first attempt.
2. One hundred percent (100%) of the graduates will be employed as nurse anesthetists within six months of graduation
3. Ninety-two percent (92%) of the students admitted to the NAP, will complete the NAP within 36 months.
4. At least 80% of students will pass their comprehensive exams on the first attempt.
5. Eighty-four percent (84%) of the respondents to the graduate survey one year following graduation, will evaluate their ability to perform entry level tasks as good or above, in the role of anesthesia providers, anesthesia care managers, and active members within the discipline of nurse anesthesia.
6. Eighty-four percent (84%) of the respondents to the employer survey, one year following graduation, will evaluate the graduate's performance, as good or above, on the role of anesthesia provider, anesthesia case manager, and active member within the discipline of nurse anesthesia.

Communities of Interest Rights and Responsibilities

Patient Rights and Responsibilities

Patient Rights:

1. A patient has the right to respectful care given by competent personnel.
2. A patient has the right, upon request, to be given the name of his attending physician, the names of all other physicians directly participating in his care, and the names and functions of other health care persons having direct contact with the patient.
3. A patient has the right to every consideration of his privacy concerning his own medical care program. Case discussion, consultation, examination, and treatment are considered confidential and shall be conducted discreetly.

4. A patient has the right to have all records pertaining to his medical care treated as confidential except as otherwise provided by law or third party contractual arrangements.
5. A patient has the right to know what facility rules and regulations apply to his conduct as a patient.
6. The patient has the right to expect emergency procedures to be implemented without unnecessary delay.
7. The patient has the right to good quality care and high professional standards that are continually maintained and reviewed.
8. The patient has the right to full information in laymen's terms, concerning his diagnosis, treatment and prognosis, including information about alternative treatments and possible complications. When it is not possible or medically advisable to give such information to the patient, the information shall be given on his behalf to the patient's designee.
9. Except for emergencies, the physician must obtain the necessary informed consent prior to the start of any procedure or treatment, or both.
10. A patient has the right to be advised when a physician is considering the patient as a part of a medical care research program or donor program. Informed consent must be obtained prior to actual participation in such program and the patient or legally responsible party, may, at any time, refuse to continue in any such program to which he has previously given informed consent. An Institutional Review Board (IRB) may waive or alter the informed consent requirement if it reviews and approves a research study in accord with federal regulations for the protection of human research subjects including U.S. Department of Health and Human Services (HHS) regulations under 45 CFR Part 46 and U.S. Food and Drug Administration (FDA) regulations under 21 CFR Parts 50 and 56. For any research study proposed for conduct under an FDA "Exception from Informed Consent Requirements for Emergency Research" or an HHS "Emergency Research Consent Waiver" in which informed consent is waived but community consultation and public disclosure about the research are required, any facility proposing to be engaged in the research study also must verify that the proposed research study has been registered with the North Carolina Medical Care Commission. When the IRB reviewing the research study has authorized the start of the community consultation process required by the federal regulations for emergency research, but before the beginning of that process, notice of the proposed research study by the facility shall be provided to the North Carolina Medical Care Commission. The notice shall include:
 - a. the title of the research study;
 - b. a description of the research study, including a description of the population to be enrolled;
 - c. a description of the planned community consultation process, including currently proposed meeting dates and times;
 - d. an explanation of the way that people choosing not to participate in the research study may opt out; and
 - e. contact information including mailing address and phone number for the IRB and the principal investigator.
 - f. The Medical Care Commission may publish all or part of the above information in the North Carolina Register, and may require the institution proposing to conduct the research study to attend a public meeting convened by a Medical Care Commission member in the community where the proposed research study is to take place to present and discuss the study or the community consultation process proposed.
11. A patient has the right to refuse any drugs, treatment or procedure offered by the facility, to the extent permitted by law, and a physician shall inform the patient of his right to refuse any drugs, treatment or procedures and of the medical consequences of the patient's refusal of any drugs, treatment or procedure.

12. A patient has the right to assistance in obtaining consultation with another physician at the patient's request and expense.
13. A patient has the right to medical and nursing services without discrimination based upon race, color, religion, sex, sexual preference, national origin or source of payment.
14. A patient who does not speak English or is hearing impaired shall have access, when possible, to a qualified medical interpreter (for foreign language or hearing impairment) at no cost, when necessary and possible.
15. The facility shall provide a patient, or patient designee, upon request, access to all information contained in the patient's medical records. A patient's access to medical records may be restricted by the patient's attending physician. If the physician restricts the patient's access to information in the patient's medical record, the physician shall record the reasons on the patient's medical record. Access shall be restricted only for sound medical reason. A patient's designee may have access to the information in the patient's medical records even if the attending physician restricts the patient's access to those records.
16. A patient has the right not to be awakened by hospital staff unless it is medically necessary.
17. The patient has the right to be free from needless duplication of medical and nursing procedures.
18. The patient has the right to medical and nursing treatment that avoids unnecessary physical and mental discomfort.
19. When medically permissible, a patient may be transferred to another facility only after he or his next of kin or other legally responsible representative has received complete information and an explanation concerning the needs for and alternatives to such a transfer. The facility to which the patient is to be transferred must first have accepted the patient for transfer.
20. The patient has the right to examine and receive a detailed explanation of his bill.
21. The patient has a right to full information and counseling on the availability of known financial resources for his health care.
22. A patient has the right to expect that the facility will provide a mechanism whereby he is informed upon discharge of his continuing health care requirements following discharge and the means for meeting them.
23. A patient shall not be denied the right of access to an individual or agency who is authorized to act on his behalf to assert or protect the rights set out in this Section.
24. A patient, or when appropriate, the patient's representative has the right to be informed of his rights at the earliest possible time in the course of his hospitalization.
25. A patient, and when appropriate, the patient's representative has the right to have any concerns, complaints and grievances addressed. Sharing concerns, complaints and grievances will not compromise a patient's care, treatment or services.
 - a. If a patient has a concern, complaint, or grievance; he may contact his nurse, the nursing supervisor, or call the Customer Care Line at 704-355-8363.
 - b. If the patient issues are not satisfactorily addressed while the patient remains hospitalized, the investigation will continue. The intent is to provide the patient a letter outlining the findings within seven days.
 - c. If a patient chooses to identify a concern, complaint, or grievance after discharge; he may call the Customer Care Line at 704-355-8363 or write a letter to the Service Excellence Department at PO Box 32861, Charlotte, NC 28232.
 - d. The patient has the right to directly contact the North Carolina Department of Health and Human Services (State Survey Agency) or the Joint Commission on Accreditation of Healthcare Organizations.
 - i. Division of Facility Services
Acute and Home Care Branch
2712 Mail Service Center
Raleigh, NC 27699-2712
1-800-624-3004 (toll free)
www.facility-services.state.nc.us

- ii. Joint Commission on Accreditation of Healthcare Organizations
1/800-994-6610 (toll free)
Email: complaint@jcaho.org
26. The patient has the right to participate in the development and implementation of his plan of care, including his inpatient treatment/care plan, outpatient treatment/care plan, discharge care plan, and pain management plan.
 27. The patient, or when appropriate, the patient's representative has the right to make informed decisions regarding his or her care. The patient's rights include being informed of his health status, being involved in care planning and treatment, and being able to request or refuse treatment. This right must not be construed as a mechanism to demand the provision of treatment or services deemed medically unnecessary or inappropriate. Making informed decisions includes the development of their plan of care, medical and surgical interventions (e.g. deciding whether to sign a surgical consent), pain management, patient care issues and discharge planning.
 28. The patient has the right to formulate advance directives and to have hospital staff and practitioners who provide care in the hospital comply with these directives.
 29. The patient has the right to have a family member or representative of his or her choice and his own physician notified promptly of his admission to the hospital.
 30. The patient has the right to personal privacy. Privacy includes a right to respect, dignity, and comfort as well as privacy during personal hygiene activities (e.g. toileting, bathing, dressing), during medical/nursing treatments, and when requested as appropriate. It also includes limiting release or disclosure of pt. information such as patient's presence in facility, location in hospital, or personal information.
 31. The patient has the right to receive care in a safe setting. A safe setting includes environmental safety, infection control, security, protection of emotional health and safety, including respect, dignity, and comfort, as well as physical safety.
 32. The patient has the right to be free from all forms of abuse or harassment. This includes abuse, neglect, or harassment from staff, other patients, and visitors.
 33. The patient has the right to be free from restraints of any form that are not medically necessary or are used as a means of coercion, discipline, convenience, or retaliation by staff.
 34. The patient has the right to be free from seclusion and restraints, of any form, imposed as a means of coercion, discipline, convenience, or retaliation by staff.
 35. The patient has the right to designate visitors who shall receive the same visitor's rights as the patient's immediate family members, regardless of whether the visitors are legally related to the patient by blood or marriage.

Patient Responsibilities:

1. Patients, and their families when appropriate, are responsible for providing correct and complete information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to their health.
2. Patients and their families are responsible for reporting unexpected changes in their condition or concerns about their care to the doctor or nurse taking care of them.
3. Patients and their families are responsible for asking questions when they do not understand their care, treatment, and service or what they are expected to do.
4. Patients and their families are responsible for following the care, treatment, and service plans that have been developed by the healthcare team and agreed to by the patient.
5. Patients and their families are responsible for the outcomes if they do not follow the care, treatment, and service plan.
6. Patients and their families are responsible for following the hospital's rules and regulations.
7. Patients and their families are responsible for being considerate of the hospital's staff and property, as well as other patients and their property.

8. Patients and their families are responsible to promptly meet any financial obligation agreed to with the hospital.

Student Rights and Responsibilities

The student is a partner in his or her education to be a Certified Registered Nurse Anesthetist (CRNA). As a student in the Carolinas Medical Center Nurse Anesthesia Program/UNCC (NAP), he or she is entitled to rights and is charged with responsibilities for his or her education. His or her participation is essential as is the willingness to communicate appropriate concerns and needs.

As an adult learner with extensive professional and life experience, the student brings knowledge, dedication, professional expertise and maturity to this educational endeavor. It is within this context that his or her education will be designed and his or her future career as a CRNA will be forged.

Student Rights:

1. The student is free to pursue the appropriate educational goals. The NAP will provide a highly specialized, graduate curriculum steeped in professionalism, progressive didactic instruction and a personally designed mentored clinical experience. The student's performance will be evaluated on established grading criteria outlined in each course syllabi.
2. The student has the right to freedom of expression, inquiry, and assembly subject to reasonable and nondiscriminatory NAP rules and regulations regarding time, place, and manner.
3. The student has the right to inquire about and to propose improvements in policies, regulations, and procedures affecting the welfare of the students through his or her class representative or with the NAP Director.
4. The student has the right to privately confer with faculty concerning a personal grievance. If the outcome is not satisfactory, the student may proceed to the next person on the organizational chain. If the student feels that he or she has been subject to irresponsible treatment, arbitrary decisions, discrimination, or differential treatment that has resulted in dismissal from the NAP, he or she has the right to appeal and due process.
5. The student has the right to review his or her school record and to request nondisclosure of certain information.

Student Responsibilities:

1. The student has the responsibility to read the NAP student handbook and to know, understand, and act within NAP and UNCC regulations, policies and procedures.
2. The student is responsible for the proper completion of all academic and clinical obligations both at the NAP and UNCC.
3. The student is responsible for maintaining appropriate personal physical and emotional health and to notify the NAP if he or she is under the care of a healthcare provider for any serious or chronic illness.
4. The student has the responsibility to respect and guard the confidentiality of all client/patient information.
5. The student is responsible for maintaining professional demeanor and conduct at all times.
6. The student has the responsibility to maintain communication with the NAP regarding current licensure, certifications, address, e-mail address and telephone number. Similarly, as a graduate, he or she has the responsibility to complete post-graduate program evaluation of the NAP and notify the NAP of changes in employment status, completion of additional degrees and advanced training or certification.
7. The student is responsible for fulfilling financial obligations such as payment of tuition and repayment of loans.

Applicant Rights and Responsibilities

Applicant Rights:

1. The applicant has the right to be treated with respect and to expect that his or her application will be reviewed fairly and without bias.
2. The applicant has the right to expect that the NAP will publish and/or disseminate information that is truthful and accurate regarding the application process, admission criteria, curriculum, time commitment, program length, tuition and fees, travel requirements, student achievement, student retention, and the program's accreditation status.
3. The applicant has the right to speak with faculty and/or students currently in the program.
4. The applicant has the right to receive a letter from the Program Administrator about the admission decision.

Applicant Responsibilities:

1. The applicant has the responsibility of ensuring the application and supporting documentation is accurate and complete and received by the University and the Program by the application deadline.
2. The applicant has the responsibility for notifying the program if he or she wishes to withdraw from the application process.
3. The applicant has the responsibility for assessing and exploring financial aid, monetary stipends or monetary clinical work contracts.
4. The applicant has the responsibility for accepting or refusing to accept an offer of a position in the program by the requested deadline.
5. The applicant has the responsibility for accepting or refusing an alternate position in the program.
6. The applicant who has accepted a position in the program has the responsibility for notifying the program if he or she has a change of plans that prevents him or her from enrolling.
7. The applicant has the responsibility to complete all admission requirements prior to enrollment.

Program Faculty Rights and Responsibilities

Program Faculty Rights:

1. Program Faculty has the right to be treated in a respectful manner by students and program administration.
2. Program Faculty has the right to be provided the support they need to conduct the activities of programmatic committee work, clinical and didactic instruction and faculty development.
3. Program Faculty has the right to expect students to be prepared as much as possible for any given lecture, clinical case or assignment.
4. Program Faculty has the right to removal of a student from the classroom or clinical area if the integrity of the class or clinical case or the safety of the patient or others may be compromised.
5. Program Faculty has the right to expect that students will have self-motivation and seek learning opportunities to develop the necessary skills, knowledge, and professional behaviors necessary to be successful in completion of the program.
6. Program Faculty has the right to expect students to be aware of and abide by Program, University, and clinical site Policies and Procedures.
7. Program Faculty has the right to know the objectives for each course for which they are responsible.

8. Program Faculty has the right to see course evaluations and have the opportunity to discuss the evaluations with program administration.
9. Program Faculty has the right to provide feedback regarding the program, curriculum, and students.

Program Faculty responsibilities:

1. Program Faculty has the responsibility to be active in and supportive of program committee assignments.
2. Program Faculty has the responsibility to be available at reasonable times for student questions.
3. Program Faculty has the responsibility to make appropriate preparation for class and other meetings.
4. Program Faculty has the responsibility to base all evaluations, academic or clinical upon professional judgment without consideration to factors such as race, color, religion, gender, age, national origin, handicap, political affiliation, lifestyle etc.
5. Program Faculty has the responsibility to respect the confidentiality of student information contained in the student's record. Faculty may release such information in connection with any intra-program business, including releasing information to clinical preceptors and affiliation faculty without student consent, or as may be required by law.
6. Program Faculty has the responsibility to not exploit professional relationships with students for private advantage and refrain for soliciting student assistance for private purposes in a manner which infringes upon the student's freedom of choice.
7. Program Faculty has the responsibility to give appropriate recognition to contributions made by students.
8. Program Faculty has the responsibility to refrain from any activity which involves risk to the health and safety of the student.
9. Program Faculty has the responsibility to respect the dignity of each student individually and all students collective in areas of educational endeavors
10. Program Faculty has the responsibility to be aware of student's education level and provide appropriate supervision and direction.
11. Program Faculty has the responsibility to provide feedback regarding the program, curriculum, and students and make suggestions for improvement.
12. Program Faculty has the responsibility to evaluate the success of teaching strategies and the effectiveness of evaluation methods.

Conducting and Affiliating Institution Rights and Responsibilities

Conducting and Affiliating Institution Rights:

1. The conducting and affiliated institution has the right to expect that the nurse anesthesia faculty operate the program in accordance with the applicable standards, policies, and procedures of the accrediting agencies, university, hospital, affiliate clinical sites, and the program.
2. The conducting and affiliated institution has the right to expect that accurate and comprehensive records will be maintained.
3. The conducting and affiliated institution has the right to expect that the program will submit annual reports and other submissions to the accrediting agency (COA) as required or requested.
4. The conducting and affiliated institution has the right to expect that the program represents itself with integrity and honesty in all communications.

5. The conducting and affiliated institution has the right to expect that to be kept informed of program changes, accrediting agency evaluations and standards, and trends affecting nurse anesthesia education.
6. The conducting and affiliated institution has the right to expect all students to be aware of and follow departmental and institutional policies related to patient care and all other matters addressed in relevant policies.
7. The conducting and affiliated institution has the right to expect all students to communicate fully with clinical instructors in regards to their abilities to perform procedures and apply knowledge in their clinical studentships.
8. The conducting and affiliated institution has the right to expect that students will arrive prepared for classes, seminars, conferences, clinical studentship, and other educational experiences.

Conducting and Affiliating Institution Responsibilities:

1. The conducting and affiliated institutions have the responsibility to provide clinical and didactic instruction and evaluations.
2. The conducting and affiliated institutions have the responsibility to coordinate and carry out application and admission procedures.
3. The conducting and affiliated institutions have the responsibility to provide classroom and laboratory space as needed for didactic lectures/courses.
4. The conducting and affiliated institutions have the responsibility to provide academic and clinical counseling to the students as needed.
5. The conducting and affiliated institutions have the responsibility to coordinate advertising and public relation efforts.
6. The conducting and affiliated institutions have the responsibility to provide orientation to the clinical area.
7. The conducting and affiliated institutions have the responsibility to provide support for clinical research.
8. The conducting and affiliated institutions have the responsibility to provide resources needed for effective operation of an educational program of high quality.
9. The conducting and affiliated institutions have the responsibility to continually evaluate the program to ensure that it meets student needs and graduates attain desired outcomes.
10. The conducting and affiliated institutions have the responsibility to conduct the program in compliance with all legal and accreditation standards.
11. The conducting and affiliated institutions have the responsibility to be accountable to the public.
12. The conducting and affiliated institutions have the responsibility to uphold the reputation of the nurse anesthesia program and its entities.

Accrediting Agency Rights and Responsibilities

The Accrediting Agency (COA) Rights:

1. The COA has the right to receive a self-study in a timely fashion prior to an accreditation visit.
2. The COA has the right to make an accreditation visit.
3. The COA has the right to receive an annual report on or before the due date.
4. The COA has the right to receive fees and expenses owed by the program in a timely fashion.
5. The COA has the right to receive any requested information in a timely fashion, and have its visitors and staff treated with courtesy and respect.
6. The COA has the right to expect the program to comply with its standards and guidelines as well as its policies and procedures.

7. The COA has the right to expect the program faculty to attend workshops or other educational sessions required by the COA of the program.
8. The COA has the right to make unannounced visits when deemed necessary.

The Accrediting Agency (COA) Responsibilities:

1. The COA has the responsibility to publish any and all applicable standards necessary for accreditation and successful re-accreditation, and to evaluate programs in their ability to meet the published standards.
2. The COA has the responsibility to inform the program of changes in the standards and guidelines and its policies and procedures.
3. The COA has the responsibility to make an honest and professional accreditation visit and to share with the program the results of that visit.
4. The COA has the responsibility to respond to requests and questions from the program in a timely fashion.

Application Procedure

Please send the completed and signed **Carolinas Medical Center Nurse Anesthesia Program/UNCC** application form and a \$60.00 non-refundable check to:

Carolinas Medical Center
Nurse Anesthesia Program/
Attn: Student Affairs
PO Box 32861
Charlotte, NC 28232

UNC Charlotte Graduate School Application

Application to the Graduate School is online only

University Application - UNC Charlotte

First review the instructions at [UNCC Apply Now Portal](#).

You will need to set up an account on the UNC Charlotte site to begin the process. Assemble the following material as directed in the instructions. Then click on the above link to apply to UNC Charlotte. All items must be uploaded into the Apply Now Portal. Do not mail anything to the Graduate School. You will need to complete several parts:

- ✓ Application for Doctorate of Nursing Practice, Nurse Anesthesia concentration.
- ✓ Non-refundable administrative application fee paid by credit card
- ✓ Upload transcripts of any course taken since high school.
- ✓ Request GRE scores from ETS (<http://www.ets.org/>) – UNC Charlotte School code is 5105.
- ✓ Email addresses for individuals providing three references. - (at least two of these must be from RNs preferably your current manager)
- ✓ Statement of purpose - Be specific - Why do you want to be a nurse anesthetist? Limit to one page.

Have the results of your GRE sent directly to UNC Charlotte.

Applications are accepted year round. Interviews are held each October/November and February/March. Class starts each year in May, at the start of the UNC Charlotte summer semester. Interview dates and application deadlines are as follows:

First week of November of the year prior to the intended start date.

Application submission deadline for this session is September 10th.

Last week of February in the year of the intended start date.

Application submission deadline for this session is January 10th.

Attendance

There will be no unexcused absence from class with the exception of vacation and sick time. Frequent tardiness/unexcused absences from the clinical area may result in probation and/or suspension. Occasionally, changes in class times and days may be necessary. Students are responsible for checking their own class schedules.

Class Admissions Calendar/Length of Program

Classes start each May. All courses taken during the first semester will be online. Orientation to the clinical program will be held one week prior to the start of class in the second semester. The course of study is 36 continuous study, full time with graduation occurring in May of the 3rd year in conjunction of the UNC Charlotte calendar.

Clinical Sites

At the present time, the program consists of two required clinical sites (Carolinas Medical Center, Atrium Health Mercy) and 3 enrichment clinical site affiliations (Atrium Health Stanly Regional Medical Center, Atrium Health University and Atrium Health Pineville). Out of city travel is limited to Atrium Health Stanly Regional Medical Center. Selected students will be assigned to this site for a one month duration. Housing is provided at no cost at this site. The program actively seeks affiliations to augment clinical education. The number, character, and time spent at affiliations may change over time. No days off will be granted while on affiliations, except for holidays recognized by the affiliating institution. Specific requests regarding affiliation experience will be handled on an individual basis. Each student will be required to evaluate the clinical site experience. During Clinical Residency IV and Clinical Residency VI, each student will evaluate Carolinas Medical Center. Each student will also evaluate each affiliate clinical site after his/her rotation.

Criminal Background & Rehire Status

Prior to beginning of class, (after the interview and acceptance process, approximately 90 days prior to the start of classes), applicants are asked to complete a Release for Atrium Health to perform a background check as part of the ATRIUM HEALTH/CMC Human Resources requirement for clinical placement. CMC obtains arrest and conviction records on all students assigned to the facilities. An arrest or conviction will not automatically eliminate you from the ability to have a student assignment at one of the facilities.

Students who are former employees of the Facility will have their employee record reviewed. Information from the record will be used to determine eligibility for placement in an internship or field, clinical, or non-clinical experience. If clinical placement is not permitted within the facility, enrollment into the NAP will be denied. (See **APPENDIX III-N**, “Criminal Background Check and Rehire Status Policy”).

During enrollment in the NAP, students are required to report any arrest to the NAP within 24 hours of the event or immediately if the event occurs within 24 hours of the next clinical day. (See **APPENDIX III-N**, “Criminal Background Check and Rehire Status Policy”).

Criteria for Graduation

1. Completion of Terminal Objectives of the NAP.
2. Completion of all clinical and academic requirements for graduation established by the COA, NBCRNA, the NAP and UNC Charlotte.
3. Submission of final Clinical Case Records.

4. Payment of all fines and fees.
5. Return of all library books.

Criteria for Selection

Each applicant for admission must satisfy the general requirements for admission to the Graduate School and the following criteria:

1. Current unrestricted licensure as a Registered Nurse. Current license in North Carolina or a compact state or the state identified by faculty for clinical practice before enrolment.
2. Baccalaureate degree in nursing (BSN) from an accredited nursing program.
3. Satisfactory performance on the Graduate Record Exam (GRE); a combined score of 950 (under the old format) or 293 (under the current format) is preferred (MAT scores are not accepted).
4. A grade point average (GPA) of 3.3 on a 4.0 scale for all undergraduate work after high school.
5. A grade point average of 3.3 on a 4.0 scale for all basic undergraduate science courses taken since high school (Chemistry, Biology, Anatomy and Physiology, Pathophysiology, and Microbiology).
6. Completion of an undergraduate statistics course with a grade of C or better.
7. An essay (statement of purpose), limited to a single page, describing the applicant's experience and objective in undertaking graduate study in the chosen specialty.
8. For the three letters of recommendation required by the Graduate School, all must be from persons familiar with the applicant's professional qualifications, such as clinical manager or supervisor, academic professor, or physician.
9. A minimum of 18 months of current full time critical care experience with adult clients prior to matriculation.
 - a. Acceptable experience includes: Intensive Care Unit, Coronary Care Unit, Trauma Intensive Care Unit, Neuro Intensive Care Unit, Surgical Intensive Care Unit, Cardiovascular Intensive Care Unit.
 - b. Experiences not acceptable include: Flight Team, Emergency Room, Pediatric Intensive Care Unit, Neonatal Intensive Care Unit, Post Anesthesia Care Unit, and Operating Room.
10. Current certification in Basic Cardiac Life Support, Advanced Cardiac Life Support, and Pediatric Advanced Life Support with documentation provided only to Carolinas Medical Center Nurse Anesthesia Program. Documentation of certifications or plan for certification/s are required at time of application (all certifications must be achieved prior to start of Program).
11. Computer literacy is required for coursework.
12. Applicants who meet the admission requirements and are deemed eligible for admission by the UNC Charlotte School of Nursing will be eligible to be invited for an interview with the Clinical Program's Admissions Committee. Interviews are offered on a competitive basis to selected students. Only after an interview, will the applicant be considered for admission to

the clinical program (major). **NOTE:** The application process requires two applications – one to UNC Charlotte and one to Carolinas Medical Center Nurse Anesthesia Program.

13. Applicants may interview one time per admission cycle.

Distance Education

Selected courses from the University and the clinical program may be offered on-line. The program itself is not considered a distance education program.

Drug Awareness

In order to ensure a safe and efficient work environment, we have adopted a drug-free work place policy, which follows existing personnel practices and procedures and includes pre-enrollment, for cause and random drug testing. All drug related incidents, pertaining to student's use of drugs, are initially referred to the Clinical Program Director. Please refer to the Atrium Health's Employee Handbook.

Evaluation/Progress Reports/Grades

It is expected that students will maintain satisfactory progress (B average) in all academic courses and clinical experience. Each student will be individually counseled, once per semester, by the Program Director, or Assistant Program Director concerning their progress in the Program. Additional counseling will occur on an as-need basis. Students will receive grades though UNC Charlotte, each semester. Upon completion of the program each student will receive a Carolinas Medical Center Nurse Anesthesia Program and UNC Charlotte transcript.

Expectations of the Nurse Anesthetist Student

The academic and clinical requirements of CMC Nurse Anesthesia Program/UNCC include the following physical and emotional functions:

1. Full range body motion including handling and lifting patients
2. Manual and finger dexterity
3. Eye-hand coordination
4. Standing for extensive periods of time
5. Corrected vision and hearing to normal range and color vision
6. Some exposure to communicable diseases and/or body fluids, toxic substances, medicinal preparations, inhalation anesthetics, other conditions common to a clinical environment
7. Occasionally lifts and carries items weighing up to 50 pounds.
8. Other requirements:
 - a. Being oriented to time, place and person
 - b. Ability to organize responsibilities, make decisions
 - c. Ability to analyze data or reports
 - d. Ability to deal effectively with others and work under pressure

Any questions or requests a student may have for reasonable accommodations should be directed to the Program Director.

Tuition & Expenses

See the detailed list of program and other expenses by semester entitled *Program Expenses by Semester* on page 19.

Nondiscrimination

CMC Nurse Anesthesia Program/UNCC seeks to promote a fair, humane, and respectful environment for its faculty, staff and students. To that end Carolinas Medical Center Nurse Anesthesia Program/UNCC does not discriminate on the basis of race, color, religion, age, gender, national origin, marital status, disability, sexual orientation, or any other factor protected by law.

Qualified applicants with disabilities, who may need reasonable accommodations, as described in the ADA, should contact the Clinical Program Director. The request will be managed by the UNC Charlotte Office of Disability Services.

Carolinas Medical Center (CMC) is an equal opportunity employer. It is the policy of the Medical Center to conduct all personnel practices in compliance with Title VII of the Civil Rights Act of 1964 and with the Americans with Disabilities Act (ADA).

Health Care Insurance

UNCC requires all students to have health insurance. A student policy may be purchased through the University or Atrium Health.

Holiday Time

The following holidays are observed by the program: New Year's Day, Good Friday, Memorial Day, July 4th, Labor Day, Thanksgiving, and Christmas Day.

Leave of Absence

A student in good standing may request a leave of absence once while enrolled in the Program for a period of up to one year due to personal reasons. Each request will be handled by the Clinical Program Director on an individual basis.

Liability Insurance

Malpractice insurance is provided by the Atrium Health for all students.

Loans/Grants/Scholarships

Financial aid will be administered through UNC Charlotte. Scholarships may be available through UNC Charlotte.

Meals/Housing/Transportation

Meals may be purchased in the CMC cafeteria, Charlotte Institute of Rehabilitation (CIR) or at the Chick-Fil -A franchise in the Medical Center Plaza. Housing is the responsibility of the student. Housing is provided while at out of town affiliate sites at no cost. The affiliate housing is subject to inspection by faculty. A limited number of Atrium Health owned housing options are available. Please contact the NAP for further information.

Nursing License, BCLS, ACLS, and PALS Certification

A current, valid North Carolina or other Compact State Nursing license must be maintained at all times. Students must maintain current BCLS, and ACLS and PALS Certification. The certifications must be maintained according to the American Heart Association recommendations. Maintenance of the above licensure and certification is the student's responsibility. Failure to comply will result in suspension from all academic and clinical activities until the expired nursing license, BCLS, ACLS and PALS certification is remedied.

Physical Examination

Evidence of good physical and mental health is required prior to registration. A medical report form is sent to successful applicants a few months prior to the start of class. As of July 1, 1986, state law requires all students entering programs, in the State of North Carolina to meet the required immunizations. Each student is responsible for and must complete their physical examination with ATRIUM HEALTH Employee Health prior to the start of class as well as reporting any additional required health information to UNC Charlotte. During the physical examination each student will be required to participate in the ATRIUM HEALTH Drug Awareness Program (see section on Drug Awareness.) It is the responsibility of the student to maintain appropriate physical health throughout the duration of the program.

Probation/Termination/Re-entrance

Students may be placed on probation for unsatisfactory administrative, academic and/or clinical performance. Those students not meeting the conditions of probation will be reviewed by the Clinical Program's Evaluation Committee. The Evaluation Committee will determine the final outcome for the student. Any student terminated for unsatisfactory academic grades, administrative behavior, and/or clinical residency failure may not be considered for re-enrollment unless extenuating circumstances are found to be the cause of that failure. The clinical program's Evaluation Committee and the University would make that determination. A student that voluntarily withdraws from the program for other than academic and/or clinical residency failure may be considered for re-enrollment.

Program Design

The Nurse Anesthesia Program is 36 months in duration (exclusive of vacation time), covering a total of 9 semesters of full time study. The first five semesters consist primarily of classroom (didactic) learning. Students will begin their orientation to the clinical learning area during their fourth semester. The first of four semesters of full time clinical experiences (Clinical Residencies) begins in the sixth semester. Didactic instruction will continue throughout the program.

Student Employment

It is the policy of the NAP to discourage extracurricular employment on the basis that the NAP of study is of such concentration that employment may tend to detract from the necessary time and effort required to complete the NAP in a satisfactory manner. During the entire education program, the student is not permitted to be employed as a CRNA by title or function. Any student not in full compliance with this mandate is subject to immediate dismissal from the NAP. The following guidelines shall be in place regarding students who elect to perform outside work during this program:

1. Students are permitted to work as an RN on their off-duty time.
2. Due to the difficulty of the NAP, it is strongly recommended that students plan to work not more than 16 hours per week.
3. **Students are not permitted to work if on probation for the duration of the probationary period.**

Transfer

Transfer between programs of nurse anesthesia is discouraged. Applicants may transfer up to 6 semester hours of core course graduate credit; any additional transfer credits will be reviewed on an individual basis. Any transfer credits must be approved by UNC Charlotte. No credit for anesthesia courses taken outside of this program will be granted.

Tuition/Fees/Refunds

Clinical and other fees are established by the CMC Nurse Anesthesia Program. Tuition and other university related fees are established by UNC Charlotte. Refer to the website for current tuition and clinical fees.

Clinical Fee Refunds: A student who officially withdraws from the CMC Nurse Anesthesia Program/UNCC will receive a refund as follows:

1. During the first 2 weeks of the semester a 90%
2. During the 3rd and 4th weeks of the semester, a 40%
3. After the first 4 weeks, tuition is not refundable.

Vacations and Sick Leave

1. Normal breaks consistent with the UNC Charlotte academic calendar can be expected while students are in their first five semesters.
2. Beginning with the Spring II semester students will follow the clinical schedule.

3. During the four clinical residencies one month of vacation will be assigned; two weeks around Christmas and one week at the beginning and one week at the end of the summer semester.
4. No terminal vacations will be granted.
5. Educational days for AANA, NCANA, or District Meetings may be granted at the discretion of the Program Director.

Academic and Clinical Schedule for BSN to DNP Degree

Year One (38)		
Summer I (9)	Fall 1 (13)	Spring 1 (16)
<ul style="list-style-type: none"> • NUDN 8147 Applied Biostatistics (3) • NUDN 8270 Technology for Communication and Transforming HealthCare (3) • NUDN 8202 Community Epidemiology (3) 	<ul style="list-style-type: none"> • NUAN 8156 Applied Physics and Chemistry (3) • NURS 6273 Advanced Human Physiology (3) • NUAN 8155 Advanced Pharmacology of Anesthetic Agents (4) • NUAN 8161 Principles of Nurse Anesthesia I (3) 	<ul style="list-style-type: none"> • NURS 6230 Advanced Health Assessment (3) • NURS 6430 Advanced Health Assessment Practicum (1) • GRAD 8002 Responsible Conduct of Research (2) • NUAN 8157 Advanced Pathophysiology in Nurse Anesthesia I (3) • NUAN 8154 Advanced Pharmacology of Non-Anesthetic Agents (4) • NUAN 8162 Principles of Nurse Anesthesia II (3)
Year Two (28)		
Summer 2 (7)	Fall 2 (12)	Spring 2 (9)
<ul style="list-style-type: none"> • NUAN 8158 Advanced Pathophysiology in Nurse Anesthesia II (3) • *NUAN 8484 Clinical Residency I (1) • NUAN 8163 Principles of Nurse Anesthesia III (3) 	<ul style="list-style-type: none"> • NUDN 8145 Leadership and Project Planning (3) • NUDN 8140 Foundations and Applications of Evidence Based Practice (3) • NUAN 8164 Principles of Nurse Anesthesia IV (3) • *NAUN 8485 Clinical Residency II (2) • NUDN 8641 Project Development I (1) 	<ul style="list-style-type: none"> • *NUAN 8486 Clinical Residency III (4) • NUDN 8230 Economic and Financial Aspects of the Healthcare System (3) • NUDN 8642 Project Development II (2)
Year Three (23)		
Summer 3 (5)	Fall 3 (9)	Spring 3 (9)
<ul style="list-style-type: none"> • *NUAN 8487 Clinical Residency IV (4) • NUDN 8643 Project Development III (1) 	<ul style="list-style-type: none"> • NUDN 8220 Healthcare Policy and Ethics (3) • *NUAN 8488 Clinical Residency V (4) • NUDN 8644 Project Development IV (2) 	<ul style="list-style-type: none"> • NUAN 8172 Nurse Anesthesia Review (2) • NUAN 8171 Professional Aspects (3) • *NUAN 8489 Clinical Residency VI (4)

TOTAL NUDN/NURS/GRAD CREDITS (EXCLUDES PROJECT)	27
TOTAL CLINICAL MAJOR CREDITS	56
<u>TOTAL PROJECT CREDITS</u>	<u>6</u>
TOTAL ALL CREDIT HOURS	89

*Clinical course ratio of credit hours to clinical hours =1:8

Student Tuition and Clinical Program Fee by Residency

BSN to DNP In State All Years

Semester	Credit Hours	Estimated UNCC Tuition and Fees	Actual CMC Clinical Fee	Clinical Program Other Expenses
Semester I Summer I	9	\$3861	\$ 2000.00 –\$ 1000 reservation fee \$1000.00 Due	Personal Purchases *Personal computer Variable
Semester II Fall I	13	\$6521	\$4,000	Required Expenses (To be paid upon admission) *Books (CRNA courses) \$731.00 <i>Purchased on your own</i> CHS Simulation Fee \$750.00 *AANA Associate membership fee \$200.00 (online) *Equipment kit \$55.00 *Activity fee \$50.00 *ID Badge fee \$10.00 *ACLS, BCLS and PALS re-certification (if needed course fee) \$250.00 *Ear Mold \$75.00 *Portfolio Binder \$25.00 *Copying \$350.00 *White lab coat \$45.00 *Scrubs \$175.00 *Case Record & Evaluation \$8.00 per month - tracking throughout program (payment directly to MedaTrax) Tech Fee CMC One Time fee \$125.00 Optional Expenses +NCANA Fall Meeting (optional, cost varies in accordance with lodging and transpiration fees)
Semester III Spring I	16	\$6521	\$4000	Required Expenses *Books (CRNA courses) \$1,083.00 <i>Purchased on your own</i> Required Expenses *Review Course Self-Study Modules \$350.00 (payment directly to vendor)
Semester IV Summer II	7	\$3159	\$2,000	Required Expenses None
Semester V Fall II	12	\$6832	\$4,000	Required Expenses None Optional Expenses +NCANA Fall Meeting (optional, cost varies in accordance with lodging and transpiration fees) +AANA Annual Congress (optional, cost varies in accordance with lodging and transpiration fees)
Semester VI Spring II	9	\$6,832	\$4,000	Required Expenses Self-Evaluation Exam (SEE) \$250.00
Semester VII Summer III	5	\$2378	\$2,000	Required Expenses None

Semester VIII Fall III	9	\$7143	\$4,000	Optional Expenses +*NCANA Fall Meeting (optional, cost varies in accordance with lodging and transpiration fees) +AANA Annual Congress (optional, cost varies in accordance with lodging and transpiration fees)
Semester IX Spring III	9	\$7,143	\$4,000	Required Expenses *Self-Evaluation Exam (SEE) \$250.00 Graduation Fees *CMC Graduation Fee \$40.00 *Certification Exam \$995.00 Optional Expenses *2 nd Review Course \$750.00
TOTALS	89	\$50,390.00 +625 fee	30,000	Clinical Program Other Expenses VARIABLE <i>NO TOTAL PROVIDED</i>
Estimated Total Program Cost for Tuition and Clinical Fees <i>All estimates are based upon UNCC 2019 tuition and fees and are subject to change.</i>			\$81,015	

Student Tuition and Clinical Program Fee by Residency
BSN to DNP Out of State First Year In State 2nd & 3rd Year

Semester	Credit Hours	Estimated UNCC Tuition and Fees	Actual CMC Clinical Fee	Clinical Program Other Expenses
Semester I Summer I	9	\$7839	\$ 2000.00 –\$ 1000 reservation fee \$1000.00 Due	Personal Purchases *Personal computer Variable
Semester II Fall I	13	\$13,574	\$4,000	Required Expenses (To be paid upon admission) *Books (CRNA courses) \$731.00 <i>Purchased on your own</i> CHS Simulation Fee \$750.00 *AANA Associate membership fee \$200.00 (online) *Equipment kit \$55.00 *Activity fee \$50.00 *ID Badge fee \$10.00 *ACLS, BCLS and PALS re-certification (if needed course fee) \$250.00 *Ear Mold \$75.00 *Portfolio Binder \$25.00 *Copying \$350.00 *White lab coat \$45.00 *Scrubs \$175.00 *Case Record & Evaluation \$8.00 per month - tracking throughout program (payment directly to MedaTrax) Tech Fee CMC One Time fee \$125.00 Optional Expenses +NCANA Fall Meeting (optional, cost varies in accordance with lodging and transpiration fees)
Semester III Spring I	16	\$13,574	\$4000	Required Expenses *Books (CRNA courses) \$1,083.00 <i>Purchased on your own</i> Required Expenses *Review Course Self-Study Modules \$350.00 (payment directly to vendor)
Semester IV Summer II	7	\$3159	\$2,000	Required Expenses None
Semester V Fall II	12	\$6832	\$4,000	Required Expenses None Optional Expenses +NCANA Fall Meeting (optional, cost varies in accordance with lodging and transpiration fees) +AANA Annual Congress (optional, cost varies in accordance with lodging and transpiration fees)
Semester VI Spring II	9	\$6,832	\$4,000	Required Expenses Self-Evaluation Exam (SEE) \$250.00
Semester VII Summer III	5	\$2,378	\$2,000	Required Expenses None

Semester VIII Fall III	9	\$7143	\$4,000	Optional Expenses +*NCANA Fall Meeting (optional, cost varies in accordance with lodging and transpiration fees) +AANA Annual Congress (optional, cost varies in accordance with lodging and transpiration fees)
Semester IX Spring III	9	\$7,143	\$4,000	Required Expenses *Self-Evaluation Exam (SEE) \$250.00 Graduation Fees *CMC Graduation Fee \$40.00 *Certification Exam \$995.00 Optional Expenses *2 nd Review Course \$750.00
TOTALS	89	\$68,471 +625 fee	30,000	Clinical Program Other Expenses VARIABLE NO TOTAL PROVIDED
Estimated Total Program Cost for Tuition and Clinical Fees All estimates are based upon UNCC 2019 tuition and fees and are subject to change.				\$99,096

Student Tuition and Clinical Program Fee by Residency

BSN to DNP Out of State All Years

Semester	Credit Hours	Estimated UNCC Tuition and Fees	Actual CMC Clinical Fee	Clinical Program Other Expenses
Semester I Summer I	9	\$7839	\$ 2000.00 –\$ 1000 reservation fee \$1000.00 Due	Personal Purchases *Personal computer Variable
Semester II Fall I	13	\$13,574	\$4,000	Required Expenses (To be paid upon admission) *Books (CRNA courses) \$731.00 <i>Purchased on your own</i> CHS Simulation Fee \$750.00 *AANA Associate membership fee \$200.00 (online) *Equipment kit \$55.00 *Activity fee \$50.00 *ID Badge fee \$10.00 *ACLS, BCLS and PALS re-certification (if needed course fee) \$250.00 *Ear Mold \$75.00 *Portfolio Binder \$25.00 *Copying \$350.00 *White lab coat \$45.00 *Scrubs \$175.00 *Case Record & Evaluation \$8.00 per month - tracking throughout program (payment directly to MedaTrax) Tech Fee CMC One Time fee \$125.00 Optional Expenses +NCANA Fall Meeting (optional, cost varies in accordance with lodging and transpiration fees)
Semester III Spring I	16	\$13,574	\$4000	Required Expenses *Books (CRNA courses) \$1,083.00 <i>Purchased on your own</i> Required Expenses *Review Course Self-Study Modules \$350.00 (payment directly to vendor)
Semester IV Summer II	7	\$6,401	\$2,000	Required Expenses None
Semester V Fall II	12	\$14,220	\$4,000	Required Expenses None Optional Expenses +NCANA Fall Meeting (optional, cost varies in accordance with lodging and transpiration fees) +AANA Annual Congress (optional, cost varies in accordance with lodging and transpiration fees)
Semester VI Spring II	9	\$14,220	\$4,000	Required Expenses Self-Evaluation Exam (SEE) \$250.00

Semester VII Summer III	5	\$4,799	\$2,000	Required Expenses None
Semester VIII Fall III	9	\$14,867	\$4,000	Optional Expenses +*NCANA Fall Meeting (optional, cost varies in accordance with lodging and transpiration fees) +AANA Annual Congress (optional, cost varies in accordance with lodging and transpiration fees)
Semester IX Spring III	9	\$14,867	\$4,000	Required Expenses *Self-Evaluation Exam (SEE) \$250.00 Graduation Fees *CMC Graduation Fee \$40.00 *Certification Exam \$995.00 Optional Expenses *2 nd Review Course \$750.00
TOTALS	89	\$104,361 +625 fee	30,000	Clinical Program Other Expenses VARIABLE <i>NO TOTAL PROVIDED</i>
Estimated Total Program Cost for Tuition and Clinical Fees <i>All estimates are based upon UNCC 2019 tuition and fees and are subject to change.</i>				\$134,986