

Doctor of Nursing Anesthesia Practice

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Board of Governors, State University System of Florida

Request to Offer a New Degree Program

(Please do not revise this proposal format without prior approval from Board staff)

Florida State University
University Submitting Proposal

Summer 2021
Proposed Implementation Term

College of Applied Studies
Name of College(s) or School(s)

Nurse Anesthesia
Name of Department(s)/ Division(s)

Nurse Anesthesiology
Academic Specialty or Field

Doctor of Nurse Anesthesia Practice
Complete Name of Degree

51.3804
Proposed CIP Code

The submission of this proposal constitutes a commitment by the university that, if the proposal is approved, the necessary financial resources and the criteria for establishing new programs have been met prior to the initiation of the program.

Febman 12, 2020
Date Approved by the University Board of Trustees

John P. Smith
President

2/11/2020
Date

[Signature]
Signature of Chair, Board of Trustees

2/12/2020
Date

Sally McRorie
Vice President for Academic Affairs

2/11/20
Date

Provide headcount (HC) and full-time equivalent (FTE) student estimates of majors for Years 1 through 5. HC and FTE estimates should be identical to those in Table 1 in Appendix A. Indicate the program costs for the first and the fifth years of implementation as shown in the appropriate columns in Table 2 in Appendix A. Calculate an Educational and General (E&G) cost per FTE for Years 1 and 5 (Total E&G divided by FTE).

Implementation Timeframe	Projected Enrollment (From Table 1)		Projected Program Costs (From Table 2)				
	HC	FTE	E&G Cost per FTE	E&G Funds	Contract & Grants Funds	Auxiliary/ Philanthropy Funds	Total Cost
Year 1	24	24	\$48,500	\$1,164,000			\$1,164,000
Year 2	48	48					
Year 3	72	72					
Year 4	72	72					
Year 5	72	72	\$27,109	\$1,735,000			\$1,735,000

Note: This outline and the questions pertaining to each section must be reproduced within the body of the proposal to ensure that all sections have been satisfactorily addressed. Tables 1 through 4 are to be included as Appendix A and not reproduced within the body of the proposals because this often causes errors in the automatic calculations.

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Signature of Chair, Board of Trustees

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Vice President for Academic Affairs

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	HC	FTE
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Year 4	72	72
Year 5	72	72

Projected Program Costs (From Table 2)				
E&G Cost per FTE	E&G Funds	Contract & Grants Funds	Auxiliary/ Philanthropy Funds	Total Cost
\$48,500	\$1,164,000			\$1,164,000
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INTRODUCTION

I. Program Description and Relationship to System-Level Goals

- A. Briefly describe within a few paragraphs the degree program under consideration, including (a) level; (b) emphases, including majors, concentrations, tracks, or specializations; (c) total number of credit hours; and (d) overall purpose, including examples of employment or education opportunities that may be available to program graduates.**

(a) Level - We are requesting to offer a new Doctor of Nurse Anesthesia Practice (DNAP) degree program in the College of Applied Studies at Florida State University (FSU). We currently offer a Master of Science in Nurse Anesthesia (MSNA) in the College of Applied Studies, and this new DNAP program will expand upon and replace our current MSNA program at FSU.

Our MS program in Nurse Anesthesia is accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA). COA has mandated that, beginning January 1, 2022, all students entering a nurse anesthesia program, and subsequently seeking to become CRNAs, must enroll in a COA-accredited doctoral program. Thus, we are seeking to transition our Master's Program in Nurse Anesthesia to a Doctorate in Nurse Anesthesia Practice in order to remain in compliance with our program's specialized accreditation standards.

(b) Emphases - The DNAP program will continue to prepare students (who already hold a bachelor's degree and are licensed to practice as registered nurses) for more specialized roles within the discipline of anesthesiology and provide them the skills and experiences necessary to become Certified Registered Nurse Anesthetists (CRNAs). Additionally, the DNAP will expand upon the MSNA program to emphasize not only the science of anesthesia and its clinical applications, but also provide a strong foundation in the application and development of research to inform best clinical practices.

(c) Credit Hours - The DNAP program is a full-time graduate program, consisting of 99 credit hours that can be completed in 9 semesters. This 3-year program consists of all didactic, clinical, and scholarly/research coursework required for students to become eligible to sit for the CRNA exam upon graduation and is in compliance with the academic curricular standards set forth by our accrediting agency - the Council on Accreditation of Nurse Anesthesia Educational Programs (COA).

(d) Overall Purpose - The overall purpose of the DNAP program is to increase the rigor and level of nurse anesthesia training that students receive at FSU, which will, in turn, provide students more focused and specialized courses to elevate their clinical abilities in nurse anesthesia practice. The DNAP degree program will also allow FSU to 1) continue training future nurse anesthetists through the Nurse Anesthesia graduate degree program; 2) grow the nurse anesthesia program to produce more CRNAs and meet workforce needs; and 3) be in compliance with accreditation standards mandating the MSNA program to become a doctorate program by January 2022. The DNAP curriculum is designed to equip the nurse anesthesiology graduate with tools for engaging in the most effective and research-based anesthesia practices, excellent ethical judgment, quick clinical decision-making, and extensive critical thinking needed for nurse anesthesia clinical practice. Additionally, the COA-accredited DNAP program will continue to train students to be eligible to sit for the CRNA exam upon graduation, which is the healthcare credential required by the National Board on Certification and Recertification of Nurse Anesthetists (NBCRNA) for entering clinical practice.

Students will graduate from the DNAP program with the ability to provide anesthesia care and engage in effective nurse anesthesiology practice across a wide variety of settings where anesthesia services are offered. Some examples of CRNA clinical settings include hospitals, obstetrical delivery centers, critical access hospitals, acute care facilities, pain management centers, ambulatory surgical centers, and dentist, podiatrist, ophthalmologist, or plastic surgeon's offices, among many others. In addition to the practical applications built into the DNAP program, students will be trained to interpret, apply, and integrate research so they can contribute knowledge to their own fields of health and anesthesiology, and engage in evidence-based practice and care.

COA-accredited Nurse Anesthesia graduate programs are highly sought after and lead to very lucrative careers for students once they graduate and become CRNAs. According to our MSNA admissions statistics, we have seen increased applications in the past 4 years. In 2016, we had 62 qualified applicants for our MSNA program, in 2017 that number increased to 132, in 2018 it jumped to 153, and in 2019 we had a record 192 qualified applicants for our MSNA program (who have competed for 24 available spots in the program). Additionally, our MSNA program boasts a 100% employment rate of our graduates, and we expect the DNAP to continue that same success because the career option of becoming a CRNA continues to be very desirable in the nursing field. According to the Bureau of Labor Statistics (2018), the mean annual wage of CRNAs is \$164,030, which is much higher than Registered Nurse (RN) salaries at \$68,450 per year. Therefore, the DNAP program is an excellent option for nurses who are RNs and interested in expanding upon their nursing credential and pursuing anesthesia care.

Source: Bureau of Labor Statistics (2018): <https://www.bls.gov/oes/current/oes291151.htm#ind>

B. Please provide the date when the pre-proposal was presented to CAVP (Council of Academic Vice Presidents) Academic Program Coordination review group. Identify any concerns that the CAVP review group raised with the pre-proposed program and provide a brief narrative explaining how each of these concerns has been or is being addressed.

The pre-proposal was discussed by the CAVP at a state-wide meeting on Friday, April 6, 2018 and no concerns were expressed.

C. If this is a doctoral level program please include the external consultant's report at the end of the proposal as Appendix D. Please provide a few highlights from the report and describe ways in which the report affected the approval process at the university.

Dr. Kay Sanders, Professor of Professional Practice at Texas Christian University, former Director of the Texas Christian University Nurse Anesthesia Program (for 30+ years), former Director of the Council on Accreditation of Nurse Anesthetists (COA; 2011-2017) served as the external consultant for this proposal. Dr. Sanders met with the faculty developing this proposal several times and conducted a site visit at the Panama City campus of FSU. Her final report is included as Appendix D.

Dr. Sanders reported that she believed that this DNAP program would complement and not compete with other Nurse Anesthesia programs in the SUS and she applauded the strong working relationship amongst the Nurse Anesthesia directors across Florida. She noted that some of the strengths of the MSNA program that were important for looking forward to the DNAP were its leadership team and enthusiasm of the faculty, 100% employment rate of graduates, the variety of clinical sites and the large number of clinical cases (more than double the amount required by accreditation) the MSNA program offers to students, and the projected number of faculty was sufficient to support the DNAP program.

Dr. Sanders also provided multiple points of feedback that were carefully considered for the proposal:

- The reviewer recommended the program not only meet but exceed the COA required standards in the areas of pharmacology, anatomy, and physiology. The program agrees with this, and has increased the number of credit hours in anatomy and physiology from the COA-required 8 credit hours to 11 credit hours. In pharmacology, the credit hours were increased from the COA-required 6 credit hours to 8 credit hours. We strongly agree that the additional 5 credit hours specific to the basic sciences will enhance student learning outcomes.
- The reviewer recommended that the scholarly project types steer clear of implementation projects at clinical sites and focus on other scholarly engagement such as care-based projects. This recommendation has been carefully considered, and the NAP agrees this could be possible, but the project types should not be limited by the proposal; rather, they should be mutually agreed-upon between the advisor and advisee within the context of the course and the relevant clinical site.
- The reviewer recommended the program consider GRE percentile scores and analytical writing scores rather than numerical scores when admitting students. The program agrees and the degree proposal reflects the recommendations.

- The reviewer recommended that holding the Critical Care Registered Nurse (CCRN) certification, which is a credential granted by the American Association of Critical Care Nurses, be an admission requirement for the doctoral program. The CCRN title is a brand name that cannot guarantee that a certificant is a registered nurse, as that issue is between the state and the participant. Having been certified at one time does not guarantee that the participant is still active in critical care nursing, it implies they met that qualification during the initial certification or renewal period. The program agrees this can be a great discriminator, and is currently a recommendation not a requirement for the MSNA. The program currently tracks CCRN data for each cohort. In the last 6 admitted cohorts, (1 transfer cohort in 2016, and 5 FSU admitted cohorts), the percentage of graduates who had their CCRN ranged from 40%-67% with an average of 51%. When looking at performance data, there has been no trended difference in the success of a student with or without the CCRN. The program is concerned this may narrow the capture of potentially well-qualified and more seasoned applicants who may have not taken time from their job to go through the testing, or perhaps had life issues or military service which precluded testing, or simply could not afford it. The test costs \$344 for non-AACN members and is an additional \$200 per renewal cycle (<https://www.aacn.org/certification/get-certified/ccrn-adult>). We believe this is a great discriminator but disagree that it is compelling enough to make this a requirement at this time.
- The reviewer made recommendations to set a minimum technological requirement for students. This was not included in the proposal as the technological requirements may vary vastly from year to year and will be based on current advances and what is available to and in use by the university.
- The reviewer made further recommendations regarding personnel and classroom upgrades as well. While the program agrees with and supports the recommendations, we believe these fiscally-driven items are beyond the scope of this degree proposal.

D. Describe how the proposed program is consistent with the current State University System (SUS) Strategic Planning Goals. Identify which specific goals the program will directly support and which goals the program will indirectly support (see link to the SUS Strategic Plan on [the resource page for new program proposal](#)).

The proposed DNAP program will provide students an opportunity to earn a doctorate degree in nurse anesthesia and enter the healthcare workforce upon graduation. The DNAP program is consistent with several strategic planning goals of the State University System (SUS), and it is also a program that is considered an area of Strategic Emphasis by the SUS. In the current strategic plan, the SUS has identified Healthcare Professions as an area of critical workforce need due to statewide projections that have estimated critical shortages in healthcare industries across Florida.

Additionally, the DNAP program is consistent with the following SUS 2025 Strategic Planning Goals: 1) Strengthen Quality and Reputation of the Universities, 2) Increase Number of Degrees Awarded in STEM/Health and Other Programs of Strategic Emphasis, 3) Strengthen Quality, Reputation of Scholarship, Research, and Innovation, 4) Strengthen Quality and Recognition of Commitment to Community and Business Engagement, and 5) Increase Community and Business Workforce.

SUS GOAL: Strengthen Quality and Reputation of the Universities - The DNAP program will enhance and replace the current MSNA program as FSU, which in turn will strengthen the quality of the nurse anesthesia program and the overall reputation of the SUS for graduate Nurse Anesthesia training. The added requirements for the DNAP program will increase the quality of students graduating and becoming CRNAs and help establish the Florida SUS as a leading university system for Nurse Anesthesia education and training, thus enhancing the national preeminence of FSU and the SUS System.

SUS GOAL: Increase the Number of Degrees Awarded within STEM/Health and Other Programs of Strategic Emphasis - The DNAP program fits in the Nurse Anesthesia CIP Code 51.3804, and this program area is part of the Healthcare and Related Professions CIP code (51), which has been identified as an area of Strategic Emphasis and Critical Workforce Need. Thus, the DNAP program will help increase the number of health-related degrees awarded in Florida.

We have seen large increases in the number of qualified applicants in recent years for our MSNA program (over 100+ applications for 24 available spots), and we anticipate the DNAP program to have the same amount of applications (or more) in the future. Because of our recent, strong application pools, we have successfully filled our MSNA program to capacity with the maximum number of students allowed to enroll each year (mandated by our accreditation standards, that maximum is 24 students per cohort). We expect to maintain the same cohort sizes in the DNAP program and we plan to teach multiple cohorts at the same time (i.e., 1st, 2nd, and 3rd year students with a new cohort entry each summer). By keeping the same cohort sizes as the MSNA program, we expect to graduate 24 students per year from the DNAP program (while also bringing in new cohorts of 24 students as each cohort progresses through the program). This will, in turn, will help the state with meeting the critical workforce need of qualified healthcare professionals. Additionally, as we add new faculty in the future to the DNAP we anticipate growing our program to larger cohort sizes and graduating even more students down the road, which would further increase degrees awarded in the STEM/Health area of strategic emphasis for the state of Florida.

SUS GOAL: Strengthen Quality, Reputation of Scholarship, Research, and Innovation - The DNAP program will strengthen the quality and reputation of scholarship for the Nurse Anesthesia program by increasing the focus of faculty and students in the program on scholarly and research-related activities. The DNAP program will consist of doctoral-level faculty with research and scholarship experience, who will lead graduate student research activities, mentor undergraduate research interests, and serve as the primary scholarly experts in Nurse Anesthesia practice in the local community. The DNAP program will be the first doctoral degree program housed in the College of Applied Studies at FSU Panama City, and this will improve FSU's outreach to the Panhandle as a leading research institution, as well as the scholarly reputation of the SUS for Panhandle region.

SUS GOAL: Strengthen Quality and Recognition of Commitment to Community and Business Engagement - Maintaining the Nurse Anesthesia program and establishing the DNAP program is a promise to the community to which FSU and the SUS are committed to educate and train the most qualified nurse anesthesia healthcare professionals to care for the citizens of Florida and work in businesses and hospitals that provide anesthesia care. Additionally, the FSU DNAP program will allow doctoral students to engage in a variety of anesthesia-related clinical experiences across a variety of hospital sites that span most geographical regions of Florida (including rural hospitals) as well as some small communities in Alabama. Many nurse anesthesia graduate students enroll to become a CRNA to then go back to their hometown communities to make differences with patients by assuring high- quality care for their anesthesia needs.

Additionally, the faculty in the DNAP engage in service to their communities, service to their profession, or by engaging in clinical work as a CRNA in healthcare settings. That same value of service will be instilled in the doctoral students in the program, so that partnerships with community hospitals and businesses will continue to foster the importance of mutually beneficial and sustainable community and business partnerships as part of the institutional culture.

SUS GOAL: Increase Community and Business Workforce - Currently, our MSNA program boasts a 100% post-graduation employment rate since the first cohort graduated in Fall 2016. We expect the DNAP program to be equally successful, given the high demand for CRNAs in the workforce nationwide and the high quality of FSU graduates. Additionally, students in the DNAP will have clinical rotations at multiple hospital sites. These clinical experiences allow them to get credentialed for those medical facilities and many of those facilities provide job offers to our students before they graduate; thus, we strongly believe our employment rates will stay at 100% post-graduation for our students.

- E. If the program is to be included in a category within the Programs of Strategic Emphasis as described in the SUS Strategic Plan, please indicate the category and the justification for inclusion.**

The Programs of Strategic Emphasis Categories:

1. Critical Workforce:
 - Education

- Health:
 - Gap Analysis
2. Economic Development:
 - Global Competitiveness
 3. Science, Technology, Engineering, and Math (STEM)

Please see the Programs of Strategic Emphasis (PSE) methodology for additional explanations on program inclusion criteria at [the resource page for new program proposal](#).

The DNAP program will be in the Nurse Anesthesia CIP Code 51.3804, which is part of the Health Professions and Related Clinical Sciences area (all areas in CIP code 51). In the current SUS Strategic Plan, all healthcare professions in the 51 CIP Code are considered areas of Strategic Emphasis. The DNAP program will prepare students to become practicing nurse anesthesia professionals.

F. Identify any established or planned educational sites at which the program is expected to be offered and indicate whether it will be offered only at sites other than the main campus.

The DNAP program will be housed at the Panama City campus of FSU. The curriculum has been designed to include didactic coursework at the beginning of the program with added clinical and research experiences as the student progresses in the program. To assist with transitions of graduate students moving to Panama City and to meet the needs of didactic instruction, the first semester will include distance-based courses that will be delivered by faculty from the Panama City Campus to students via technology enhancement.

During the rest of the semesters, didactic course instruction will be primarily face-to-face at the FSU Panama City Campus and clinical practicum courses will include instruction and experiences at clinical sites off-campus. When students rotate to their clinical sites and possibly move out of the area, some coursework will be technology-enhanced, with course delivery provided face-to-face on campus by instructors with a synchronous, interactive tech-enhanced class meeting for any distance-based students. Offering some courses through a distance modality will help students cut down on travel time and utilize that time for their scholarly inquiry projects and practica at their clinical sites. The program, as it is offered now, has a COA-approved distance education package, and per COA standards, a program is considered face-to-face if online course work does not exceed 50% of the hours in the degree program. Our projected DNAP is 99 credit hours with 22 credit hours projected to include a distance modality or some technology enhancement (23%).

INSTITUTIONAL AND STATE LEVEL ACCOUNTABILITY

II. Need and Demand

- A. Need: Describe national, state, and/or local data that support the need for more people to be prepared in this program at this level. Reference national, state, and/or local plans or reports that support the need for this program and requests for the proposed program which have emanated from a perceived need by agencies or industries in your service area. Cite any specific need for research and service that the program would fulfill.**

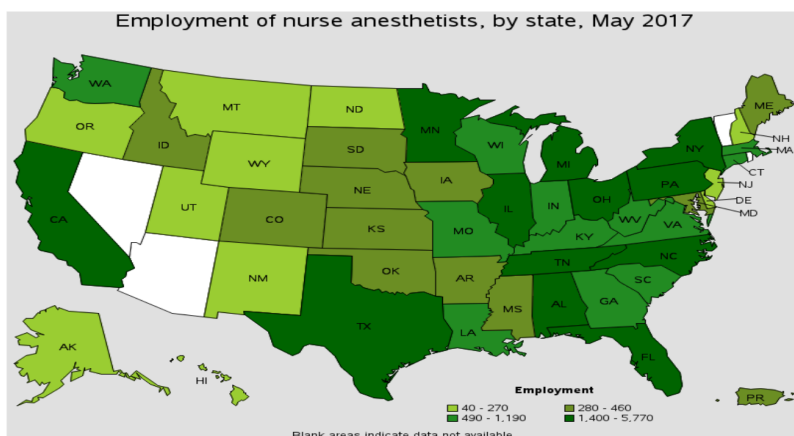
There is a strong need for CRNAs in Florida (and across the country) and the workforce demand for CRNAs is abundant. Both anesthesiologists and CRNAs provide high-quality, anesthesia-related care to the US population (Hogan et al., 2010). As healthcare has become more widely available to consumers through insurance programs like the Affordable Care Act (2010), CRNAs are a less costly option for high-quality anesthesia care (as demonstrated in the table below) and this workforce has provided economic relief for health care facilities across the nation who are trying to keep costs down while meeting the increasing demand for services.

Baseline Values of Key Variables in the Anesthesia Graduate Education Model

Feature	CRNA	Anesthesiologist	Source
Program length	28 months	36 months	
Student/faculty ratio	7.4	2.2	AANA (2009); Franzini & Berry (1999)
Faculty salary	\$158,587	\$366,649	AANA (2008a); MGMA (2005)
Student opportunity cost at entry	\$52,455	\$120,000	Merritt Hawkins & Associates (2008); RN Magazine's 2009 Nurse Earnings Survey (Modern Medicine, 2009)
Attrition rate	7.3%/year	3%/year	AANA (2008a); Schubert (2007)

Source: Hogan et al. (2010)

Nationwide: According to the Bureau of Labor Statistics (2018), 42,620 individuals were employed nationwide as a Nurse Anesthetist with an average national yearly salary of \$169,450. Additionally, the US Bureau of Labor Statistics predicted that the CRNA workforce would grow by 19% in 2024, translating to an increase of 7,400 jobs (Code, 2016). The Nurse Anesthetist career is also a highly rated one. According to the US News and World Report (2019), CRNAs have a 0.4% unemployment rate and the Nurse Anesthetist occupation was ranked nationwide as: #3 in Best Healthcare Jobs, #5 in 100 Best Jobs, #5 in Best STEM Jobs, and #11 in Best Paying Jobs.



Source: Bureau of Labor Statistics (2018)

Rankings

Nurse Anesthetists rank #3 in [Best Health Care Jobs](#). Jobs are ranked according to their ability to offer an elusive mix of factors. [Read more about how we rank the best jobs.](#)

- #3 in Best Health Care Jobs
- #5 in 100 Best Jobs
- #5 in Best STEM Jobs
- #11 in Best Paying Jobs

SCORECARD		7.9
Salary		10
Job Market		10
Future Growth		10
Stress		4
Work Life Balance		4

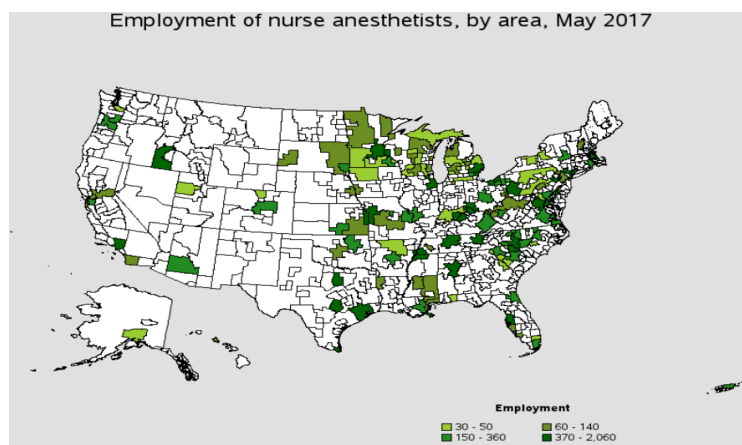
Source: US News and World Report (2019)

Statewide: In May 2018, there were 2,180 individuals employed as Nurse Anesthetists in Florida (Bureau of Labor Statistics, 2018). Also, according to the Bureau of Labor Statistics (2018), the demand for CRNAs is expected to increase 31% over the next 10 years and in 2018, Florida employed over 2000 CRNAs, making it the 6th largest state employer of CRNAs in the US. Additionally, Florida ranks 7th in CRNA vacancies nationwide at 17.75 vacancies per 100 positions in the state (Mervin, Stern, & Jordan, 2006). The Bureau of Labor Statistics also provides occupational information for CRNAs across the state of Florida, and the Panhandle and Big Bend region of Florida are areas with less numbers of CRNAs than other parts of the state, further supporting the need for the DNAP program to train and place CRNAs in the northern

parts of Florida and other rural areas where FSU serves those communities.

In addition to the data provided by the US Bureau of Labor Statistics described above, employment projections provided by the Florida Department of Economic Opportunity (FL DOE) also predict growth in the employment of nurse anesthetists in future years. According to the FL DOE projections, employment of nurse anesthetists in Florida is expected to grow 20.3% with 1,405 job openings between 2018-2026. Additionally, this growth projection is consistent with increases in healthcare jobs that are currently taking place in the Florida workforce (areas that nurse anesthetists commonly practice are highlighted in yellow in the table below). These projections are especially important for the DNAP program, because after 2022 all students entering programs to become nurse anesthetists will be required to have doctoral-level training before being certified to enter the job market and practice as nurse anesthetists in Florida.

Source: Florida Department of Economic Opportunity (2019)



Source: US Bureau of Labor Statistics (2017)

Sources:

Hogan, Seifert, Moore, & Simonson (2010). [https://www.aana.com/docs/default-source/research-aana.com-web-documents-\(all\)/nec_mj_10_hogan.pdf](https://www.aana.com/docs/default-source/research-aana.com-web-documents-(all)/nec_mj_10_hogan.pdf)

Bureau of Labor Statistics (2018). <https://www.bls.gov/oes/current/oes291151.htm>

Code (2016). <https://dailynurse.com/consider-becoming-nurse-anesthetist/>

US News and World Report (2019). <https://money.usnews.com/careers/best-jobs/nurse-anesthetist>

Mervin, Stern, & Jordan (2006). [https://www.aana.com/docs/default-source/research-aana.com-web-documents-\(all\)/supply-demand-and-equilibrium-in-the-market-for-crnas.pdf?sfvrsn=9eb544b1_2](https://www.aana.com/docs/default-source/research-aana.com-web-documents-(all)/supply-demand-and-equilibrium-in-the-market-for-crnas.pdf?sfvrsn=9eb544b1_2)

B. Demand: Describe data that support the assumption that students will enroll in the proposed program. Include descriptions of surveys or other communications with prospective students.

As mentioned above, becoming a CRNA is a lucrative and fulfilling career option for healthcare professionals and based on national and state data, we strongly believe that students will enroll in the program. The Bureau of Labor Statistics (2018) reported a mean annual wage of \$169,450 for CRNAs nationally and Florida has a higher average wage than the national average at \$177,390. Moreover, the DNAP program requires students to be RNs at the time of admission, and CRNA salaries are much higher than RN salaries which average \$68,450 per year. Thus, the DNAP program is very desirable for nurses who want to expand their education and pursue anesthesia care.

Additionally, the recent US News and World Report (2019) rankings listed the CRNA profession as a very desirable one, listing this occupation as #3 in Best Healthcare Jobs, #5 in 100 Best Jobs, #5 in Best STEM Jobs, and #11 in Best Paying Jobs. The US News and World Report also gave the Nurse Anesthetist occupation a 10/10 rating for Salary, Job Market, and Future Growth, which further supports the

assumption that students will enroll in the DNAP program to become CRNAs.

Finally, our admissions record from our MSNA program most strongly supports the assumption that students will enroll in the DNAP program when it replaces the MSNA program. Since the program began in 2015, we have filled every seat available in each cohort (seats are limited to 24 per accreditation standard). Our MSNA program has also experienced tremendous growth in qualified applicants in recent years. In 2016, our program had 62 qualified applicants, in 2017 it jumped to 132, in 2018 it increased further to 153, and in 2019 we saw a record number of qualified applicants - 192. Based on conversations with applicants, they said they applied to the FSU MSNA program because of positive recommendations they received from current and/or former students, and according to incoming students, they chose FSU's MSNA program because of the positive student interactions they encountered during their interview and the trust they had in FSU as a preeminent university.

Source: Bureau of Labor Statistics (2018). <https://www.bls.gov/oes/current/oes291151.htm>

C. If substantially similar programs (generally at the four-digit CIP Code or 60 percent similar in core courses), either private or public exist in the state, identify the institution(s) and geographic location(s). Summarize the outcome(s) of communication with such programs with regard to the potential impact on their enrollment and opportunities for possible collaboration (instruction and research). In Appendix C, provide data that support the need for an additional program.

This degree would be the first DNAP degree in the State of Florida, which makes it a distinct degree program that would allow students to fully specialize in nurse anesthesia practice at the doctoral level. There are currently 3 similar doctoral programs at SUS institutions. FIU, UNF, and USF all offer Doctor of Nursing Practice (DNP) programs, with COA-accredited CRNA curricula embedded within them, to allow students to specialize in Nurse Anesthesia.

As part of this proposal development, Dr. Van Dyke, the FSU Nurse Anesthesia Director contacted the Program Directors of the FIU, UNF, and USF nurse anesthesia DNP programs and each program reported that they did not anticipate any potential impact on their programs with the development of the DNAP at FSU. A summary of their responses is provided below:

- Dr. Derrick Glymph from FIU said "I do not foresee any potential impact to FIU's Nurse Anesthesia Program in the transition of FSU Nurse Anesthesia Program to DNAP. Please let me know if I can be of any further assistance."
- Dr. John McDonough from UNF said "I do not foresee any potential impact on us if the FSU program transitions to the DNAP degree."
- Dr. Michelle Canale from USF said "We understand that all Nurse Anesthesia Programs must make this transition by 2021 and fully expect that your program will pursue this as well. I do not foresee any impact to our Program as a result of your transition to the doctoral degree."

FSU's program has a positive working relationship with other Florida programs, and we anticipate potential research collaborations to increase with the other SUS programs as each program becomes a doctorate program to meet COA-accreditation standards, if they are not already. The Nurse Anesthesia field is small by comparison of other professions, and academicians in the CRNA field are even fewer; thus, collegiality amongst academics is commonplace. In our experience, both UNF and USF have shared materials with our program in preparation for the doctorate transition and we share clinical sites with both UNF and FIU. Our DNAP will not hinder enrollment at any other SUS university; in fact, we have experienced the opposite with our MSNA program. Other CRNA program directors in the SUS commonly refer potential students to us from their university because of student fit or geographic preference, and we do the same for them. As evidenced by our own application rates, there are more students seeking the nurse anesthesia graduate degree than number of spots available in programs.

Finally, there are 9 COA-accredited Nurse Anesthesia programs in the State of Florida (5 are at public universities and 4 are private). To maintain the same number of graduate programs that train CRNAs in the State of Florida, all COA-accredited Nurse Anesthesia programs at the master's level must become doctorate programs (DNP or DNAP) by 2022. Thus, this proposed DNAP program is required for us to

maintain the same number of students we train and serve in our Nurse Anesthesia program beyond 2022. This DNAP would replace the current MSNA program at FSU, and would not unnecessarily add an additional program that is not needed.

- D. Use Table 1 in Appendix A (1-A for undergraduate and 1-B for graduate) to categorize projected student headcount (HC) and Full Time Equivalents (FTE) according to primary sources. Generally undergraduate FTE will be calculated as 30 credit hours per year and graduate FTE will be calculated as 24 credit hours per year. Describe the rationale underlying enrollment projections. If students within the institution are expected to change majors to enroll in the proposed program at its inception, describe the shifts from disciplines that will likely occur.**

Each COA-accredited nurse anesthesia program has a limit to the number of students they can enroll each year in a cohort model. For the DNAP program, we are projecting to keep our headcount at full capacity per COA guidelines and enroll new cohorts of DNAP students each summer after year one. We do this currently in our MSNA program with multiple cohorts of 24 students progressing through the program at the same time, and we anticipate doing the same for the DNAP program. Thus, for the DNAP program, the headcount for the first year would be 24 (i.e., in Summer of 2021 we would have 24 DNAP students in the program). In the second year of the DNAP, we would enroll an additional 24 new, first-year students in the summer, and the original first year students would enter the second year of their program. In the third year of the DNAP, we would enroll a new cohort of 24 first-year students in the summer, and our second- and third- year students would continue finishing the program. From the third year forward, we would maintain teaching three cohorts of students continuously.

It is important to note that during the first year of the DNAP (2021-2022), we will have 24 first-year doctoral students and we will also have 24 second-year students in the MSNA program that will be part of the MSNA teach out, and 24 third-year students who will be finishing their final year of the MSNA program. Thus, in Fall 2021 we will be running the new DNAP concurrently with the MSNA program and we will continue to have 3 cohorts of students (1st, 2nd, and 3rd year students) enrolled in the program. This teaching projection is the same as what we currently do in the MSNA program, and we currently have sufficient faculty, adjuncts, and clinical supervisors to maintain this overlap. We anticipate hiring additional faculty at years 2 and 3 of the DNAP to further support the program and the student inquiry projects that take place later in the program. Faculty information is included in Table 4 of Appendix A. Additionally, for the purposes of this proposal, we included only the DNAP headcount and FTE in Table 1-B of Appendix A.

- E. Indicate what steps will be taken to achieve a diverse student body in this program. If the proposed program substantially duplicates a program at FAMU or FIU, provide, (in consultation with the affected university), an analysis of how the program might have an impact upon that university's ability to attract students of races different from that which is predominant on their campus in the subject program. The university's Equal Opportunity Officer shall review this section of the proposal and then sign and date Appendix B to indicate that the analysis required by this subsection has been completed.**

Consistent with FSUs Strategic Plan and related goals, FSU supports an institutional culture that values, celebrates, and leverages similarities and differences within our communities to create fertile learning experiences (FSU Strategic Plan, 2017). Similarly, the Nurse Anesthesia program has been committed to diversity within the student body and encourages applications from all qualified persons and does not discriminate on the basis of age, race, religion, disability, gender, marital status, national origin, sexual orientation, or veteran status.

Additionally, the geographic status of the program in Panama City allows faculty to recruit and retain underrepresented students from rural communities across the Panhandle. Within the region surrounding the FSU PC campus, the nurse anesthesia faculty also routinely participate in Florida's Rural STEM Education Initiative by presenting to high school students and supporting time to shadow a CRNA in the perioperative arena. They also participate in the Bay Education Foundation's "Take Stock in Children" program, which provides mentorship of low socioeconomic students in middle school and high school to

provide them support and resources for attaining a post-secondary degree.

As mentioned above, FIU offers a DNP program with a specialization in Nurse Anesthesia that is similar to this proposed DNAP. The FIU DNP program began in 2018, and it is limited to 45 seats per cohort. FSU has 24 seats per cohort and shares a clinical site in South Florida with FIU students. When discussing our DNAP program with the FIU director, Dr. Glymph, he noted no anticipated impacts on the FIU program with our DNAP proposal. We also have not had any problems expressed from the FIU program when they were an MS program and we continue to anticipate only collegial collaborations with FIU moving forward.

For comparison purposes, the table below shows enrollment statistics for the 2018-2019 nurse anesthesia cohorts at FIU's DNP program and FSU's MSNA program. The table below demonstrates an underrepresentation of minorities in the nurse anesthesia profession, which has recently been recognized by the American Association of Nurse Anesthetists (AANA) as an area of concern. To address this concern, the AANA created an ad hoc committee in 2018 to address under-representation of minorities and we as a program will continue to advocate for diversity in our field.

Race/Ethnicity	FIU DNP 2018-2019	FSU MSNA 2018-2019
Hispanic	55%	7%
Black non-Hispanic	3%	7%
White non-Hispanic	27%	74%
Asian/Pacific Islander	12%	9%
Other Ethnicities	3%	3%

Source: <https://cnhs.fiu.edu/academics/nursing/nurse-anesthesia/fast-facts/index.html>

III. Budget

- A. Use Table 2 in Appendix A to display projected costs and associated funding sources for Year 1 and Year 5 of program operation. Use Table 3 in Appendix A to show how existing Education & General funds will be shifted to support the new program in Year 1. In narrative form, summarize the contents of both tables, identifying the source of both current and new resources to be devoted to the proposed program. (Data for Year 1 and Year 5 reflect snapshots in time rather than cumulative costs.)

As displayed in Table 2 of Appendix A, the costs associated with the program for Year 1 include faculty salaries and benefits (4 faculty in year 1- \$884,000); A&P staff expenses (\$90,000) for our DNAP graduate coordinator and DNAP program office staff; OPS expenses (\$100,000) for adjunct faculty, on-site clinical coordinators, and IT support; and other expenses (travel, office expenses, etc. – \$90,000). By year 5, we anticipate hiring 2 additional faculty members and 2 additional staff members, and we expect those costs to be estimated at: \$1,300,000 for faculty salaries/benefits, \$320,000 for A&P and OPS staff, and \$115,000 for additional expenses.

The program will be funded through E&G funds from tuition collected, with a differentiated graduate tuition appropriate for an intensive clinical program. It will not be a market-rate or a continuing education program as defined in Board of Governors Regulation 8.002. The graduate tuition that our current MSNA program assesses is a per-student, per-semester total of \$8,475. When adding financial aid, capital improvement, athletics, activity and service, student health fees, and other university fees the total cost per semester, per student is \$9,500 and we anticipate the same structure for the DNAP program.

All funds generated by tuition will support the expenses of the program. For example, the Nurse

Anesthesia program is projected to generate \$1,824,000 from tuition in 2021. This includes 2 masters student cohorts and one inaugural DNAP cohort. We anticipate receiving \$1,627,200 of E&G funds for year 1 (2021; generated tuition minus all fees), which will support the program's estimated expenses of \$1,164,000. In years 2 and 3 we expect the same revenue as we maintain the same numbers of students in the MSNA phase-out/DNAP phase-in, and in years 4 and 5 \$2,052,000 will be collected in tuition with \$1,830,600 in E&G funds available to the program for operations (tuition from multiple, concurrent doctoral cohorts) minus all fees assessed for financial aid, capital improvement, athletics, activity and service, student health fees, and other university fees. The program's Year 5 E&G funds of \$1,830,600 will support the program's projected expenses of \$1,735,000 that same year.

- B. Please explain whether the university intends to operate the program through continuing education, seek approval for market tuition rate, or establish a differentiated graduate-level tuition. Provide a rationale for doing so and a timeline for seeking Board of Governors' approval, if appropriate. Please include the expected rate of tuition that the university plans to charge for this program and use this amount when calculating cost entries in Table 2.**

As mentioned above, we plan to keep the tuition structure as it exists in the current MSNA program, which is a differentiated graduate tuition appropriate for an intensive clinical program. Graduate and professional program tuition and fees, such as this, are authorized by Board of Governors' Regulation 7.001 and Section 1009.24(4)(b), Florida Statutes, and established in Florida State University Regulation FSU-2.024. After approval by the FSU BOT of any needed amendment to FSU-2.024, this amendment will be submitted to the Board of Governors for final approval as required by BOG Procedure.

Our expected rate of tuition is based off of the current tuition rate per semester for the MSNA program, which is \$9,500. The total cost per student of the MSNA program is \$66,500 for the seven semester program, excluding additional fees (e.g., Self-Evaluation Examination, Commercial Review Course, APEX - Anesthesia Review, and National Certification Examination fees). The DNAP expands from seven to nine semesters, which increases the overall programmatic cost per student to \$85,500 (calculated at \$9,500 multiplied by nine semesters).

In regards to our timeline for seeking approval of the differentiated graduate tuition, we plan to seek approval for the revised tuition regulation from the FSU Board of Trustees in Fall 2020 and then seek Board of Governors' approval as soon as possible thereafter.

- C. If other programs will be impacted by a reallocation of resources for the proposed program, identify the impacted programs and provide a justification for reallocating resources. Specifically address the potential negative impacts that implementation of the proposed program will have on related undergraduate programs (i.e., shift in faculty effort, reallocation of instructional resources, reduced enrollment rates, greater use of adjunct faculty and teaching assistants). Explain what steps will be taken to mitigate any such impacts. Also, discuss the potential positive impacts that the proposed program might have on related undergraduate programs (i.e., increased undergraduate research opportunities, improved quality of instruction associated with cutting-edge research, improved labs and library resources).**

No other programs will be impacted by reallocating resources. We will be reallocating our own resources in our Nurse Anesthesia budget from the MSNA to the DNAP and anticipate no negative impacts.

- D. Describe other potential impacts on related programs or departments (e.g., increased need for general education or common prerequisite courses, or increased need for required or elective courses outside of the proposed major).**

There are no potential impacts noted.

- E. Describe what steps have been taken to obtain information regarding resources (financial and in-kind) available outside the institution (businesses, industrial organizations,**

governmental entities, etc.). Describe the external resources that appear to be available to support the proposed program.

We have already started securing resources that will be necessary for the DNAP program. One of the main preparation activities we have completed is the expansion and update of our simulation lab, which is now a fully functional, clinical simulation lab with a human patient simulator. The FSU PC administration provided space on the PC campus for this lab and we utilized existing resources in our budget to fund it. We began using our new simulation lab in Fall 2018, and it is now an integral part of students' early clinical experiences in our current MSNA curriculum. In addition, we have expanded the number and variety of clinical sites to accommodate needs of our students regarding specific clinical trainings. We have also worked with our campus administration and finance office to ensure the ability to support the additional 2 faculty members needed for the DNAP program at years 2 and 3 (anticipated start dates of Fall 2022 and Fall 2023 when students are more senior in the DNAP program and working on research projects and clinical rotations). At this time, we are expecting the DNAP program to be fully funded by existing resources in our Nurse Anesthesia budget and the additional resources generated by this program in the future.

IV. Projected Benefit of the Program to the University, Local Community, and State

Use information from Tables 1 and 2 in Appendix A, and the supporting narrative for "Need and Demand" to prepare a concise statement that describes the projected benefit to the university, local community, and the state if the program is implemented. The projected benefits can be both quantitative and qualitative in nature, but there needs to be a clear distinction made between the two in the narrative.

This proposed DNAP program will expand upon FSUs current Nurse Anesthesia program, allow FSU to continue training high-quality CRNAs for the state's health-profession workforce, and enhance FSUs outreach in teaching, research, and service across the Panhandle by serving as the first Doctorate degree program housed at the Panama City campus of FSU.

V. Access and Articulation – Bachelor's Degrees Only

- A. If the total number of credit hours to earn a degree exceeds 120, provide a justification for an exception to the policy of a 120 maximum and submit a separate request to the Board of Governors for an exception along with notification of the program's approval. (See criteria in Board of Governors Regulation 6C-8.014)**

N/A

- B. List program prerequisites and provide assurance that they are the same as the approved common prerequisites for other such degree programs within the SUS (see link to the Common Prerequisite Manual on [the resource page for new program proposal](#)). The courses in the Common Prerequisite Counseling Manual are intended to be those that are required of both native and transfer students prior to entrance to the major program, not simply lower-level courses that are required prior to graduation. The common prerequisites and substitute courses are mandatory for all institution programs listed, and must be approved by the Articulation Coordinating Committee (ACC). This requirement includes those programs designated as "limited access."**

If the proposed prerequisites are not listed in the Manual, provide a rationale for a request for exception to the policy of common prerequisites. NOTE: Typically, all lower-division courses required for admission into the major will be considered prerequisites. The curriculum can require lower-division courses that are not prerequisites for admission into the major, as long as those courses are built into the curriculum for the upper-level 60 credit hours. If there are already common prerequisites for other degree programs with the same proposed CIP, every effort must be made to utilize the previously approved prerequisites instead of recommending an additional "track" of prerequisites for that CIP. Additional

tracks may not be approved by the ACC, thereby holding up the full approval of the degree program. Programs will not be entered into the State University System Inventory until any exceptions to the approved common prerequisites are approved by the ACC.

N/A

- C. If the university intends to seek formal Limited Access status for the proposed program, provide a rationale that includes an analysis of diversity issues with respect to such a designation. Explain how the university will ensure that Florida College System transfer students are not disadvantaged by the Limited Access status. NOTE: The policy and criteria for Limited Access are identified in Board of Governors Regulation 6C-8.013. Submit the Limited Access Program Request form along with this document.

N/A

- D. If the proposed program is an AS-to-BS capstone, ensure that it adheres to the guidelines approved by the Articulation Coordinating Committee for such programs, as set forth in Rule 6A-10.024 (see link to the Statewide Articulation Manual on [the resource page for new program proposal](#)). List the prerequisites, if any, including the specific AS degrees which may transfer into the program.

N/A

INSTITUTIONAL READINESS

VI. Related Institutional Mission and Strength

- A. Describe how the goals of the proposed program relate to the institutional mission statement as contained in the SUS Strategic Plan and the University Strategic Plan (see link to the SUS Strategic Plan on [the resource page for new program proposal](#)).

The DNAP program's main goal is to provide high-quality Nurse Anesthesia instruction, research, and clinical training for students so they can be successful doctoral-level, scientist practitioners and CRNAs upon graduation. This goal aligns with the mission of the SUS mission to provide graduate and professional education to serve the needs of a diverse state and society. More specifically, the SUS mission is "to provide undergraduate, graduate and professional education, research, and public service of the highest quality through a coordinated system of institutions of higher learning, each with its own mission and collectively dedicated to serving the needs of a diverse state and global society."

The goals of the DNAP program also fit with FSUs mission, which is "dedicated to excellence in teaching, research, creative endeavors, and service and strives to instill the strength, skill, and character essential for lifelong learning, personal responsibility, and sustained achievement within a community that fosters free inquiry and embraces diversity." Most specifically, the DNAP program emphasizes the ever-changing world of best-practice research, which will require the doctoral students to acquire a vast understanding of creating, understanding, and updating one's knowledge and skill sets for the safety of the patients under their anesthesia care, and this fits with FSUs commitment to lifelong learning and personal responsibility.

Sources:

SUS Strategic Plan: <https://www.flbog.edu/board/strategic-plan/>

FSU Strategic Plan: <https://strategicplan.fsu.edu/>

- B. Describe how the proposed program specifically relates to existing institutional strengths, such as programs of emphasis, other academic programs, and/or institutes and centers.

FSU Panama City houses the College of Applied Studies - FSUs 16th academic college that was

established in 2010. Since 2010, the College of Applied Studies has grown to offer (1) a Bachelor of Science degree in Recreation, Tourism and Events, thereby serving the coastal Florida tourism industry, (2) an on-line graduate certificate in Event Management, (3) an Bachelor of Science program in Public Safety and Security, (4) a Bachelor of Science degree in Professional Communication, (5) a Master of Science degree in Corporate & Public Communication, (6) undergraduate and graduate certificates in Underwater Crime Scene Investigation, meeting the educational/training needs of public and private law enforcement agencies across the Southeastern United States, and (7) an online Master of Science degree program in Law Enforcement Intelligence, which serves law enforcement professionals from across the nation.

The proposed DNAP program will be the first doctoral program housed at FSU Panama City and the first doctoral program for the College of Applied Studies. This DNAP program represents a very significant addition to the College of Applied Studies, and it will transform the PC campus and region - allowing FSU Panama City to further achieve its institutional mission of providing access to high-quality applied graduate programs and encouraging regional business and research partnerships across Northwest Florida.

- C. Provide a narrative of the planning process leading up to submission of this proposal. Include a chronology in table format of the activities, listing both university personnel directly involved and external individuals who participated in planning. Provide a timetable of events necessary for the implementation of the proposed program.**

Planning process:

We began planning for the DNAP to replace our current MSNA program in May 2017. This coincides with the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) mandate that all students matriculating into a Nurse Anesthesia educational program on January 1, 2022 or thereafter must be enrolled in a program approved by the COA to award a practice doctoral degree. In anticipation of this shift, the NAP program administrators and FSU administration began working on this new degree proposal. To accomplish this task, numerous working and writing meetings were held with primary project stakeholders (displayed in the tables below) and the faculty in the NAP program worked together to develop the proposal, which included discussions amongst the faculty regarding the curriculum, budget, admission/graduation requirements, faculty responsibilities, space and technology needs, and navigating the approval processes for completion of this proposal and subsequent application for COA accreditation upon final approval of the DNAP.

Also part of this process was the site visit and external review from Dr. Kay Sanders in October 2019. Dr. Sanders is the veteran Program Director for Texas Christian University's Nurse Anesthesia Program, and she provided excellent feedback, particularly regarding the proposed DNAP curriculum, which was reflected in the Proposal to Implement that was reviewed and approved by the VP for Faculty Development, the FSU Applied Studies College Curriculum Committee, the FSU Graduate Policy Committee, and most recently, FSU's Board of Trustees.

Phasing out and terminating MSNA:

Following final approval of the DNAP Proposal to Implement by the Board of Governors, we plan to phase out the MSNA program by admitting our last cohort of MS students for enrollment in Fall 2020 (who will graduate in Fall 2022) and accept new DNAP students to begin in Summer 2021. We plan to have an overlap of both master's and doctoral students between Summer 2021 and Fall 2022, and by Spring 2023, all Nurse Anesthesia students will be enrolled in the DNAP program. As mentioned above in Section II.D., we currently have sufficient faculty, adjuncts, and clinical supervisors to maintain this overlap. We anticipate hiring additional faculty at years 2 and 3 of the DNAP to further support the program and the student inquiry projects that take place later in the program. Faculty information is included in Table 4 of Appendix A.

Also part of this plan includes our accreditation application for the DNAP upon approval of our proposal to implement. We plan to apply for accreditation of the new DNAP program in August 2020, so that all approvals will be in place to allow us to admit new DNAP students to enroll in Summer 2021.

Timetable of events related to planning process:

Date	Participants	Planning Activity
5/31/17	Jennifer Buchanan, Ruth Feiock, Amy Polick, Stacey VanDyke	Discussed requirements for new program; discussed QER timing to coincide with DNAP application
2/8/18	Stacey VanDyke & Amy Polick	Discussing timeline for expanding into DNAP/application season for MSNA v. DNAP.
2/18-2/19/18	Dr. Stacey VanDyke, Director, Dr. Robyn Ward (former Associate Director), & Makana Craig	Attended 2022 <i>is Closer than You Think: Transitioning to the Doctoral Degree</i> conference hosted by the AANA and COA.
3/1/18	Stacey VanDyke, Robyn Ward, Scott Stewart, Geniece McPeak, & Makana Craig	NAP team meeting. Initial planning/timeline for DNAP commences.
3/22/18	Stacey VanDyke & Makana Craig	DNAP planning meeting regarding pre-proposal to explore.
3/29/18	Stacey VanDyke, Robyn Ward, & Makana Craig	DNAP planning meeting; finalizing curriculum.
4/4/18	Stacey VanDyke, Robyn Ward, & Makana Craig	DNAP planning meeting; finalizing proposal verbiage and working on budgeting section.
4/16/18	Stacey VanDyke, Robyn Ward, & Makana Craig	DNAP planning meeting; updating budget projections, examining SACSCOC proposal.
4/6/18	Proposal to Explore reviewed by VP for Faculty D&A, Provost and SUS CAVP Workgroup.	
4/23/18	Stacey VanDyke, Robyn Ward, & Makana Craig	DNAP planning meeting; reviewing budget projections, space needs.
5/24/18	Stacey VanDyke, Robyn Ward, Scott Stewart, Geniece McPeak, & Makana Craig	NAP team meeting; continued discussion of DNAP planning.
2/20/19	DNAP Proposal to Explore approved by FSU Board of Trustees.	

Events Leading to Implementation

Date	Implementation Activity	
2/27/19	Stacey VanDyke, Robyn Ward, & Makana Craig	DNAP planning meeting; discussing DNAP mission, purpose, application considerations, curriculum, culminating project, and hiring timeline. Discussed option of using QER to have External Reviewer review Proposal to Explore/Implement.
3/4/19	Stacey Van Dyke, Amy Polick	Discussion of DNAP proposal to implement

4/1/19	Stacey Van Dyke, Amy Polick	Continued discussion and writing of DNAP proposal to implement, budget, hiring timelines
5/10/19	Stacey Van Dyke, Amy Polick	Curriculum review of DNAP
6/1/19	Stacey Van Dyke, Lonnie Hodges	External review identification for DNAP and QER, self-study development and curriculum updated for DNAP
8/7/19	Stacey Van Dyke, Makana Craig, Amy Polick	Editing of Proposal to Implement for DNAP, external reviewer contacted and chosen
9/2019	Stacey Van Dyke, Makana Craig, Amy Polick	Plans for external reviewer site visit and edits for DNAP proposal to implement
10/14/19	Dr. Sanders external reviewer	External reviewer site visit
10/2019	Proposal to Implement reviewed by the VP for Faculty Development office	Multiple edits
10/22/19	Proposal to Implement to be reviewed by the College Curriculum Committee.	Approved with edits
12/2/19	Proposal to Implement to be reviewed by GPC.	Approved
1/2020	Proposal to Implement reviewed by the FSU BOT	Approved
5/2020	Proposal to Implement reviewed by BOG	
8/1/2020	DNAP accreditation application due to COA. Site visit of COA.	
8/2020	Last cohort of MSNA students begins their MS degree in the NAP program	
10/2020	COA meeting; decision regarding DNAP proposal to be communicated shortly thereafter.	
10/2020	Seek approval for tuition amendment from FSU BOT and FSU BOG thereafter	
11/2020	Upon final approvals, DNAP applications are open for students	
2/2021	DNAP applications are reviewed and student interviews held	
5/2021	Inaugural class of DNAP students begin the program	

VII. Program Quality Indicators - Reviews and Accreditation

Identify program reviews, accreditation visits, or internal reviews for any university degree programs related to the proposed program, especially any within the same academic unit. List all recommendations and summarize the institution's progress in implementing the recommendations.

Our MSNA program is the most similar to the proposed DNAP program. The MSNA program is reviewed, at a minimum, each year through the university institutional effectiveness processes and policies as part of FSU's SACSCOC accreditation. Additionally, in October 2019, the MSNA program went through the university's Quality Enhancement Review (QER) Process, which takes place every 7 years. Also, each year the program prepares an annual report to COA as part of the program's accreditation standards. The MSNA's next accreditation visit is scheduled for March 2020, and upon full approval of the DNAP, we will subsequently apply for continued accreditation by COA for the DNAP program.

The MSNA program first began at FSU in 2015. One of the main outcomes that are monitored by the accrediting body, COA, is the overall pass rate for first-time test takers of the CRNA exam. In previous years, the MSNA program was provided recommendations to increase its pass rate, and in 2018 the MSNA program pass rate exceeded the COA standard of 80%. As a new program, several changes were made to improve the pass rates since the program started in 2015 – these have included hiring new faculty, hiring new administrators who oversee the program, increasing standards for student admission, creating new programmatic policies to prepare students for the CRNA exam throughout the MSNA curriculum, adding a simulation lab that enhances student learning of content from their courses, increasing clinical sites with a variety of client populations, and embedding CRNA exam content preparation into the coursework. These strategies have been successful thus far in obtaining higher pass rates and we have seen a large increase in applicants to the program suggesting the changes have been received positively by potential students.

Regarding the recent QER, the MSNA program, per the exit interview, received praise for its variety of clinical sites, the number of clinical cases that the students receive in the MSNA program (which is double what many other programs provide), the strength of the program administrators, the satisfaction of the students in the program, and the course content, which while appropriate for a master's program was advised to be modified for a DNAP program.

VIII. Curriculum

A. Describe the specific expected student learning outcomes associated with the proposed program. If a bachelor's degree program, include a web link to the Academic Learning Compact or include the document itself as an appendix.

The overall mission of the DNAP program is to train effective, ethical, and expert nurse anesthetist clinicians and one important program outcome is to have at least 80% of our graduating, first-time test takers pass the NBCRNA exam and become Certified Registered Nurse Anesthetists (CRNAs). In order to meet this outcome and achieve the mission of the program, the curriculum has very specific learning outcomes that are guided by the accrediting standards of the nurse anesthesia field.

Overall, the graduates of the DNAP shall receive a doctoral degree, be an expert in research-based anesthesia clinical practices, be eligible for the CRNA exam, and shall have acquired knowledge, skills and competencies in the following areas:

Patient safety as demonstrated by the ability of the student to:

1. Be vigilant in the delivery of patient care.
2. Protect patients from iatrogenic complications.
3. Participate in the positioning of patients to prevent injury.
4. Conduct a comprehensive and appropriate equipment check.
5. Utilize standard precautions and appropriate infection control measures.

Individualized perianesthetic management as demonstrated by the ability of the student to:

1. Provide care throughout the perianesthetic continuum.
2. Use a variety of current anesthesia techniques, agents, adjunctive drugs, and equipment while providing anesthesia
3. Administer general anesthesia to patients of all ages and physical conditions for a variety of surgical and medically related procedures.
4. Provide anesthesia services to all patients, including trauma and emergency cases.
5. Administer and manage a variety of regional anesthetics.
6. Function as a resource person for airway and ventilatory management of patients.
7. Possess current advanced cardiac life support (ACLS) certification.
8. Possess current pediatric advanced life support (PALS) certification.
9. Deliver culturally competent perianesthetic care throughout the anesthesia experience.

Critical thinking as demonstrated by the student's ability to:

1. Apply theory to practice in decision-making and problem solving.
2. Provide nurse anesthesia care based on sound principles and research evidence.
3. Perform a preanesthetic assessment and formulate an anesthesia care plan for patients to whom they are assigned to administer anesthesia.
4. Identify and take appropriate action when confronted with anesthetic equipment-related malfunctions.
5. Interpret and utilize data obtained from noninvasive and invasive monitoring modalities.
6. Calculate, initiate, and manage fluid and blood component therapy.
7. Recognize and appropriately respond to anesthetic complications that occur during the perianesthetic period.
8. Pass the NBCRNA certification examination.

Communication skills as demonstrated by the student's ability to:

1. Effectively communicate with all individuals influencing patient care.
2. Utilize appropriate verbal, nonverbal, and written communication in the delivery of perianesthetic care.

Professional role as demonstrated by the student's ability to:

1. Participate in activities that improve anesthesia care.
2. Function within appropriate legal requirements as a registered professional nurse, accepting responsibility and accountability for his or her practice.
3. Interact on a professional level with integrity.
4. Teach others.
5. Participate in continuing education activities to acquire new knowledge and improve his or her practice.

B. Describe the admission standards and graduation requirements for the program.

Admission requirements: Admission to the proposed DNAP is a two-fold evaluation process. The Office of Admissions determines eligibility for admission to the University and the academic department or college determines admissibility to the degree program. Final admission to the University is subject to approval by the Office of Admissions.

Departmental application requirements include:

- Baccalaureate degree in Nursing (BSN) obtained from a regionally accredited institution of higher education in the United States.
- Chemistry – One semester of general college-level chemistry is required within 5 years. A course in organic and/or biochemistry would be a good choice for a second chemistry course.
- An upper-division grade point average (GPA) of 3.0 or greater on a 4.0 scale.
- Registered Nurse (RN) experience of at least one year in a critical care setting, such as Surgical Intensive Care, Cardiothoracic Intensive Care, Medical Intensive Care, Pediatric Intensive Care, and Neonatal Intensive Care. Those who have experiences in other areas may be considered provided they can demonstrate competence with managing unstable patients, invasive

monitoring, ventilators, and critical care pharmacology. Traditional adult ICU experience (CVICU, SICU, and MICU) will be considered first.

- A competitive Graduate Record Examination (GRE) taken within 5 years of application. Preferred program standards will be 50th percentile scores in Quantitative and Verbal sections, and a writing score of 4.0 or above.
- References from
 - an immediate supervisor familiar with your critical care RN work
 - a Certified Registered Nurse Anesthetist (CRNA). This person does not have to be familiar necessarily with you or your RN work. Simply arrange some time to discuss nurse anesthesia with this CRNA.
- Current health certifications:
 - Advanced Cardiac Life Support (ACLS) certification- required
 - Basic Life Support (BLS) certification-required
 - Pediatric Advanced Life Support (PALS) certification- preferred and required by admission to the program
 - Critical Care Registered Nurse (CCRN) Certification is highly recommended

Graduation requirements: Graduation from the DNAP program will require successful completion of the 99-credit course of study (see detailed course-completion requirements below). The full 99-credit curriculum requires meeting accreditation standards for all clinical nurse anesthesia competencies of applied practice, completion of all didactic courses, and successful completion of the DNAP scholarly inquiry project.

C. Describe the curricular framework for the proposed program, including number of credit hours and composition of required core courses, restricted electives, unrestricted electives, thesis requirements, and dissertation requirements. Identify the total numbers of semester credit hours for the degree.

The curricular framework for the DNAP was developed based upon 1) the required standards set forth by the COA, and 2) a review of best-practice strategies for CRNAs to ensure the DNAP has additional coursework that will develop the graduate student into an independent, advanced doctoral-level practitioner ready to enter the CRNA workforce. The courses are sequenced in a manner that helps the student blend didactic knowledge with clinical applications in order to acquire the knowledge, skills, and independent critical thinking strategies required for CRNA practice.

The DNAP curriculum includes 99 credit hours of required courses (no elective course options) and each cohort of students will complete their required course of study as displayed in section VIII.D. below. The required courses in the DNAP curriculum include a breadth of courses related to the following curriculum content categories: 1) Leadership, healthcare delivery, policy, and informatics, 2) Basic sciences, 3) Anesthesia-specific principles and practice, 4) Simulation of anesthesia practices, 5) Direct participation in clinical anesthesia practice through clinical practica, and 6) Engagement with research literature and research development through research courses and DNAP scholarly inquiry project.

The DNAP program does not have a thesis requirement and the DNAP scholarly inquiry project serves as the program's doctoral requirement, in lieu of a dissertation, which is common for professional clinical practice degrees. The DNAP scholarly inquiry project will require students to integrate knowledge and skills from their coursework and experiences into the development, implementation, and evaluation of an anesthesia-related clinical practice improvement project. These projects will be completed individually, or in pairs, under the direct supervision of a DNAP faculty advisor. The main objectives of the scholarly inquiry project are for students to 1) effectively search, digest, and critique research related to nurse anesthesia practice, 2) utilize tools for integrating and understanding relevant evidence from the current literature and analyze it for application to a clinical problem or question, 3) develop and implement an intervention with a measurable outcome that can be applied to current practice in an attempt to improve patient, population, and/or facility outcomes, and 4) disseminate their findings by presenting their project to peers at a regional, state, or national conference.

D. Provide a sequenced course of study for all majors, concentrations, or areas of emphasis within the proposed program.

Detailed descriptions for the required course of study for the proposed DNAP degree program are provided in the table below:

Course Code	Course Title	Credits	Curriculum Category
SUMMER SEMESTER 1			
Explanation: The first semester of the DNAP program will be offered entirely via distance learning. The purpose of offering these courses via distance learning is to provide students the option to delay moving to Panama City and/or continue working as an RN, if the student chooses. If students choose to continue working through this semester, these courses will complement their experiences, enabling them to apply their knowledge in real settings.			
NGR 7892	Health Care Policy & Clinical Prevention for Improving Population Health	3 <i>distance</i>	Leadership, healthcare delivery & policy, & informatics
NGR 7874	Informatics & Patient Care Technology	3 <i>distance</i>	Leadership, healthcare delivery & policy, & informatics
NGR 7766	Health Systems Leadership & Professional Practice	3 <i>distance</i>	Leadership, healthcare delivery & policy, & informatics
Total Semester 1 Credits		9	
FALL SEMESTER 2			
Explanation: Students will be required to be on-campus starting in semester two when core courses begin, which consist of face-to-face courses in anatomy, physiology, pharmacology, health assessment, chemistry, biochemistry, physics, and simulation. Greater emphasis has been placed on the basic sciences, as it is important for students to have a solid foundation in this realm before advancing to increasingly rigorous courses. NGR 6404 - Anatomy, Physiology/Pathophysiology I and NGR 6002 - Advanced Health Assessment Across the Lifespan have both increased by one credit hour from the MSNA.			
NGR 6404	Anatomy, Physiology/Pathophysiology I <i>*increase from MSNA's 3 credits</i>	4*	Basic sciences
NGR 6460	Pharmacology for Anesthesia I	3	Basic sciences
NGR 6002	Advanced Health Assessment Across the Lifespan <i>* increase from MSNA's 2 credits</i>	3*	Basic sciences
NGR 6400	Chemistry, Biochemistry & Physics for Anesthesia	3	Basic sciences
NGR 6420	Principles of Anesthesia	3	Anesthesia specific

Total Semester 2 Credits		16	
SPRING SEMESTER 3			
Explanation: In semester 3, students will be leaving anesthesia clinical simulation and preparing for on-site clinical experience. Similar to the semester above, we see an increase on the credit hours associated with NGR 6405 - Anatomy, Physiology/Pathophysiology II. NGR 6929C - Clinical Correlational Conference will be transformed from a traditional face-to-face course to online.			
NGR 6405	Anatomy, Physiology/Pathophysiology II <i>* increase from MSNA's 3 credits</i>	4*	Basic sciences
NGR 6461	Pharmacology for Anesthesia II <i>* increase from MSNA's 3 credits</i>	4*	Basic sciences
NGR 6929C	Clinical Correlational Conference	1 <i>distance</i>	Anesthesia specific
NGR 6440L	Anesthesia Simulation I	2	Simulation
Total Semester 3 Credits		11	
SUMMER SEMESTER 4			
Explanation: In the MSNA program, NGR 6803 - Research Methods & Evidence-Based Practice I is typically one credit. To support the research focus of the DNAP program, we will be increasing our credits for NGR 6803 to two, and shifting the course into an online platform. In this first semester of NGR 6803, faculty will teach research methods, the research process, literature review, and provide an overview of statistics and relevance to practice.			
NGR 6424	Advanced Principles of Anesthesia I	3	Anesthesia specific
NGR 6442	Anesthesia Simulation II	4	Simulation
NGR 6929C	Clinical Correlational Conference	1 <i>distance</i>	Anesthesia specific
NGR 6803	Research Methods & Evidence-Based Practice I <i>* increase from MSNA's 1 credit</i>	2* <i>distance</i>	Research curriculum
NGR 6406	Anatomy, Physiology/Pathophysiology III <i>*increase from MSNA's 3 credits</i>	4*	Basic sciences
Total Semester 4 Credits		14	
FALL SEMESTER 5			
Explanation: NGR 6809 - Research & Evidence-Based Practice II has been scheduled to be taught directly after NGR 6803 - Research & Evidence-Based Practice I. In this subsequent course, faculty will shift from statistics and a broad overview of research into a more focused research approach. In this course, DNAP students will develop their scholarly research proposal and work on developing their			

writing skills. An additional improvement made in this semester is the introduction of NGR 6425 - Advanced Principles of Anesthesia II. While the MSNA program stops at NGR 6424 -Advanced Principles of Anesthesia I, it is important to expand on the advanced principles of anesthesia for the DNAP, and we will do so by offering NGR 6425.			
NGR 6425	Advanced Principles of Anesthesia II	3	Anesthesia specific
NGR 6929C	Clinical Correlational Conference	1 <i>distance</i>	Anesthesia specific
NGR 6432L	Anesthesia Clinical Practicum II <i>*6 credits in MSNA, decreased to allow for additional practica</i>	4*	Simulation/clinical practicum
NGR 6809	Research Methods & Evidence-Based Practice II <i>*increase from MSNA's 1 credit</i>	2* <i>distance</i>	Research curriculum
Total Semester 5 Credits		10	
SPRING SEMESTER 6			
Explanation: At this phase of the DNAP program, students will already have a preliminary research proposal drafted via their participation in NGR 6809. However, NGR 7974 - DNAP Project: Proposal Development, will enable students to better flesh out their ideas, methodologies, and literature reviews. While students are not required to begin their data collection until semester seven, they will be encouraged to begin this as soon as the scholarly research proposals have been vetted by the scholarly project review committees.			
NGR 7974	DNAP Project: Research Proposal Development	2	Research curriculum
NGR 6433L	Anesthesia Clinical Practicum III <i>*8 credits in MSNA, decreased to allow for additional practica</i>	6*	Simulation/clinical practicum
NGR 6929C	Clinical Correlational Conference	1 <i>distance</i>	Anesthesia specific
Total Semester 6 Credits		9	
SUMMER SEMESTER 7			
Explanation: In semester 7, students will be implementing their projects at their clinical sites and analyzing their collected data during NGR 7974 - DNAP Project: Implementation/analysis. NGR 6491 - Nurse Anesthesia Practice Comprehensive I will be shifted from a face-to-face to online format to provide students more flexibility in their engagement with the clinical sites and their data collection.			
NGR 7974	DNAP Project: Research Implementation/Analysis	2	Research curriculum
NGR 6434L	Anesthesia Clinical Practicum IV <i>*10 credits in MSNA, decreased to allow for additional practica</i>	8*	Simulation/clinical practicum

NGR 6491	Nurse Anesthesia Practice Comprehensive I	1 <i>distance</i>	Anesthesia specific
Total Semester 7 Credits		11	
FALL SEMESTER 8			
Explanation: NGR 7945 - DNP Clinical Residency I will be offered as the final leg of the scholarly research project curricula. In this course, students will be fully immersed in their project at their respective clinical sites, spending time with subject matter experts. At this phase, students will be refining and disseminating their findings both at their sites, and at the state and/or national level.			
NGR 6495	Nurse Anesthesia Practice Comprehensive II	2 <i>distance</i>	Anesthesia specific
NGR 7945	DNAP Clinical Residency I	1	Research curriculum
NGR 6435L	Anesthesia Clinical Practicum V <i>*originally 10 credits, decreased to allow for additional practica</i>	8*	Simulation/clinical practicum
Total Semester 8 Credits		11	
SPRING SEMESTER 9			
Explanation: To better prepare our students for the comprehensive exams, the DNAP program will be redesigning its NGR 6496 - Nurse Anesthesia Practice Comprehensive III. To do so, NGR 6436L - Anesthesia Clinical Practicum VI has been reduced from 10 to six credits to allow for more focused energy in the comprehensive review. NGR 6496 will be taught by program faculty, but efforts will be made to recruit subject matter specialists who can speak to topics as outlined by the NBCRNA. Essentially, NGR 6496 will be used as a resource to help students brush up on the topics and skills learned in their first year.			
NGR 6496	Nurse Anesthesia Practice Comprehensive III	2 <i>distance</i>	Anesthesia specific
NGR 6436L	Anesthesia Clinical Practicum VI <i>*10 credits in MSNA, decreased to allow for additional practica</i>	6	Simulation/clinical practicum
Total Semester 9 Credits		8	
Total DNAP Credits		99	

E. Provide a one- or two-sentence description of each required or elective course.

NGR 6002. Advanced Health Assessment (1). This course includes the history, physical, and psychological assessment of signs and symptoms, pathophysiologic changes, and psychosocial variations of a patient as they relate to preoperative assessment, intraoperative management and postoperative management of patients receiving anesthesia.

NGR 6400. Chemistry, Biochemistry, and Physics (3). This course investigates the concepts and principles of chemistry, biochemistry and physics that are fundamental to anesthesia practice, medical equipment and operating room safety.

NGR 6404. Anatomy, Physiology/Pathophysiology I (3). This course presents, analyzes/evaluates anatomy, physiology/pathophysiology of the respiratory and renal systems. The course also examines fluid and electrolyte balance, abnormalities and management in the acute and chronically ill patient.

NGR 6405. Anatomy, Physiology/Pathophysiology II (3). This course presents, analyzes/evaluates anatomy, physiology/pathophysiology of the cardiovascular, neurological, and hepatic systems. The course also examines acid base status, abnormalities and management in the acute and chronically ill patient.

NGR 6406. Anatomy, Physiology/Pathophysiology III (3). This course presents, analyzes/evaluates anatomy, physiology/pathophysiology of the cardiovascular, neurological, and hepatic systems.

NGR 6420. Basic Principles of Anesthesia (3). This course presents principles relevant to the practice of anesthesia: history of anesthesia, scope of anesthetic practice, documentation, preoperative patient evaluation and preparation, anesthesia technique, airway assessment and management, anesthesia delivery systems, positioning of the patient for anesthesia and surgery, effects of coexisting disease on anesthetic administration, physiologic response to anesthesia, intraoperative anesthetic management, anesthesia administration in locations outside the operating room, postoperative patient complications, postoperative patient management.

NGR 6424. Advanced Principles of Anesthesia (3). This course analyzes/evaluates principles relevant to acute care and the practice of anesthesia for the following specific populations: orthopedic patients, trauma patients, burn patients, ENT patients, spinal cord injury patients, patients with neuromuscular disease, chronic pain patients, patients being monitored with evoked potentials, patients undergoing organ transplant, and patients with coagulopathies. The course also explores the anesthesia techniques of neuraxial and regional anesthesia.

NGR 6425. Advanced Principles of Anesthesia II (3). This course analyzes/evaluates principles relevant to acute care and more-advanced and specialized practices of anesthesia.

NGR 6431L. Anesthesia Practicum I (2). This course allows for clinical application of principles of nurse anesthesia. Students are precepted in the perioperative clinical site. Experiences include application of skills specific to the role of nurse anesthetist. Important concepts include anatomical, physiological, pathophysiological and pharmacological principles.

NGR 6432L. Anesthesia Practicum II (6). This course allows for clinical application of principles of nurse anesthesia. Students are precepted in the perioperative clinical site. Experiences include application of skills specific to the role of nurse anesthetist. Important concepts include anatomical, physiological, pathophysiological and pharmacological principles.

NGR 6433L. Anesthesia Practicum III (8). This course allows for clinical application of principles of nurse anesthesia. Students are precepted in the perioperative clinical site. Experiences include application of skills specific to the role of nurse anesthetist. Important concepts include anatomical, physiological, pathophysiological and pharmacological principles.

NGR 6434L. Anesthesia Practicum IV (10). This course allows for clinical application of principles of nurse anesthesia. Students are precepted in the perioperative clinical site.

NGR 6435L. Anesthesia Practicum V (10). This course allows for clinical application of principles of nurse anesthesia. Students are precepted in the perioperative clinical site. Experiences include application of skills specific to the role of nurse anesthetist. Important concepts include anatomical, physiological, pathophysiological and pharmacological principles.

NGR 6436L. Anesthesia Practicum VI (10). This course allows for clinical application of principles of nurse anesthesia. Students are precepted in the perioperative clinical site. Experiences include application of skills specific to the role of nurse anesthetist. Important concepts include anatomical, physiological, pathophysiological and pharmacological principles.

NGR 6440L. Anesthesia Simulation I (2). This course allows for clinical application of principles of nurse anesthesia in a simulation laboratory. Experiences include application of skills specific to the role of nurse anesthetist. Important concepts include anatomical, physiological, pathophysiological and pharmacological principles.

NGR 6442L. Anesthesia Simulation II (4). This course allows for advanced clinical application of principles of nurse anesthesia in a simulation laboratory. Experiences include application of skills specific to the role of nurse anesthetist. Important concepts include anatomical, physiological, pathophysiological and pharmacological principles.

NGR 6460. Pharmacology of Anesthesia I (3). This course presents, analyzes/evaluates general principles of drug action, signs and stages of anesthesia, uptake and distribution of inhalation agents, and pharmacology of specific drug classes: inhalation agents, anesthesia induction drugs, opiate agonists/antagonists, and non-narcotic agents.

NGR 6461. Pharmacology of Anesthesia II (3). This course presents, analyzes/evaluates pharmacology of specific drug classes: neuromuscular blocking drugs, local anesthetics, autonomic drugs, and cardiovascular drugs.

NGR 6491. Nurse Anesthesia Practice Comprehensive I (1). This course is designed to measure the knowledge base and clinical competency of the nurse anesthesia student.

NGR 6492. Professional Aspects of Nurse Anesthesia (3). This course analyzes and evaluates the nurse anesthesia profession in terms of professionalism, regulation, healthcare, environment, issues, politics, and practice challenges to include by not limited to adverse outcomes in anesthesia, cultural competency, conflict management, professional issues, legality, liability, informed consent, involvement in professional associations and addiction in anesthesia providers.

NGR 6495. Nurse Anesthesia Practice Comprehensive II (1). This course is designed to measure the knowledge base and clinical competency of the nurse anesthesia student.

NGR 6496. Nurse Anesthesia Practice Comprehensive III (2). Prerequisite: Successful standing in the nurse anesthesia program at the end of semester six. This course is designed to measure the knowledge base and clinical competency of the nurse anesthesia student.

NGR 6803. Research and Evidence-Based Practice I (1). This course prepares advanced practice nurse anesthetists who are proficient in ethical utilization and clinical application of research including problem identification and evaluation to provide high quality care and improve practice.

NGR 6809. Research and Evidence-Based Practice II (1). This course prepares advanced practice nurse anesthetists who are proficient in ethical utilization and clinical application of research including problem identification and evaluation to provide high quality care and improve practice.

NGR 6929C. Clinical Correlation Conference (1). This course provides the opportunity for analysis and evaluation of current anesthesia literature through student presentations and discussion and anesthesia related guest lectures. May be repeated to a maximum of five semester hours.

NGR 7766. Health Systems Leadership & Professional Practice (3). This course provides skills required for leading professional teams to improve health care delivery and health outcomes with emphasis on systems thinking, communication, health system fluency, and management of ethical dilemmas.

NGR 7874. Informatics & Patient Care Technology (3). This course prepares nurse anesthetist leaders to

implement quality improvement initiatives and support practice and administrative decision making.

NGR 7892. Healthcare Policy & Clinical Prevention for Improving Population Health (3). This course provides skills for the analysis, development, and implementation of health policy and health promotion and disease prevention interventions to improve population health.

NGR 7945. DNAP Clinical Residency I (1-3). Residency experience provides students with advanced knowledge and expertise in a focused area of nurse anesthesia practice.

NGR 7974. DNAP Research Practice Scholarly Inquiry Project (1-3). This course allows students to integrate knowledge and skills acquired in previous courses through the development, implementation, and evaluation of an anesthesia-related clinical practice improvement or research project.

F. For degree programs in the science and technology disciplines, discuss how industry-driven competencies were identified and incorporated into the curriculum and indicate whether any industry advisory council exists to provide input for curriculum development and student assessment.

The National Board of Certification and Recertification of Nurse Anesthetists (NBCRNA) has established the professional standards of the nurse anesthesia profession and the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) enforces the education, examination, experience, ethics and other requirements of the NBCRNA certification. As mentioned previously, COA requires that all students matriculating into a nurse anesthesia educational program on January 1, 2022 or later be enrolled in a doctoral program approved by the COA to become CRNAs. All programs are required to embed the following courses and content into their curriculum:

Courses:

Advanced Physiology/Pathophysiology
Advanced Pharmacology
Basic and Advanced Principles in Nurse Anesthesia
Advanced Health Assessment

Content with Specified Contact Hours:

Advanced Physiology/Pathophysiology (120 contact hours)
Advanced pharmacology (90 contact hours)
Basic and advanced principles in nurse anesthesia (120 contact hours)
Research (75 contact hours)
Advanced health assessment (45 contact hours)

Content Areas without Specified Contact Hours:

Human anatomy, chemistry, biochemistry, physics, genetics, acute and chronic pain management, radiology, ultrasound, anesthesia equipment, professional role development, wellness and substance use disorder, informatics, ethical and multicultural healthcare, leadership and management, business of anesthesia/practice management, health policy, healthcare finance, integration/clinical correlation

COA also mandates the following graduate standards. The graduate student must be able to:

1. Perform a comprehensive history and physical assessment.
2. Provide nurse anesthesia services based on evidence-based principles.
3. Use science-based theories and concepts to analyze new practice approaches.
4. Utilize interpersonal and communication skills that result in the effective interprofessional exchange of information and collaboration with other healthcare professionals.
5. Integrate critical and reflective thinking in his or her leadership approach.
6. Provide leadership that facilitates intraprofessional and interprofessional collaboration.
7. Adhere to the Code of Ethics for the Certified Registered Nurse Anesthetist.
8. Apply ethically sound decision making processes.
9. Inform the public of the role and practice of the CRNA.
10. Evaluate how public policy making strategies impact the financing and delivery of healthcare.

11. Advocate for health policy change to improve patient care.
12. Advocate for health policy change to advance the specialty of nurse anesthesia.
13. Analyze strategies to improve patient outcomes and quality of care.
14. Analyze health outcomes in a variety of populations.
15. Analyze health outcomes in a variety of clinical settings.
16. Analyze health outcomes in a variety of systems.
17. Disseminate research evidence.
18. Use information systems/technology to support and improve patient care.
19. Use information systems/technology to support and improve healthcare systems.
20. Analyze business practices encountered in nurse anesthesia delivery settings.

As mentioned above in Section VIII.C., completing a DNAP Scholarly Inquiry Project is required for all students. It allows each student to demonstrate the ability to integrate and apply his/her knowledge of evidence-based practice as learned through curricula taught by the DNAP program and requires that they disseminate their findings at a regional, state, or national conference. The COA states that the graduate must demonstrate knowledge and scholarship skills within the area of academic focus on completion of the scholarly work. Completion and dissemination of the scholarly inquiry project will demonstrate the graduate's ability to impact healthcare delivery systems and provide outstanding patient care by using evidence-based practice. This course requirement is a part of the standards of the COA and will be considered part of the educational requirement for NBCRNA certification.

All instruction in the DNAP curriculum will be consistent with the standards of the Council on Accreditation of Nurse Anesthesia Educational Programs.

- G. For all programs, list the specialized accreditation agencies and learned societies that would be concerned with the proposed program. Will the university seek accreditation for the program if it is available? If not, why? Provide a brief timeline for seeking accreditation, if appropriate.**

The current FSU MSNA Program is accredited by COA, and we plan to apply for COA accreditation for the proposed DNAP program upon its final approval to implement. As part of the accreditation process, we plan to submit an application for accreditation for the DNAP program in August 2020, which will be reviewed by COA, and the DNAP program will undergo an onsite review thereafter. Upon completion of the onsite review and all application materials, the DNAP program would be considered for accreditation at the October 2020 COA meeting. Our plan is to formally transition from the MSNA into the DNAP program in Summer 2021, pending all required approvals.

- H. For doctoral programs, list the accreditation agencies and learned societies that would be concerned with corresponding bachelor's or master's programs associated with the proposed program. Are the programs accredited? If not, why?**

The FSU Nurse Anesthesia Program currently offers an MSNA and is seeking to transition to a DNAP to be in accordance with COA's mandate that all master's degree programs in Nurse Anesthesia become doctoral programs by 2022. As indicated above, our goal is to submit the DNAP application to COA by August 2020 in anticipation of a DNAP start in Summer 2021.

- I. Briefly describe the anticipated delivery system for the proposed program (e.g., traditional delivery on main campus; traditional delivery at branch campuses or centers; or nontraditional delivery such as distance or distributed learning, self-paced instruction, or external degree programs). If the proposed delivery system will require specialized services or greater than normal financial support, include projected costs in Table 2 in Appendix A. Provide a narrative describing the feasibility of delivering the proposed program through collaboration with other universities, both public and private. Cite specific queries made of other institutions with respect to shared courses, distance/distributed learning technologies, and joint-use facilities for research or internships.**

Our anticipated delivery system is a combination of few distance learning courses with a majority of traditional, on-campus classes. The first semester of the DNAP will be delivered by the faculty from the Panama City Campus to students at a distance. The subsequent semesters will be primarily face-to-face at FSU Panama City Campus and at clinical sites, with a few exceptions (i.e., one-credit Clinical Correlational Conference courses, and Research Methods & Evidence-Based Practice). As students rotate to their clinical sites, some coursework will be offered as hybrid courses, with the course delivery being face-to-face on campus and via live interactive classrooms for the distance students. Offering some courses via distance will decrease the time our students need to be on campus, which will allow them to be immersed in the doctoral realm of study and better engage in their scholarly inquiry projects and practica at their clinical sites. No part of this program will be taught at an off-campus location.

The program, as it is offered now, has a COA-approved distance education package. Per COA standards, a program is considered face-to-face as long as the distance course work does not exceed 50% of the hours offered in the degree program. Our projected DNAP is 99 credit hours with 22 being offered as distance or hybrid (23%). This proposed delivery system is similar to the current MSNA and we do not anticipate any specialized services needed or greater than normal financial support.

The way we have organized and sequenced the courses in the DNAP curriculum allows students to complete a substantial amount of foundational coursework before entering the clinical portions of the program. The program begins with one semester (6 credits) of distance-based courses, allowing students the option to defer relocating to Panama City and/or continuing to work as an RN, if the student chooses. Students would need to be on-campus in Panama City starting in semester two when core courses begin, which consist of anatomy, physiology, pharmacology, health assessment, chemistry, biochemistry, physics, and simulation. Simulation and pharmacology courses continue into semester three, along with pathophysiology, basic foundations of anesthesia, and nurse anesthesia role development. Semesters four and five consist of advanced principles of anesthesia, anesthesia specialty coursework, and evidenced-based practice and statistics courses. Students enter clinical practica for the first time at one day per week during semester four, and two days per week in semester five. DNAP project proposal development begins in semester six and students are in clinicals four days per week. DNAP project implementation and analysis takes place in semester seven while students are in clinicals four days per week. In semester eight, students begin their senior comprehensive review coursework, are in clinical practice three days per week, and participate in DNAP residency, where they will finalize their projects and finish their scholarly work, including dissemination of their work at a regional, state, or national conference. In semester 9, the last semester of the program, students conclude their senior comprehensive review coursework and are in clinical practice four days per week.

IX. Faculty Participation

- A. Use Table 4 in Appendix A to identify existing and anticipated full-time (not visiting or adjunct) faculty who will participate in the proposed program through Year 5. Include (a) faculty code associated with the source of funding for the position; (b) name; (c) highest degree held; (d) academic discipline or specialization; (e) contract status (tenure, tenure-earning, or multi-year annual [MYA]); (f) contract length in months; and (g) percent of annual effort that will be directed toward the proposed program (instruction, advising, supervising internships and practica, and supervising thesis or dissertation hours).**

As shown in Table 4 in Appendix A, we plan to have 4 full-time, 12-month faculty with 100% of their effort assigned to the DNAP program during Year 1. By Year 5, we plan to increase that to 6 full-time, 12-month faculty with 100% of their effort assigned to the DNAP program to account for program growth and increased student research mentorship.

All core faculty for the DNAP program will have doctoral degrees and significant experience as a CRNA. Additionally, having faculty who are current in the nurse anesthesia field will provide students the benefit of up-to-date knowledge and research, and most effective, evidence-based practices. Below is additional information about the faculty and clinical coordinators who will be involved with the DNAP program.

Current Nurse Anesthesia Core Faculty

Stacey VanDyke, DNP, CRNA

Lonnie Hodges, DNP, CRNA

Gerard Hogan, DNsc, CRNA

Scott Stewart, MSN, CRNA (DNAP anticipated August 2020)* currently visiting faculty

Given the clinical nature of this program, our clinical coordinators at partnering hospitals will also play a key role in overseeing students while they are conducting their clinical experiences and fulfilling their clinical practicum requirements. The following personnel will continue to serve as clinical coordinators through the DNAP program:

Clinical Coordinators

Lisa Mills, CRNA, Clinical Coordinator at Memorial Healthcare System

Laura Martin, CRNA, Clinical Coordinator at Providence Hospital

Jason Smith, CRNA, Clinical Coordinator at Jackson Hospital

Kevin Lopeman, CRNA, Clinical Coordinator at Capital Regional Medical Center and Tallahassee Memorial Hospital

Mike Rimes, CRNA, Clinical Coordinator at West Florida Hospital

Bonnie Cook, CRNA, Clinical Coordinator at Flowers Hospital

Russel Joy-Paragas, CRNA, Clinical Coordinator at Joe DiMaggio Children's Hospital

Debbie Malcolm, CRNA, Clinical Coordinator at Florida Medical Center

Anil Abraham, MDA, Clinical Coordinator at Florida Medical Center

Justin Kelly, CRNA, Clinical Coordinator at Bay Medical Center

Clint Christensen, MDA, Clinical Coordinator at Memorial Hospital Miramar

Ashley Madsen, CRNA, Clinical Coordinator at Memorial Regional Hospital

Faith Colley, CRNA, Clinical Coordinator at Fort Walton Beach Medical center

We anticipate hiring at least 2 new hires for the DNAP program prior to Year 5. All additional teaching faculty will be sought as needed through hiring processes set forth by FSU, community connections, and searching for faculty with experience at other major universities. FSU Panama City (FSUPC) will ensure that all future faculty will meet or exceed Policy 3A-2 as found in the Faculty Development and Advancement section of the Florida State University Regulations and Policies.

- B. Use Table 2 in Appendix A to display the costs and associated funding resources for existing and anticipated full-time faculty (as identified in Table 4 in Appendix A). Costs for visiting and adjunct faculty should be included in the category of Other Personnel Services (OPS). Provide a narrative summarizing projected costs and funding sources.**

As mentioned previously in this proposal, the CRNA profession is a lucrative one, and salaries average \$160,000 - \$170,000 per year for CRNA clinicians. In this program, the CRNA faculty salaries are comparable to that market rate. Table 2 in Appendix A lists the projected costs for the faculty, staff, and other expenses for the DNAP at Year 1 and Year 5. All expenses will be supported by the Nurse Anesthesia Program Budget and E&G funds. As mentioned above in Section III.A., the Nurse Anesthesia program is projected to generate \$1,824,000 from tuition in 2021 and we anticipate E&G funds of \$1,627,200 for year 1 (2021; generated tuition minus all fees), which will support all estimated expenses for the program in Year 1 (\$1,164,000). At Year 5, we expect \$2,052,000 to be collected in tuition with \$1,830,600 in E&G funds available to the program for operations (tuition minus fees), and these funds will support the Year 5 estimated expenses of \$1,735,000.

Also listed in Table 2-Appendix A are estimated expenses for OPS employees in the amount of \$100,000. These anticipated expenses are based on our current MSNA program expenses that would continue with the DNAP and include costs associated with employment of Clinical Supervisors at practicum sites, adjunct faculty teaching in the program, graduate program assistants, and IT support staff.

- C. Provide in the appendices the abbreviated curriculum vitae (CV) for each existing faculty member (do not include information for visiting or adjunct faculty).**

Abbreviated CVs are provided in the appendices for each faculty member.

D. Provide evidence that the academic unit(s) associated with this new degree have been productive in teaching, research, and service. Such evidence may include trends over time for average course load, FTE productivity, student HC in major or service courses, degrees granted, external funding attracted, as well as qualitative indicators of excellence.

Faculty in the academic unit of the Nurse Anesthesia Program at the Panama City campus of FSU were included in this report. To demonstrate that the academic unit associated with the DNAP has been productive in teaching, research, and service, below are summaries of teaching, research, and service for the Nurse Anesthesia faculty at FSU Panama City from 2017-19.

The Nurse Anesthesia Faculty included in this summary report were Dr. Stacey VanDyke, Dr. Lonnie Hodges, Dr. Gerard Hogan, and Scott Stewart, all of whom are also CRNAs.

Teaching

Summary of Student Research Supervision

Level	Supervisory Committee Role	Current Students	Current Candidates	Graduated in Reporting Period
Doctoral	Chair	5		
	Co-Chair			
	Univ. Rep.	1		
	Member	1	1	1
Master's	Chair	4		4
	Co-Chair	1		
	Member	10		3
Bachelor's	Chair	5		2
	Member			1

Research and Original Creative Work

Publications

Category	2015		2016		2017		2018		2019	
	Number	Avg.	Number	Avg.	Number	Avg.	Number	Avg.	Number	Avg.
Invited Journal Articles					1	0.0			1	0.0
Refereed Journal Articles	8	0.2	4	0.1	7	0.2	3	0.1	5	0.1
Nonrefereed Journal Articles					2	0.0				
Invited Books							1	0.0		
Refereed Books	2	0.0								
Edited Books	1	0.0								
Nonrefereed Books							1	0.0		
Invited Book Chapters	1	0.0	1	0.0						
Refereed Book Chapters			1	0.0	3	0.1	2	0.0		
Refereed Proceedings	3	0.1	5	0.1	3	0.1	11	0.3	3	0.1
Refereed Reviews - Published in Journal	5	0.1	2	0.0	2	0.0	5	0.1	4	0.1
Refereed Tests, Instruments, or Assessment Measures			1	0.0						
Refereed Reports	1	0.0			2	0.0				
Total	21	0.5	14	0.3	20	0.5	23	0.6	13	0.3

Presentations

Category	2015		2016		2017		2018		2019	
	Number	Avg.	Number	Avg.	Number	Avg.	Number	Avg.	Number	Avg.
Refereed Papers at Conferences	2	0.0	2	0.0	1	0.0	8	0.2	6	0.1
Refereed Papers at Symposia							2	0.0		
Invited Keynote and Plenary Presentations at Conferences							1	0.0		
Invited Keynote and Plenary Presentations at Symposia							1	0.0		
Invited Presentations at Conferences	4	0.1	3	0.1	3	0.1	2	0.0	1	0.0
Refereed Presentations at Conferences	2	0.0	1	0.0	3	0.1	2	0.0	2	0.0
Nonrefereed Presentations at Conferences			4	0.1	6	0.1	1	0.0		
Invited Presentations at Symposia									1	0.0
Refereed Presentations at Symposia	1	0.0	1	0.0	1	0.0	2	0.0		
Invited Workshops							2	0.0		
Nonrefereed Workshops	1	0.0	1	0.0						
Invited Lectures and Readings of Original Work			3	0.1	3	0.1	2	0.0		
Total	10	0.2	15	0.4	17	0.4	23	0.6	10	0.2

Service***Florida State University***

Category	2015		2016		2017		2018		2019	
	Number	Avg.	Number	Avg.	Number	Avg.	Number	Avg.	Number	Avg.
FSU University Service	36	0.9	39	1.0	49	1.2	66	1.6	56	1.4
FSU College Service	16	0.4	15	0.4	17	0.4	24	0.6	33	0.8
FSU Department Service	19	0.5	23	0.6	23	0.6	28	0.7	26	0.6
FSU Institute or Center Service			1	0.0	1	0.0	2	0.0	2	0.0
FSU Program Service	10	0.2	13	0.3	14	0.3	20	0.5	16	0.4
Total	81	2.0	91	2.2	104	2.5	140	3.4	133	3.2

The Profession

Category	2015		2016		2017		2018		2019	
	Number	Avg.	Number	Avg.	Number	Avg.	Number	Avg.	Number	Avg.
Editor for Refereed Journals	1	0.0	2	0.0	2	0.0	2	0.0	2	0.0
Editorial Board Membership(s)	2	0.0	3	0.1	1	0.0	1	0.0	1	0.0
Guest Reviewer for Refereed Journals	21	0.5	21	0.5	23	0.6	22	0.5	20	0.5
Reviewer for Textbooks	4	0.1	1	0.0	5	0.1	14	0.3	2	0.0
Judge for an Exhibition							1	0.0		
Chair of a Symposium			1	0.0			1	0.0		
Service to Professional Associations	8	0.2	14	0.3	12	0.3	15	0.4	14	0.3
Interviews							6	0.1		
Total	36	0.9	42	1.0	43	1.0	62	1.5	39	1.0

X. Non-Faculty Resources

- A. Describe library resources currently available to implement and/or sustain the proposed program through Year 5. Provide the total number of volumes and serials available in this discipline and related fields. List major journals that are available to the university's students. Include a signed statement from the Library Director that this subsection and subsection B have been reviewed and approved.**

The FSU Libraries - The University Libraries' collections include over 4.0 million titles, and the website offers access to more than 1,064 databases and 119,385 electronic journals. Materials not available online or at the libraries may be requested through interlibrary loan or through the statewide UBBorrow system, offering FSU faculty and students over 15 million books from 39 other state university and college libraries.

The FSU Libraries include the FSUPC Campus Library in Panama City; eight libraries in Tallahassee (the Robert Manning Stroz Library, Paul A. M. Dirac Science Library, Mildred and Claude Pepper Library, Warren Allen Music Library, Harold Goldstein Library and Information Studies Library, College of Law Legal Research Center, College of Medicine Maguire Medical Library, and the College of Engineering Library); the John and Mable Ringling Museum in Sarasota; and international study centers at London, Florence, and The Republic of Panama.

FSU, Panama City Library (Library and Learning Center) The FSUPC Campus Library is part of the Florida State University Libraries and plays a cooperative role within the library system, providing students, staff, and faculty with collections, resources, and services to enhance the learning, research, and service activities of the Florida State University. The FSUPC Library has a panoramic view of Saint Andrew Bay and serves as the central and busiest service point on campus. The library is open seven days a week for a total of 102 hours.

In FY2017/18, the library recorded 36,828 library visits, including student, staff, faculty, and community members who entered our library to 1) accomplish individual and group study, 2) use the library's computer hardware and software to complete their coursework, 3) request expert reference help with research strategies, 4) access print and digital resources via the FSU Libraries' catalog and databases, FSUPC's local collection, Express Delivery, Interlibrary Loan, and Uborrow, 5) use our public printing and scanning services, and 6) attend library instruction sessions. For distant learners and other off-campus library users, online research services are available. In addition to remote and on-campus access to all digital resources, FSUPC students and faculty have access to the FSU Panama City Library's physical collection and enjoy same-day delivery of physical items from the eight other libraries in Tallahassee.

The FSUPC Library's professional staff work with faculty as subject liaisons: staff engage in the research, teaching, and learning process; communicate information about library services; respond to the scholarly information needs of faculty; and conduct collection development activities to maintain current, high-quality resources that support the curriculum.

Description of Collections - The FSU Library system provides an allocation of funds for subject area collection development to purchase scholarly print and electronic books and media (DVDs, streaming services). Departmental faculty and subject librarians select materials to support the curriculum and research interests of the department. The library also maintains approval plans (books that are sent automatically when subject area and other non-subject area criteria are met based on a pre-defined profile) across many subject areas. In text-intensive subject areas, the library has a preference for electronic books. The library currently has access to approximately 200,000 scholarly e-books with circulation exceeding 1,000,000 uses per year.

In addition to departmental allocations, the library provides supplemental funds to support individual faculty research in the following forms:

1. New Faculty Grants. All incoming full-time faculty receive \$1,000 toward the one-time purchase of scholarly materials to support their area of research.
2. Bradley Research Grants. The library allocates funds on an annual basis to support competitive proposals for faculty to request research materials that are more expensive than other funding sources can consider. Typically \$100,000 is allocated. The program is administered through the Faculty Senate Library Committee.
3. The Nurse Anesthesia program at FSUPC has full access to the online scholarly resources of both the FSU Libraries and the FSU Maguire Medical Library (millions of books and articles) as well as the print collections of the FSU Panama City Library and the eight Tallahassee physical libraries through same-day express delivery.

Databases A comprehensive collection of over 100 nurse health and medicine databases are available to our Nurse Anesthesia students and faculty; the following are some of the most popular:

- Access Medicine
- Access Surgery

- Bacteriology Abstracts (Microbiology B)
- Bassett Collection of Stereoscopic Images of the Human Anatomy
- Biosis Citation Index
- Books@Ovid
- CINAHL Plus with Full Text
- ClinicalKey
- Cochrane Library
- DynaMed Plus
- Facts and Comparisons eAnswers
- Health and Wellness Resource Center
- MEDLINE (PubMed)
- Medscape
- Nature Journals
- PsycINFO (APA)
- PsycINFO (ProQuest)
- PubMed (NLM)
- Testing and Education Reference Center (TERC)
- Thieme E-Book Library
- Toxicology Abstracts
- TOXLINE
- UCentral
- Virology & AIDS Abstracts
- World Health Organization Institutional Repository (WHO IRIS)

Shared collection development within the State and region - The library participates in a number of collaborative collection development and resource-sharing programs with other colleges and universities within the state. The Florida Electronic Library (FEL) and the Florida Academic Library Services Consortium (FALSC) license content that is available to students and faculty at FSU. FEL is administered through the State Library of Florida; FALSC is a division of the Florida Virtual Campus and operates the integrated library system of the state's 40 colleges and universities. The library also benefits from a cooperative agreement with other state university libraries that allows shared access to e-books across all subject areas.

Books and Journals - The professional library staff of the FSUPC campus ensures the availability of core research titles and consults with Nurse Anesthesia faculty to develop the local collection—and guide university-wide acquisitions—to meet the unique needs of our Nurse Anesthesia curriculum. The FSU collection currently contains hundreds of research monographs and journals that relate to nurse anesthesia, covering topics such as ultrasound, cardiothoracic, anesthesia complications, pharmacology, airway, pediatric, emergencies, obstetric, and equipment.

Comparing the FSU Libraries' Nurse Anesthesia Collection to the Top-Ten Nurse Anesthesia Schools ranked by U.S. News and World Report - Only four of the top-ten-ranked NA programs own more anesthesia books--and only six programs own more anesthesia journals than Florida State University.

Books

University	Journals	Books
1 - Virginia Commonwealth University	113	1746
2 - Baylor College of Medicine	98	1456
7 - University of Pittsburgh	135	1426
3 - Duke University	103	1401
Florida State University	71	1057
9 - University of Texas Health Science Center--Houston	53	879
6 - Uniformed Services University of the Health Science	29	294
4 - Keiser Permanente School of Anesthesia - California State University --Fullerton	76	283
5 - Rush University	67	201
8 - U.S. Army Graduate Program in Anesthesia Nursing	99	143
10 - Georgetown University	66	112

Journals

University	Journals	Books
7 - University of Pittsburgh	135	1426
1 - Virginia Commonwealth University	113	1746
3 - Duke University	103	1401
8 - U.S. Army Graduate Program in Anesthesia Nursing	99	143
2 - Baylor College of Medicine	98	1456
4 - Keiser Permanente School of Anesthesia - California State University --Fullerton	76	283
Florida State University	71	1057
5 - Rush University	67	201
10 - Georgetown University	66	112
9 - University of Texas Health Science Center--Houston	53	879
6 - Uniformed Services University of the Health Science	29	294

Services Related to Collections:

Library Instruction - The FSU Libraries partner with our faculty and students to link teaching and research to the many resources and services we provide. To help students learn research strategies and develop critical thinking skills, individual consultation and targeted group instruction are provided, following the *Framework for Information Literacy for Higher Education* developed by the Association of College and Research Libraries (ACRL). Instruction is provided by an experienced reference librarian onsite with an MLS from an ALA-accredited institution – and is supplemented by subject experts from Tallahassee; 2018 assessment reflected a 92.59% student satisfaction (good or excellent) with library instruction to classroom groups at FSU, Panama City.

Research Consultation Service - University Libraries offer a research consultation service for students and faculty. Consultations are usually scheduled with a librarian or a team of librarians to discuss some aspect of the research or publication process. Consultations may cover many topics, including developing a search strategy, beginning a literature review, managing reference and citations, locating and using data sources, determining impact of research, creating a data management plan, and making research open access.

Library Express Delivery - The Library Express Delivery Service (LEDS) offers same-day delivery of library books from the eight Tallahassee branch libraries to Panama City students, staff, and faculty. Print article and microfilm requests are scanned and emailed directly to the researchers. Materials available for delivery requests include the collections of all FSU libraries, the remote storage facilities, and materials received through Interlibrary Loan.

ILL and UBBorrow for Books and Journal Articles - When resources are not available within the FSU libraries, Interlibrary Loan (ILL) will request books, articles, and media from other libraries around the world. When materials cannot be borrowed, then ILL will often purchase the items in order to quickly meet research needs. UBBorrow, the unmediated borrowing service among the Florida College System and the State University System, allows the FSU community to request books directly from the shared union

catalog.

Open Access, Data Management, and Digital Scholarship (current contact is Devin Soper) - FSU Libraries' Office of Digital Research and Scholarship (DRS) provides support, infrastructure, and consulting for technology-focused research projects in the areas of digital humanities, academic/digital publishing, data management, and digital pedagogy. DRS is focused on building collaborative research partnerships across disciplines, providing platforms for new forms of scholarship, developing open access and data management policies, and integrating digital tools and methodologies into the classrooms.

Facilities - The FSU, Panama City Library has 94 seats, six study rooms, a library instruction room, and a loft area. The loft area has five study lounges optimized for individual study with privacy screens, power, and task lighting. Two of the study rooms have 65" monitors for group collaborative work.

Computing Resources - Students use the library's 54 computer workstations to access library resources and complete their coursework. The library offers Microsoft Office and Adobe Creative Cloud suites on all computers, along with specialized software applications needed by students and instructors. The library has highspeed WiFi for portable computing and popular technology items for patron checkout.

Library hours - The FSUPC library serves FSU students and faculty seven days a week for a total of 70 open hours.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
8am-9pm	8am-9pm	8am-9pm	8am-9pm	10am-4pm	12pm-6pm	12pm-6pm

- B. Describe additional library resources that are needed to implement and/or sustain the program through Year 5. Include projected costs of additional library resources in Table 2 in Appendix A. Please include the signature of the Library Director in Appendix B.**

The library director, Shaun Saxon, is preparing resources for the DNAP program as outlined in the above section. The only anticipated needs would include updates that are normally accessed within the library system.

- C. Describe classroom, teaching laboratory, research laboratory, office, and other types of space that are necessary and currently available to implement the proposed program through Year 5.**

The Nurse Anesthesia Program is housed in the Bayside Building of the Panama City Campus. The program has exclusive access to a classroom that can seat 60 students. The program also has exclusive access to a classroom in the technology building which seats 24 students. The program has access to shared spaces as well to include the Bayside Auditorium, which was technologically enhanced and upgraded in 2017 specifically to meet the current and future needs of the program. The shared space would need to be scheduled in advance to accommodate the program needs.

The simulation lab, housed within the Technology Building, is equipped with a human patient simulator as well an anesthesia machine, ultrasound equipment, and state of the art task trainers for student simulation of clinical procedures. This lab was also outfitted in 2018 with new high-fidelity equipment. All classroom, simulation, and research space is currently available to implement the program through Year 5.

- D. Describe additional classroom, teaching laboratory, research laboratory, office, and other space needed to implement and/or maintain the proposed program through Year 5. Include any projected Instruction and Research (I&R) costs of additional space in Table 2 in Appendix A. Do not include costs for new construction because that information should be provided in response to X (E) below.**

N/A

- E. If a new capital expenditure for instructional or research space is required, indicate where this item appears on the university's fixed capital outlay priority list. Table 2 in Appendix A includes only Instruction and Research (I&R) costs. If non-I&R costs, such as indirect costs affecting libraries and student services, are expected to increase as a result of the program, describe and estimate those expenses in narrative form below. It is expected that high enrollment programs in particular would necessitate increased costs in non-I&R activities.**

N/A

- F. Describe specialized equipment that is currently available to implement the proposed program through Year 5. Focus primarily on instructional and research requirements.**

The simulation lab houses the only specialized equipment required for the DNAP program, and that was outfitted in 2018 with the most current equipment to date. The current simulation equipment is under a five-year warranty with the ability to extend. Aside from potential upgraded modules, the program does not foresee any needs and has sufficient equipment available to implement the program through Year 5.

- G. Describe additional specialized equipment that will be needed to implement and/or sustain the proposed program through Year 5. Include projected costs of additional equipment in Table 2 in Appendix A.**

N/A

- H. Describe any additional special categories of resources needed to implement the program through Year 5 (access to proprietary research facilities, specialized services, extended travel, etc.). Include projected costs of special resources in Table 2 in Appendix A.**

N/A

- I. Describe fellowships, scholarships, and graduate assistantships to be allocated to the proposed program through Year 5. Include the projected costs in Table 2 in Appendix A.**

N/A

- J. Describe currently available sites for internship and practicum experiences, if appropriate to the program. Describe plans to seek additional sites in Years 1 through 5.**

We have existing contractual relationships with clinical sites in our MSNA program, and we will continue those clinical agreements with the DNAP. We have included a list of the existing clinical sites that we utilize for practicum experiences for our students. Three additional clinical sites in the Orlando region are currently under review at the Council on Accreditation for approval. Our MSNA program categorizes clinical sites into regions. Clinical sites are subject to change due to an at-will relationship, but we anticipate utilizing all of these sites through year five of the DNAP. This mix of available sites allows the students to get the case types and numbers that are required for graduation.

Panhandle Florida/South Alabama

Bay Medical Center Sacred Heart Health Systems (Panama City, FL)
 Capital Regional Medical Center (Tallahassee, FL)
 Flowers Hospital (Dothan, AL)
 Gulf Coast Regional Medical Center (Panama City, FL)
 Jackson Hospital (Marianna, FL)
 Northwest Florida Community Hospital (Chipley, FL- inactive)
 The Eye Center of Northwest Florida (Panama City, FL)
 Tallahassee Memorial HealthCare (Tallahassee, FL)
 Southeast Alabama Medical Center (Dothan, AL)

North/Central Florida

AdventHealth (Orlando, FL)
AdventHealth (Altamonte Springs, FL)
AdventHealth (Celebration, FL)
AdventHealth (Winter Park, FL)
Baptist Beaches Medical Center (Jacksonville, FL)
Baptist Medical Center Downtown (Jacksonville, FL)
Baptist Medical Center South (Jacksonville, FL)

West Florida/Gulf Coast Alabama

Eglin Air Force Base (Eglin AFB, FL)
Fort Walton Beach Medical Center (Ft. Walton Beach, FL)
Pensacola Sacred Heart Hospital (Pensacola, FL- inactive)
Providence Hospital (Mobile, AL)
West Florida Hospital (Pensacola, FL)

South Florida

Florida Medical Center (Lauderdale Lakes, FL)
Joe DiMaggio Children's Hospital (Hollywood, FL)
Memorial Regional Hospital (Hollywood, FL)
Memorial Hospital Miramar (Miramar, FL)

APPENDIX B

Please include the signature of the Equal Opportunity Officer and the Library Director.

_____ Signature of Equal Opportunity Officer	_____ Date
_____ Signature of Equal Opportunity Officer	_____ Date
_____ Signature of Library Director	_____ Date

This appendix was created to facilitate the collection of signatures in support of the proposal. Signatures in this section illustrate that the Equal Opportunity Officer has reviewed section II.E of the proposal and the Library Director has reviewed sections X.A and X.B.

APPENDIX A

**TABLE 1-A
PROJECTED HEADCOUNT FROM POTENTIAL SOURCES
(Baccalaureate Degree Program)**

Source of Students (Non-duplicated headcount in any given year)*	Year 1		Year 2		Year 3		Year 4		Year 5	
	HC	FTE	HC	FTE	HC	FTE	HC	FTE	HC	FTE
Upper-level students who are transferring from other majors within the university**	0	0	0	0	0	0	0	0	0	0
Students who initially entered the university as FTIC students and who are progressing from the lower to the upper level***	0	0	0	0	0	0	0	0	0	0
Florida College System transfers to the upper level***	0	0	0	0	0	0	0	0	0	0
Transfers to the upper level from other Florida colleges and universities***	0	0	0	0	0	0	0	0	0	0
Transfers from out of state colleges and universities***	0	0	0	0	0	0	0	0	0	0
Other (Explain)***	0	0	0	0	0	0	0	0	0	0
Totals	0	0	0	0	0	0	0	0	0	0

* List projected annual headcount of students enrolled in the degree program. List projected yearly cumulative ENROLLMENTS instead of admissions.

** If numbers appear in this category, they should go DOWN in later years.

*** Do not include individuals counted in any PRIOR CATEGORY in a given COLUMN.

APPENDIX A
TABLE 1-B
PROJECTED HEADCOUNT FROM POTENTIAL SOURCES
(Graduate Degree Program)

Source of Students (Non-duplicated headcount in any given year)*	Year 1		Year 2		Year 3		Year 4		Year 5	
	HC	FTE	HC	FTE	HC	FTE	HC	FTE	HC	FTE
Individuals drawn from agencies/industries in your service area (e.g., older returning students)	0	0	0	0	0	0	0	0	0	0
Students who transfer from other graduate programs within the university**	0	0	0	0	0	0	0	0	0	0
Individuals who have recently graduated from preceding degree programs at this university	6	6	12	12	18	18	18	18	18	18
Individuals who graduated from preceding degree programs at other Florida public universities	12	12	24	24	36	36	36	36	36	36
Individuals who graduated from preceding degree programs at non-public Florida institutions	0	0	0	0	0	0	0	0	0	0
Additional in-state residents***	0	0	0	0	0	0	0	0	0	0
Additional out-of-state residents***	6	6	12	12	18	18	18	18	18	18
Additional foreign residents***	0	0	0	0	0	0	0	0	0	0
Other (Explain)***	0	0	0	0	0	0	0	0	0	0
Totals	24	24	48	48	72	72	72	72	72	72

- * List projected annual headcount of students enrolled in the degree program. List projected yearly cumulative ENROLLMENTS instead of admissions.
- ** If numbers appear in this category, they should go DOWN in later years.
- *** Do not include individuals counted in any PRIOR category in a given COLUMN.

APPENDIX A

TABLE 2
PROJECTED COSTS AND FUNDING SOURCES

Instruction & Research Costs (non-cumulative)	Year 1								Year 5						
	Funding Source							Subtotal columns 1+...+7	Funding Source						Subtotal columns 9+...+ 14
	Reallocated Base* (E&G)	Enrollment Growth (E&G)	New Recurring (E&G)	New Non-Recurring (E&G)	Contracts & Grants (C&G)	Philanthropy/ Endowments	Enterprise Auxiliary Funds		Continuing Base** (E&G)	New Enrollment Growth (E&G)	Other*** (E&G)	Contracts & Grants (C&G)	Philanthropy/ Endowments	Enterprise Auxiliary Funds	
Columns	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Faculty Salaries and Benefits	884,000	0	0	0	0	0	0	\$884,000	1,300,000	0	0	0	0	0	\$1,300,000
A & P Salaries and Benefits	90,000	0	0	0	0	0	0	\$90,000	170,000	0	0	0	0	0	\$170,000
USPS Salaries and Benefits	0	0	0	0	0	0	0	\$0	0	0	0	0	0	0	\$0
Other Personal Services	100,000	0	0	0	0	0	0	\$100,000	150,000	0	0	0	0	0	\$150,000
Assistantships & Fellowships	0	0	0	0	0	0	0	\$0	0	0	0	0	0	0	\$0
Library	0	0	0	0	0	0	0	\$0	0	0	0	0	0	0	\$0
Expenses	90,000	0	0	0	0	0	0	\$90,000	115,000	0	0	0	0	0	\$115,000
Operating Capital Outlay	0	0	0	0	0	0	0	\$0	0	0	0	0	0	0	\$0
Special Categories	0	0	0	0	0	0	0	\$0	0	0	0	0	0	0	\$0
Total Costs	\$1,164,000	\$0	\$0	\$0	\$0	\$0	\$0	\$1,164,000	\$1,735,000	\$0	\$0	\$0	\$0	\$0	\$1,735,000

*Identify reallocation sources in Table 3.

**Includes recurring E&G funded costs ("reallocated base," "enrollment growth," and "new recurring") from Years 1-4 that continue into Year 5.

***Identify if non-recurring.

Faculty and Staff Summary

Total Positions	Year 1	Year 5
Faculty (person-years)	4.00	6.00
A & P (FTE)	1	2
USPS (FTE)	0	0

Calculated Cost per Student FTE

	Year 1	Year 5
Total E&G Funding	\$1,164,000	\$1,735,000
Annual Student FTE	24	72
E&G Cost per FTE	\$48,500	\$24,097

Table 2 Column Explanations

Reallocated Base* (E&G)	1	E&G funds that are already available in the university's budget and will be reallocated to support the new program. Please include these funds in the Table 3 - Anticipated reallocation of E&G funds and indicate their source.
-------------------------	---	--

Enrollment Growth (E&G)	2	Additional E&G funds allocated from the tuition and fees trust fund contingent on enrollment increases.
New Recurring (E&G)	3	Recurring funds appropriated by the Legislature to support implementation of the program.
New Non-Recurring (E&G)	4	Non-recurring funds appropriated by the Legislature to support implementation of the program. Please provide an explanation of the source of these funds in the budget section (section III. A.) of the proposal. These funds can include initial investments, such as infrastructure.
Contracts & Grants (C&G)	5	Contracts and grants funding available for the program.
Philanthropy Endowments	6	Funds provided through the foundation or other Direct Support Organizations (DSO) to support of the program.
Enterprise Auxiliary Funds	7	Use this column for continuing education or market rate programs and provide a rationale in section III.B. in support of the selected tuition model.
Subtotal columns 1+...+7	8	Subtotal of values included in columns 1 through 7.
Continuing Base** (E&G)	9	Includes the sum of columns 1, 2, and 3 over time.
New Enrollment Growth (E&G)	10	See explanation provided for column 2.
Other*** (E&G)	11	These are specific funds provided by the Legislature to support implementation of the program.
Contracts & Grants (C&G)	12	See explanation provided for column 5.
Philanthropy Endowments	13	See explanation provided for column 6.
Enterprise Auxiliary Funds	14	Use this column for continuing education or market rate programs and provide a rationale in section III.B. in support of the selected tuition model.
Subtotal columns 9+...+ 14	15	Subtotal of values included in columns 9 through 14.

APPENDIX A

TABLE 3
ANTICIPATED REALLOCATION OF EDUCATION & GENERAL FUNDS*

Program and/or E&G account from which current funds will be reallocated during Year 1	Base before reallocation	Amount to be reallocated	Base after reallocation
301640 - PCC Nurse Anesthesia Program	1,337,128	1,164,000	\$173,128
	0	0	
	0	0	
	0	0	
	0	0	
	0	0	
Totals	\$1,337,128	\$1,164,000	\$173,128

* If not reallocating funds, please submit a zeroed Table 3

APPENDIX A

**TABLE 4
ANTICIPATED FACULTY PARTICIPATION**

Faculty Code	Faculty Name or "New Hire" Highest Degree Held Academic Discipline or Speciality	Rank	Contract Status	Initial Date for Participation in Program	Mos. Contract Year 1	FTE Year 1	% Effort for Prg. Year 1	PY Year 1	Mos. Contract Year 5	FTE Year 5	% Effort for Prg. Year 5	PY Year 5
A	Stacey Van Dyke, DNP Anesthesia	Program Director	MYA	Summer 2021	12	1.00	1.00	1.00	12	1.00	1.00	1.00
A	Lonnie Hodges, DNP Anesthesia	Asst Program Director	MYA	Summer 2021	12	1.00	1.00	1.00	12	1.00	1.00	1.00
A	Gerard Hogan, D.Nsc Critical Care Nursing	Teaching Faculty	MYA	Summer 2021	12	1.00	1.00	1.00	12	1.00	1.00	1.00
A	Scott Stewart, MSN (DNAP anticipated Aug 2020) Nurse Anesthesia	Teaching Faculty	MYA	Summer 2021	12	1.00	1.00	1.00	12	1.00	1.00	1.00
C	New Hire, DNP or PhD Anesthesia, Sciences	Teaching Faculty	MYA	Fall 2022					12	1.00	1.00	1.00
C	New Hire, PhD Anesthesia, Research	Teaching Faculty	MYA	Fall 2023					12	1.00	1.00	1.00
	Total Person-Years (PY)							4.00				6.00

Faculty Code		Source of Funding	PY Workload by Budget Classification				
			Year 1		Year 5		
A	Existing faculty on a regular line	Current Education & General Revenue	4.00		4.00		
B	New faculty to be hired on a vacant line	Current Education & General Revenue	0.00		0.00		
C	New faculty to be hired on a new line	New Education & General Revenue	0.00		2.00		
D	Existing faculty hired on contracts/grants	Contracts/Grants	0.00		0.00		
E	New faculty to be hired on contracts/grants	Contracts/Grants	0.00		0.00		
Overall Totals for			Year 1	4.00		Year 5	6.00

APPENDIX B

Please include the signature of the Equal Opportunity Officer and the Library Director.




Signature of Equal Opportunity Officer



Date

Signature of Equal Opportunity Officer

Date



Signature of Library Director

(IN LIEU
OF
GAIL
ETSCHMAYER)



Date

This appendix was created to facilitate the collection of signatures in support of the proposal. Signatures in this section illustrate that the Equal Opportunity Officer has reviewed section II.E of the proposal and the Library Director has reviewed sections X.A and X.B.

Curriculum Vitae
Stacey Alicia VanDyke

January 27, 2020

General Information

University address: Nurse Anesthesia Program
PCC Academic Affairs
Panama City Campus
P.C.- BAY BUILDING (BLDG0118)
Florida State University
Panama City, FL 32405
Phone: 850-770-2421

E-mail address: svandyke@fsu.edu

Professional Preparation

2013 DNP, The University of Alabama at Birmingham. Major: Nursing.

2006 MSN, Uniformed Services University of the Health Sciences. Major: Nursing.
Anesthesia.

1994 BSN, Jacksonville State University. Major: Nursing.

Nondegree Education and Training

2008 Air Command Staff College.

2008 Combat Casualty Care Course- resident program.
DMRTI, Ft. Sam Houston/Camp Bullis, TX.

2008 Nursing Service Management, resident program.
class leader, Sheppard AFB, TX.

2007 Center for Sustainment of Trauma and Readiness Skills.
R. Adams Cowley Trauma Center, Baltimore, MD.

2003 Center for Sustainment of Trauma and Readiness Skills.
St. Louis University Hospital, St. Louis, MS.

2003	Squadron Officer School, resident program. outstanding flight.
2002	Squadron Officer School. Correspondence.
2001	Nursing Service Fundamentals.
1998	Junior Officer's Professional Development Course.
1997	Critical Care Air Transport Team Course.

Professional Credential(s)

2006–present	Certified Registered Nurse Anesthetist (CRNA). Advanced Practice Registered Nurse.
1994–present	Registered Nurse (RN).

Professional Experience

2017–present	Assistant Teaching Professor- Program Director, Nurse Anesthesia, Florida State University. Develops and implements departmental mission and vision; contributes to annual program action planning within the context of departmental strategic plan; analyzes program assessment data for programmatic and departmental improvement; maintains programmatic accreditation standards; accreditation planning, preparation and evaluation activities; assesses student academic achievement and other areas of instructional effectiveness; exercises administrative authority regarding budgeted financial resources used to meet accreditation standards, physical-resources, including facilities, equipment, and supplies, learning resources, faculty, support personnel, and access to student services. Manages staff regarding appointment, promotion, retention, and dismissal of full-time, part-time and adjunct faculty in the program; Ensures annual summative and self- evaluation report completion, develops and administers policies and procedures.
2016–present	Teaching Faculty I Program Director, PCC NURSE ANESTHESIA PROGRAM, Florida State University. Develops and implements departmental mission and vision; contributes to annual program action planning within the context of departmental strategic plan; analyzes program assessment data for programmatic and departmental improvement; maintains programmatic accreditation standards; accreditation planning, preparation and evaluation

activities; assesses student academic achievement and other areas of instructional effectiveness; exercises administrative authority regarding budgeted financial resources used to meet accreditation standards, physical-resources, including facilities, equipment, and supplies, learning resources, faculty, support personnel, and access to student services. Manages staff regarding appointment, promotion, retention, and dismissal of full-time, part-time and adjunct faculty in the program; Ensures annual summative and self- evaluation report completion, develops and administers policies and procedures.

- 2014–2016 Lieutenant Colonel, USAF, Director, Nurse Anesthesia Clinical Training, Nurse Anesthesia Education, Uniformed Services University. Coordinated/supervised/ procured rotation schedules for students at military and civilian clinical sites. Led didactic seminars and simulation activities. Led research activities IAW program requirements and best practices. Adjunct assistant professor of multiple online RNA courses. Performed site visits IAW COA standards. Preceptor for doctoral candidates.
- 2016 Teaching Faculty I V. in Lieu, PCC NURSE ANESTHESIA PROGRAM, Florida State University. Developed and instructed courses for the nurse anesthesia program. Maintained and enforced programmatic standards.
- 2013–2016 Adjunct Assistant Professor, Nurse Anesthesia, Uniformed Services University, Daniel K. Inouye School of Nursing. Education and training of Nurse Anesthesia doctoral students.
- 2013–2014 Major, USAF, Research Director, Nurse Anesthesia Clinical Training, Uniformed Services University. Led students in research activities for the Anesthesia training program. Executed Air Force mission of training CRNAs for the Air Force.
- 2011–2013 Major, USAF, AFIT Doctoral Student, United States Air Force. Full time doctoral student, completed scholarly project "Management of Pain and Anxiety in Women Undergoing Needle Localization Breast Biopsy.".
- 2009–2011 Major, USAF, Chief, Anesthesia Services, Anesthesia, United States Air Force Academy. Element leader, led anesthesia providers, contractors, and NCOIC. Performed general, regional, and IV sedation techniques of anesthesia supporting 20 surgeons in six surgical specialties. Additional Duties: Leader, Staff Education/Training, ECONS.
- 2009 Major, USAF, Nurse Anesthetist, Anesthesia, 332 EMDG Balad, Iraq. Led 8 anesthesia providers in productivity providing anesthesia and trauma care to 250 patients undergoing over 400 procedures. Trained 11 Special Forces medics in advanced airway techniques.

2007–2009	Major, USAF, Chief Nurse Anesthetist, Anesthesia, United States Air Force Academy. Performed general, regional and IV sedation techniques of anesthesia supporting 16 surgeons in 6 surgical specialties. Anesthesia Quality Assurance, Education and Training leader, Conscious Sedation oversight; Disaster Team leader.
2004–2006	Captain, USAF, AFIT Student, Nurse Anesthesia Graduate School, Uniformed Services University. Mastering of didactic curriculum and clinical skills as an advanced practice nurse in the delivery of anesthesia care; Principal Investigator for "Relationships, Roles, and Practice of Senior Air Force CRNAS". Graduated #1/63. Agatha Hodgins Award Recipient.
2002–2004	Captain, USAF, Assistant Clinical Nurse Leader, Neonatal Intensive Care, Keesler Air Force Base. Provided care to neonates in level 3 Neonatal Intensive Care Unit. Led parent education classes for unit, education and training leader for staff. Clinical Nurse Council President, Critical Care Air Transport Team.
1999–2002	Captain, USAF, Team Leader/ Preceptor, Cardiothoracic Intensive Care, Keesler Air Force Base. Certified critical care RN for medical, surgical, and cardiothoracic intensive care. Trained 24 nurses in intensive care nursing; leader of education and training. Clinical Nurse Council President.
2001	Captain, USAF, Registered Nurse, Critical Care Air Transport, Seeb Air Base, Oman. Flew critical care air transport missions; provided only critical care capability in AOR at start of Operation ENDURING FREEDOM.
1996–1999	First Lieutenant, USAF, Team Leader/Preceptor, Surgical Intensive Care, Travis Air Force Base. Critical Care nurse for 10 bed surgical and pediatric intensive care unit. Patient educator and staff development officer.

Honors, Awards, and Prizes

Top 10 Ms. Veteran America, Ms. Veteran America/ Final Salute Inc (2018).
Air Force Longevity Service with 4 Oak Leaf Clusters, United States Air Force (2016).
JoAnn Barnett Award for Compassionate Care in Community Service, University of Alabama at Birmingham (2016).
Meritorious Service Medal, United States Air Force (2016).
Nuclear Deterrence Operations Service Medal, United States Armed Forces (2014).
Air Force Organizational Excellence Award, United States Air Force (2011).
Air Force Outstanding Unit Award with Two Oak Leaf Clusters (2010).
Certified Registered Nurse Anesthetist of the Year, United States Air Force Academy Command (2010).
Air Force Commendation Medal Second Oak Leaf Cluster, United States Air Force (2009).
Air Force Expeditionary Service Ribbon with Gold Border, United States Air Force (2009).

Iraq Campaign Medal with 1 Service Star, United States Armed Forces (2009).
Certified Registered Nurse Anesthetist of the Year, United States Air Force Academy Command (2008).
Agatha Hodgins Award for Outstanding Nurse Anesthesia Graduate, Uniformed Services University (2006).
Agatha Hodgins Outstanding Nurse Anesthesia Graduate, Uniformed Services University of the Health Sciences (2006).
Who's Who Among Students in American Universities and Colleges, Uniformed Services University of the Health Sciences (2006).
John F. Garde Scholarship Recipient, American Association of Nurse Anesthetists (2005). (\$1,000).
Air Force Commendation Medal First Oak Leaf Cluster, United States Air Force (2004).
Air Force Achievement Medal, United States Air Force (2002).
Air Force Overseas Ribbon Short, United States Air Force (2001).
Armed Forces Expeditionary Medal, United States Armed Forces (2001).
Global War on Terrorism Service Medal, United States Armed Forces (2001).
National Defense Service Medal, United States Armed Forces (2001).
Air Force Commendation Medal, United States Air Force (1999).

Current Membership in Professional Organizations

American Association of Nurse Anesthetists
Florida Association of Nurse Anesthetists
Sigma Theta Tau
Society of Opioid Free Anesthesia

Teaching

Courses Taught

Advanced Principles of Anesthesia (NGR6424)
Basic Principles of Anesthesia (NGR6420)
Nurse Anesthesia Practice Comprehensive III (NGR6496)
Professional Aspects of Nurse Anesthesia (NGR6492)
Anesthesia Practicum II (NGR6432L)
Anesthesia Practicum V (NGR6435L)
Anesthesia Practicum I (NGR6431L)
Anesthesia Practicum IV (NGR6434L)
Anesthesia Practicum III (NGR6433L)
Anesthesia Practicum VI (NGR6436L)
Nurse Anesthesia Practice Comprehensive II (NGR6495)

Clinical Practice

Jackson Hospital , critical access care (2019)

Digestive Diseases Center of North Florida, regional community (2018)

Eye Center of North Florida, regional community (2018)

Eglin Hospital, all DoD eligible patients (2016)

Wright Patterson Air Force Base Hospital, all DoD eligible patients (2014)

Air Force Academy Hospital, all DoD eligible patients (2011)

Balad, Iraq Field Hospital, military, civilians (2009)

Bethesda Naval Medical Center, graduate student, all DoD eligible patients (2006)

Keesler Air Force Base Hospital, all DoD eligible patients (2004)

Seeb, Oman Tent City Hospital, deployed location, military and civilians (2001)

Travis Air Force Base Hospital, all DoD eligible patients (1999)

Regional Medical Center, community hospital (1996)

Supervision of Clinical Practice

Clinical Practicum students 19 sites (2019)

Doctoral Committee Chair

Ransom, L., doctoral student. *Trigger Films in Nurse Anesthesia Education.*

Bandy, T., doctoral student. [Doctoral Preceptor/ Mentor]

Heering, T., doctoral student. *Current Evidence for Intraoperative Neuromonitoring for 1- and 2-Level Lumbar Fusions.* [Uniformed Services University]

Marquez, L., doctoral student. *Current Evidence for Intraoperative Neuromonitoring for 1- and 2-Level Lumbar Fusions.*

Roark, E., doctoral student. *Current Evidence for Intraoperative Neuromonitoring for 1- and 2-Level Lumbar Fusions.*

Doctoral Committee Member

Smith, J. C., doctoral candidate. *Patient Comfort with Troche Sedation While Undergoing Cataract Surgery*.

Research and Original Creative Work

Publications

Refereed Book Chapters

VanDyke, S., & Montgomery, D. (contract). *Eye Trauma*. Manuscript under contract for publication, Borden Institute, Fort Sam Houston, TX.

Publication is a field manual initiated work while with the Air Force Program. Co-author is not affiliated with any university at this time.

Presentations

Invited Presentations at Conferences

For invited presentations at conferences, 100.0% were national in scope.

Ransom, L., Grey, C., Hylton, M., & VanDyke, S. (presented 2016, September). *Trigger Films in Nurse Anesthesia Education*. Poster presentation at American Association of Nurse Anesthetists Annual Congress, American Association of Nurse Anesthetists, Washington, DC. (National)

Heering, T., Marquez, L., Roark, E., Wofford, K., Hodgen, K., & VanDyke, S. (presented 2015, September). *Current Evidence for Intraoperative Neuromonitoring for 1- and 2-Level Lumbar Fusions*. Poster presentation at American Association of Nurse Anesthetists Annual Congress, American Association of Nurse Anesthetists, Salt Lake City, UT. (National)

VanDyke, S. (presented 2014, September). *Pain and Anxiety in Women Undergoing Needle Localization Breast Biopsy*. Poster presentation at American Association of Nurse Anesthetists World Congress, American Association of Nurse Anesthetists, Orlando, FL. (National)

Contracts and Grants

Contracts and Grants Funded

VanDyke, S. (Jul 2018–Jun 2019). *Nurse Anesthetist Traineeships*. Funded by Health Resources and Services Administration. (A22HP309770200). Total award \$79,111.

VanDyke, S. (Jul 2017–Jun 2018). *Nurse Anesthetist Traineeships*. Funded by Health Resources and Services Administration. (A22HP309770102). Total award \$30,329.

VanDyke, S., Pelham, B., & Myers, M. (May 2017–Jun 2017). *Panama City Technology Enhanced Auditorium/Classroom*. Funded by Florida State University. Total award \$38,065.

VanDyke, S. (Jul 2016–Jun 2017). *Nurse Anesthetist Traineeships*. Funded by Health Resources and Services Administration. (A22HP299120102). Total award \$21,102.

Resource Grant

VanDyke, S. (2017, July–October). A grant of Aestiva Anesthesia Machine. *Equipment Grant*. Sponsored by GE Healthcare.

Service

Florida State University

FSU University Service

Member, Graduate Policy Committee (2017–present).

FSU College Service

Area Coordinator, Program Coordinator (2020–present).

Member, Distance Learning Committee (2019–present).

Member, Curriculum Committee (2018–present).

Member, Faculty Affairs Committee (2017–present).

FSU Department Service

Chair, Admissions Committee (2016–present).

Chair, Faculty Committee (2016–present).

FSU Program Service

Program Coordinator, Nurse Anesthesia Program (2016–present).

The Profession

Service to Professional Associations

Member, Bylaws Committee, American Association of Nurse Anesthetists (2019–present).

Panelist, Continued Professional Certification Assessment Professional Practice Analysis,
National Board of Certification and Recertification for Nurse Anesthetists
(2019–present).

Chair, Resolutions Committee, American Association of Nurse Anesthetists (2018–present).

Member, Student Services Committee, Florida Association of Nurse Anesthetists
(2016–present).

Interviews

Lesley, L. (2018, December). Alumna VanDyke makes Top 10 at Ms. Veteran America. *UAB School of Nursing* [website]. Retrieved from <https://www.uab.edu/nursing/news/home/valuable-resources/item/2285-alumna-vandyke-makes-top-10-at-ms-veteran-america>

Kughn, S. (2018, October). Piedmont native in Top 10 of Ms. Veteran America Contest. *The Anniston Star* [Newspaper]. Retrieved from https://www.annistonstar.com/features/piedmont-native-in-top-of-ms-veteran-america-contest/article_4b31a75c-d3df-11e8-b29f-4f2ff5bc2c7a.html

Breaux, C. (2018, August). FSU PC educator competing to be Ms. Veteran America. *Panama City News Herald* [Newspaper, online and paper]. Retrieved from <https://www.newsherald.com/news/20180828/fsu-pc-educator-competing-to-be-ms-veteran-america>

Martin, E. (2018, August). FSU PC faculty member, vet tackles homelessness for Ms. Veteran America. *FSU Panama City* [web blog]. Retrieved from <https://pc.fsu.edu/article/fsu-pc-faculty-member-vet-tackles-homelessness-ms-veteran-america>

Levy, G. (2018, August). Local woman gets support from Congressman Neal Dunn on a growing issue. *WJHG/WECP* [television]. Retrieved from <https://www.wjhg.com/content/news/Local-woman-gets-support-from-Congressman-Neal-Dunn-on-a-growing-issue-491930961.html>

Thorson, A. (2018, August). Local Veteran Raises Money for Homeless Female Vets at 'Ms. Veteran America' Competition. *News 13* [Television]. Retrieved from <https://www.mypanhandle.com/news/local-veteran-raises-money-for-homeless-female-vets-at-ms-veteran-america-competition/1386944778>

The Community

Top 10 Finalist, Ms. Veteran America, Ms. Veteran America/ Final Salute Inc (2018–present).

Fundraiser, Volunteer, The Journey Home Project (2014–present).

Professional activities that occurred prior to my employment at FSU.

CURRICULUM VITAE

Lonnie Wayne Hodges DNP, CRNA, Lt Col (ret), USAF

4750 Collegiate Drive
Panama City, FL 32405
Lwhodges@fsu.edu
Tel: 850-770-2054
Fax: 850-770-2080

Education:

Year	Degree	Institution/Location/Area of Concentration-Not required
2017	Doctor of Nursing Practice	Univ. of North Florida
2009	Master of Science in Nursing	U.S. Army Graduate Program in Anesthesia Nursing at Fort Sam Houston, TX in association with Northeastern University Boston, MA
1998	Bachelor of Science in Nursing	University of Tennessee Martin, TN

Professional Experience:

Dates	Position title/Institution/Duty Station/Location	Scope of Role
2018-Present	Teaching Faculty, Florida State Univ., Panama City, FL	Provide didactic instruction for Nurse Anesthesia Program and oversee the development and implementation of high fidelity anesthesia simulation lab.
2014-2018	Assistant Professor, Uniformed Services University, Graduate School of Nursing (GSN), Bethesda, MD	Teach graduate level coursework and workshops at USU.
2016-2018	Phase II Clinical Site Dir. Eglin AFB, FL	Responsible for promoting critical thinking through teaching and integration activities of the Graduate School of Nursing. Maintain the educational standards and guidelines developed by the Council on

Dates	Position title/Institution/Duty Station/Location	Scope of Role
		Accreditation of Nurse Anesthesia Educational Programs. Conduct site visits to the various phase II hospitals to ensure compliance with the set standards for nurse anesthesia student practice. Participate in both service and professional activities to include scholarship, research and leadership conferences. Responsible for the delivery of anesthesia as a licensed independent practitioner providing anesthesia services to adult and pediatric patients. Be accessible to students as both a mentor and professor.
2014-2016	Assistant Phase II Clinical Site Director, Walter Reed National Military Medical Center, Bethesda, MD	Responsible for promoting critical thinking through teaching and integration activities of the Graduate School of Nursing. Maintain the educational standards and guidelines developed by the Council on Accreditation of Nurse Anesthesia Educational Programs. Conduct site visits to the various phase II hospitals to ensure compliance with the set standards for nurse anesthesia student practice. Advise in the planning and development of curriculum changes from the current MSN degree to the DNP degree in Anesthesia Nursing. Participate in research activities among students and staff. Participate in both service and professional activities to include scholarship, research and leadership conferences. Responsible for the delivery of anesthesia as a licensed independent practitioner providing anesthesia services to adult and pediatric patients. Be accessible to students as both a mentor and professor.

Dates	Position title/Institution/Duty Station/Location	Scope of Role
2012- 2014	Anesthesia Element Chief, 96 th Medical Group, Eglin AFB, FL	Supervise daily operations of 8 physician and 14 nurse anesthesia providers, 2 anesthesia technicians, and 1 administrative assistant in the delivery of anesthetic care for 4500 operating room cases and 960 laboring mothers annually. Unit supports 7 operating rooms with a budget of \$235,000 annually. Support the training platform for Air Force Special Operations Command, 7 th Special Forces Group, North West Florida Univ. paramedic program, Eglin Family Medicine Residency program, and Eglin Dental Residency program. Continued deployment support to 7 countries on 4 continents.
2010 – 2012	ASU/PACU Element Chief, 96 th Medical Group, Eglin AFB, FL	Directed 24 RN/LPN/technicians in pre-op and recovery room care while contributing to the Anesthesia Element mission as a full time provider. Managed three geographically separated areas with a rotational staffing model for 25 perioperative beds and a pre-operative clinic. Supported Phase II medical technician training, providing preceptors for 3 students per day.
Jun '04-Jun '07	Element Leader, SICU, Wilford Hall Med Ctr, Lackland AFB, TX	12 Bed Neuro/Surgical/Trauma ICU at 225 bed Level 1 Trauma Center. Managed 24 Registered Nurses and 8 technicians in care of trauma patients for South Texas Regional Trauma Service Council's, Trauma Service Area-P. TSA-P encompasses the 26000 square mile area from the San Antonio metropolitan area to the

Dates	Position title/Institution/Duty Station/Location	Scope of Role
Dec '02-Jun '04	Nurse Manager, ICU, Martin Army Community Hospital, Ft. Benning, GA	Mexican Border. Directed daily activities of 9 RNs and 5 LPNs assigned to 11 bed medical/surgical ICU at 250 bed facility for 72,000 beneficiaries.
Jan '00-Dec '02	Nurse Manager, SICU, Eisenhower Army Medical Center, Ft. Gordon, GA	Directed daily activities of 16 RNs and 5 LPNs in operation of 12 bed SICU open heart recovery at Army Southeastern Regional Medical Command.
Aug '98-Jun '00	Nurse Manager Medical/Surgical/Oncology, Eisenhower Army Medical Center, Ft. Gordon, GA	Managed 18 RNs and 6 LPNs in delivery of care on a 36 bed ward at Army Southeastern Regional Medical Center. Certified Chemotherapy nurse and care of implanted radiation device patients.

Honors and Awards:

Year	Award Title	Presented By
2016	Defense Meritorious Service Medal	USUHS, Bethesda, MD
2016	First place winner	RADM Niemyer Award for Evidence Based Practice
2016	First place in the EBP category	National Capital Region research competition
2007	Meritorious Service Medal	59 th Med Wing, Lackland AFB, TX
2006	AF Commendation Medal	37 th Trng Wing, Lackland AFB, TX
2006	Company Grade Officer of the Year	759 th Surgical Operations Squadron, Lackland AFB, TX
2004	Army Commendation Medal	Martin Army Community Hospital, Fort Benning, GA
2002	Army Commendation Medal	Eisenhower Army Medical Center, Fort Gordon, GA
1998	Distinguished Military Graduate	University of Tennessee Martin, TN

Education – Non-Degree Granting:

Year	Course	Location
Sep 2017	AANA Annual Congres	Seattle, WA

Feb 2017	AANA Assembly of School Faculty	Ft. Lauderdale, FL
Sep 2016	AANA Annual Congress	Washington, DC
Feb 2016	AANA Assembly of School Faculty	San Antonio, TX
May 2016	Military Mountain Medicine Course	Tacoma, WA
Sep 2015	AANA Annual Congress	Salt Lake City, UT
Mar 2013	Air Command and Staff College	Eglin AFB, FL
Nov 2010	Expeditionary Medical Support (EMEDS) Brooks City, TX	Brooks City, TX
Mar 2007	Squadron Officer's School (Correspondence)	San Antonio, TX
Sept 2004	Expeditionary Medical Support (EMEDS) Brooks City, TX	Brooks City, TX
Nov 2004	Army Medical Dept Officer Advanced Course	San Antonio, TX
Mar 2001	Combat Casualty Care Course	Camp Bullis, TX
Oct 2000	Brooke Army Medical Center Critical Care Nurse Course	San Antonio, TX
Aug 1998	Army Medical Dept Officer Basic Course	San Antonio, TX
July 1994	U. S. Army Basic Airborne Course	Ft. Benning, GA
Aug 1992	U. S. Army Basic Training	Ft. Leonardwood, MO

Publications:

Peer reviewed/refereed journal (* databases)

*Gegel, B.T., Burgert, J.M., Lockhart, C., Austin III, R., Davila, A., Deeds, J., **Hodges, L.**, Hover, A., Roy, J., Simpson, G., Weaver, S., Wolfe, W., Johnson, D. (2010, April). Effects of Celox and TraumaDex on Hemorrhage Control in a Porcine Model. *AANA Journal*, 115-120.

Research Activities/Projects/Funding:

Year	Title of Activity/Project/Position Co-investigator.	Funding
2017	Anxiety mgmt. for Needle Localization- advisor-CoPI	N/A
2016	Trigger Films in Nurse Anesthesia Education and Training-Advisor	TSNRP
2015	Measuring Competency in Ultrasound Guided Regional Anesthesia-CoPI	N/A
2008	Effects of Celox and TraumaDex on Hemorrhage Control in a Porcine Model- CoPI	AANA Foundation

Presentations: (Selected from the last 10 years)

National (Poster & Podium Presentation)

Sep 2018 American Association of Nurse Anesthetists Annual Conference-Boston, MA
Anxiety Management for Needle Localization

National (Poster & Podium Presentation)

Aug 2015- Tri-Service Nursing Research Program annual conference-San Antonio, TX
Measuring Competency in Ultrasound Guided Regional Anesthesia

National (Poster)

Aug 2015- American Assoc. of Nurse Anesthetists Annual Congress-Salt Lake City UT
Measuring Competency in Ultrasound Guided Regional Anesthesia

National (Poster and Podium Presentation)

Aug 2009- American Association of Nurse Anesthetists 76th Annual Meeting: Effects of Celox and TraumaDex on Hemorrhage Control in a Porcine Model

State (Podium Presentation)

July 2009- California Association of Nurse Anesthetists Annual Conference: Effects of Celox and TraumaDex on Hemorrhage Control in a Porcine Model

Teaching Experience:

Uniformed Services University
Assistant Professor

Date	Course No.	Topic/Course	Level
2018, Spring	RNA 607	Principles of Regional Anesthesia: Instructor	DNP
2018, Spring	RNA 806	Clinical Practicum VI: Seminar Leader, Clinical Instructor	DNP
2017, Fall	RNA 805	Clinical Practicum V: Seminar Leader, Clinical Instructor	DNP
2017, Summer	GSN 705	Health Economics	DNP
2017, Summer	RNA 804	Clinical Practicum IV: Seminar Leader, Clinical Instructor	DNP
2017, Spring	RNA 803	Clinical Practicum III: Seminar Leader, Clinical Instructor	DNP
2017, Spring	RNA 607	Cadaver Regional & Airway Lab, Clinical Instructor	DNP
2017, Spring	RNA806	Clinical Practicum VI: Seminar Leader, Clinical Instructor	DNP
2016, Fall	RNA 802	Clinical Practicum II: Seminar Leader, Clinical Instructor	DNP
2016, Fall	RNA 805	Clinical Practicum V: Seminar Leader, Clinical Instructor	DNP
2016, Summer	RNA 804	Clinical Practicum IV: Seminar Leader, Clinical Instructor	DNP

2016, Summer	RNA 801	Clinical Practicum I: Instructor	DNP
2016, Spring	RNA 607	Principles of Regional Anesthesia: Instructor	DNP
2016, Spring	RNA 803	Clinical Practicum III: Seminar Leader, Clinical Instructor	DNP
2016, Spring	RNA 806	Clinical Practicum VI: Seminar Leader, Clinical Instructor	DNP
2015, Fall	RNA 805	Clinical Practicum V: Seminar Leader, Clinical Instructor	DNP
2015, Fall	RNA 802	Clinical Practicum II: Seminar Leader, Clinical Instructor	DNP
2015, Summer	RNA804	Clinical Practicum IV: Seminar Leader, Clinical Instructor	DNP
2015, Summer	RNA801	Clinical Practicum I: Instructor	DNP
2015, Spring	RNA 607	Principles of Regional Anesthesia: Instructor	DNP
2015, Spring	RNA 803	Clinical Practicum III: Seminar Leader, Clinical Instructor	DNP
2014, Summer	RNA 894	Clinical Practicum IV: Seminar Leader, Clinical Instructor	MSN
2014, Fall	RNA 895	Clinical Practicum V: Seminar Leader, Clinical Instructor	MSN
2014, Fall	RNA 802	Clinical Practicum II: Seminar Leader, Clinical Instructor	DNP

Florid State University-Panama City
Adjunct Faculty

2018, Summer	NGR6929	Clinical Correlation Conference, Didactic Instructor	MSN
2018, Spring	NGR6929	Clinical Correlation Conference, Didactic Instructor	MSN
2018, Spring	NGR6809	Research & Evidence-Based Practice II, Didactic Instr	MSN
2017, Fall	NGR6803	Research & Evidence-Based Practice I, Didactic Instructor	MSN
2017, Fall	NGR6929	Clinical Correlation Conference, Didactic Instructor	MSN
2017, Fall	NGR6431	Anesthesia Practicum I, Simulation Instructor	MSN
2017, Summer	NGR6929	Clinical Correlation Conference, Didactic Instructor	MSN
2017, Summer	NGR6436	Anesthesia Practicum VI, Simulation Instructor	MSN

Guest Lectures

Date	Course No.	Topic/Course	Level
2016, Summer	USU	Operational Ultrasound-Regional Anesthesia 6 th /yrly	DNP/MD
2016, Summer	GSN 710	Bedside Ultrasound Course-Regional Anesthesia	DNP
2016, Summer	GSN 701	Role of the Nurse Anesthetist	DNP
2016, Spring	RAN 606	Anesthesia for Abdominal Surgery	DNP
2016, Fall	RNA 605	Basics of Anesthesia Airway Management	DNP
2015, Summer	USU	Operational Ultrasound-Regional Anesthesia 5 th /yrly	DNP/MD
2015, Summer	GSN 701	Role of the Nurse Anesthetist	DNP
2015, Summer	GSN 710	Bedside Ultrasound Course-Regional Anesthesia	DNP
2015, Fall	RNA 605	Basics of Anesthesia Airway Management	DNP
2015, Spring	RNA 606	Induction simulations and oral boards	DNP
2014, Fall	RNA 601	Basic Anesthetic and Pharmacologic Principles of Anesthesia, (Airway Management lecture)	DNP
2014, Fall	RNA 605	Basics of anesthesia airway management	DNP

Date	Course No.	Topic/Course	Level
2014, Fall	RNA 601	Basic Anesthetic and Pharmacologic Principles of Anesthesia, (Anesthesia Machine Oral Board)	DNP
2014, Summer	RNA 801	Induction Complication Scenario Simulations	DNP
2014, Summer	RNA 801	Emergence Complication Scenarios	DNP
2014, Summer	RNA 894	Clinical Practicum IV: Seminar Leader	MSN
2014, Summer	RNA 801	Regional Anesthesia Workshop	DNP
2014, Summer	GSN 602	Advanced Health Assessment, (Final practicum-evaluator)	DNP

Other Teaching Experiences (Continuing Ed/Workshops/Seminars):

Date	Continuing Education/Workshop/Seminar	Location
1/24/17	Mgmt of difficult airway lecture	FSU-PC
1/24/17	Airway mgmt skills lab	FSU-PC
5/21/16	Regional Anesthesia-USGRA	Univ of Maryland
2016	Airway Mgmt Intern orientation	WRNMMC Simulation lab
2015	Operational Medicine Exercise	Fort Belvoir, VA
2014	Operational Medicine Exercise SRNA/FP residents	Fort Belvoir, VA
2014	Middle Tennessee School of Anesthesia Midwife/SRNA retained placenta simulation	Nashville, TN
2014	A-fib Objective Structured Clinical Exam (OSCE) USU medical residents	WRNMMC Simulation Lab
2006	Disaster Medical Management Defense Institute of Medical Operations (DIMO)	Rabat, Morocco

Academic/Service Activities:

Date	Title (Chair/Member)	Service/Committee
2014-2018	Member	USUHS Graduate School of Nursing All Faculty Committee
2014-2018	Member	USUHS Graduate School of Nursing Registered Nurse Anesthetist Program Committee

Membership in Professional Organization:

Date	Organization
1998-present	Sigma Theta Tau
2007-2010	American Association of Nurse Anesthetists

Curriculum Vitae

Gerard Thomas Hogan, DNSc., CRNA, ARNP-BC

**3923 Ural St.
Panama City Beach, FL 32408
Cell (904) 252-0937
E-mail: gthcrna@gmail.com**

EDUCATION AND DEGREES

- | | |
|---------------|--|
| December 2014 | Stony Brook University (SUNY) School of Nursing
Stony Brook, New York
Post Master's Advanced Graduate Certificate in Mental Health
Psychiatric Nursing -
Specialization Area: Psychiatric Mental Health
Nurse Practitioner/Clinical Nurse Specialist Dual Role |
| December 2004 | University of Tennessee Health Science Center, College of Nursing
Memphis, Tennessee
Doctor of Nursing Science (DNSc.)
Specialization Area: Acute Care Nursing
Dissertation Title: "The Effect of Simulator Training on Nurse
Anesthesia Students' Anxiety in Their First Semester of Patient
Care" |
| August 1992 | North Carolina Baptist Hospitals, Inc, and the Bowman Gray
School of Medicine of Wake Forest University
Winston-Salem, North Carolina
Diploma in Anesthesia Nursing
(Clinical Residency portion of Nurse Anesthesia Education) |
| May 1992 | University of North Carolina at Greensboro, School of Nursing
Greensboro, North Carolina
Master of Science in Nursing (MSN)
Clinical Specialty in Anesthesia Nursing
(Academic portion of Nurse Anesthesia Education) |
| August 1989 | University of Florida, College of Nursing
Gainesville, Florida
Bachelor of Science in Nursing (BSN)
Graduated with High Honors |

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May 1983

Palm Beach Community College
Lake Worth, Florida
Associate of Applied Science in Nursing (ADN)

LICENSURE AND SPECIALTY CERTIFICATION

Certification:

Certified Registered Nurse Anesthetist (CRNA)

National Board on Certification and Recertification of Nurse Anesthetists (NBCRNA) initial certification January 1993

National Board on Certification and Recertification of Nurse Anesthetists

Recurring Certification Expires July 31, 2021 AANA Number 043125

Family Psychiatric Mental Health Nurse Practitioner – Board Certified (PMHNP-BC)

American Nurses Credentialing Center - initial certification June 2015

Expires June 3, 2020 Certification Number 2015000827

Documentation of current certification available on request

Basic Life Support (CPR + AED) BLS Provider Expires 05/2020

Advanced Cardiac Life Support ACLS Provider Expires 05/2020

Licensure:

Registered Nurse- Florida Board of Nursing Expires April 30, 2021

APRN (Nurse Anesthetist and Psychiatric Mental Health Nurse Practitioner)-

Florida Board of Nursing Expires April 30, 2021

Registered Professional Nurse- Illinois Department of Financial and Professional Regulation (Inactive May 31, 2020)

Advanced Practice Nurse – Certified Registered Nurse Anesthetist- Illinois Department of Financial and Professional Regulation (Inactive May 31, 2020)

RN/ARNP- Washington State Dept. of Health Nursing Commission Expires December 26, 2019

Registered Professional Nurse/CRNA, APRN (Inactive) – Georgia Board of Nursing

Registered Nurse (Inactive) - North Carolina Board of Nursing

License numbers available on request

PROFESSIONAL EXPERIENCE

February 2020 to
Present

Florida State University – College of Applied Studies
Nurse Anesthesia Program, Panama City, Florida
Faculty Member – Nurse Anesthesia Program

Principle Duties: Assist Program Director and Faculty in the development and transition from the Master of Science in Anesthesia to the Doctor of Nurse Anesthesia Practice degree. Didactic instruction as required. Developing an Evidence Based Practice Doctoral Project curriculum for future students who enroll in the program after 2021.

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January 2018 to
February 2020

Rush University College of Nursing
Rush University Medical Center
Chicago, Illinois
Program Director, Nurse Anesthesia Program
Associate Professor of Nursing

Principle Duties: Program Director. Responsibilities included oversight of administrative and financial duties within a large and successful Nurse Anesthesia Program ranked #4 of 122 programs by US News and World Report in 2019. . Provide academic leadership for faculty and students. Comprehensive management of budget, policies and procedures within the anesthesia program. Didactic instructor in team teaching format for variety of anesthesia and graduate nursing courses. Reports directly to the Chair, Adult and Gerontological Nursing. Supervises four full time faculty members, two part time faculty members, and an ancillary support staff members. Maintains ongoing accreditation requirements of the Council on Accreditation of Nurse Anesthesia Educational Programs. Interacts successfully with other Nursing Faculty to maintain cohesive and positive relationship. Mentors DNP students and new faculty members. Maintains active role in clinical practice and clinical instruction of Nurse Anesthesia students at Rush University Medical Center, Chicago, IL.

August 2015 to
December 2017

Nemours Children's Specialty Care/Wolfson Children's
Hospital Division of Psychiatry and Psychology
Jacksonville, Florida
Psychiatric Mental Health Nurse Practitioner

Principle Duties: Psychiatric Mental Health Nurse Practitioner working in collaboration with Psychiatrist to provide both inpatient and outpatient psychiatric services for children and adolescents up to the age of 18. Comprehensive clinic and hospital duties including call and crisis management. Worked in a prn position and worked with PMHNP students one weekend a month.

March 2009 to
December 2017

Mayo Clinic Hospital, Jacksonville, FL
Staff Certified Registered Nurse Anesthetist

Principle Duties: Certified Registered Nurse Anesthetist providing direct anesthetic patient care in the Ambulatory Surgery Center at Mayo. Clinical instruction of Student Registered Nurse Anesthetists from both the University of North Florida and the Mayo School of Nurse Anesthesia in Rochester, MN. Member of the Nursing Doctoral Council and actively participated and advised DNP Projects throughout the institution.

January 2009 to
December 2017

University of North Florida Brooks College of Health
School of Nursing
Jacksonville, Florida
Assistant Professor of Nursing
Director – Doctor of Nursing Practice (DNP) Program
Acting Director – Psychiatric Mental Health Nurse Practitioner Program

Principle Duties: Administrator and Program Director for the School of Nursing's Post-MSN Doctor of Nursing Practice Program and post-MSN DNP Psychiatric Mental

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Health Nurse Practitioner Program. Maintained programs and oversaw all aspects of student progression from initial advising through graduation. Oversaw administrative requirements of the School of Nursing and the Nurse Anesthetist Program, to include coordination of self study and reaccreditation undertakings for both the Nurse Anesthetist Program (COA) and the School of Nursing (CCNE). Nationally recognized expert in Nurse Anesthesia for accreditation and reaccreditation knowledge. Teaching responsibilities in both the Nurse Anesthetist Program to include both clinical and didactic instruction, Didactic and clinical instruction to the Psychiatric Mental Health Nurse Practitioner students and the didactic and administrative oversight for the post-MSN Doctor of Nursing Practice (DNP) Program. Answered directly to the Director of the School of Nursing. Maintained active clinical practice as a CRNA at the Mayo Clinic-Jacksonville and as an ARNP-BC in the UNF Counseling Center and at Nemours Children's Specialty Care/Wolfson Children's Hospital in Jacksonville.

October 2008 to **Chief Nurse and Deputy Commander, 315th Aeromedical**
 October 2014 **Evacuation Squadron, Charleston AFB, SC**

Principle Duties: Chief Nurse of the second largest Aeromedical Evacuation Squadron in the Air Force Reserve Command (AFRC). Supervises 35 Registered Nurses all of whom are qualified flight nurses, and over 70 Aeromedical Evacuation Technicians. Provides for career progression, staff development and mentoring to all nursing staff. Completes performance evaluations and progression feedback annually to all nurses. Selected by AFRC on the 2009 Commander Selection Board for a commander's position in an Aeromedical Evacuation Squadron sometime in FY 2010.

January 2008 to **Medical Center of Central Georgia/Mercer University**
 December 2008 **School of Medicine Nurse Anesthesia Program**
 Macon, Georgia
 Program Director and Department Chair - Nurse Anesthesia
 Clinical Assistant Professor of Anesthesiology, Mercer University
 School of Medicine

Principle Duties: Program Director and department chair of Nurse Anesthesia within the School of Medicine. Responsibilities included oversight of all financial, administrative, and educational aspects of a hospital based CRNA program. Provided academic leadership and mentoring to over 50 staff CRNA clinical instructors and 31 Student Nurse Anesthetists. Provided comprehensive management of budget, policies and procedures of the CRNA program. Answered directly to the Vice President of Clinical Services, Medical Center of Central Georgia and the Dean of the School of Medicine at Mercer University. Didactic and Clinical Instructor in a team teaching environment. Supervised three full time department members. Maintained ongoing accreditation requirements set forth by the Council on Accreditation of Nurse Anesthesia Educational Programs. Maintained active clinical practice as a clinical instructor at the Medical Center of Central Georgia. Chaired the Nurse Anesthesia Program Admissions Committee. Fostered collegial relationships with nursing services and perioperative services within the hospital and medical center. Facilitated learning environment and assisted staff CRNAs with lecturing and clinical instruction techniques. Responsible for

successful initial on site accreditation visit to include crafting of self study and use of the new COAccess on line accreditation system. Created simulation program for SRNAs.

July 2005 to
December 2007

**Florida International University College of Nursing and
Health Sciences Nurse Anesthetist Program**

Miami, Florida

Program Director, Anesthesiology Nursing Program

Clinical Assistant Professor of Nursing

Principle Duties: Program Director. Responsibilities included oversight of administrative and financial duties within a large and successful Nurse Anesthesia Program. Provided academic leadership for faculty and students. Comprehensive management of budget, policies and procedures within the anesthesia program. Didactic instructor in team teaching format for variety of anesthesia and graduate nursing courses. Reported directly to the Dean of the College of Nursing and Health Sciences. Supervised three full time faculty members, two part time faculty members, and two ancillary support staff members. Maintained ongoing accreditation requirements of the Council on Accreditation of Nurse Anesthesia Educational Programs. Interacted successfully with other Nursing Faculty to maintain cohesive and positive relationship. Mentored junior faculty members. Maintained active role in clinical practice and clinical instruction of Nurse Anesthesia students at Mt. Sinai Medical Center, Miami Beach, FL.

July 2001 to
July 2005

**Florida International University College of Nursing and
Health Sciences Nurse Anesthetist Program**

Miami, Florida

Clinical Assistant Professor, Associate Program Director

Principle Duties: Associate Program Director. Responsibilities included assisting with the administrative, financial, and overall direction of a large Nurse Anesthetist Program. Didactic instructor in a team teaching format for a variety of anesthesia and nursing courses. Experience in preparation for and participation in Initial and on-going Accreditation by the Council on Accreditation of Nurse Anesthesia Educational Programs. Clinical Instructor practicing with ANP graduate students two days per week in the operating room at Mt. Sinai Medical Center and The Miami Heart Institute, Miami Beach, FL.

November 1998-
June 2001

JFK Medical Center, Atlantis, Florida

Palm Beach Anesthesia Associates

Certified Registered Nurse Anesthetist

Staff Nurse Anesthetist at very busy Medical Center with over 20 anesthetizing locations. Was 1 of only 5 CRNAs who did Cardiothoracic

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Anesthesia for the group serving a large outpatient volume, as well as very complex inpatients. Provided a wide variety of anesthetics, including regional. Anesthetics performed in consultation with Anesthesiologist using the Anesthesia Care Team Approach. Served as Clinical Instructor and Clinical Coordinator for Barry University Nurse Anesthesia Program.

January 1996 to November 1998 **Landstuhl Regional Military Medical Center, Landstuhl, Germany**
Certified Registered Nurse Anesthetist

Served as a U.S. Air Force officer and Staff Nurse Anesthetist in the only Department of Defense Medical Center serving all of Europe and Africa. Responsible for all aspects of anesthetic patient care. Provided a wide variety of anesthetics for all specialties except transplant and cardiovascular. Performed all anesthetic techniques, including general, regional, and local/MAC. Secured vast experience gained in Obstetrical Anesthesia, performing many labor epidurals and intrathecal analgesia, and a large pediatric surgical volume. Consulted with Anesthesiologists to provide care but was expected to perform anesthesia independently. Additionally, served as Clinical Instructor for graduate nurse anesthesia students in the US Army Nurse Anesthesia Program assigned to the facility.

August 1992 to December 1995 **Thomas Koritz Hospital (4th Medical Group), Seymour Johnson**
Air Force Base, North Carolina
Staff Certified Registered Nurse Anesthetist

Provided anesthesia care in a small USAF base hospital as 1 of 2 CRNAs. Performed General, Regional, and MAC anesthesia care for General Surgery, Orthopedics, Ear Nose and Throat, and Obstetrics and Gynecology. Responsible for all phases of anesthesia care. Didactic Instructor on Obstetric and Regional Anesthesia at the Raleigh School of Nurse Anesthesia, Raleigh, North Carolina.

TEACHING ACTIVITIES

Courses taught at the University of North Florida

NGR 6740 – Role Development in Advanced Practice Nursing (DNP)
NGR 7850 – Evidence Based Practice I (DNP)
NGR 7851 – Evidence Based Practice II (DNP)
NGR 7991 – Practice Management (DNP)
NGR 609X – Principles of Nurse Anesthesia II, II, and IV
NGR 627X – Nurse Anesthesia Practicum
NGR 6491 - Advanced Anesthesia Seminar
NGR 5810 – Research Methods for Evidence Based Practice

Courses taught at Mercer University/Medical Center of Central Georgia

MSA 751 – Leadership (Professional Aspects) Seminar
MSA 631 – Introduction of Research
MSA 743 – Applied Anesthesia Pharmacology III

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MSA 723 – Principles of Nurse Anesthesia III
Clinical Practicum Instructor

Courses Taught at FIU:

NGR 5810 – Research Methods in Nursing
NGR 5110 - Theories in Nursing
NGR 6091, NGR 6093, NGR 6094, NGR 6097 -Principles of
Anesthesiology Nursing I-IV
NGR 6012 – Physics of Anesthesia
NGR 6173, NGR 6174 - Pharmacology of Anesthesiology Nursing I-II
NGR 6092 - Regional Anesthesia
NGR 6760 - Professional Aspects of Nurse Anesthesia
NGR 6010 - Technology in Anesthesiology Nursing

SCHOLARLY ACTIVITIES

Publications (peer reviewed):

Halterman, R.S., Gaber, M., Janjua, M.S., and Hogan, G.T. (2019). Use of a checklist for the postanesthesia care unit patient handoff. *Journal of PeriAnesthesia Nursing*, 34(3): In Press.

Hogan, G.T. (2018). The challenges of providing doctor of nursing practice coursework and the scholarly project while ensuring graduates can deliver a safe anesthetic. *AANA Journal*, 86(1): online content

Davies, A., Monaghan, W.P. & Hogan, G.T. (2016). Implementing an educational program to increase preoperative screening for obstructive sleep apnea using the stop-bang questionnaire. *International Journal of Advanced Nursing Studies*; 5(1): 56-58.

Machan, M.D., Monaghan, W.P., McDonough, J.P. & Hogan, G.T. (2013). Emerging Evidence in Infection Control: Effecting Change Regarding Use of Disposable Laryngoscope Blades. *AANA Journal*, 81(2): 103-112.

Hogan, G.T. (2013). Tips and Tactics for Using and Interpreting Capnography. *Gastroenterology Nursing*, 36(1) 68-70.

Groom J.A. & Hogan, G.T. (2006). Medical Decision Making under Stress; Evaluating the Impact of Medical Simulation Instruction on Affective Learning. *Journal of Medical Simulation*, 1(2), 99-101.

Kerns, A. S., McDonough, J.P., Groom, J.A., Kalynych, N.M., & Hogan, G.T. (2006). Televideo Conferencing: Is it as effective as “in person” lectures for nurse anesthesia education? *AANA Journal*, 74(1), 19-21.

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Hogan, G.T & Carter M. (2005). The Effect of Simulator Training on Nurse Anesthesia Students' Anxiety in their First Semester of Patient Care. Dissertation, University of Tennessee Press

Extramurally Funded Invited Presentations (Since 2007):

New England Assembly of Nurse Anesthetists 2019 Annual Meeting
 "Emotional Intelligence and Resilience in Nurse Anesthesia Students"
Florida Association of Nurse Anesthetists 2018 Annual Meeting
 "Emotional Intelligence and Resilience"
American Association of Nurse Anesthetists – Council on Accreditation of Nurse Anesthesia Educational Programs – Assembly of School Faculty Feb 2017
 "Program Administrator Burnout: Setting Boundaries"
Florida Association of Nurse Anesthetists 2017 Surf and Sand Symposium
 "Addiction Physiology and Symptoms"
Florida Association of Nurse Anesthetists 2016 Annual Meeting
 Moderator and Host, 2nd Annual College Bowl.
American Association of Nurse Anesthetists Annual Congress 2016, Wash. DC
 "Interagency Response and Post-traumatic Stress in First Responders"
Florida Association of Nurse Anesthetists 2016 Annual Meeting
 Moderator and Host, 1st Annual College Bowl
UNF Patient Safety Conference 2014, Amelia Island, Florida
 "Stress – Have We Given It a Bad Name?"
UNF Patient Safety Conference 2013, Amelia Island, Florida
 "Simulation as a Way to Improve Patient Safety"
North Carolina Association of Nurse Anesthetists, Winston-Salem, NC 2008
 "Cardiovascular Anesthesia and Assessment of Risk"
Florida International University, Miami, FL April, 2007
 "Nursing in Times of War" – Keynote Speaker

Posters Accepted For Presentation At Major Conferences:

Jessica E. Smith, BSN, RN, Alexis N. Johnson, BSN, RN, Gerard Hogan, DNSc., CRNA, ARNP-BC, Nicholas Kalynych, DNP, MSHS, CRNA. The Effectiveness of Preoperative Warming to Prevent Intraoperative Hypothermia. Annual Congress of the American Association of Nurse Anesthetists, Boston, MA 2018.

Brooke Blasser, BSN, RN, Tiffany Whiting, BSN, RN, Ryan Shores, DNP, CRNA, Gerard Hogan DNSc., CRNA, Matthew Warrick, MD, Anjum Anwar, MD. Transversus

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Abdominis Plane Blocks for Postoperative Caesarean Section Pain. Annual Congress of the American Association of Nurse Anesthetists, Seattle, WA 2017.

Amanda Cralley, BSN, RN, Kristin Brown, BSN, RN, Jennifer Joseph, BSN, RN, Gerard Hogan, DNSc., CRNA, PMHNP-BC. The Effectiveness of Patient Education for Cataract Surgery at Improving Satisfaction. Annual Congress of the American Association of Nurse Anesthetists, Seattle, WA 2017.

Danielle Wynne, BSN, RN, Michelle Rucinski, BSN, RN, Timothy White, BSN, RN, Gerard Hogan, DNSc., CRNA, PMHNP-BC, William Self, DNP, CRNA. Evidence-Based Practice: Decreased Length of Stay Using Goal Directed Fluid Therapy for Open Abdominal Surgery Patients. Annual Congress of the American Association of Nurse Anesthetists, Seattle, WA 2017.

Analise N. Murphy, BSN, RN, Maggie C. Sievers, BSN, RN, Gerard T. Hogan, DNSc., CRNA, PMHNP-BC, John P. McDonough, CRNA, EdD, Dr(habil.)NScA, ARNP. Evidence-Based Practice: The Effectiveness of Paravertebral Blocks in Preventing Chronic Pain Syndrome Following Breast Surgery. Annual Congress of the American Association of Nurse Anesthetists, Seattle, WA 2017.

Cameron Cushenbery, MSN, CRNA, Nicholas Kalynych, MHS, CRNA, Gerard Hogan, DNSc., CRNA, PMHNP-BC, Lillia Loriz, PhD, ARNP, GNP-BC. The Effect of Preoperative Information on Patient Satisfaction after Second Eye Cataract Surgery. Annual Congress of the American Association of Nurse Anesthetists, Washington, DC 2016.

Cody Hambleton, BSN, RN, Mark Hill, BSN, RN, Gerard Hogan DNSc., CRNA, PMHNP-BC, William Self, MSN, CRNA. Assessment of Certified Registered Nurse Anesthetists Knowledge of Costs of Anesthetic Medications. Annual Congress of the American Association of Nurse Anesthetists, Washington, DC 2016.

Agatha O'Connell, BSN, RN, Katie Scanlon, BSN, RN, Gerard Hogan, DNSc., CRNA, ARNP-BC, Tammy Carroll MSN, CRNA. Alveolar Recruitment Maneuvers: Influencing Practice. Annual Congress of the American Association of Nurse Anesthetists, Washington, DC 2016.

debran L. Harmon, CRNA, DNP, W. Patrick Monaghan, PhD, CLS, SBB, Gerard T. Hogan, DNSc., CRNA, PMHNP-BC, E. Jane McCarthy, PhD, CRNA. Anesthesia Safety: Filter Needle Use with Glass Ampules. Sigma Theta Tau International Research Symposium, Jacksonville, FL, The Annual Congress of the American Association of Nurse Anesthetists, Salt Lake City, UT 2015 and The International Federation of Nurse Anesthetists Biannual Meeting, Glasgow, Scotland, UK 2016

Katy Hayes, RN, BSN, Jenny Kambel, RN, BSN, Gerard T. Hogan, DNSc., CRNA, PMHNP-BC. "The Real Price of CRNA School: Weight Gain and Physical Inactivity".

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Annual Congress of the American Association of Nurse Anesthetists, Salt Lake City, UT 2015

Jacob Atkins, RN, BSN, Joshua Newby, RN, BSN, Gerard T. Hogan, CRNA, DNSc. “Simulation-Based and Text-Based Instruction and Evaluation of the Effect on Knowledge Retention: A Pilot Study”. Annual Congress of the American Association of Nurse Anesthetists, Orlando, FL 2014

Samuel Timothy Floyd, RN, BSN, Michelle Woodrum, RN, BSN, Gerard T. Hogan, CRNA, DNSc., W. Patrick Monaghan, CLS, SBB, PhD. “Cricoid Pressure: Are Providers Doing it Right?”. Annual Congress of the American Association of Nurse Anesthetists, Orlando, FL 2014

Cristal Turner, RN, BSN, Christina Maloney, RN, BSN, Gerard T. Hogan, CRNA, DNSc., Ryan Shores, CRNA, MSN. “Reducing Subglottic Aspiration During Extubation with Positive Pressure: A Pilot Study”. Annual Congress of the American Association of Nurse Anesthetists, Orlando, FL 2014

Jennifer Fildey, RN, BSN, Gerard T. Hogan, CRNA, DNSc., W. Patrick Monaghan, CLS, SBB, PhD “Breaking up is hard to do: A Study of Divorce and Separation in Graduate Nurses”. Annual Meeting of the American Association of Nurse Anesthetists, Las Vegas, NV 2013.

Cameron Dang, RN, BSN, Casuda Lombardo, RN, BSN, Gerard T. Hogan, CRNA, DNSc., W. Patrick Monaghan, CLS, SBB, PhD. “Generation Smartphone: The Use of Cell Phone Technologies While Performing Anesthesia Care”. Annual Meeting of the American Association of Nurse Anesthetists, Las Vegas, NV 2013.

Henry Patalinghug, RN, BSN, Erik Foutz, RN, BSN, Gerard T. Hogan, CRNA, DNSc. “Evaluation of Provider Practice – Laryngeal Mask Airway Cuff Inflation”. Annual Meeting of the American Association of Nurse Anesthetists, San Francisco, CA 2012.

Bruce Wilburn, RN, BSN, Roger Southall, RN, BSN, Gerard T Hogan, CRNA, DNSc. “A Phase III, Randomized, Double-Blinded, Single Center Study to Determine Analgesic Efficacy of Ofirmev versus Ketorolac for Parathyroidectomy Post-operative Pain”. Meeting of the American Association of Nurse Anesthetists, San Francisco, CA 2012.

Sherry Rosales, RN, BSN, Jennifer Battani, RN, BSN, W. Patrick Monaghan, CLS, SBB, PhD, Gerard T. Hogan, CRNA, DNSc. “Personal Items: A Possible Vector for Transmission of Infection by the Presence of Visible and Occult Blood”. Meeting of the American Association of Nurse Anesthetists, San Francisco, CA 2012.

Ashley Dartt, RN, BSN, Tonia Neill, RN, MSN, Gerard T. Hogan, CRNA, DNSc., Michael R. Dorsch, MD. “Accuracy of Tracheal Tube Cuff Inflation by Anesthesia Providers”. Annual Meeting of the American Association of Nurse Anesthetists, Boston, MA 2011.

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Dimitrina I. Borisova, RN, BSN, Tammy L. Carroll, CRNA, MSN, Ryan T. Shores, CRNA, MSN, Gerard T. Hogan, CRNA, DNSc. "Utilization of Sniffing Position for Intubation Among Student Registered Nurse Anesthetists", Annual Meeting of the American Association of Nurse Anesthetists, Seattle, WA, 2010.

Katherine C. Childress, RN, BSN, Jeanie K. Ladd, RN, BS, BSN, Gerard T. Hogan, CRNA, DNSc., Nathaniel M. Apatov, CRNA, PhD, Christopher Leone, PhD. "Perceived Self-Efficacy, Trait Anxiety, and Their Correlation to Student Nurse Anesthetists' Performance on the Self-Evaluation Examination", Annual Meeting of the American Association of Nurse Anesthetists, Seattle, WA, 2010.

Debra Stokes, RN, BSN, Linda Foley, RN, BSN, Gerard T. Hogan, Jr., CRNA, DNSc. "Education in Chemical Dependency and Alterations in Perceptions Toward the Impaired Anesthesia Provider", Annual Meeting of the American Association of Nurse Anesthetists, Denver, CO, 2007.

Jeffrey A. Groom, CRNA, Ph.D. , Gerard T. Hogan, Jr., CRNA, DNSc. "The Utility of Anesthesia Crisis Management Simulation in Mitigating SRNA Stress and Increasing Confidence", Annual Meeting of the American Association of Nurse Anesthetists, Cleveland, OH, 2006.

Jeffrey A. Groom, CRNA, Ph.D., Gerard T. Hogan, Jr., CRNA, DNSc. "Medical Decision Making Under Stress: Evaluating the Impact of Medical Simulation Instruction on Affective Learning", Society for Medical Simulation 6th Annual IMMS; San Diego, CA 2006

Gerard T. Hogan, Jr., CRNA, MSN, DNSc.(c), Michael Carter, DNSc., FAAN, APRN-BC "The Effect of Simulator Training on Nurse Anesthesia Students' Anxiety in Their First Semester of Patient Care", University of Tennessee College of Nursing Research Meeting, Memphis, TN, 2004

Anthony Kerns, RN, BSN, SRNA, Gerard T. Hogan, Jr., MSN, CRNA, ARNP, Nicholas Kalynych, MSHS, CRNA. "Does the Use of Real Time Tele-Video Conferencing Effect the Academic Achievements of Student Nurse Anesthetists?" AANA Annual Meeting, ("State of the Science Session") Seattle, 2004; and, the European Congress of Nursing, Munich, Germany 2004

Melissa Nolen, RN, BSN, SRNA, W. Patrick Monaghan, CLS, SBB, Ph.D., Jeffrey Groom, MS, CRNA, ARNP, Gerard T. Hogan, Jr., MSN, CRNA, ARNP. "Presence of Visible and Occult Blood on Anesthesia Airway Equipment". AANA Annual Meeting, ("State of the Science Session") Boston, August, 2003

Jonathan Pabalate, RN, BSN, SRNA; W. Patrick Monaghan, CLS, Ph.D.; Jeffrey Groom, CRNA, Ph.D.(c), ARNP; Gerard Hogan, CRNA, MSN. "Identification of Patients Undergoing Blood Transfusions by Anesthesia Providers". AANA Annual Meeting ("State of the Science Session"), Boston, August, 2003

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John Weber, RN, BA, SRNA; John P. McDonough, Ed.D., CRNA; Jeffrey Groom, MS, CRNA, ARNP; Gerard Hogan, MSN, CRNA. "The Ability of Anesthesia Providers to Recognize Preoperative Anxiety". AANA Annual Meeting ("State of the Science Session"), Boston, August, 2003

Patrick Mulleavy, MSN, SRNA, Edward Freeman, Ph.D., RN, Gerard Hogan, MSN, CRNA. "Hardiness and Coping in Preoperative Clients with HIV Disease" AANA Annual Meeting, ("State of the Science Session") Orlando, 2002

RESEARCH ACTIVITIES

Funded Grants:

Gerard T Hogan, DNSc., CRNA (PI) Nurse Anesthesia Traineeship Grant \$43, 294 Health Resources and Services Administration, 2019 for Rush University College of Nursing Nurse Anesthesia Program.

Gerard T. Hogan, Jr., DNSc., CRNA. (PI) Nurse Anesthesia Traineeship Grant \$116,226 Health Resources and Services Administration, 2008 for Mercer University Nurse Anesthesia Program.

Gerard T. Hogan, Jr., DNSc., CRNA. (PI) Nurse Anesthesia Traineeship Grant \$51,126, Health Resources and Services Administration, 2007 for the Florida International University College of Nursing and Health Sciences Anesthesiology Nursing Program.

(PI) John P. McDonough, CRNA, Ed.D.; (Co-I) Jeffrey Groom, CRNA, Ph.D.(c); (Co-I) Gerard Hogan, CRNA, MSN. Developing a Culturally Diverse Nurse Anesthesia Program" \$1.15 Million, 2002-2004, Department of Health and Human Services, US Public Health Service, Health Resources and Services Administration.

RESEARCH/MENTORSHIP/DOCTORAL COMMITTEE MEMBERSHIP

Actively mentors Nurse Anesthesia students in the Rush University College of Nursing on Research topics, design, implementation and evaluation of results – adept at guiding students through IRB approval and dissemination of research results.

Doctoral Student Mentorship Program participant for the AANA Foundation 2009-present

Doctoral (DNP) Committees:

DNP Project Chair:

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Amber Bouton BSN, SRNA. “Video Education to Improve Ventilator Management Skills”. Rush University College of Nursing, First Reader, Graduated with Doctor of Nursing Practice (DNP) December 2019.

Caitlin Darden BSN, SRNA. and Keely Murphy, BSN, SRNA. “Stress and Self-Efficacy During the Clinical Transition Period”. Rush University College of Nursing, First Reader, Graduated with Doctor of Nursing Practice (DNP) December 2019.

Justin Howard BSN, SRNA. “Implementation of an Anesthesia Crisis Checklist at Cook County Medical Center”. Rush University College of Nursing, First Reader, Graduated with Doctor of Nursing Practice (DNP) December 2019.

Marion (Ellie) Lyman, MSN, SRNA. “The Effects of Education on External Ventriculostomy Devices and Anesthesia Management”. Rush University College of Nursing, First Reader, Graduated with Doctor of Nursing Practice (DNP) December 2019.

Danielle O’Connor BSN, SRNA. “Anesthesia Crisis Management: Power Failure in the OR”. Rush University College of Nursing, First Reader, Graduated with Doctor of Nursing Practice (DNP) December 2019.

Kaitlin Overstreet, BSN, SRNA. “Health and Wellness in Nurse Anesthesia: Using Meditation and Mindfulness Training to Reduce Student Stress Levels”. Rush University College of Nursing, First Reader, Graduated with Doctor of Nursing Practice (DNP) December 2019.

Monica Gonzalez, MSN, ARNP. “Reducing Benzodiazepine Use in Veterans with Post-Traumatic Stress Disorder (PTSD): An Evidence-Based Approach”. University of North Florida School of Nursing, Committee Chair. Graduated with Doctor of Nursing Practice (DNP) April 2018.

Reed Halterman, MSN, CRNA. “Use of a Checklist for the Post-Anesthesia Care Unit Patient Handoff”. University of North Florida School of Nursing, Committee Chair. Graduated with Doctor of Nursing Practice (DNP) April 2018.

Travis Jeffords, BSN, RN & Natacha Farrow, BSN, RN. “Identifying Risk for Depression in Post-MI Patients During Follow-up Cardiology Clinic Appointments”. University of North Florida School of Nursing, Committee Chair. Graduated with Doctor of Nursing Practice (DNP) April 2018.

Rudolph Pavelsich, MSN, CRNA & Dwayne Thibeault, MSN, CRNA. “Most Efficacious Dose of Flumazenil for Reversal of Midazolam”. University of North Florida School of Nursing, Committee Chair. Graduated with Doctor of Nursing Practice (DNP) April 2018.

Revised 01/22/2020 GTH

Joseph Kelly, MHS, CRNA. “Implementing a Clinical Practice Guideline for Post-Operative Nausea and Vomiting Rescue in the Post-Anesthesia Care Unit”. University of North Florida School of Nursing, Committee Chair. Graduated with Doctor of Nursing Practice (DNP) December 2017.

Amanda Cralley, BSN, RN, Kristin Brown, BSN, RN and Jennifer Joseph, BSN, RN. “The Effectiveness of Patient Education for Cataract Surgery at Improving Satisfaction”. Committee Chair. Graduated with Doctor of Nursing Practice (DNP) December 2017.

Danielle Wynne, BSN, RN, Michelle Rucinski, BSN, RN, and Timothy White, BSN, RN. “Evidence-Based Practice: The Effectiveness of Goal Directed Fluid Therapy”. Committee Chair. Graduated with Doctor of Nursing Practice (DNP) December 2017.

Kathleen Jasper, MSN, CRNA. “Increasing Compliance with the Difficult Airway Algorithm in Non-Physician Anesthesia Providers”. Committee Chair. Graduated with Doctor of Nursing Practice (DNP) December 2017.

Katherine Meuti Fowler, MSN, CRNA. “The Effectiveness of Co-Loading Intravenous Fluids to Reduce Spinal-Induced Hypotension in Parturients Undergoing Cesarean Section”. Committee Chair. Graduated with Doctor of Nursing Practice (DNP) December 2017.

Analise Murphy, BSN, RN and Maggie Sievers, BSN, RN. “The Effectiveness of Regional Blocks for Breast Cancer Surgery at Reducing Chronic Post-operative Pain”. Committee Chair. Graduated with Doctor of Nursing Practice (DNP) December 2017.

Alexander Oliu, MS, CRNA, Jacqueline Paugam, MS, CRNA, and Omar Fundora, MSN, CRNA. “Clinical Practice Change: Tranxemic Acid Use in Arthroplasty”. Committee Chair. Graduated with Doctor of Nursing Practice (DNP) December 2017.

Daryl English, MSN, ARNP-BC. “Music Therapy for Improved Management of Adult Chronic Pain”. University of North Florida School of Nursing, Committee Chair. Graduated with Doctor of Nursing Practice (DNP) Degree August 2017.

Lonnie Hodges, MSN, CRNA. “Local Anesthetic Concentration of Epidural Solutions and Assisted Vaginal Delivery”. University of North Florida School of Nursing, Committee Chair. Graduated with Doctor of Nursing Practice (DNP) Degree April 2017

Tammy Mangual, MSN, FNP-BC. “Staff Education in Long Term Facilities to Reduce Health Failure Readmissions”. University of North Florida School of Nursing, Committee Chair. Graduated with Doctor of Nursing Practice (DNP) Degree April 2017

Robert Lawrence, MS, CRNA. “Improving Pre-Operative HbA1c: Early Identification of Uncontrolled Diabetics Scheduled for Elective Surgery”. University of North Florida

School of Nursing, Committee Chair. Graduated with Doctor of Nursing Practice (DNP) Degree April 2017

Cameron Cushenbery, MSN, CRNA and Nicholas Kalynych, MHS, CRNA. “The Effect of Preoperative Information on Patient Satisfaction after Second Eye Cataract Surgery”. University of North Florida School of Nursing, Committee Chair. Graduated with Doctor of Nursing Practice (DNP) degree Fall 2016.

Christoph Van Dach, RN, MS. “The Effect of a Hospital Based Outpatient Palliative Care Service on Informal Caregivers’ Burden”. University of North Florida School of Nursing, Committee Chair. Graduated with Doctor of Nursing Practice (DNP) degree Fall 2016.

William Self, CRNA, MSN. “Utilization of the Society of Ambulatory Anesthesia Guidelines in the Prevention of Post-Operative Nausea and Vomiting: An Evidence-Based Approach”. University of North Florida School of Nursing, Committee Chair. Graduated with Doctor of Nursing Practice (DNP) degree Fall 2016.

Ryan Shores, CRNA, MSN. “Instituting Low Flow Anesthesia as a Cost Saving Initiative”. University of North Florida School of Nursing, Committee Chair. Graduated with Doctor of Nursing Practice (DNP) degree Summer 2015.

Stacy Manning, ARNP, MSN, FNP-BC. “An Evidence-Nased Approach to Preventing Heart Failure Readmissions” University of North Florida School of Nursing, Committee Chair. Graduated with Doctor of Nursing Practice (DNP) degree Summer 2015.

Marianne Scheiner, RN, MSN, PMHNP-BC. “Assessing Thyroid Function in the Initial Screening of Bipolar 1 Patients; an Evidence-Based Approach” Doctoral Project, University of North Florida School of Nursing, Committee Chair. Graduated with Doctor of Nursing Practice (DNP) degree Summer 2015.

Jody Herriott, CRNA, MSN. “Instituting a Beta Blocker Protocol for Improving Postoperative Outcomes in Cardiac Patients having Non-Cardiac Surgery” Doctoral Project, University of North Florida School of Nursing, Committee Chair. Graduated with Doctor of Nursing Practice (DNP) degree July 2012.

Member:

Adam Davies, CRNA, MSN. Preoperative Screening for Obstructive Sleep Apnea Using the STOP-BANG Questionnaire: A Review of the Literature” University of North Florida School of Nursing, Committee Member. Graduated with Doctor of Nursing Practice (DNP) degree Summer 2014.

Susan J. Schultz, RN, MSN, DNP. “Dysrhythmia Monitoring Practices of Nurses on a Telemetry Unit”. Doctoral Project, University of North Florida School of Nursing, Committee Member. Graduated with Doctor of Nursing Practice (DNP) degree July 2010.

Revised 01/22/2020 GTH

Jonathan Pabalate, CRNA, MSN, DNP. “The Effect of Electronic Media on Timeliness of Antibiotic Administration in the Operating Room”. Doctoral Project, University of North Florida School of Nursing. Committee Member. Graduated with Doctor of Nursing Practice (DNP) degree December 2009.

PROFESSIONAL ACTIVITIES

Chair onsite reviewer – Council on Accreditation of Nurse Anesthesia Educational Programs
Active Member - American Association of Nurse Anesthetists
Active Member - Illinois Association of Nurse Anesthetists
Member – American Psychiatric Nurses Association
Past President – Florida Association of Nurse Anesthetists (2014-2015)
Georgia Association of Nurse Anesthetists (former)
North Carolina Association of Nurse Anesthetists (former)

UNIVERSITY/COLLEGE/SCHOOL OF NURSING SERVICE

Chair, Rush University College of Nursing Admissions and Progressions Committee
Chair, Rush University College of Nursing CRNA Interview Committee
Member, UNF Graduate Council 2012-2017
Chair, UNF School of Nursing Graduate Curriculum Committee 2012
Chair and Member, UNF School of Nursing Search and Screen Committee 2006-2017
Chair, UNF Nurse Anesthesia Program Reaccreditation Project 2009
UNF School of Nursing AACN/CCNE Reaccreditation Committee 2009-present
UNF School of Nursing Anesthesia Admissions Committee 2009-present
Chair CRNA Program Admissions Committee MCCG/MUSM, 2007-2009
Chair, Doctor of Nursing Practice Committee, 2005-2007
University Medical School Steering Committee, 2004-2006
College of Nursing and Health Sciences Curriculum Committee 2006-2007
Anesthesiology Nursing Admissions Committee, 2001-2007
School of Nursing Student Affairs Committee, 2001-2006
School of Nursing Faculty Affairs Committee 2005-2007
School of Nursing Student Scholarship Committee, 2001-2007
ANP Council on Accreditation Self Study Committee, 2001-2007
FIU Medical School Initiative Steering Committee 2004-2006
Mercer University School of Medicine Faculty Graduate Committee 2008-present
Medical Center of Central Georgia Simulation Centre Committee 2008-present

COMMUNITY SERVICE

2011-2018: Knights of Columbus Council 5595 Fundraising activities.
2007-2008: St. Joseph’s Soup Kitchen, Macon, Georgia

1998-2003: Assistant Scoutmaster, Troop 204, Gulfstream Council, Boy Scouts of America.

2002-2004: Second Vice-President and Board Member, Santaluces High School Band Boosters, Inc.

2006-Present: Volunteer – Habitat for Humanity

HONORS AND AWARDS

Great 100 Nurses of Northeast Florida

Class of 2017

NLN Foundation Promise of Nursing 2004

Graduate Scholarship recipient for Promising Nursing Faculty

Alpha Phi Alpha

International Baccalaureate Honor Society

Sigma Theta Tau

The International Honor Society of Nursing, Alpha Theta Chapter, University of Florida, 1989-present

Health Professions Scholarship Recipient - 1990

United States Air Force

Company Grade Officer of the Year 1993

Chosen as the top officer of the Thomas Koritz Hospital at Seymour Johnson Air Force Base, North Carolina

United States Air Force School of Aerospace Medicine Flight Nurse Training

Chosen as the Distinguished Graduate of the Flight Nurse class 103195.

MILITARY EXPERIENCE AND TRAINING

Lieutenant Colonel, United States Air Force Reserve, Retired October 1, 2014.

Duties:

Primary Air Force Service Code (AFSC): M46M3 - Fully Qualified Certified Registered Nurse Anesthetist

Last Duty AFSC: X46F3 - Fully Qualified Flight Nurse

Last Assignment: 315th Aeromedical Evacuation Squadron

Charleston Air Force Base, South Carolina

Last Position: Chief Nurse

Deployed in support of Operation Enduring/Iraqi Freedom 2/22/2003-9/05/2003

Deployed in support of Operation Enduring/Iraqi Freedom 4/24/2005-5/23/2006

Deployed as Officer In Charge, 455th Expeditionary Aeromedical Evacuation Flight, Bagram AB, Afghanistan 4/28/10-9/09/10

Military Training:

Military Indoctrination for Medical Service Officers - 1992

Medical Readiness Training Course - 1993

United States Air Force Flight Nursing Course - 1995 Distinguished Graduate

Air Force Nurse Corps Nursing Service Management Course - 1996

Revised 01/22/2020 GTH

U.S. Air Force Squadron Officers School – 1996
Air Command and Staff College - 2006

Military Awards:

United States Armed Forces Meritorious Service Medal 1 OLC
Air Medal
Air Force Commendation Medal
Army Commendation Medal
Air Force Achievement Medal
Air Force Outstanding Unit Medal with 3 devices
Combat Readiness Medal
National Defense Service Medal
Afghanistan Campaign Medal with Second Tour Device
Global War on Terrorism Service Medal
Air Force Overseas Long Tour Ribbon
Air Force Expeditionary Service Ribbon with Gold Border
Air Force Longevity Service with 2 devices
Armed Forces Reserve Medal with 1 M device
Small Arms Expert Marksmanship Ribbon
Air Force Training Ribbon

Military Qualification Recognition Decorations:

Air Force Chief Flight Nurse Badge
Air Force Chief Nurse Badge

REFERENCES

Available on Request

Curriculum Vitae

Scott L Stewart

January 11, 2020

General Information

University address: Nurse Anesthesia Program
PCC Academic Affairs
Panama City Campus
P.C.- BAY BUILDING (BLDG0118)
Florida State University
Panama City, Florida 32405-1099
Phone: 850-770-2423; Fax: 50-770-2080

E-mail address: JEEPSLS@yahoo.com

Professional Preparation

- 2020 Enrolled - DNAP, Middle Tennessee School of Anesthesia. Major: Anesthesia. Anesthesia. Graduation August 2020.
- 2002 Master of Science, The University of Tennessee at Chattanooga. Major: Nursing Anesthesia. Anesthesia. With Honors.
- Scott Stewart. (2002). *A Comparison of Endotracheal Tube Cuff Pressures Using Estimation Techniques and Direct Intracuff Measurement*. Unpublished master's thesis, The University of Tennessee at Chattanooga.
- 1998 BSN, Florida State Univeristy Tallahassee, FL. Major: Nursing. Cum Laude.
- 1993 BS, Troy State Univeristy Dothan, AL. Major: Biology.

Non-degree Education and Training

2019	Pathfinder Graduate – U.S. Space and Rocket Center – Huntsville, AL.
2019	American Association of Nurse Anesthetist Annual Meeting – Chicago, IL.
2019	Pediatric Advanced Life Support Training
2018	American Association of Nurse Anesthetist Annual Meeting - Boston, Massachusetts.
2017–present	Advanced Cardiac Life Support Training.
2017–present	Professional Association of Dive Instructors Enriched Air Diver Certification.
2013–present	Professional Association of Dive Instructors Open Water SCUBA certification.
2017	Florida Association of Nurse Anesthetists Annual Meeting - Tampa, FL.
2017	American Association of Nurse Anesthetist Annual Meeting - Seattle, Washington.
1988	United States Navy Aerospace Physiology Technician Training.
1988	United States Navy Hospital Corpsman Training.
1987	United States Navy Basic Recruit Training.

Professional Credential(s)

2015–present	Certified Registered Nurse Anesthetist - State of Florida.
2002–present	Certified Registered Nurse Anesthetist - Council on Certification of Nurse Anesthetists.
2005–2016	Registered Nurse - State of North Carolina.
2000–2005	Registered Nurse - State of Tennessee.
1998–2000	Registered Nurse - State of Florida.
1989–1991	Emergency Medical Technician - National Registry of Emergency Medical Technicians.

Professional Experience

2017–present	Teaching Faculty I, PCC Nurse Anesthesia Program, Florida State University.
2015–2019	Certified Registered Nurse Anesthetist, Anesthesia, Bay Medical Center. Panama City, Florida. Provided anesthesia services in the peri-operative setting.
2016–2017	Adjunct Faculty, PCC Nurse Anesthesia Program, Florida State University.
2005–2015	Certified Registered Nurse Anesthetist, Anesthesia, Allcare Clinical Associates Asheville, North Carolina. Provided anesthesia services in the peri-operative setting.
2008–2009	Guest Lecturer, Anesthesia, Western Carolina University. Asheville, North Carolina. Guest lecturer in the Nurse Anesthesia Program.
2002–2005	Certified Registered Nurse Anesthetist, Anesthesia, Anesthesiology Consultants Erlanger Medical Center Chattanooga, Tennessee. Provided anesthesia services in the peri-operative setting.
1998–2000	Registered Nurse, Medical Surgical Intensive Care Unit, Tallahassee Memorial Hospital. Provided care to patients in the medical/surgical Intensive Care Unit.
1987–1991	United States Navy Hospital Corpsman, United States Navy, United States Navy. Hospital Corpsman assigned to units providing teaching and training in aviation medicine and aerospace physiology.

Honors, Awards, and Prizes

Clinical Anesthesia Instructor of the Year, University of Tennessee Chattanooga School of Nursing (2005).
Florida State University School of Nursing Outstanding Senior Student Award, Florida State University School of Nursing (1998).
Golden Key National Honor Society, Golden Key National Honor Society (1998).
Sigma Theta Tau Honor Society, Sigma Theta Tau (1998).
United States Navy National Defense Service Medal, United States Navy (1991).

Current Membership in Professional Organizations

American Association of Nurse Anesthetists
Florida Association of Nurse Anesthetists

Teaching

Courses Taught

Nurse Anesthesia Practice Comprehensive II (NGR6495)
Anesthesia Practicum V (NGR6435L)
Nurse Anesthesia Practice Comprehensive I (NGR6491)
Pharmacology of Anesthesia II (NGR6461)
Advanced Health Assessment (NGR6002)
Pharmacology of Anesthesia I (NGR6460)
Anesthesia Practicum VII (NGR6437L)
Nurse Anesthesia Practice Comprehensive III (NGR6496)
Anesthesia Practicum VI (NGR6436L)

Clinical Practice

Florida Hospital, Orlando, FL. Clinical liaison of Student Registered Nurse Anesthetists (2019)
Bay Medical Center Panama City, FL. Clinical supervision of Student Registered Nurse Anesthetists (2018)

Supervision of Clinical Practice

Florida Hospital, Orlando, FL. Clinical supervision of Student Registered Nurse Anesthetists (2019)
Bay Medical Center, Panama City, FL. Clinical supervision of Student Registered Nurse Anesthetists (2018)

Research and Original Creative Work

Publications

Invited Journal Articles

Stewart, S. (2003). A Comparison of Endotracheal Tube Cuff Pressures Using Estimation Techniques and Direct Intracuff Measurement. *American Association of Nurse Anesthetists*, 71(6), 443-447.

Presentations

Invited Presentations at Conferences

Stewart, S. (presented 2003). *A comparison of endotracheal tube cuff pressures using estimation techniques and direct intracuff measurement*. Presentation at Tennessee Association of Nurse Anesthetists Annual Meeting, Tennessee Association of Nurse Anesthetists, Nashville, Tennessee. (State)

Stewart, S. (presented 2003). *A comparison of endotracheal tube cuff pressures using estimation techniques and direct intracuff measurement*. Presentation at Southern Nursing Research Society Annual Meeting, Southern Nursing Research Society, San Antonio, Texas. (National)

Service

The Community

Mentor, Provided mentorship to 4th-grade students in the Bay County, Florida School system, Elevate Bay (2018–2019).



SCHOOL OF NURSE ANESTHESIA

9994 Boat Club Road
Fort Worth, Texas 76179

k.sanders@tcu.edu
817-929-7625 mobile

November 4, 2019

Re: FSU PC Nurse Anesthesia Program (NAP) DNAP Proposal

Dear Colleagues:

The purpose of this letter is to provide a review of the NAP's proposal for a DNAP (Doctor of Nurse Anesthesia Practice) degree. As stated in the Request to Offer a New Degree Program from the Nurse Anesthesia Department this change from the MS program in Nurse Anesthesia (MSNA) to a DNAP program will allow FSU to continue educating nurse anesthetists. Without this change FSU will not comply with the Council on Accreditation of Nurse Anesthesia Programs (COA) standards which mandate a clinical doctorate degree for newly enrolled anesthesia students by January 1, 2022.

Overall Analysis

The Request to Offer a New Degree Program document is well written and describes both the need for the program and how the program supports the State University System (SUS) goals with appropriately referenced information.

As the documents states this program will complement, not compete, with the other NAPs that reside in the SUS. The working relationship with other SUS program directors is commendable.

Budgetarily, the DNAP will continue to be self-sustaining just as the current MSNA program is. The increase in faculty numbers is offset by the increase in credit hours and length of the program.

The DNAP program will be the first doctoral program in the College of Applied Studies and the first on the Panama City campus. This will be an asset for the Northwest Florida region.

Moving from a MSNA to a DNAP program will enhance the NAP's national reputation.

Major Strengths

1. The leadership of Dr. VanDyke and Dr. Hodges and the enthusiasm of the faculty.
2. MSNA clinical case numbers for graduating students is almost double COA minimum requirements. This should continue with the new degree.

3. Employment rate is 100% for graduates.
 - a. 2019 cohort reports almost everyone has a job or is about to obtain a job.
 - b. DNAP graduates should have the same employment rate.
4. Quality and number of clinical sites.
 - a. Clinical sites are regionally distributed.
 - b. This allows some students to live closer to home during clinical experiences.
5. Class of 2018 met the passing standard set by COA for the NCE (National Certifying Examination), referred to as CRNA exam in the document.

During the visit areas of concern were identified and suggestions were made to strengthen the DNAP submission and the DNAP program.

Curriculum

Area of concern:

The NAP does meet the minimum contact/credit hours in defined subjects and minimum admission requirements mandated by the COA; however, the program has struggled with its pass rate on the NCE (National Certification Examination for Nurse Anesthetists). The first two graduating classes (2017 and 2016) did not meet the minimum first time pass rate requirement on the NCE set by the COA. These two classes had a low pass rate (71%, Class of 2016 and 62% Class of 2016) and caused the COA to place this program on a monitoring status until the pass rate improves. The following recommendations should increase future graduates' first time pass rate on the NCE.

Recommendation:

This reviewer recommends the NAP strengthen its curriculum to exceed, not just meet the minimums set by the COA. The minimum contact/credit hours are 90/6 for pharmacology and 120/8 for anatomy, physiology and pathophysiology (AP&P). The recommendation is to increase pharmacology contact/credit hours to 120/8 and AP&P to 180/12 (3 separate courses instead of the current two). Because anesthesia is pharmacology applied to AP&P, this increase in core subject matter should increase the likelihood graduates will pass the NCE on their first attempt. The NAP needs to set their own passing standard at 90% or above, not at the COA minimum of 80%. This was a successful approach in my experience.

Result:

The post-visit Request to Offer a New Degree Program document from the Nurse Anesthesia Department reflects the proposed curriculum revisions.

Area of concern

In the Table describing the program of study, Summer Semester 7 states the students will implement their projects at their clinical site. It is strongly suggested that the faculty consider case-based projects/research rather than implementation projects. Clinical sites typically do not appreciate input from learners as to ways they (anesthesiologists and CRNAs) need to improve their practice.

The information in the Table and the course descriptions are not completely congruent. For example, NGR 6460 is listed as a four-credit hour course in the Table and a three-credit hour course in the course descriptions.

Admission Requirements

The NAP number of applicants has increased significantly since 2016. Strengthened admission requirements will not affect the NAP's ability to fill its class of 24.

Recommendations from visit and Results:

GRE

When considering applicant GRE scores, the NAP should use percentile (prefer 50th percentile or higher), not numerical scores. Currently, the NAP recommends a combined score of greater than 300. The analytical writing score should also be used in admission decisions. This score gives important data about the applicant's critical thinking ability and organizational skills.

Result

The post-visit Request to Offer a New Degree Program document from the Nurse Anesthesia Department reflects the proposed GRE revisions.

CCRN

The NAP should require applicants to hold this certification which is granted by AACN Certification Corporation. This is a rigorous national examination which "validates that a registered nurse has achieved a level of knowledge in nursing necessary to care for patients in the acute care and/or critical care setting." Eligibility for the CCRN exam requires a minimum of 1,750 hours of direct care of acutely/critically ill patients. (<https://www.aacn.org/certification/get-certified/ccrn-adult>)

Result:

The post-visit Request to Offer a New Degree Program document from the Nurse Anesthesia Department does not reflect the proposed CCRN revisions.

Technology Requirement for Students

The NAP needs to set a minimum technological requirement for students [e.g., students are required to have adequate internet connectivity (preferably broadband), a laptop equipped with a camera which is a Pentium Class PC with Windows 8.1 or later version, or a MAC with OS X v10.9 or later version, Microsoft Office with PowerPoint, Word, and Excel or MAC compatible version, sufficient computer literacy to manipulate multiple types of files, and a printer].

Result:

The post-visit Request to Offer a New Degree Program document from the Nurse Anesthesia Department does not reflect the proposed technology requirement for students.

Faculty

The reviewer congratulates FSU on the hiring of a nationally known nurse anesthesia educator, Gerard Hogan, DNSc, CRNA, who begins his employment spring 2020.

With this new hire and the potential to hire more faculty member with the inauguration of the new DNAP degree, faculty should be adequate in number.

Concern

Faculty salaries are not in line with the market for Nurse Anesthetists. If Florida State University wishes to keep their ranking, FSU will need to be competitive to recruit and sustain high-quality faculty.

Recommendation

FSU should consider increasing faculty salaries since in Florida new nurse anesthesia graduates earn \$177,000 annually.

Resources

Areas of Concern

Technical Staffing and Classroom Upgrade

Simulation Technician

A simulation technician would enhance the student experience by allowing the simulation lab to be open longer hours for student practice. A technician would free faculty time to concentrate on teaching and their own research efforts rather than on technical issues in the sim lab. The salary necessary to hire a simulation technician would much lower than CRNA salaries.

Classroom for Distant Education

Video broadcasting capabilities need to be enhanced in the classroom to provide a high-fidelity experience for students. It is recommended that a consultant with expertise in designing classrooms for video conferencing be hired. They can recommend the correct placement of monitors, cameras, and audio equipment. This will make all the difference in the quality of the student learning environment.

Video Broadcasting Technician/Engineer

A technician whose expertise is broadcasting should be available in the classroom during all distance education. This will free the instructor to concentrate on education, not on troubleshooting equipment.

Summary

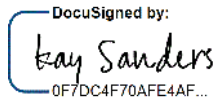
I know this will be a successful endeavor! Overall this is a thorough and well written proposal. Please do not be discouraged by the suggestions in this review. I want the FSU DNAP program to be an example for others to follow. I know you wish that result, too. I do not want to see you make the mistakes others have made. Please take my concerns in that spirit.

I hope this review has provided you with the requested information. If you have any questions, need clarification, or need further information, please do not hesitate to contact me. Thank you for allowing me to participate as a reviewer.

Respectfully,

Kay K. Sanders, DNP, CRNA

Professor of Professional Practice

DocuSigned by:
 11/19/2019 | 7:56 AM EST
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FSU-2.024 Tuition and Fees.

The following tuition and fees shall be levied and collected in U.S. dollars for each student regularly enrolled, unless specifically provided otherwise, for Fall 2019, Spring 2020, Summer 2020, Per Credit Hour in U.S. Dollars

[Note: Graduate references all graduate degree programs and areas other than as may be specifically provided such as Medicine, Law, Other Professional Programs effective date applies to all but Medicine]

Main Campus		
	Undergraduate	Graduate
Tuition	105.07	403.51
Tuition Differential	49.59	
Student Financial Aid Fee	5.25	20.17
Capital Improvement Trust Fund Fee	4.76	4.76
Athletics Fee	7.90	7.90
Activity & Service Fee	12.86	12.86
Student Health Fee	13.97	13.97
Transportation Access Fee	8.90	8.90
Student Facility Use Fee [+ 20.00/semester]	2.00	2.00
Technology Fee	5.25	5.25
Total Per Credit Hour (PCH) Resident Rate	215.55	479.32
Student Facility Use Fee Per Semester	20.00	20.00
Out-of-State Fees		
Total PCH Resident Rate	215.55	479.32
Out-of-State Fee	481.48	601.34
Out-of-State Student Financial Aid Fee	24.07	30.06
Total PCH Out-of-State Rate	721.10	1,110.72
Student Facility Use Fee Per Semester	20.00	20.00

Law	
Tuition	602.36
Student Financial Aid Fee	30.11
Capital Improvement Trust Fund Fee	4.76
Athletics Fee	7.90
Activity & Service Fee	12.86
Student Health Fee	13.97
Transportation Access Fee	8.90
Student Facility Use Fee	2.00
Technology Fee	5.25
Total (PCH) Resident Rate	688.11
Student Facility Use Fee Per Semester	20.00
Out-of-State Fees	
Total PCH Resident Rate	688.11
Out-of-State Fee	635.31
Out-of-State Student Financial Aid Fee	31.76
Total PCH Out-of-State Rate	1,355.18
Student Facility Use Fee Per Semester	20.00

Panama City Campus		
	Undergraduate	Graduate
Tuition	105.07	403.51
Tuition Differential	49.59	
Student Financial Aid Fee	5.25	20.17
Capital Improvement Trust Fund Fee	4.76	4.76
Athletics Fee	0.69*	0.69*
Activity& Service Fee	9.88	9.88
Student Health Fee		
Technology Fee	5.25	5.25
Total PCH Resident Rate	180.49	444.26
Out-of-State Fees		
Total PCH Resident Rate	180.49	444.26
Out-of-State Fee	481.48	601.34
Out-of-State Student Financial Aid Fee	24.07	30.06
Total PCH Out-of-State Rate	686.04	1,075.66

*Panama City Students may opt to pay Main Campus rate in exchange for Main Campus Athletic Fee benefits

Sarasota Campus		
	Undergraduate	Graduate
Tuition	105.07	403.51
Tuition Differential	49.59	
Student Financial Aid Fee	5.25	20.17
Capital Improvement Trust Fund Fee	4.76	4.76
Athletics Fee	0.69	0.69
Activity& Service Fee	11.69	11.69
Student Health Fee		
Technology Fee	5.25	5.25
Total PCH Resident Rate	182.30	446.07
Out-of-State Fees		
Total PCH Resident Rate	182.30	446.07
Out-of-State Fee	481.48	601.34
Out-of-State Student Financial Aid Fee	24.07	30.06
Total PCH Out-of-State Rate	687.85	1,077.97

Medicine**In State Fees Assessed:****Following assessed per year**

Tuition	22,408.12
Student Financial Aid Fee	1,120.41
Capital Improvement Trust Fund Fee	190.40
Athletics Fee	284.40
Activity & Service Fee	462.96
Student Health Fee	502.92

Following assessed per credit hour

Technology Fee	189.00
Transportation Access Fee	320.40
Student Facility Use Fee	132.00

Out-of-State Fees (Per Year)

Out-of-State Fee	32,905.90
Out-of-State Student Financial Aid Fee	1,645.29

College of Medicine Notes:

The academic year for the College of Medicine consists of Summer, Fall, and Spring Semesters.

The Student Facilities Use Fee is not assessed to 3rd & 4th Year College of Medicine students, as their studies are conducted off-campus.

A College of Medicine student taking six or more semester hours will pay the full rate as provided herein for tuition and fees. Any student approved to attend fewer than six semester hours will pay the tuition and fees at the Graduate Student Rate for the actual number of semester hours.

Other Professional Programs**Master of Science-Nurse Anesthesia (Panama City Campus)-per semester****Doctor of Nurse Anesthesia Practice (DNAP). (Panama City Campus)-per semester**
(beginning Summer 2021)

Tuition	8,475.00
Student Financial Aid Fee	423.75
Capital Improvement Trust Fund Fee	51.12
Athletics Fee	8.26
Activity & Service Fee	118.56
Student Health Fee	423.75

Physician Assistant**Following assessed per year****[Local and other per-credit fees set at 36-hour year]**

Tuition	28,000.00
Student Financial Aid Fee	1,400.00
Capital Improvement Trust Fund Fee	171.36
Athletics Fee	284.40
Activity & Service Fee	462.96
Student Health Fee	502.92
Technology Fee	189.00
Transportation Access Fee	320.40
Student Facility Use Fee [20.00/semester + 2.00/credit hr.]	132.00
Total In-State Fee	31463.04

Out-of-State Fees (Per Year)

Out-of-State Fee	10,000.00
Out-of-State Student Financial Aid Fee	500.00
Total Out-of-State Fee	41,963.04

Distance Learning

	Undergraduate	Graduate
Tuition	105.07	403.51
Tuition Differential	49.59	
Student Financial Aid Fee	5.25	20.17
Capital Improvement Trust Fund Fee	4.76	4.76
Athletics Fee	0.69	0.69
Activity & Service Fee	9.88	9.88
Student Health Fee	---	---
Transportation Access Fee	---	---
Student Facility Use Fee [+ 20.00/semester]	---	---
Technology Fee	5.25	5.25
Total Per Credit Hour (PCH) Resident Rate	180.49	444.26

Total PCH Resident Rate	180.49	444.26
Out-of-State Fee	481.48	601.34
Out-of-State Student Financial Aid Fee	24.07	30.06
Total PCH Out-of-State Rate	686.04	1,075.66
Student Facility Use Fee Per Semester		

Definition:

Distance Learning Student: A distance learning student is one who is coded as such in the Office of the University Registrar. Note that students are assessed distance learning rates when they are coded as a distance learner student based on policies established by the Registrar but that all students enrolled in online courses are not automatically deemed distance learners for tuition purposes.

Tuition and Fees: For the purposes of this regulation, tuition and fees refers to the standard charges assessed pursuant to State Statute, Board of Governors and Florida State University Regulation.

Specific Authority; Art. IX, Sec 7, Florida Constitution, BOG Regulation 1.001(3) Law

Implemented: BOG Regulation 7.001; s. 1009. 24, Florida Statutes History-New 7-21-05, Amended, 9-21-05, 1-30-2007, 6-14-2007, 11-29-2007, 6-13-2008, 2-25-2009, 6-17-2009, 6-25-2010, 9-9-2011, 9-7-2012, 6-7-2013, 6-27-2014, 11-21-2014, 6-26-2015, 6-10-2016, 6-7-2017, 6-8-2018, 6-7-2019, _____



FLORIDA STATE UNIVERSITY
OFFICE OF THE PROVOST

MEMORANDUM

To: Christy England
Vice Chancellor for Academic and Student Affairs
Florida Board of Governors

From: Sally McRorie *Sally McRorie*
Provost and Executive Vice President for Academic Affairs

Date: February 27, 2020

Re: New Degree Program – Doctor of Nurse Anesthesia Practice (C.I.P. 51.3804)

At its February 12, 2020 meeting, the Florida State University Board of Trustees granted initial approval for the implementing the Doctor of Nurse Anesthesia Practice (C.I.P. 51.3804) degree, as requested by the College of Applied Studies. The University is now requesting that the Board of Governors grant final approval to implement the program at the professional doctorate level. The program will be delivered face-to-face on the Panama City Campus. The first doctoral-level class is scheduled to be admitted for Summer 2021.

Thank you for adding this proposal to the Board of Governors June agenda. I have also included a draft of FSU Regulation 2.024, which reflects the change from master's to doctoral-level total tuition charges. Please let me know if you need additional information.

cc:

Chairman Ed Burr
President John Thrasher
Vice President Janet Kistner
Associate VP Jennifer Buchanan
Traki Taylor
Dean Mark Riley
Dean Randy Hanna
Stacey Van Dyke
Ruth Feiock

James Hunt
Kim Barber
Hege Ferguson
Michael Lake
Melissa Crawford
Veronica Cline
Kristen Hagen
Degree Program Inventory Group

Attachments: Degree Proposal (Signed by Chairman Burr)
Appendix A – Tables
Appendix D – External Reviewer's Report
BOT Agenda Item
Draft FSU Regulation 2.024

212 Westcott Building, Florida State University, Tallahassee, Florida 32306-1310
Telephone: 850.644.1816 Fax: 850.644.0172 <http://provost.fsu.edu>



**FLORIDA STATE UNIVERSITY
BOARD OF TRUSTEES MEETING**

**WEDNESDAY, FEBRUARY 12, 2020
8:00 AM**

**AUGUSTUS B. TURNBULL III FLORIDA STATE CONFERENCE CENTER
555 WEST PENSACOLA STREET • TALLAHASSEE, FLORIDA**

REVISED 2/5/2020

A G E N D A

*The Agenda will be followed in subsequent order and items
may be heard earlier than the scheduled time.*

I. CALL TO ORDER AND WELCOME

Mr. Ed Burr, Chair

II. APPROVAL OF MINUTES (ACTION)

- November 1, 2019, Meeting Minutes

III. PUBLIC COMMENTS

IV. PRESIDENT'S REPORT

Mr. John Thrasher, President

V. CONSENT ITEMS

- A. Requesting Approval of Termination of Education Specialist in Instructional Systems and Learning Technologies
- B. Requesting Approval of Termination of Education Specialist in Measurement and Statistics
- C. Requesting Approval of Termination of Education Specialist in Higher Education
- D. Requesting Approval of Termination of Education Specialist in Foundations of Education
- E. Requesting Approval of Termination of Master's in Interdisciplinary Social Science
- F. Requesting Approval of Proposal to Implement Doctor of Nurse Anesthesia Practice

- G. Requesting Approval of Proposal to Implement Master's in Entrepreneurship
- H. Requesting Approval of Proposal to Explore Master's in Data Science
- I. Requesting Approval of Amended University Regulation FSU 3.005 Academic Honor Policy
- J. Requesting Approval of Amended University Regulation 4.071 Faculty Practice Plan
- K. Requesting Approval of the FSU Research Foundation Audit Contract Extension
- L. Requesting Approval for FSU Florida Medical Practice Plan Audit Contract Renewal
- M. Requesting Approval for Florida State University School Audit Contract Extension
- N. Requesting Approval for the 2020-2021 Budget Projects for Auxiliaries with Outstanding Revenue Bonds
- O. Requesting Approval for the 2019-2020 Revised Fixed Capital Outlay Plan
- P. Requesting Approval of the Seminole Booster Board Nominee

VI. NEW BUSINESS

A. Finance and Business

Mr. Kyle Clark, Vice President for Finance & Administration

Action Items

- 1. Requesting Contingent Approval for FSU Research Foundation purchase of Burt Reynolds Hall
- 2. Requesting Approval of Resolution for Executing Seminole Boosters, Inc. College Town Financing

B. University Advancement

Dr. Thomas W. Jennings, Vice President for University Advancement

C. Academic Affairs

Dr. Sally McRorie, Provost

D. Audit & Compliance

Mr. Sam McCall, Chief Audit Officer

Action Items

- 1. Requesting Approval of Audit Report AR 20-04 – Performance-Based Funding Metrics Data Integrity Certification Audit and Data Integrity Certification
- 2. Requesting Approval of Audit Report AR 20-05 – Preeminent Research University Metrics Data Integrity Certification Audit and the Data Integrity Certification

E. Student Government Association

Ms. Stephanie Lee, Vice President of Student Government Association

F. Faculty Senate

Dr. Erin Ryan, Vice Chair, Faculty Senate Steering Committee

G. Student Affairs

Dr. Amy Hecht, Vice President for Student Affairs

H. Legislative Update

Ms. Kathleen Daly, Associate Vice President of University Relations

I. General Counsel

Ms. Carolyn Egan, General Counsel

VI. CHAIR'S REPORT

Mr. Ed Burr, Chair

Action Items

- A. Election of Vice Chairman of the FSU Board of Trustees for two-year term
- B. FSU Board of Trustees Committee Assignments

VII. OPEN FORUM FOR BOARD OF TRUSTEES

Mr. Ed Burr, Chair

VIII. ADJOURNMENT

Approved

Date

From: [Stacey VanDyke](#)
To: [Amy Polick](#)
Cc: [Makana Craig](#)
Subject: Fw: Florida State's Application for a DNAP
Date: Tuesday, May 5, 2020 3:32:16 PM
Attachments: [image001.png](#)

Email correspondence FIU

From: Stacey VanDyke
Sent: Friday, October 11, 2019 8:29 PM
To: Derrick Glymph <dglymph@fiu.edu>; Jorge Valdes <jvalde@fiu.edu>
Cc: Amy Polick <polick@psy.fsu.edu>
Subject: Re: Florida State's Application for a DNAP

Thank you so much for your fast reply. I appreciate you and your program.

Get [Outlook for iOS](#)

From: Derrick Glymph <dglymph@fiu.edu>
Sent: Friday, October 11, 2019 8:28 PM
To: Stacey VanDyke; Jorge Valdes
Subject: RE: Florida State's Application for a DNAP

Good Evening Dr. VanDyke,

I do not foresee any potential impact to FIU Nurse Anesthesia Program in the transition of FSU Nurse Anesthesia Program to DNAP. Please let me know if I can be of any further assistance.

Sincerely,

The Nicole Wertheim College of Nursing and Health Sciences - "We are fueled by intellect; driven by innovation and caring."

Derrick C. Glymph, DNAP, CRNA, APRN, COL., USAR
Interim Chair, Department of Nurse Anesthetist Practice
Clinical Associate Professor
Nicole Wertheim College of Nursing and Health Sciences
Florida International University
11200 SW 8th ST, AHC3-343
Miami, FL 33199
Tel: 305-348-4808
FAX: 305-348-7823

Email: dglymph@fiu.edu
www.cnhs.fiu.edu/anesthesiology

“There is no traffic on the extra mile”

US NAVY SEALs Quote “ The only easy day was yesterday”

“Emerging preeminent state research university.”



Think differently, go beyond what is expected. Do something great with the opportunity you are given.

Be Worlds Ahead.

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From: Stacey VanDyke [mailto:svandyke@pc.fsu.edu]
Sent: Friday, October 11, 2019 2:57 PM
To: Derrick Glymph <dglymph@fiu.edu>; Jorge Valdes <jvalde@fiu.edu>
Subject: Florida State's Application for a DNAP

Good afternoon Jorge and Derrick,

I hope this semester is treating you well, the fall is always so busy. I am reaching out to you both because as you know, we are currently looking to transition our master's degree program into a doctoral program in the near future. Since we are all in the SUS system and you offer a similar program, part of the approval process involves notifying other schools within the SUS that I am planning to do that and to have you weigh in on whether our program would impact your

recruitment in general and specifically in diversity recruitment regarding FIU. Do you foresee any potential impact to your program in transitioning ours to a DNAP by 2021? Thank you in advance for your information and look forward to seeing you again soon.

Sincerely,

Stacey A. VanDyke

DNP, CRNA

Program Administrator

Assistant Teaching Professor

Nurse Anesthesia Program

College of Applied Studies

Florida State University, Panama City

4750 Collegiate Drive

Panama City, FL 32405-1099

(O) 850-770-2421

(F) 850-770-2080

svandyke@fsu.edu

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MEMORANDUM

TO: Dr. Christy England
Vice Chancellor for Academic and Student Affairs

FROM: Dr. Randy Hanna
Dean, Florida State University College of Applied Studies

Dr. Stacey VanDyke
Director, Florida State University Nurse Anesthesia Program

DATE: June 8, 2020

SUBJECT: Doctor of Nurse Anesthesia Practice, § 1104.08, Florida Statutes

Dear Dr. England,

The proposed Doctor of Nurse Anesthesia Practice (DNAP) program will meet or exceed each of the standards for clinical practice outlined in Section 1004.08 of the Florida Statutes¹. More specifically, in the attached table we list each of the standards for clinical practice from Section 1004.08 and match those items to a sample of corresponding standards and learning objectives of the DNAP program, which have been built into the DNAP curriculum and program per guidelines provided by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA)².

Please let us know if you have any other questions.

Sincerely,

Randy Hanna, EdD
Dean
College of Applied Studies
Florida State University

Stacey VanDyke, DNP, CRNA
Director
Nurse Anesthesia Program
Florida State University

¹ Florida Statute 1004.08: Patient safety instructional requirements.—Each public school, college, and university that offers degrees in medicine, nursing, or allied health shall include in the curricula applicable to such degrees material on patient safety, including patient safety improvement. Materials shall include, but need not be limited to, effective communication and teamwork; epidemiology of patient injuries and medical errors; medical injuries; vigilance, attention, and fatigue; checklists and inspections; automation, technological, and computer support; psychological factors in human error; and reporting systems.

² Accreditation standards of Nurse Anesthesia Programs at the Practice Doctorate level can be accessed here: <https://www.coacrna.org/wp-content/uploads/2020/01/Standards-for-Accreditation-of-Nurse-Anesthesia-Programs-Practice-Doctorate-revised-October-2019.pdf>

Florida Statute Section 1004.08 Clinical Standards and Sample of Standards Built into DNAP Curriculum

Clinical Standards Florida Statute, Section 1004.08	Sample of Graduate Standards Built into DNAP Curriculum (per COA accreditation guidelines²)
Effective communication and teamwork	<p>D.13) Apply knowledge to practice in decision-making and problem-solving.</p> <p>D.25) Utilize interpersonal and communication skills that result in the effective exchange of information and collaboration with patients and their families.</p> <p>D.26) Utilize interpersonal and communication skills that result in the effective interprofessional exchange of information and collaboration with other healthcare professionals.</p> <p>D.27) Respect the dignity and privacy of patients while maintaining confidentiality in the delivery of interprofessional care.</p> <p>D.29) Transfer the responsibility for care of the patient to other qualified providers in a manner that assures continuity of care and patient safety</p> <p>D.30) Teach others</p> <p>D.34) Interact on a professional level with integrity</p>
Epidemiology of patient injuries and medical errors	<p>D.7) Provide anesthesia services to all patients across the lifespan</p> <p>D.8) Perform a comprehensive history and physical assessment</p> <p>D.9) Administer general anesthesia to patients with a variety of physical conditions.</p> <p>D.11) Administer and manage a variety of regional anesthetics.</p> <p>D. 14) Provide nurse anesthesia services based on evidence-based principles.</p> <p>D.36) Function within legal and regulatory requirements.</p>
Medical injuries	<p>D.4) Protect patients from iatrogenic complications.</p> <p>D.10) Administer general anesthesia for a variety of surgical and medically related procedures.</p> <p>D.20) Calculate, initiate, and manage fluid and blood component therapy.</p> <p>D.21) Recognize, evaluate, and manage the physiological responses coincident to the provision of anesthesia services.</p> <p>D.22) Recognize and appropriately manage complications that occur during the provision of anesthesia services.</p>
Vigilance, attention, and fatigue	<p>D.1) Be vigilant in the delivery of patient care.</p> <p>D.2) Refrain from engaging in extraneous activities that abandon or minimize vigilance while providing direct patient care (e.g., texting, reading, emailing, etc.).</p> <p>D.5) Provide individualized care throughout the perianesthesia continuum.</p> <p>D.6) Deliver culturally competent perianesthesia care</p> <p>D.13) Apply knowledge to practice in decision making and problem-solving.</p> <p>D.15) Perform a preanesthetic assessment before providing anesthesia services.</p>

	<p>D.17) Formulate an anesthesia plan of care before providing anesthesia services.</p> <p>D.19) Interpret and utilize data obtained from noninvasive and invasive monitoring modalities.</p>
Checklists and inspections	<p>D.3) Conduct a comprehensive equipment check</p> <p>D.12) Maintain current certification in ACLS and PALS.</p> <p>D.15) Perform a preanesthetic assessment before providing anesthesia services</p> <p>D.16) Assume responsibility and accountability for diagnosis</p> <p>D.17) Formulate an anesthesia plan of care before providing anesthesia services.</p>
Automation, technological, and computer support	<p>D.3) Conduct a comprehensive equipment check</p> <p>D.18) Identify and take appropriate action when confronted with anesthetic equipment-related malfunctions</p> <p>D.49) Use information systems/technology to support and improve patient care</p> <p>D.50) Use information systems/technology to support and improve healthcare systems.</p>
Psychological factors in human error	<p>D.16) Assume responsibility and accountability for diagnosis</p> <p>D.22) Recognize and appropriately manage complications that occur during the provision of anesthesia services</p> <p>D.29) Transfer the responsibility for care of the patient to other qualified providers in a manner that assures continuity of care and patient safety</p> <p>D.34) Interact on a professional level with integrity</p> <p>D.33) Adhere to the Code of Ethics for the Certified Registered Nurse Anesthetist</p> <p>D.35) Apply ethically sound decision-making processes.</p> <p>D.37) Accept responsibility and accountability for his or her practice.</p>
Reporting systems	<p>D.16) Assume responsibility and accountability for diagnosis</p> <p>D. 17) Formulate an anesthesia plan of care before providing anesthesia services</p> <p>D.19) Interpret and utilize data obtained from noninvasive and invasive monitoring modalities</p> <p>D.25) Utilize interpersonal and communication skills that result in the effective exchange of information and collaboration with patients and their families</p> <p>D.26) Utilize interpersonal and communication skills that result in the effective interprofessional exchange of information and collaboration with other healthcare professionals.</p> <p>D.27) Respect the dignity and privacy of patients while maintaining confidentiality in the delivery of interprofessional care</p> <p>D.28) Maintain comprehensive, timely, accurate, and legible healthcare records.</p> <p>D.48) Disseminate scholarly work</p>

MEMORANDUM

TO: Dr. Christy England
Vice Chancellor for Academic and Student Affairs

FROM: Dr. Sally McRorie *Sally McRorie*
Provost and Executive Vice President for Academic Affairs

DATE: May 12, 2020

SUBJECT: FSU Doctor of Nurse Anesthesia Practice, CIP 51.3804

Thank you for providing a review of our Doctor of Nurse Anesthesia Practice (DNAP) Proposal. In this memorandum, we are providing clarification and revisions as requested for our proposal to implement the DNAP program beginning summer 2021. Below is the original list of requested revisions, and our responses are provided with each item in **bold**. Thank you for allowing us the opportunity to submit these revisions, and please let us know if further clarification is needed.

Substantive Issues:

- Please provide a copy of the communication with FIU referenced in Section II.E. of the proposal.
 - **As requested, a copy of our communications with the FIU Nurse Anesthesia Program Director, Dr. Derek Glymph, will be uploaded into the dropbox provided by your staff.**
- In Section III.A. of the proposal, several clarifications are needed. Table 2-Appendix A shows all of the funding for the program as E&G (state-funded); however, the narrative in this section indicates that the program will be self-sustaining from tuition revenue. Please clarify if this program will be self-supporting as defined by Board of Governors Regulation 8.002, or state-funded using E&G funding?
 - **We revised Section III.A. to reflect clearly that the DNAP program will be supported by E&G funding. It is not intended as a market-rate or continuing education program. Table 2-Appendix A also describes the program as E&G funded.**
- The narrative in Section III.A. indicates that the tuition rate for the program is \$9,500 per credit hour, but the narrative in Section III.B. indicates that the tuition rate for the program is \$9,500 per semester. Please clarify which rate is correct.
 - **The narratives in Sections III.A. and III.B. have been revised to correct the error. The correct rate is \$9,500 per semester.**

- Section III.A. of the proposal states that “At \$8,475 of \$9,500 coming back to the program, the actual budget for year 1 (2021) is \$1,627,200.” Please explain the use for the overage of tuition collected, and why the \$463,200 overage is not reflected in Table 2-Appendix A.
 - **Section III.A. of the proposal has been revised to provide clarification about the tuition and fees associated with the DNAP program. The graduate tuition that the DNAP program will assess is a per-student, per-semester total of \$8,475.00. When adding student financial aid, capital improvement, athletics, activity and service, and student health fees, the combined tuition and fees total \$9,500 per semester.**
- Please provide documented evidence of the university’s authority to charge the tuition rate for the program as referenced in Sections III.A. and III.B. of the proposal.
 - **We revised Sections III.A. and III.B. to be more clear regarding the proposed tuition rate for the DNAP and our timeline for seeking BOG approval for differentiated graduate program tuition. As noted in the updated proposal, we based the proposed DNAP tuition on what was approved by the BOG for our current MSNA tuition structure (a rate of \$9,500 per semester). Tuition and fees for professional programs – such as the MSNA and proposed DNAP – are authorized by the Board of Governors’ regulation 7.001(4), section 1009.24(4)(b) of the Florida statutes, and established in Florida State University Regulation FSU-2.024. After receiving final approval of the DNAP proposal to implement, we will seek approval by the FSU BOT for any needed amendment to FSU-2.024. Thereafter, this tuition amendment will be submitted to the Board of Governors for final approval.**
- Section III.A. lists an allocation of \$190,000 in year 1 for A&P Staff expenses, however, Table 2-Appendix A only reflects \$100,000. Please revise the narrative in Section III.A. and/or Table 2-Appendix A to accurately reflect the use and amount for this allocation.
 - **As requested, the narrative and its corresponding table were reviewed and corrected. The A&P Staff expenses information have been updated to reflect \$90,000 in year 1 for both the narrative and the excel table (Table 2). The original \$190,000 was a typographical error.**
- Pursuant to Section VI.C. please provide a narrative, as required, corresponding with the timeline for the planning process, as well as a timeline for phasing out and terminating the Master of Science in Nursing Anesthesia.
 - **Section VI.C. in our proposal has been updated and revised to include a narrative that corresponds with the planning activities associated with the development of the DNAP. This narrative also includes information about our timeline for the overall planning process and timeline for phasing out and terminating the MSNA program.**
- Pursuant to Section VIII.B. of the proposal, please provide a description of the graduation requirements for the program.
 - **Section VIII.B. has been revised to be more explicit regarding the DNAP program’s graduation requirements, which include successful completion of the full academic program of study presented in detail in the proposal.**

- Pursuant to Section VIII.C. of the proposal, please provide more information regarding the specific requirements for the Scholarly Inquiry Project. Additionally, please provide all of the curriculum information required, or provide a reference to where this information is provided in the proposal.
 - **In Section VIII.C. of the proposal, we have added additional information about the Scholarly Inquiry Project, which is a requirement for fulfillment of the doctorate degree. Also in Section VIII.C., all of the curriculum information required for this section has been more clearly described.**
- Pursuant to Section IX.B. of the proposal and Table 2-Appendix A, the use of the OPS allocations is not specified in the narrative. Please describe the purpose of the OPS allocations in Table 2-Appendix A.
 - **We have updated the narrative in Section IX.B. to reflect a more specific description of the OPS allocations that are listed in Table 2-Appendix A.**

Technical Issues:

- Please revise the reported values in Table 4-Appendix A under the “% Effort for Program” columns in years 1 and 5 to values of “1.0” indicating 100% effort in the program.
 - **We have reviewed and revised Table 4-Appendix A, and all effort for faculty in the program is now reflected as 1.0 to indicate 100% effort.**

Thank you again for allowing us to submit these revisions; I look forward to having this phase of the approval process completed. Please feel free to contact me or a member of my staff if you have questions or concerns.

cc: Dr. Jennifer Buchanan
 Dr. Traki L. Taylor
 Ms. Brittanian K. Gamble
 Ms. Lynda Page
 Mr. Jeremy M. Hudak
 Dr. Amy Polick
 Dr. Stacey VanDyke