SEATTLEU
COLLEGE OF NURSING

Doctor of Nursing Practice

PRECEPTOR HANDBOOK

Primary Care/Family Nurse Practitioner

Updated May 2026

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Welcome

The graduate Primary Care/FNP faculty wishes to welcome you to the Doctor of Nursing Practice (DNP) Program at Seattle University College of Nursing. We are committed to promoting excellence in this program and seek to provide our graduates with the knowledge and skills necessary to function effectively as Family Nurse Practitioners and Adult-Gero Nurse Practitioners in the management of common acute and chronic health care problems across the lifespan in a variety of primary care settings.

Mission and Philosophy of Seattle University College of Nursing

Educating and Inspiring Leaders to Transform Health Care for a Just and Humane World

Students learn critical thinking, clinical reasoning and judgment, and acquire fundamental skills necessary to address issues of health and well-being, particularly among the poor, vulnerable, underserved, and marginalized. We seek to provide nursing instruction that incorporates ethical, aesthetic, and personal ways of knowing—a holistic approach that is in line with the nursing profession and Jesuit teaching. We are recognized as an engaged, creative and dynamic learning organization, committed to social justice, innovation, scholarship, teaching excellence, and the formation of professionals ready to meet the evolving health care needs of a global community.

Furthermore, we embrace and value diversity within our university, faculty, staff, students, and the communities we serve. We endorse and uphold the principles of cultural humility and sensitivity—lifelong processes that require us to engage in self-reflection, critique, and evaluation; to examine and rectify longstanding power differentials between clients and members of the healthcare team; and to work in partnership with the communities we serve to co-create mutually beneficial, non-paternalistic relationships.

Program Accreditation

Accreditation: The Bachelor of Science in Nursing (BSN), Doctor of Nursing Practice (DNP), and Post-Graduate Advanced Practice Nurse Practitioner Certificate programs at Seattle University College of Nursing are accredited by the Commission on Collegiate Nursing Education (CCNE), 655 K Street NW, Suite 750, Washington, DC, 20001, 202-887-6791
Doctor of Nursing Practice (DNP) and Post-Graduate Advanced Practice Nurse Practitioner Certificate programs are accredited through December 31, 2030.
Seattle University College of Nursing is a member of the American Association of Colleges of Nursing (AACN), and has local student chapters in Sigma Theta Tau International Nursing Honorary Society and the National Student Nurses' Association.

Program Overview

The Doctor of Nursing Practice (DNP) is a post baccalaureate or post master's program that prepares advanced practice nurses to meet the demands of complex health care systems, the rapidly expanding scientific knowledge needed for practice, and the increasing needs for interprofessional collaboration and leadership. Graduates will provide leadership for just and humane health care policies and

promote access to high quality, culturally competent health care and healthcare systems for vulnerable individuals, families, communities and populations through regional, national and global engagement.

Program Learning Outcomes

Graduates of the Seattle University College of Nursing DNP Program will demonstrate the following in the care of individuals, families, and/or communities within culturally diverse and vulnerable populations:

- Synthesize knowledge from nursing and other disciplines in the provision of evidence-based advanced practice nursing care.
- Utilize information systems technology to improve health care access, quality, and outcomes.
- Demonstrate competence in an advanced nursing practice specialty.
- Exercise leadership through scholarship, advocacy, and community engagement to achieve just and equitable health care systems that improve health potential and reduce health disparities of vulnerable populations.
- Evaluate and influence health care systems and health policy at local, state, federal, and global levels.
- Demonstrate effective communication and interprofessional collaboration in the promotion of health care access, quality, and outcomes.
- Evaluate beliefs, values, and ways of knowing to foster lifelong personal and professional development.
- Apply principles of ethical decision-making in complex clinical situations.

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DNP PRECEPTOR AND CLINICAL SITE GUIDELINES

Recognition of Preceptor Role

Your involvement as a preceptor for the nurse practitioner program is an essential component of the curriculum. Clinical practice rotations offer a unique opportunity for the graduate nursing student to observe and practice the management of patient care. Students develop their ability to safely perform clinical problem-solving through their participation in the clinical decision-making process and learn the value of collaboration among health care providers.

Affiliate Faculty Appointment

- To become affiliate faculty, please fill out this form.

Training

Minimal Qualifications for NP Preceptor:

- Preparation at the appropriate level of current practice and a minimum of (1) one-year experience in current role.
- Licensed by the state of practice as a MD (Medical Doctor), DO (Doctor of Osteopathic Medicine), NP (Nurse Practitioner), PA (PhysicianAssistant), ND (naturopathic doctor)
- Required Documentation for NP preceptor
    - Professional licenses will be verified on-line.
    - Current CV - include any previous teaching experience, previous CE on teaching or precepting, additional certifications

Preceptor Responsibilities for Preceptorship

1. Preceptors should orient the student to the clinical site. This includes organizational policies and procedures specific to the setting.
2. Discuss in advance with the student your expectations, teaching style and proposed schedule. Preceptors must approve all schedule revisions.
3. Preceptors should review course objectives with the student and contact the program faculty member if any questions arise.
4. Preceptors will evaluate the performance of the student using the provided evaluation tool. (*Typhon NPST™ software)
5. Preceptors must approve any clinical activity by the student in the clinical setting.
6. Preceptors are urged to contact faculty at any time during the clinical experience with questions, concerns, or problems. This includes any problems encountered with the student during the experience as soon as they occur or if the student does not complete the clinical hours or does not notify the preceptor of an absence.
7. The preceptor will notify the student and designated faculty member immediately prior to termination of the agreed upon contract.

Evaluation

At the conclusion of the rotation, the preceptor will complete an electronic evaluation form to provide feedback on the student's progress.

*Typhon NPST ™ software is the student clinical tracking system used to complete clinical evaluations and view student time and case logs. The FNP program uses Typhon NPST™ to collect and track individual students and aggregate program-•-related data such as total clinical hours and evaluations. All active preceptors will be listed in Typhon NPST ™ and will be sent a user name and password along with instructions for logging in. The software is optimized for Internet Explorer so some of the features do not work as well in other browsers.

Additional Considerations for Precepting

A. Generally, the development of a learning environment for the student would include:
    1. Sufficient exam rooms so the student may function at a novice pace.
    2. Opportunities to do histories and physical examinations, present the case orally to you including proposing appropriate diagnoses and therapeutic plans, and write up the encounter as part of the permanent chart/record.
    3. Preceptor follow-up with the patient in order to critique the proposed assessment and plan of care.
    4. Opportunity for the student to observe or participate in the management of any patient who presents with a problem of general education interest.
    5. Guidance in the performance of clinical procedures that are consistent with the student's learning objectives while under supervision of the preceptor.
    6. A site visit and an email or telephone conversation with the academic faculty overseeing the student's work sometime during the semester for the purposes of determining student progress.
B. The clinic staff should understand that the nurse practitioner student will function as a health care provider.
C. The purpose of the experience is to provide the nurse practitioner student with an opportunity to participate in: 1) health assessment of patients, 2) counseling and guidance in accordance with identified needs, and 3) management of the care of patients in consultation with the preceptor.
D. The student is expected to consult with the preceptor regarding **each patient** and to record the visits in the format appropriate to the organization's standards. The student will function under the supervision of the preceptor at all times.
E. The supervising faculty member for the student will be the point of communication with the preceptor during the clinical practicum. This will include a mid-quarter site visit.

DNP Student Onboarding

The College verifies that nurse practitioner students have the following:

- Unencumbered RN license
- American Heart Association BLS Provider CPR certification
- HIPAA/OSHA certification
- Professional liability insurance
- Personal Health Insurance
- Background Check
- Health Data and Immunization Requirements:
    - TB Screening
    - Hepatitis B: 3 Vaccinations **AND** positive antibody titer
    - Varicella: 2 Vaccinations **OR** positive antibody titer
    - MMR: (Measles / Mumps / Rubella) 2 Vaccinations **OR** positive antibody titers for all 3 components
    - Tdap within last 10 years
    - Current (yearly) flu immunization

These items are required for all students *prior to* beginning any clinical rotation. Additional documentation may be required based on individual agency placements.

Student Responsibilities

1. The student should initially meet with the preceptor to discuss objectives and give overview of past experiences.
2. Each student is responsible for arranging with the preceptor a schedule to indicate the exact times and dates to complete the required number of clinical hours to be precepted.
3. Students are required to inform the preceptor and Primary Care/FNPfaculty member of any changes in the schedule or any absence. Preceptors should be contacted at least a day before the absence when possible.
4. Students should collaborate appropriately with other health care professionals.
5. Students must complete all clinical hours with their approved preceptor.
6. Any problems that arise during preceptorship must be reported to the preceptor and the Primary Care/FNP faculty member immediately.
7. The student should seek ongoing feedback from the preceptor.
8. The student should adhere to all policies and procedures specific to the practice settings during the clinical experience at the clinical site.
9. Students must report every accident or injury immediately after its occurrence tothe preceptor and the Primary Care/FNP faculty member.
10. The student should always show professionalism in behavior and dress.

11. Students will evaluate preceptors upon completion of each practicum experience.
12. Clinical hours during academic breaks must be approved in advance by faculty.

Primary Care/FNP Faculty Responsibilities to Preceptor

1. Faculty will monitor students through three points of contact throughout the practicum. (email, phone and/or a site visit)
2. Faculty will be available to support preceptors as needed.

DNP Curriculum Overview

The Doctor of Nursing Practice is a 3-year post licensure program to prepare Advanced Practice Nurses with a focus of Family Nurse Practitioner or Adult Gero Nurse Practitioner -Primary care. The curriculum encompasses the DNP essentials which focus on organizational leadership and health system changes as well as the foundationsfor the Advanced Practice Nursing. The foundational courses include both didactic lab courses as well as practicum-based learning.

Pre-clinical Coursework

Nurs 6024: Advanced Pathophysiology

This course presents advanced pathophysiologic concepts essential for critical thinking and clinical decision-making. The emphasis is pathophysiology applied to health promotion, disease prevention, and disease management. Case studies, lecture, class discussion, and student-lead teaching will be used to teach concepts and application of material.

Nurs 6101/6001: Advanced Health Assessment Didactic/Lab

This course focuses on advanced knowledge and skills necessary for the assessment and promotion of health across the life span. Emphasis will be placed upon collection and interpretation of comprehensive biological, cultural, psychosocial, and physical data from the history and physical examination in relation to both normal and abnormal findings. Registration restrictions may be bypassed by the department with permission of instructor.

Nurs 6004: Advanced Pharmacology of RNs

This course examines advanced pharmacological principles and drug actions encountered when providing nursing care across the lifespan. The focus is on major drug class prototypes, commonly prescribed medications, and associated laboratory data. Students analyze therapeutic and adverse drug effects and implications for nursing care.

Nurs 6022: Advanced Pharmacology for Prescribers

This course is intended to familiarize students with principles of drug therapy in primary care and to develop the skills necessary to prescribe drugs to children, adults, pregnant women, and geriatric clients. The course covers drugs used in some of the basic diseases encountered in primary care. The student will learn to apply the general principles of drug therapy by evaluating the therapeutic and adverse effects of drug therapy in each of the patient groups described above. The combination of an understanding of the theoretical principles, as well as application of these principles to cases and illustrations, will sharpen the student's ability to prescribe drugs appropriately. A combination of self-study, lecture, cases, problem-solving, and exams will be used in class to achieve this goal. Upon

completing this course, when confronted with new drug therapies, the student should feel comfortable in their ability to find and utilize the proper information necessary to make a justifiable pharmacotherapeutic recommendation.

Nurs 6120: Population Based Healthcare

This course builds on information covered in NURS 5002 and NURS 5020 and focuses on the context of primary care for populations with identified risk factors, vulnerabilities, and health disparities. Principles of epidemiology are applied in assessing the health needs of communities and populations. Students will assess multiple dimensions of interventions that address community-based health promotion, evidence-based care, and evaluation with interprofessional teams.

Nurs 6024: Reproductive Health

Health promotion and disease prevention for women from adolescence through old age. Developmental, preconception, inter-conceptual, and postpartum assessment, as well as the assessment and management of common episodic and chronic gynecological conditions of women in primary care settings, including culturally diverse, vulnerable and global populations. Health promotion and screening for male reproductive health is also included. Pregnancy care and the common complications are included. Theory and research from nursing and other disciplines are applied and integrated into a case based approach.

Nurs 6121: Mental Health for Primary Care Providers

Addresses the promotion of mental health, diagnosis, and age-appropriate treatment of common, uncomplicated mental disorders and the ongoing management of patients with stabilized psychiatric disorders in primary care and the community. The complex interactions of mental and physical health,and bidirectional influences of medical and psychiatric treatment and prognosis, are considered. An ecological model and social determinants of health are examined as factors influencing the development of mental disorders and treatment effectiveness. Emphasis is placed on holistic assessment, early detection, disease prevention, health promotion, and collaborative, integrated approaches to treatment planning and referral processes

NURS 6075: Clinical Reasoning

Development of critical thinking and clinical decision-making skills used in health assessment. Approaches to diagnosis, utilization and interpretation of diagnostic tests, developing differential diagnoses, documentation of skills and use of computerized documentation programs are included. Registration restrictions may be bypassed by the department with permission of instructor.

NURS 6401: Diagnostics and Procedures**

During this course, you will be exposed to a variety of clinical laboratory and radiographic tests and understand the principals for ordering tests for both the acute inpatient and outpatient setting. The course will also expose you to an introduction to procedures commonly used in the outpatient and sub-acute settings. Registration restrictions may be bypassed by the department with permission of instructor.

** Optional

Clinical Didactic Courses

Nurs 6450: Primary Care Management I: Acute and Chronic conditions
Focuses on management of common acute and chronic health problems in primary care across the lifespan. Diagnostic reasoning is used to differentiate the basis of acute and chronic problems. Evidenced-based approaches to primary care drawing upon theories, research, clinical knowledge and national standards are used to develop therapeutic plans for common acute and chronic health problems across the lifespan.

Nurs 6460: Primary Care Management II: Chronic and Complex conditions
Focuses on management of common acute and chronic health problems in primary care across the lifespan. Diagnostic reasoning is used to differentiate the basis of acute and chronic problems. Evidenced-based approaches to primary care drawing upon theories, research, clinical knowledge and national standards are used to develop therapeutic plans for common acute and chronic health problems across the lifespan.

Nurs 6470: Primary Care Management III: Primary care of Infants and Children
Focuses on management of common acute and chronic health problems in primary care across the lifespan. Diagnostic reasoning is used to differentiate the basis of acute and chronic problems. Evidenced-based approaches to primary care drawing upon theories, research, clinical knowledge and national standards are used to develop therapeutic plans for common acute and chronic health problems across the lifespan.

Nurs 6360: Geriatric Syndromes
Explores the phenomenon of geriatric syndromes, which encompass complex multi-morbidities that do not fit into discrete disease categories seen in younger persons. Students will learn to select and employ assessment instruments to quantify and evaluate common geriatric syndromes. Students will incorporate research in order to identify evidence-based approaches for treatment of syndromes in elderly patients. Emphasis is placed on comprehensive assessment and research based advanced nursing interventions to promote, maintain, and restore health of the elderly. Registration restrictions may be bypassed by the department with permission of instructor.

Clinical Practicum Courses

The ideal practicum experience will afford the student the opportunity to strengthen their clinical practice across the lifespan. Focus may be in specific population groups such as pediatrics and explore opportunities in clinical areas that they have expressed an interest in. Students must complete 600 hours over the clinical courses. Typically they are divided to 150 hours per quarter but this may very. A satisfactory faculty evaluation of student performance must be obtained to successfully complete the course. Faculty and preceptors will conduct an informal midterm and a formal final evaluation of student performance.

Overview of Clinical Courses in the program

Clinical Hours

Clinical hours are derived from direct face-to-face patient contact hours, time spent reviewing the patient's medical record in preparation for the clinical encounter, documentation of the clinical encounter and conference dialogwith the preceptor regarding the clinical encounter.

NURS 6486: Primary Care Management Practicum I: Acute Management

This is the student's first clinical experience. This course focuses on management of common acute health problems in primary care across the lifespan. Diagnostic reasoning is used to differentiate the basis of chronic acute problems. Evidenced-based approaches to primary care drawing upon theories, research, clinical knowledge, and nation standards are used to develop therapeutic plans for common acute health problems across the lifespan.

NURS 6487: Primary Care Practicum II: Chronic Issues

This quarter is the student's second clinical rotation. This course focuses on management of common chronic health problems in primary care across the lifespan. Diagnostic reasoning is used to differentiate the basis of chronic acute problems. Evidenced-based approaches to primary care drawing upon theories, research, clinical knowledge, and nation standards are used to develop therapeutic plans for common acute health problems across the lifespan.

NURS 6488: Primary Care Management Practicum III: Complex Problems across the Lifespan

This course is the student's third clinical rotation. This course focuses on the primary health needs of patients including those needs related to health promotion and disease prevention, strategies for identification, management, client and family education, and appropriate referrals. Theories and research from nursing and other disciplines are applied and integrated through seminars, clinical conferences, and clinical practice.

NURS 6489: Transition to Advanced Practice Nursing

This course is the student's fourth and final clinical experience. During this course the students are expected to integrate all of theoretical and clinical components of the advanced nurse practitioner role in an intensive, capstone clinical experience in a primary care settings with patients across the life span. Scheduled seminars to integrate the leadership, accountability, autonomy, professionalism, collaboration, consultation, and research dimensions of the role.

General Clinical Course Objectives:

The course objectives for these clinical courses are the same, however the level of mastery increases with each progressive quarter.

Upon completion of these courses are, the learner:

1. Identifies signs and symptoms of common acute physical and mental illnesses across the lifespan.
2. Identifies acute exacerbations of chronic illness and intervenes appropriately.
3. Orders, performs and interprets age-, gender-, and condition-specific diagnostic tests and screening procedures.
4. Analyzes and synthesizes collected data for patients of all ages.
5. Formulates comprehensive differential diagnoses, considering epidemiology, environmental and community characteristics, and life stage development including the presentation seen with increasing age, family and behavioral risk factors.
6. Treats common acute physical and mental illnesses and common injuries in people of all ages to minimize the development of complications and promote function and quality of living.
7. Prescribes medications with knowledge of altered pharmacodynamics and pharmacokinetics in people of all ages.
8. Evaluates the effectiveness of the plan of care for the family, as well as the individual, and implements changes.
9. Evaluates patient's and /or other caregiver's support systems and resources, collaborates with and supports the patient and caregivers, and assists families/individuals in the development of coping systems and lifestyle adaptations.
10. Makes appropriate referrals to other health care professionals and community resources for individual and families.
11. Facilitates transitions between health care settings to provide continuity of care for individuals and family members.
12. Intervenes with multigenerational families who have members with differing health concerns.
13. Assists patient and family members to cope with end of life issues.
14. Applies research that is family-centered and contributes to positive change in the health of and health care delivery to families.
15. Maintains a sustaining partnership with individuals/families and facilitates family decision-making about health.
16. Assists individuals and families with ethical issues in balancing differing needs, age-related transitions, illness, or health among family members
17. Demonstrates knowledge and skill in addressing sensitive topics with family members such as sexuality, finances, mental health, terminal illness and substance abuse.
18. Elicits information about the family's and patient's goals, perceptions, and resources when considering health care choices.
19. Assesses educational needs and teaches individuals and families accordingly.
20. Provides anticipatory guidance, teaching, counseling, and education for self-care for the identified patient and family.

Seattle University
Primary Care/ Family Nurse Practitioner
DNP Program Student Clinical Evaluation Tool
Faculty/Preceptor Evaluation Midterm Final

Excellence in NP Education

Nurse Practitioner Student Competency Assessment (NPSCA)

Revised April 10, 2024

	Item	4 points Competent (75-100%)	3 points Advanced Beginner (50-74%)	2 points Novice (25-49%)	1 point Pre-Novice (0-24%)	Score	Not applicable	Comments
	Communication (Communicate effectively with individuals and families.)							
1	Used open-ended questions	All of the time	Most of the time	Some of the time	Little to none of the time			
2	Used terminology that was clear and free of jargon	All of the time	Most of the time	Some of the time	Little to none of the time			
3	Used reflection, clarification and/or summarization	All of the time	Most of the time	Some of the time	Little to none of the time			
	Promote Caring Relationships (Engage with individuals and/or families in establishing a caring relationship.)							

	Item	4 points Competent (75-100%)	3 points Advanced Beginner (50-74%)	2 points Novice (25-49%)	1 point Pre-Novice (0-24%)	Score	Not applicable	Comments
4	Conveys respect and a non-judgmental attitude	All of the time	Most of the time	Some of the time	Little to none of the time			
5	Encouraged patient to ask questions and bring up any additional concerns	All of the time	Most of the time	Some of the time	Little to none of the time			
6	Acknowledged patient feelings/ emotions	All of the time	Most of the time	Some of the time	Little to none of the time			
	Diagnostic Reasoning (A problem identification process that leads to clinical decisions. It involves a process of gathering data, sifting or sorting relevant data, prioritizing and weighing data, developing a tentative problem list, selecting a diagnosis based on significant and non-significant data, re-evaluating the diagnosis and making a final diagnosis.)							
7	**History** (Focuses information gathering in an organized and systematic manner reflects consideration of differential diagnoses)	Gathers all of the significant information necessary to obtain a complete history based on the type of assessment (full or episodic). Collects relevant information that is problem-focused and responds to patient cues that guide the assessment.	Gathers most of the significant information necessary to obtain a complete history based on the type of assessment (full or episodic). Collects little extraneous information that is not problem-focused.	Gathers some significant information that is necessary to obtain a complete history based on the type of assessment (full or episodic) or collects some extraneous information that is not problem-focused.	Gathers little important information that is necessary to obtain a complete history based on the type of assessment (full or episodic) or collects much extraneous information that is not problem-focused.			

	Item	4 points Competent (75-100%)	3 points Advanced Beginner (50-74%)	2 points Novice (25-49%)	1 point Pre-Novice (0-24%)	Score	Not applicable	Comments
8	**Physical Exam** (Performs physical exam accurately reflects consideration of differential diagnoses)	Performs the physical exam with little or no conscious effort. Includes pertinent aspects of the physical exam. Demonstrates mastery of physical assessment skills.	Performs the physical examination without significant error. Omits some pertinent aspects of the physical exam	Makes a number of errors when performing the physical examination but can complete a rough approximation of it. Omits pertinent aspects of the physical exam	Makes critical errors when performing the physical examination or leaves out critical examination techniques.			
9	**Laboratory or Diagnostic Testing** Selects appropriate testing to support or refute a tentative differential diagnosis	Selects all of the appropriate tests	Selects most of the appropriate tests	Selects some of the appropriate tests	Selects few of the appropriate tests			
10	**Classifies normal and abnormal findings**	Correctly identifies normal and abnormal findings. Identifies findings that may not fit the picture and appropriately classifies them	Correctly identifies normal and abnormal findings	Makes some errors in identifying normal and abnormal findings	Makes frequent and significant errors in identifying normal and abnormal findings			

	Item	4 points Competent (75-100%)	3 points Advanced Beginner (50-74%)	2 points Novice (25-49%)	1 point Pre-Novice (0-24%)	Score	Not applicable	Comments
11	**Analyzes and Interprets Findings** (Selection of a diagnosis based on significant and non-significant data)	Selects and accurately identifies all relevant information from which to make a diagnosis.	Selects the most relevant and important information from the presenting problem from which to make a diagnosis.	Selects some information that is not important to the diagnosis or does not accurately identify the important information from which a diagnosis can be made.	Selects unimportant and trivial information to make a diagnosis			
12	**Differential Diagnosis** (Develop a list of likely Diagnoses)	Selects diagnoses that fully explain the relationship between the problem and the findings	Selects diagnoses that partially explain the relationship between the problem and the findings	Selects diagnoses that generally relate to the information available but do not explain the problem fully	Selects diagnoses that do not have a significant relationship to the problem and findings			

	Item	4 points Competent (75-100%)	3 points Advanced Beginner (50-74%)	2 points Novice (25-49%)	1 point Pre-Novice (0-24%)	Score	Not applicable	Comments
13	**Forms a Final Diagnosis**	Presents conclusions that reflect clear and logical links between the information collected, the presenting signs and symptoms, physical exam findings, and the final diagnosis (or diagnoses). The rationale shows thoughtful and accurate attention to the process.	Presents conclusions that, with a few exceptions, follow logically from the information collected, the presenting signs and symptoms, physical exam findings, and the final diagnosis (or diagnoses)	Presents some conclusions that reflect erroneous interpretations made from the information collected, the presenting signs and symptoms, physical exam findings, and the final diagnosis (or diagnoses)	Presents conclusions that reflect erroneous interpretations made from the information collected, the presenting signs and symptoms, physical exam findings, and the final diagnosis (or diagnoses)			
	Patient Management (Refers to the process of choosing between options in the management of patients and should involve the inclusion of evidence-based interventions, person-centered care, and shared decision-making/patient engagement.)							
14	**Management Plan** (Diagnostic Studies, Pharmacologic and Non-pharmacologic Treatment, Patient Education/Counseling, Care Coordination, and Plan for Follow-up are included).	All of the management plan elements included and appropriate for the patient	Most of the management plan elements included and appropriate for the patient	Some of the management plan elements included and appropriate for the patient	Few of the management plan elements included and appropriate for the patient			

	Item	4 points Competent (75-100%)	3 points Advanced Beginner (50-74%)	2 points Novice (25-49%)	1 point Pre-Novice (0-24%)	Score	Not applicable	Comments
17	**Evidence-Based Practice** (The most current evidence-based guidelines and/or evidence-based interventions are incorporated into the management plan and are guidelines)	Evidence-based guidelines and/or evidence-based interventions are incorporated into the management plan	Evidence-based guidelines and/or evidence-based interventions are mostly incorporated into the management plan	Evidence-based guidelines and/ or evidence-based interventions are partly incorporated into the management plan	Evidence-based guidelines and/or evidence-based interventions are not incorporated into the management plan			
	Total Score				**Total Score**			