



2014–2015

CATALOG
STUDENT HANDBOOK



SACRAMENTO

OAKLAND CAMPUS



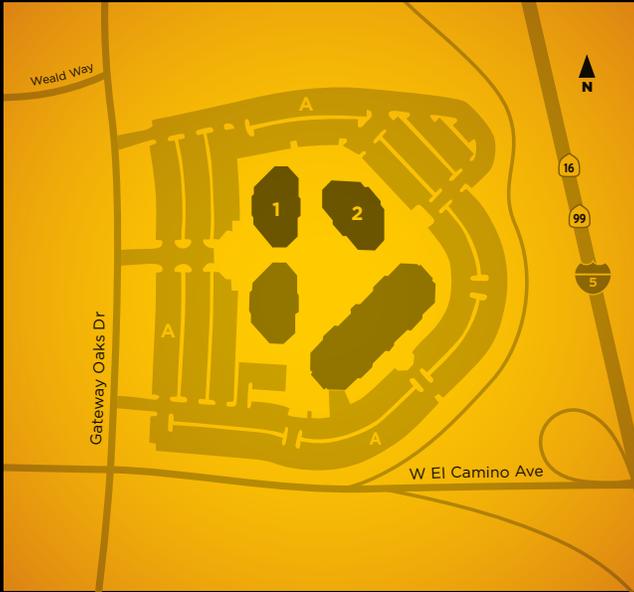
- 1 Health Education Center**
Bechtel Room
Classrooms
Fontaine Auditorium
Library
MARC
- 2 Providence Pavilion**
Faculty Offices (3rd Floor)
Parking Office
Security
- 3 Peralta Medical Office Building**
Academic and Disability Support Services
Admission
Campus Service Center
Classrooms
- 4 Peralta Pavilion**
Academic Affairs
Administration
Bookstore
Computer Lab
- 5 Providence South**
Facilities
Institutional Research

Oakland Campus
3100 Telegraph Ave
Oakland, CA 94609
510.869.6511

Sacramento Regional Learning Center
2710 Gateway Oaks Dr
Suite 360
Sacramento, CA 95833
916.646.2770

San Francisco Peninsula Learning Center
1720 South Amphlett Blvd
Suite 300
San Mateo, CA 94402
650.292.5565

SACRAMENTO REGIONAL LEARNING CENTER



1 2710 Gateway Oaks (North)

Admission
Classroom 1
Classroom 2
Classroom (Tandberg)
Clinical Lab & Sim Lab
Computer Lab
Faculty Offices
Library
Lounge
Managing Director's Office
Student Services

2 2720 Gateway Oaks

Café

A Parking

SAN FRANCISCO PENINSULA LEARNING CENTER



1 1720 South Amplett

2nd Floor
Faculty Offices
Video Conference Room
Learning Center, 3rd Floor
Classroom 1
Classroom 2
Classroom 3
Faculty and Staff Offices
Computer Lab
Library
Managing Director's Office
Skills Lab
Student Lounge
Student Services

2 1726 South Amplett

Café
Gym

A Parking

CATALOG & HANDBOOK STATEMENT

The provisions of this catalog and student handbook reflect information available as of the date of publication. The provisions of this catalog and handbook are subject to change and do not constitute an irrevocable contract between any student and Samuel Merritt University. New policies and policy changes are emailed to the University community and posted two weeks prior to implementation on the University website.

AFFIRMATION OF NONDISCRIMINATION

Samuel Merritt University does not discriminate on the basis of sex, age, race, color, ethnic or national origin, disability or handicap, religion, marital status, sexual orientation, or status as a veteran in the administration of employment, admission, financial aid, or educational programs. Nondiscrimination is consonant with the principles and practices of the University and is required by Section 504 of the Rehabilitation Act of 1973; Titles I and III of the Civil Rights Act of 1964; Title IX of the Education Amendments of 1972; the Equal Pay Act of 1963, as amended by the Education Amendments of 1972; the Age Discrimination in Employment Act of 1967; the Age Discrimination Act of 1974; and various other federal, state and local statutes and regulations.



ACCREDITATION

Samuel Merritt University is accredited by the regional accrediting association, the Senior Commission of the Western Association of Schools and Colleges (WASC). Professional programs of the University are accredited by specialized accrediting agencies. The table on page 1 provides information on each of the agencies by which the University and its programs were accredited at the time of publication of this Catalog.

SAMUEL MERRITT UNIVERSITY

Samuel Merritt University, in continuing its tradition of quality education in the health professions, offers students:

- > Undergraduate and graduate curricula which emphasize academic preparation in health science disciplines, competency for clinical practice roles, and acquisition of professional values.
- > Faculty with expertise and graduate preparation appropriate to their professional disciplines and responsibilities.
- > Low student/faculty ratios that encourages a personalized education.
- > Multiple enrollment options accommodating a wide diversity of students.
- > Outstanding clinical practice opportunities at Alta Bates Summit Medical Center and many other health care agencies throughout the East Bay, California and the western United States.
- > Exceptional instructional facilities including one of the largest privately supported health science library collections in the East Bay, laboratories for therapeutic exercise, exercise physiology, occupational therapy, anatomy, nursing, podiatric medicine, biomechanics, physical diagnosis, simulation, and computer learning facilities.
- > Personalized student services to support students' achievement of academic and personal goals.

CONTENTS

ACCREDITATION	1	Doctor of Nursing Practice Program	34
		Program Learning Outcomes	34
		Curriculum Overview	35
ACADEMIC CALENDARS	2	OCCUPATIONAL THERAPY	51
Bachelor of Science in Nursing	2	History, Mission, and Philosophy	52
Accelerated Bachelor of Science in Nursing		Program Learning Outcomes.....	53
Oakland Campus	3	Master of Occupational Therapy Degree	53
San Francisco Peninsula—January Cohort	4	Curriculum Overview	54
San Francisco Peninsula—April Cohort	5	PHYSICAL THERAPY	58
San Francisco Peninsula—June Cohort	6	History, Mission, and Philosophy	59
San Francisco Peninsula—November Cohort	7	Doctor of Physical Therapy Degree	60
Sacramento Regional Learning Center	8	Program Learning Outcomes.....	61
Graduate Calendar	9	Curriculum Overview	62
California School of Podiatric Medicine.....	10	PHYSICIAN ASSISTANT	69
HISTORY AND MISSION	11	History, Mission, and Philosophy	70
Mission, Vision, and Values	13	Master Physician Assistant Degree	71
Principles of Community	14	Program Learning Outcomes.....	71
		Curriculum Overview	73
ACADEMIC DIVISION	15	PODIATRIC MEDICINE	78
Organization of Academic Units	15	History, Mission, and Philosophy	79
Oakland Campus	15	Program Learning Outcomes.....	80
Regional Learning Center—Sacramento	15	Doctor of Podiatric Medicine Degree	80
Learning Center—San Francisco Peninsula	15	Curriculum Overview	81
Institutional Learning Outcomes (ILOs)	15	INTERPROFESSIONAL EDUCATION	88
Technical Standards	17	ADMISSION POLICIES	91
Philosophy of Teaching and Learning	17	Preferred Application Dates	91
Memberships	18	General Information	92
Course Credits and Course Numbering System	18	Special Status	92
		International Students	92
		Required Standardized Tests	92
		TOEFL Requirement	93
		Bachelor of Science in Nursing	94
		Freshman Entry	94
		Transfer Student Entry	94
		LVN Entry	95
		30 Unit Option for RN Licensure	95
		Advanced Placement—BS Nursing Degree	95
		Accelerated Bachelor of Science in Nursing (ABS N)	96
		Master of Science in Nursing	98
		Doctor of Nursing Practice	100
		Master of Occupational Therapy	101
		Doctor of Physical Therapy	102
		Master Physician Assistant	103
		Doctor of Podiatric Medicine	104

CONTENTS

FINANCIAL INFORMATION	106	John A. Graziano Memorial Library	158
Tuition and Fees	107	Media Services	159
Payment of Tuition and Fees	120	Computer Services	159
Refund Policy	122	Printing and Copying Services	159
Financial Assistance	122	Food Services	159
Satisfactory Academic Status.....	122	Mail Service	159
ACADEMIC POLICIES	125	Parking and Public Transportation	159
Academic Advising	125	Student Organizations	160
Attendance	125	Alumni Society	163
Award of Academic Credit, Transfer Credit, Advanced Placement	125	Student Activities	163
Grades, Grade Reports, Grading	126	Student Awards and Recognition	163
Drop Add Policies	130	UNIVERSITY FACILITIES	166
Undergraduate Progression and Graduation Policies	133	Samuel Merritt University Campus	166
Graduate Progression and Graduation Policies	135	Learning Centers	168
Safe and Professional Practice	140	CRISIS RESPONSE PLAN	169
ACADEMIC, PERSONAL, AND PROFESSIONAL INTEGRITY	141	ADMINISTRATIVE OFFICES AND SERVICES	171
Academic Integrity	141	FEDERAL AND STATE REGULATORY POLICIES	173
Code of Ethics	141	Affirmation of Nondiscrimination	173
Code of Conduct	141	Americans with Disabilities Act	173
Grievance Policy, Process, and Procedures	142	The Jeanne Clery Disclosure of Campus Security Policy and Higher Education Opportunities Act (HEOA)	174
Sexual Violence Policy	144	Drug Free Schools and Communities Act of 1989	177
Sexual Harassment	145	Drug Free Workplace Policy	178
CAMPUS POLICIES	148	Federal, State and Local Sanctions about Alcohol and Other Drugs	178
Alcoholic Beverage Policy	148	Specific Drugs and their Effects	181
Fundraising	149	Family Educational Rights and Privacy Act of 1974 (FERPA)	184
Institutional Review Board	150	FACULTY AND ADMINISTRATION	186
Smoking Policy	151	Frequently Called Numbers	197
Solicitation	151	INDEX	198
Student Travel Policy	151		
Weapons	151		
STUDENT LIFE AND STUDENT SERVICES	152		
Academic and Disability Support Services	152		
Bookstore	153		
Ceremonies and Events	153		
Health & Counseling Services	153		
Health Services	153		
Counseling Services	154		
Student Health Requirements	154		
Procedures for Reporting Illnesses and Accidents	155		
Student Health Policies	155		
Infectious Diseases	156		
Student Health Insurance	157		
Employment	158		
Security/Escort Service	158		

ORGANIZATIONS ACCREDITING SAMUEL MERRITT UNIVERSITY

Organization	Address	Institutional Accrediting Agency Recognized by the US Secretary of Education and the Commission on Higher Education Accreditation (CHEA)	Last Visit	Next Visit
Accrediting Commission for Senior Colleges and Universities of the Western Association of Schools and Colleges (WASC)	985 Atlantic Avenue, Suite 100 Alameda, CA 94501 510.748.9001	Institutional Accreditation for Samuel Merritt University	2011	2021
Accreditation Council for Occupational Therapy Education (ACOTE)	4720 Montgomery Lane P. O. Box 31220 Bethesda, MD 20824-1220 301.652.2682	Entry-level Master's Degree program in Occupational Therapy (MOT)	2008	2018
California Board of Registered Nursing (BRN)	P. O. Box 944210 Sacramento, CA 94244-2100 916.322.3350	Baccalaureate Program in Nursing (BSN) Certificate and Master's Degree in Nursing (MSN)— Family Nurse Practitioner Program	2011	2017
Commission on Collegiate Nursing Education (CCNE)	One Dupont Circle, NW Suite 530 Washington, DC 20036-6791 202.887.6791	Baccalaureate Program in Nursing (BSN) Master's Degree in Nursing (MSN)	2010	2020
Commission on Collegiate Nursing Education (CCNE)	One Dupont Circle, NW Suite 530 Washington, DC 20036-6791 202.887.6791	Doctor of Nursing Practice (DNP)	2012	2017
Commission on Accreditation in Physical Therapy Education (CAPTE)	Department of Accreditation American Physical Therapy Association 1111 North Fairfax Street Alexandria, VA 22314 703.706.3245 www.apta.org/CAPTE	Entry-level Doctoral Degree Program in Physical Therapy (DPT)	2007	2017
Council on Accreditation of Nurse Anesthesia Educational Programs (COA)	222 South Prospect Avenue Park Ridge, IL 60068-4010 847.692.1160	Post-professional Certificate & Master's Degree Program in Nurse Anesthesia (MS)	2014	2024
Accreditation Review Commission on Education for the Physician Assistant (ARCPA)	12000 Findley Road Suite 150 Johns Creek, Georgia 30097 770.476.1224	Entry Level Master's Degree Program for Preparation of Physician Assistants	2011	2018
Council on Podiatric Medical Education (CPME)	9312 Old Georgetown Road Bethesda, MD 20814 301.581.9200	Doctoral Degree Program in Podiatric Medicine	2014	TBD

ACADEMIC CALENDAR 2014-2015
BACHELOR OF SCIENCE
IN NURSING

BSN

Fall 2014

04/14-04/18	Fall 2014 registration
08/27-08/28	New student orientation
08/04	Classes begin
09/02-09/12	Add/drop period
09/12	Last day to register for Fall 2014
11/03-11/14	Spring 2015 advising
11/17-11/21	Spring 2015 registration

According to class level in Spring 2015:

Senior I and II—registration opens at 8AM on Monday, 11/17 (closes 11/21)

Junior II—registration opens at 8AM on Wednesday, 11/19 (closes 11/21)

11/26-11/28	Thanksgiving break
12/15-12/19	Final exams
12/26	Grades due in Registrar's Office

Spring 2015

12/17-12/19	New student orientation
01/05/15	Classes begin
01/05-01/16	Add/drop period
01/16	Last day to register for Spring 2015
01/19	Martin Luther King, Jr. holiday
02/16-02/17	President's Day holiday break
03/16-03/27	Fall 2015 advising
03/30-04/03	Fall 2015 registration
04/20-04/24	Final exams (for courses ending in April)
05/22	Commencement
05/22	Official last day of Spring 2015
05/29	Grades due in Registrar's Office

ACADEMIC CALENDAR 2014–2015

ACCELERATED BACHELOR OF SCIENCE IN NURSING

ABSN

Oakland Campus

Summer 2014

4/14–4/18	Summer 2014 registration
5/13–5/15	New student orientation
05/27	Classes begin Summer 2014
06/30–07/06	July 4th holiday
8/11–8/20	Break
8/18–8/22	Fall 2014 registration
09/01	Labor Day holiday
09/26	Last day of Summer 2014
10/03	Grades due

Fall 2014

09/29	Classes begin Fall 2014
11/24–11/30	Thanksgiving break
12/17–1/05/15	Winter break
01/05–01/09	Spring 2015 registration
01/19	Martin Luther King, Jr. holiday
02/08	Last day of Fall 2014
02/16	Grades due

Spring 2015

02/11	Classes begin for Spring 2015
02/16	President's Day holiday
05/22	Commencement
05/25	Memorial Day holiday
05/26	Last day of Spring 2015
06/02	Grades due

The Academic Calendar is subject to change without notice.

ACADEMIC CALENDAR 2014-2015

ACCELERATED BACHELOR OF SCIENCE IN NURSING

ABS N

San Francisco Peninsula
(January Cohort)

Spring 2014

11/18-11/22	Spring 2014 registration
11/21-11/22	New student orientation
01/06/14	Classes begin Spring 2014
01/20/14	Martin Luther King, Jr. holiday
02/08-02/17	Break
03/17-03/21	Summer 2014 registration
04/27	Last day of Spring 2014
05/05	Grades due

Summer 2014

04/28	Classes begin Summer 2014
05/26	Memorial Day holiday
06/02-06/08	Break
07/04	July 4th holiday
07/14-07/18	Fall 2014 registration
08/17	Last day of Summer 2014
08/18-08/26	Break
08/25	Grades due

Fall 2014

08/27	Classes begin for Fall 2014
09/01	Labor Day holiday
11/27-11/30	Thanksgiving holiday
12/21	Last day of Fall 2014
01/05/15	Grades due

The Academic Calendar is subject to change without notice.

ACADEMIC CALENDAR 2014–2015

ACCELERATED BACHELOR OF SCIENCE IN NURSING

ABS N

San Francisco Peninsula
(April Cohort)

Summer 2014

03/10–03/14	Summer 2014 registration
03/13–03/14	New student orientation
04/21	Classes begin Summer 2014
05/26	Memorial Day holiday
06/30–07/04	Fall 2014 registration
07/01–07/07	July 4th holiday
08/10	Last Day of Summer 2014
08/18	Grades due

Fall 2014

08/11	Classes begin Fall 2014
09/01	Labor Day holiday
09/16–09/21	Break
11/24–11/28	Spring 2015 registration
11/27–12/01	Thanksgiving break
12/20	Last Day of Fall 2014
12/26	Grades due

Spring 2015

01/07/15	Classes begin for Spring 2015
01/19	Martin Luther King, Jr. Holiday
02/24	President's Day holiday
04/19	Last day of Spring 2015
04/27	Grades due
05/22	Commencement

ACADEMIC CALENDAR 2014-2015

ACCELERATED BACHELOR OF SCIENCE IN NURSING

ABSN

San Francisco Peninsula
(June Cohort)

Summer 2014

04/21-04/25	Summer 2014 registration
05/07-05/09	New student orientation
06/02	Classes begin Summer 2014
07/04	July 4th holiday
07/05-07/13	Break
08/18-08/22	Fall 2014 registration
09/01	Labor Day holiday
09/21	Last day of Summer 2014
09/22-9/28	Break

Fall 2014

09/29	Classes begin Fall 2014
11/24-11/30	Thanksgiving break
12/15-01/4/15	Winter break
01/05-01/09	Spring 2015 registration
01/19	Martin Luther King, Jr. holiday
02/08	Last day of Fall 2014

Spring 2015

02/11	Classes begin for Spring 2015
02/16	President's Day holiday
05/22	Commencement
05/25	Memorial Day holiday
05/31	Last day of Spring 2015

The Academic Calendar is subject to change without notice.

ACADEMIC CALENDAR 2014–2015

ACCELERATED BACHELOR OF SCIENCE IN NURSING

ABSN

San Francisco Peninsula
(November Cohort)

Fall 2014

09/22–09/26	Fall 2014 registration begins New student orientation
11/03	Classes begin Fall 2014
11/26–11/30	Thanksgiving Break
12/12–01/04/15	Winter Break
01/19	Martin Luther King, Jr. Day holiday
02/09–02/13	Spring 2015 registration
02/16	President's Day holiday
03/15	Last day of Fall 2014
03/16–03/22	Spring break
03/22	Grades due

Spring 2015

03/23	Classes begin Spring 2015
05/25	Memorial Day holiday
06/01–06/05	Summer 2015 registration
07/04	July 4th holiday
07/12	Last day of Spring 2015
07/19	Grades due

Summer 2015

07/13	Classes begin for Summer 2015
09/07	Labor Day holiday
11/02	Last day of Summer 2015
11/09	Grades due

The Academic Calendar is subject to change without notice.

ACADEMIC CALENDAR 2014–2015

ACCELERATED BACHELOR OF SCIENCE IN NURSING

ABSN

Sacramento Regional Learning Center

Spring 2014

11/01/2013	New student orientation—mandatory
11/18–11/22/2013	Spring 2014 registration
01/03/14	Sacramento mandatory kick-off
01/06	Classes begin
01/20	Martin Luther King, Jr. holiday
02/17	President's Day holiday
03/24–03/28	Summer 2014 registration
04/23	Last day of Spring 2014 classes
04/30	Grades due

Summer 2014

05/05	Classes begin
05/26	Memorial Day holiday
07/04	July 4th holiday
07/14–07/18	Fall 2014 registration
08/20	Last day of Summer 2014 classes
08/27	Grades due

Fall 2014

08/27	Classes begin
09/01	Labor Day holiday
11/27–11/28	Thanksgiving holiday
12/19	Last day of Fall 2014 classes
01/05/2015	Grades due

The Academic Calendar is subject to change without notice.

GRADUATE CALENDAR
(EXCLUDING CSPM)

GRAD

Fall 2014

08/27–08/28	New student orientation
9/2/14	Classes begin
9/2–9/12	Add/drop period
9/1/14	Labor Day holiday
9/5/14	Last day to register
10/27–11/7	Spring term advising
11/10–11/14	Spring term registration
11/26–11/28	Thanksgiving break
12/12/14	Last day of Fall term classes
12/15–12/19	Final examinations
12/26/14	Grades due in Registrar's Office

Spring 2015

TBA	New student orientation
01/05/15	Classes begin
01/05–01/16	Add/drop period
01/16/14	Last day to register
01/19/15	Martin Luther King, Jr. holiday
02/16–02/18	President's holiday break
03/2–03/13	Summer term advising
03/16–03/20	Summer term registration
04/17/15	Last day of Spring term classes
04/20–4/24	Final examinations
05/01/15	Grades due in Registrar's Office

Summer 2015

05/04/15	Classes begin
05/04–05/15	Add/drop period
05/15/15	Last day to register
05/22/15	Commencement
05/25/15	Memorial Day holiday
07/02–07/03	July 4th holiday
06/29–07/10	Fall term advising
07/13–07/17	Fall term registration
08/7/15	Last day of Summer term classes
08/10–08/14	Final examinations
08/21/15	Grades due in Registrar's Office

ACADEMIC CALENDAR 2014-2015

CALIFORNIA SCHOOL
OF PODIATRIC MEDICINE



Summer 2014

05/27-08/22	Length of semester
07/04	July 4th holiday
07/09	National Boards Part I (3rd Year Rotations cancelled)
07/15	Classroom instruction begins— Class Of 2017

Fall 2014

08/25-12/12	Length of semester
08/20-08/22	CSPM New Student Orientation Program—Class Of 2018
08/25	Classroom instruction begins— Classes Of 2016 and 2018
09/01	Labor Day holiday
10/01	National Boards Part I
11/27-11/28	Thanksgiving recess
12/01-12/05	Course Review Week (No new material to be presented— clinical rotations continue). Final exams may be scheduled during this week— Class Of 2016
12/08-12/12	Final examination week (3rd year rotations cancelled)— Class Of 2016
12/13-01/04/14	Winter Recess
TBD	National Boards Part 2 (4th Year Rotations cancelled)

Spring 2015

01/05-05/22	Length of semester
01/05	Classroom instruction begins
TBD	National Boards Part II
01/19	Martin Luther King, Jr. holiday
02/16	President's Day holiday (no classes—clinical rotation assignments may be scheduled)
TBD	National Boards Part II
03/09-03/13	Spring Break (no classes—clinical rotation assignments continue)
TBD	OSCE Examination—Class of 2016
04/30	Last day of classes/examinations Class of 2017
TBD	National Boards Part II
05/04-05/08	Course Review Week (No new material to be presented— clinical rotations continue)— Class Of 2016
05/11-05/15	Final examination week (3rd year rotations cancelled)— Class Of 2016
05/15	Last day at Core Site Rotations/ Clerkships (2015)
05/21	Doctoral Graduation Ball
05/22	Commencement
05/24	Last day of rotations Classes of 2017 and 2017

HISTORY AND MISSION

HISTORY OF SAMUEL MERRITT UNIVERSITY

Samuel Merritt University was founded in 1909 as a diploma school of nursing sponsored by Samuel Merritt Hospital in Oakland, California. Named in honor of a physician, Dr. Samuel Merritt, the University has evolved over its one hundred years of existence from a hospital diploma school of nursing to a university.

Samuel Merritt University's School of Nursing has graduated more than 9,500 women and men. Throughout much of its early history, the School affiliated with other colleges and universities to offer general education and liberal arts courses. Early partners included Mills College, California State University, Hayward, and the College of Alameda. In 1977, an agreement was reached with Saint Mary's College of California, in which a cooperative program was initiated as a precursor to the current joint baccalaureate nursing program. From 1977 through 1980, students who were enrolled at Samuel Merritt took foundation liberal arts and sciences courses at Saint Mary's College and completed a major in nursing on the Samuel Merritt campus. Graduates received an associate of science degree from Saint Mary's College and a diploma from Samuel Merritt Hospital College of Nursing. The last class to complete requirements for the diploma in nursing graduated in 1983.

Samuel Merritt Hospital College of Nursing was renamed Samuel Merritt College (SMC) during the 1980s in recognition of its move to become a senior institution of higher education. A joint baccalaureate degree program in nursing was initiated in 1981, and the term, "Intercollegiate Nursing Program," began to be used to differentiate this new joint venture with Saint Mary's College. The first baccalaureate students, a group of college transfers and college graduates completing an accelerated program, were graduated in February 1984. Accreditation from the senior commission of the Western Association of Schools and Colleges (WASC) was also achieved by SMC in

that same year. The first registered nurses to complete an RN to BSN option were graduates of the last diploma class who completed baccalaureate requirements in 1985.

Much change occurred at SMC during the late 1980s and the decade of the 1990s. The sponsoring parent institution successfully merged with a series of hospitals (Peralta Hospital in 1981, and Providence Hospital in 1991) to become Summit Medical Center. In 1999, another merger was completed with Alta Bates Medical Center, leading to the adoption of a new name, Alta Bates Summit Medical Center. At the same time, the Medical Center and the College became part of Sutter Health System. Within this time frame, SMC became the custodian of the academic records for graduates of Providence School of Nursing, which closed in 1972, and welcomed these graduates into its alumni organization.

In 1990, SMC established its first graduate degree program, a first professional degree leading to a master's in physical therapy. In 2002, this program transitioned to a first professional doctoral degree program, leading to the Doctor of Physical Therapy. Other graduate programs were developed during this period, including a master's degree in nursing (1992), and a post-professional Master of Science degree for physical therapists. In 1994, an entry-level master's degree program was established in Occupational Therapy, and in 1999, in Physician Assistant studies. At the present time, the School of Nursing offers tracks for specialization in case management, family nurse practitioner, and nurse anesthesia.

In July 2002, the California College of Podiatric Medicine (CCPM) merged with SMC. CCPM was founded in 1914 in San Francisco and is one of nine professional schools of podiatric medicine in the country. Now known as the California School of Podiatric Medicine (CSPM), CSPM is recognized for its reputation for educating outstanding podiatric physicians.

Samuel Merritt University has, for decades, graduated highly qualified health care providers. In recognition of its efforts, the University was awarded the California Governor's Quality Award in 1999, the first institution of higher education in California to receive this award.

In 2002, Samuel Merritt University established its first regional learning center in Sacramento to house an entry-level master of science in nursing program. The center added the ABSN program in 2007. In 2005, the University undertook an aggressive enrollment expansion plan in nursing, given the substantial state and national shortage of registered nurses projected to last well into the third decade of the new century. In cooperation with the East Bay Community Foundation and the Gordon and Betty Moore Foundation, the University established two learning centers. The first opened in 2006 on the St. Luke's Medical Center campus in San Francisco and the second in San Mateo in 2007.

Both of these programs enroll 100 nursing students at each site utilizing the ABSN curricula established on the Oakland campus in 2005. The learning centers are completely self-contained educational centers; however, all are connected to the Oakland campus via state of the art live video feed. Both centers also have human simulation laboratory capabilities that enhance the primary Health Sciences Simulation Center on the Oakland campus, widely recognized as a premier learning technology in the western United States.

On January 26, 2009, in celebration of the College's centennial, Samuel Merritt College was renamed Samuel Merritt University.

In January of 2011 the School of Nursing admitted its first cohort into the Doctor of Nursing Practice (DNP) program. As a 36 unit, six semester online program, at its inception, the SMU DNP program was one of only six DNP programs in California. The program is designed for advanced practice nurses (APRNs) and nurses in leadership positions seeking additional practice-focused academic preparation intended to transform patient and practice outcomes.

In November 2012, the last class of ABSN students at the San Francisco Learning Center was pinned and students, faculty, and staff moved to the San Mateo Learning Center, which has been renamed the San Francisco Peninsula Learning Center.

Beginning in May of 2013, the first cohort of post-baccalaureate RNs entered the FNP/DNP program, where they will complete the requirements for their Family Nurse Practitioner certificate along with their DNP degree. This is an eleven semester, 79 unit program offering a combination of online, hybrid and face-to-face delivery.

SMU Program	Degree	Year Established
Nursing*	Diploma	1909
Nursing* (Intercollegiate Nursing Program)	BSN	1981
Nursing* RN-BSN option	BSN	1984
Nursing Accelerated BSN Program for College Graduates*	BSN	1988
Physical Therapy*	MPT	1990
Nursing (Administration*, High Risk Populations*)	MSN	1992
Nursing (Family Nurse Practitioner)	MSN	1993
Physical Therapy*	MS	1993
Nursing (Nurse Anesthesia & Medical Surgical*)	MSN	1994
Occupational Therapy	MOT	1994
Nursing (Entry-Level Master's for College Graduates)	MSN	1996
Nursing (RN-BSN-MS with Saint Mary's College)*	BSN, MSN	1997
Health and Human Sciences*	BS	1998
Physician Assistant	MPA	1999
Nursing (On-line Degree Completion for Advanced Practice Nurses)*	MSN	2001
Nursing (Entry-Level Master's for College Graduates)—Sacramento Regional Center	MSN	2002
Doctor of Physical Therapy	DPT	2002
Doctor of Podiatric Medicine	DPM	2002**
Nursing (Partnership Programs)	BSN	2004
Nursing (Accelerated BSN)	BSN	2005
Nursing (Doctor of Nursing Practice)	DNP	2011

* Enrollment of new students suspended

** Originally established at the California College of Podiatric Medicine in 1914.

STRATEGIC DIRECTION OF SAMUEL MERRITT UNIVERSITY

Samuel Merritt University has defined a bold and forward-looking vision that will sustain the University as a first class accredited institution of higher learning. The University is focused on strategies to enhance instructional innovation, expand learning and laboratory facilities, and provide the highest levels of expert faculty and staff to support undergraduate and graduate students.

MISSION

Samuel Merritt University educates students to become highly skilled and compassionate healthcare professionals who positively transform the experience of care in diverse communities.

VISION

Samuel Merritt University will become nationally recognized as a premier, multi-specialty health sciences institution. Expert faculty and staff will shape an inclusive learning environment where all students experience best teaching practices and state-of-the-art learning approaches. The University will select and support students who will flourish in its rigorous academic programs, learn to practice expertly, and pass licensure or certification examinations on first attempt.

VALUES

At Samuel Merritt University we value...

- > A **learning** environment where we challenge ourselves and our students to think critically, seek mastery, and act compassionately.
- > A **collegial** environment where we are fair, respectful, and behave with integrity.
- > A **collaborative** environment where we partner with one another and with others in the community.
- > An **innovative** environment where we take reasoned risks and move nimbly.
- > A **results-oriented** environment where we provide and expect exceptional performance and service.

PRINCIPLES OF COMMUNITY

PRINCIPLES OF COMMUNITY

Samuel Merritt University is committed to creating a diverse, equitable, and inclusive learning community, workplace, and campus environment. We demonstrate this commitment by ensuring that SMU is a community where:

- > We affirm the value of human diversity, respecting our differences, while acknowledging our common humanity.
- > We affirm the inherent dignity and value of every person and strive to maintain a climate based on mutual respect, fairness, and inclusion, calling for civility and decency in our personal interactions, regardless of position or status in the academy.

- > We respect the right of freedom of expression within our community and value the different perspectives of others; recognizing and appreciating these differences builds trust and contributes to the excellence of the University.
- > We challenge all forms of behavior that are prejudicial, discriminatory, and detrimental or contrary to the values expressed in this document; and we take responsibility for increasing our own understanding of these issues through education and our interactions with one another.

AS A COMMUNITY, WE ARE COMMITTED, INDIVIDUALLY AND COLLECTIVELY, TO EMBODYING AND SAFEGUARDING THESE PRINCIPLES.

ACADEMIC DIVISION

ORGANIZATION OF ACADEMIC UNITS

The Academic Division of Samuel Merritt University offers baccalaureate, master's and doctoral programs in two professional Schools (Nursing and Podiatric Medicine) and three departments (Occupational Therapy, Physical Therapy, and Physician Assistant). The division also maintains responsibility for the John A. Graziano Memorial Library, Academic and Instructional Innovation, and the Department of Institutional Research.

The School of Nursing operates programs on the Oakland campus, the Sacramento Regional Learning Center, and the San Francisco Peninsula Learning Center. Nursing programs include the Bachelor of Science in Nursing Program, and Accelerated Bachelor of Science in Nursing program (undergraduate studies), and graduate programs, which include the Entry-Level Masters Degree Program, Nurse Anesthesia, Case Management, Family Nurse Practitioner, and the Doctor of Nursing Practice Program.

OAKLAND CAMPUS

The main campus of Samuel Merritt University is located in Oakland at 3100 Telegraph Avenue on the Summit campus of Alta Bates Summit Medical Center. The University operates in several facilities on the campus, including the Health Education Center, Peralta Pavilion, Peralta Medical Office Building, and Providence Pavilion. All non-nursing graduate programs are based on the Oakland campus. Nursing programs include those listed above.

REGIONAL LEARNING CENTER— SACRAMENTO, CA

The Sacramento Regional Learning Center houses complete, free-standing educational programs in nursing, including the ABSN and the Entry-level Masters Degree Program.

LEARNING CENTER—SAN MATEO, CA

The San Francisco Peninsula Learning Center houses a complete, free-standing ABSN program. The program admits four cohorts of students per year.

INSTITUTIONAL LEARNING OUTCOMES

The faculty of Samuel Merritt University have identified a set of Institutional Learning Outcomes (ILOs) to be achieved by graduates of its baccalaureate, master's and professional doctoral programs. Curricula are planned to enable students to develop these outcomes which have been identified as a result of recommendations from employers, professional groups, professional associations, licensing agencies, and organizations such as the Pew Foundation. ILOs guide assessment and evaluation activities of the University as it seeks to use evidence for continuous improvement of its curricula, teaching strategies, and educational resources. In keeping with one of its core values, Learning, Samuel Merritt University is a learning community engaged in ongoing development of its students, faculty, and staff. Please see the following table for more information.

SAMUEL MERRITT UNIVERSITY'S INSTITUTIONAL LEARNING OUTCOMES (ILOs) AND COMPETENCIES

All Samuel Merritt University graduates are expected to demonstrate the ILOs and competencies identified in this document. The competencies are statements of minimal expectations. Departments and Programs may have additional competency requirements. It is assumed that the student meets the competencies at the lower level.

ILOs	Competencies		
	Undergraduate Level	Master's Level	First Professional/Entry Doctoral Level
<p>01 Clinically competent and displays appropriate clinical reasoning skills</p> <p>A Samuel Merritt University graduate is</p>	<p>Passes entry-level licensure/certification examination.</p> <p>Demonstrates entry-level clinical skills and abilities for the discipline.</p> <p>Makes sound clinical decisions based on reasoning processes that involve the patient/client, caregivers and healthcare team members that result in patient-centered plans of care.</p> <p>Evaluates individual patient/client care, critiques the outcomes of care, and suggests improvements.</p> <p>Engages in professional development activities that enhance clinical skill sets.</p>	<p>Passes entry-level licensure/certification examination.</p> <p>Demonstrates entry-level clinical skills and abilities for the discipline.</p> <p>Makes sound clinical decisions based on reasoning processes that involve the patient/client, caregivers and healthcare team members that results in accurate diagnoses and patient-centered plans of care.</p> <p>Critically analyzes increasingly complex patient management issues, critiques outcomes of care, and implements improvements.</p> <p>Develops a plan for ongoing professional development to improve clinical competence.</p>	<p>Passes entry-level licensure/certification examination.</p> <p>Demonstrates entry-level clinical skills and abilities for the discipline.</p> <p>Makes sound clinical decisions based on reasoning processes that involve the patient/client, caregivers and healthcare team members that results in accurate diagnoses and patient-centered plans of care.</p> <p>Critically analyzes data from populations of patients/clients, and implements processes and policies to guide care and evaluate outcomes.</p> <p>Develops a plan for ongoing professional development to improve clinical competence.</p>
<p>02 One who contributes to the profession and society through leadership and service</p>	<p>Demonstrates fundamental skills in leadership and management to improve healthcare and practice in the workplace.</p> <p>Participates in professional associations and community service activities.</p>	<p>Demonstrates skills in leadership and management to improve healthcare and practice in the community.</p> <p>Participates as an active member/associate of a professional association and in community service activities.</p>	<p>Initiates changes to improve healthcare and professional practice through leadership.</p> <p>Advances the profession through leadership and community service activities.</p>
<p>03 A critical thinker</p>	<p>Formulates relevant questions, ideas and perspectives based on liberal learning educational requirements.</p> <p>Exhibits openness to examine contradictory ideas and question assumptions.</p> <p>Justifies and evaluates solutions selected.</p>	<p>Formulates relevant questions and proposes new ideas / care strategies based on research and practice from areas that contribute to the discipline.</p> <p>Actively seeks and critically examines contradictory ideas, assumptions and biases.</p> <p>Evaluates and justifies solutions to complex problems.</p>	<p>Formulates relevant questions and proposes new ideas / care strategies based on integration and synthesis of data, practices and theories of related disciplines.</p> <p>Critically examines own assumptions and suspends biased judgments.</p> <p>Evaluates and justifies solutions to complex problems that lead to effective change or improved outcomes.</p>
<p>04 Skilled in scientific inquiry</p>	<p>Uses the research literature to identify clinical problems that improve practice.</p> <p>Differentiates the level of quality and value among informational resources.</p>	<p>Completes a comprehensive literature review, and appropriately applies relevant findings to practice.</p> <p>Serves as a resource of knowledge about the discipline.</p>	<p>Formulates questions and develops systematic methods to address them.</p> <p>Serves as a resource of knowledge about the discipline.</p>
<p>05 An effective communicator</p>	<p>Speaks, reads, writes and listens effectively.</p> <p>Communicates effectively with clients and colleagues in the workplace.</p>	<p>Optimizes productive interpersonal relationships.</p> <p>Efficiently receives and transfers pertinent knowledge.</p> <p>Facilitates small group communication.</p>	<p>Models effective oral and written communication.</p> <p>Plans, implements and evaluates organizational communication systems.</p>
<p>06 Culturally competent</p>	<p>Demonstrates awareness of cultural values and beliefs that affect healthcare delivery.</p>	<p>Develops culturally competent approaches to problem solving that take into account individual differences.</p>	<p>Independently manages health problems that incorporate principles of cultural competence.</p> <p>Develops and promotes professional practice that recognizes and respects differences among patients in terms of their values, expectations, and experiences with healthcare.</p>
<p>07 Compassionate and caring</p>	<p>Demonstrates respect, concern and empathy for others.</p>	<p>Demonstrates respect, concern and empathy for others.</p> <p>Implements a plan that addresses the humanistic care requirements of clients.</p>	<p>Demonstrates humanistic qualities which foster the formation of appropriate and effective patient/provider relationships.</p>
<p>08 Skilled in information management</p>	<p>Proficient in using information through common technologies of access.</p> <p>Determines what data are needed, finds it in any medium, evaluates it and uses it appropriately.</p>	<p>Competently applies information to improve patient and organizational outcomes.</p> <p>Identifies emerging information technologies in the service sector that enhance clinical decision making.</p>	<p>Develops information management systems to improve patient and organizational outcomes.</p> <p>Identifies emerging information management technologies in the service sector that enhance clinical decision-making.</p>
<p>09 Ethical</p>	<p>Clarifies personal values and behaves in accordance with professional values and codes of ethics.</p> <p>Takes action based on sound ethical and moral principles and practices in the care of patients.</p>	<p>Uses ethical problem solving skills that enhance patient care through competent decision making.</p>	<p>Implements and evaluates ethical decision making from individual, organizational, and societal perspectives.</p>

TECHNICAL STANDARDS

In accord with Institutional Learning Outcomes, specified program outcomes, and licensure requirements for each health science program, enrolled students are expected to complete all academic and clinical requirements of their respective program. Students should refer to the cognitive, affective, and psychomotor skills deemed essential to the completion of their program in order to perform as a competent professional in the field. Technical standards are published on the University website and are available from the Office of Academic and Disability Support Services upon request.

PHILOSOPHY OF TEACHING AND LEARNING

The philosophy of teaching and learning at Samuel Merritt University consists of a system of beliefs and values about the partnership between faculty members and students in the teaching and learning process. Our philosophy is directed toward the preparation of health care practitioners whose practice is planned and coordinated around the unique qualities of each person served. Our philosophy requires that our graduates use sound reasoning that incorporates the current best evidence, their clinical expertise, and the preferences of the people served.

In the partnership between student and faculty, we believe that the responsibility for effective learning ultimately rests with the student. Our partnership honors and respects the varied life experiences students bring to the learning environment. Learning is a social process and takes place within the context of the learner's life style, culture, and readiness to learn. Process, outcomes, and competencies are integral to the educational enterprise.

Faculty members, as the experts in the discipline and in the academy, have the responsibility to establish an environment conducive to learning, exhibit expertise within their discipline, and facilitate learning through use of current, best practices of effective teaching and learning.

Programs, curricula, and courses are designed to value active, experiential learning and collegial, scholarly, and effective interaction among students and faculty. Faculty members have a fiduciary responsibility for the students who trust us to create an effective learning environment. We believe that clinical and practical applications, grounded in the basic sciences, social sciences, and humanities, provide a critical foundation for learning in the health professions. Ultimately, the responsibility our graduates have for the health of the people they serve requires that they integrate, apply, and critically evaluate their learning throughout all phases of their health professional education.

COURSE CREDITS AND COURSE NUMBERING SYSTEM

Samuel Merritt University uses the semester unit system for representing course credits.

One unit is awarded for each hour of classroom work per week, with the expectation that students will spend an additional three hours per week in study outside of the classroom. A semester normally includes 14–16 weeks of instruction. Thus a class which meets for at least fifty minutes three times per week is credited as three semester units of credit. Undergraduate laboratory work is credited at one unit per three contact hours. One hundred and twenty semester units is the minimum required for a baccalaureate degree and thirty-six semester units of credit is the minimum required for the award of a master's degree at Samuel Merritt University. The course numbering system is as follows:

UNDERGRADUATE COURSES

000-099 Assigned to Lower Division Courses

100-199 Assigned to Upper Division Courses

GRADUATE COURSES

500-599 Assigned to courses taught at the graduate level in preparation for a graduate degree program

600-699 Assigned to courses at the master's level

700-799 Assigned to courses at the doctoral level

** The letter L is used to denote laboratory courses or sections.*

MEMBERSHIPS

Samuel Merritt University maintains memberships in the following associations:

American Association for Higher Education

American Association of Colleges of Nursing

American Association of Colleges of Podiatric Medicine (AACPM)

American College Health Association

American Council of Education

American Library Association

Association for Student Conduct Administration

Association of Independent California Colleges and Universities

Association of Physician Assistant Programs

Association on Higher Education and Disabilities

Black Chamber of Commerce

Califa Library Group

California Association of Student Financial Aid Administrators

Case Management Society of America

Center for Academic Integrity

The College Board

East Bay Consortium of Education Institutions, Inc.

Ethnic Health Institute

Medical Library Association

National Association of Advisors in the Health Professions

National Association of College and University Business Officers

National Association for Graduate Admission Professionals

National Association of Student Financial Aid Administrators

National Association of Student Personnel Administrators (NASPA)

North American Association of Commencement Officers (NAACO)

Northern California Consortium of Psychology Libraries

Oakland Metropolitan Chamber of Commerce

Public Responsibility in Medicine and Research (PRIM&R)

Specialized Colleges of Nursing and Health

Statewide California Electronic Library Consortium

Western Association of Advisors in the Health Professions

Western Association of College and University Business Officers

Western College Association

SMU INSTITUTIONALLY ESTABLISHED EQUIVALENCY

A credit hour is defined as an amount of work that reasonably approximates one hour of classroom or direct faculty instruction and a minimum of two hours out-of-class student work each week (Carnegie Unit Definition), for approximately fifteen weeks or the equivalent of one semester.

This policy makes no attempt to award units to clinical or laboratory hours by any standard methodology. The University's expectation is that clinical or laboratory ratios may vary by program.

NURSING

SCHOOL OF NURSING

HISTORY

The School of Nursing offered the first academic program under the aegis of Samuel Merritt Hospital in 1909. Over 3,000 nurses graduated during the first 75 years of its existence. In 1977, a cooperative associate degree-diploma in nursing program was initiated with Saint Mary's College of California. In 1981, in a new cooperative endeavor with Saint Mary's College, the first students were admitted to a joint baccalaureate degree program. Graduate programs in nursing were initiated in 1992 and today include programs in case management (1997), family nurse practitioner (1993), and nurse anesthesia (1994). An entry-level master's degree option for college graduates (ELMSN) was initiated in 1996. A Bachelor of Science accelerated program for college graduates (ABSN) admitted its first class in 2005. In 2001, nursing became the first program to be offered at a distance from the campus with the inauguration of the ELMSN program at the Sacramento Regional Learning Center. In 2006, the ABSN program opened a San Francisco Learning Center and in 2007 expanded to Sacramento and San Mateo. The Doctor of Nursing Practice (DNP) program admitted the first class in January 2011.

PHILOSOPHY

Nursing is a dynamic, evolving discipline based on knowledge of human health derived from the integration of research, theory, and practice. The

consistent orientation of nursing is to provide care that promotes well-being in the people served (ANA, 1995, p.6). The ultimate goal of nursing is to assist individuals, families, and communities to achieve optimal health within the parameters of applicable social, cultural, and environmental systems. The professional nurse consults with other health professionals, forms independent clinical judgments, and makes autonomous decisions based on a systematic problem-solving approach. Students and faculty are committed to principles of shared responsibilities for continuous learning, self-assessment, and practice improvement.

MISSION

We are committed to educational innovation in theory and practice to prepare highly competent professional nursing leaders who are engaged in the advancement of nursing practice and the improvement of health for diverse populations/peoples.

VALUES

Social Justice: We believe in a fair, equitable, ethical, respectful, and dignified environment.

Evidence-based: We believe in the conscientious, explicit, and judicious use of current best evidence in guiding nursing education and clinical decisions about the care of individuals, groups, and communities.

Culture: We are committed to self-evaluation and self-critique to redress power imbalances and to develop and maintain mutually respectful and dynamic partnerships with individuals, groups, and communities. We recognize that culture matters in clinical care and in the educational environment. Culture comprises multiple variables and is a process of meaning-making in which faculty and students are engaged with others.

Lifelong Learning: We are committed to life-long, continual self assessment and the conscientious and diligent pursuit of excellence.

Compassion and Caring: We treat those we serve, and one another, with concern, kindness and respect.

Collaboration and partnership: We continually seek to collaborate with a focus on merging the insights of persons with differing perspectives, recognition of other's concerns and expertise, with a high degree of assertiveness and cooperation to jointly develop integrated solutions.

ACCREDITATION

The nursing programs are approved by the California Board of Registered Nursing, and accredited by the Commission on Collegiate Nursing Education (CCNE). In addition, the Program of Nurse Anesthesia is accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA).

BACHELOR OF SCIENCE IN NURSING

Students looking to earn a Bachelor of Science in Nursing (BSN) may enter the University in one of three ways:

- 1. Freshmen Entry — BSN program with Partnership Programs.** Students who are interested in entering the program as a freshman may apply directly to one of our partnership programs at Holy Names University, Mills College (women only), Saint Mary's College of California or Notre Dame de Namur University for the first two years of the nursing major. Following the successful completion of the first two years of coursework, students who meet all conditions of the partnership program are granted admission to Samuel Merritt University for the completion of the Bachelor of Science in Nursing degree.
- 2. Transfer Entry.** Samuel Merritt University admits transfer students on a space available basis in fall and spring. The admission is as a first semester junior and it will take four semesters to complete the program.
- 3. Accelerated Bachelor of Science in Nursing (ABSN).** The ABSN is designed for someone who has his/her bachelor's degree in a non-nursing field. The ABSN will be completed in 12 months of intensive nursing theory courses and clinical education. The ABSN program is offered on the main campus in Oakland, and at our Learning Centers in San Mateo and Sacramento.

For more information on any of these programs, please contact the Office of Admission or visit the Samuel Merritt University website (www.samuelmerritt.edu).

GOALS

The goals of the Baccalaureate Nursing Programs are to:

- Educate professionals who are grounded in the liberal arts and the discipline of nursing and who demonstrate competence in practice, skills in inquiry, and who are guided by ethical and humanistic values.
- Offer baccalaureate education in nursing for learners with varied educational and cultural backgrounds who are capable of providing health care to diverse client populations and exercising leadership in a variety of settings.
- Provide a forum for analysis of issues in nursing and health care that supports the preparation of graduates who are client advocates and who are able to facilitate change in health care environments.
- Provide an environment in which faculty and students engage in scholarly activities in order to contribute to the body of nursing knowledge through practice, education, and research.
- Prepare graduates who are consumers of research with an ability to translate research findings into practice and who are prepared for graduate education.

- Prepare graduates who contribute to the advancement of nursing as a profession and to the improvement of health care through participation in professional organizations.
- Prepare professionals who are capable of exercising citizenship in a world community and have an appreciation for community service, life-long learning, and an enriched human existence.

CURRICULUM

Education for the professional nurse emphasizes liberal and professional education, skilled nursing practice, values, and attitudes. The curriculum for the preparation of the nurse in the Baccalaureate Nursing Programs is based upon the philosophy of the faculty and student learning outcomes, as well as knowledge and theory from the various disciplines and nursing. The liberal learning and science requirements from our partner colleges have been designed to meet both Samuel Merritt University's requirements for liberal learning as well as those required by our accreditation bodies. Four major concepts are used to provide organizational focus in nursing courses. These concepts include person, environment, health, and nursing.

PROGRAM LEARNING OUTCOMES

The prelicensure nursing programs, built upon a foundation of science and liberal arts education, prepare individuals for beginning professional practice and provide a foundation for graduate study. Based upon the School's philosophy and purposes, upon graduation, the student will:

1. Demonstrate respect for the inherent dignity of individuals and groups in the delivery of nursing care within an appropriate moral, ethical and legal framework.
2. Integrate theory, research and knowledge from nursing, the physical, behavioral sciences, and humanities to improve the quality of care provided to clients.
3. Use effective communication principles in facilitating professional relationships with clients, families, and health care system colleagues.
4. Demonstrate clinical reasoning in planning, delivering and evaluating care directed at disease prevention, health promotion and restoration, across the life span to diverse clients.
5. Critically analyze research findings for application in the provision of therapeutic, evidence-based nursing interventions.
6. Analyze the effects of changing social, cultural, legal, economic, global political and ethical trends on health-care policy, financing and regulatory environments.
7. Collaborate effectively with multidisciplinary practitioners to promote illness prevention and the health and welfare of individuals, families and communities.

8. Apply standards of practice within an ethical decision making framework in the provision of nursing care that meets clients' health care needs.
9. Use leadership and management principles in the delegation and supervision of nursing care while retaining accountability for the quality of care given to the client.
10. Use emerging health care information technologies to evaluate client care and advance client education
11. Articulate a philosophy of self-care and professional development.

PRE-LICENSURE PROGRAM ASSESSMENT

All students in the BSN, ABSN, and ELMSN programs participate in the HESI Review and Testing product developed by Elsevier.

BACHELOR OF SCIENCE IN NURSING DEGREE

Degree Requirements: The Pre-Nursing program is offered in cooperation with Holy Names University, Oakland; Mills College, Oakland; Saint Mary's College of California, Moraga; and Notre Dame de Namur University, Belmont. This program allows students multiple options to secure the liberal learning and science courses required as the foundation for professional nursing education. Admission to the Samuel Merritt University BSN program is dependent upon several factors, including completion of all required prerequisites with a grade of C or higher prior to the start of the program. A prerequisite GPA will be considered and it is strongly recommend that this GPA exceed a 3.0. The TEAS is also used in determining admission and is required for all applicants by the deadline date for applications. While there are no minimum required scores, it is highly suggested that TEAS scores meet or exceed the national score averages. Successful completion of a criminal background check, required health forms and BLS for Healthcare Providers are also required prior to matriculation.

Transfer Students: Transfer students may be enrolled in the program. Students who desire to transfer into the Nursing program must meet all of the same requirements expected from the colleges and the university named above. Prospective students are asked to check the Samuel Merritt University website (www.samuelmerritt.edu) for updates on admission requirements and ability to be admitted as a transfer student.

BSN CURRICULUM OVERVIEW Years Three and Four

JUNIOR YEAR—33 UNITS

JUNIOR ONE:

NURSG 119	Pathophysiology	3.0
NURSG 125	Health Assessment I	4.0
NURSG 129	Psychiatric/Mental Health Nursing	5.0
NURSG 137	Introduction to Professional Nursing	3.0

Total **15.0**

JUNIOR TWO:

NURSG 118	Pharmacology	3.0
NURSG 127	Managing Care of Adults I-II	10.0
NURSG 128	Healthy Aging	2.0
	General Education I	3.0

Total **18.0**

SENIOR YEAR—34 UNITS

SENIOR ONE:

NURSG 108	Nursing Research	2.0
NURSG 144	Care of the Childbearing Family	5.0
NURSG 158	Nursing Care of Infants, Children and Youth Populations	5.0
NURSG 164	Managing Care of Adults III	5.0

Total **17.0**

SENIOR TWO:

NURSG 160	Leadership	3.0
NURSG 170	Community Health	5.0
NURSG 190	Senior Synthesis	6.0
	General Education II	3.0

Total **17.0**

Total Units **67.0 units**

ACCELERATED BACCALAUREATE PROGRAM (ABSBN)

Samuel Merritt University, School of Nursing, offers an accelerated baccalaureate program (ABSBN) for candidates with degrees in other fields. The program recognizes each individual's past experiences and academic achievements and builds upon these assets. It provides a mechanism for graduates with non-nursing degrees to change careers efficiently and effectively. Because of these basic premises, the curriculum is different from the traditional BSN.

The program is designed to be completed in 12 months. The curriculum includes five terms of intensive study at a rapid pace. Although the curriculum and format are different from Samuel Merritt's traditional BSN program, the goals, student learning outcomes, and foundational concepts are the same.

The ABSBN is offered on the Oakland campus, the Sacramento Regional Learning Center, and the San Francisco Peninsula Learning Center in San Mateo.

ABSBN CURRICULUM OVERVIEW

TERM I

NURSG 125	Health Assessment I	2.5
NURSG 138	Introduction to Professional Nursing and the Healthcare Delivery System	2.0
Total		4.5

TERM II

NURSG 120	Managing Care of Adults I	5.0
NURSG 126	Health Assessment II	2.5
NURSG 128	Healthy Aging	2.0
NURSG 136	Managing Care of Adults II	5.0
Total		14.5

TERM III

NURSG 108	Nursing Research	2.0
NURSG 144	Care of the Childbearing Family	5.0
NURSG 158	Nursing Care of Infants, Children and Youth Populations	5.0
NURSG 164	Managing Care of Adults III	5.0
Total		17.0

TERM IV

NURSG 129	Psychiatric/Mental Health Nursing	5.0
NURSG 170	Community Health Nursing	5.0
Total		10.0

TERM V

NURSG 160	Leadership, Management, Healthcare Policy	3.0
NURSG 181	Senior Synthesis	3.0
Total		6.0

Total Units **52.0**

MASTER OF SCIENCE DEGREE IN NURSING

DESCRIPTION

The graduate program in nursing prepares nurses for advanced roles. A minimum of 36 semester units of study is required for the master's degree, but specific tracks may require more units of study to provide adequate mastery of theory and clinical skills appropriate for advanced roles. Two types of entry options are offered: the entry-level, first professional degree for college graduates who are seeking to become nurses (ELMSN), and the post-professional master's degree for students who are already registered nurses. In addition, post-master's certificates are offered in advanced practice programs for those nurses who already have a graduate degree in nursing but who are seeking preparation for a new role.

The graduate curriculum is designed to prepare students to meet specific competencies at the completion of the program. Core courses, courses with a research focus, and courses in the specialty area are sequenced in order to enable students to develop advanced nursing skills progressively as they move through the program. A graduate level synthesis project, which may include a comprehensive exam, directed study special project, or a thesis, is required as a final graduate-level project.

GRADUATE EDUCATION

We believe that new knowledge and advances in science, philosophy, and technology necessitate advanced preparation to enable the practitioner to make complex decisions in delivering health care to individuals and groups. Graduate education programs for the professional must be conducted in an environment in which scholarship, research, creativity, clinical practice, and professional activity are valued. The development of graduate students' critical inquiry skills and abilities is central to clinical practice and the evolution of the profession. Furthermore, we believe that students admitted to the graduate programs acquire skills in inquiry and scholarship in conjunction with expert faculty who direct study, inspire problem-solving, and promote professional growth.

GOALS

The goals of the Master of Science in Nursing program are to:

- > Prepare nurses for advanced nursing roles in case manager, family nurse practitioner, and nurse anesthetist.
- > Prepare graduates for leadership roles in the health care system at the regional, state, and national levels.
- > Prepare nurses who can identify researchable problems, participate in conducting research, and promote the use of research findings in practice.
- > Provide the foundation for doctoral study.

ENTRY-LEVEL MASTER OF SCIENCE IN NURSING (ELMSN)

Designed for college graduates seeking a new career in nursing, the entry-level master's degree program (ELMSN), offers preparation for RN licensure and a choice of two graduate tracks on the Oakland campus and the Sacramento Regional Learning Center. The ELMSN program at the Oakland campus admits students in the fall semester; the program at the Sacramento campus admits students in the spring semester.

The graduate options in the ELMSN program include: case management (CM) and family nurse practitioner (FNP). All options have identical full-time coursework for the first four semesters, after which, students may take the RN licensure examination. The case management track includes an additional three semesters and the FNP track an additional six semesters. Both tracks are designed for either full or part-time study after licensure. In order to progress into the seventh semester in the CM and FNP programs, ELMSN students are required to have passed the NCLEX examination.

PROGRAM LEARNING OUTCOMES

The prelicensure nursing programs, built upon a foundation of science and liberal arts education, prepare individuals for beginning professional practice and provide a foundation for graduate study. Based upon the School's philosophy and purposes, upon graduation, the student will:

1. Demonstrate respect for the inherent dignity of individuals and groups in the delivery of nursing care within an appropriate moral, ethical and legal framework.
2. Integrate theory, research and knowledge from nursing, the physical, behavioral sciences, and humanities to improve the quality of care provided to clients.
3. Use effective communication principles in facilitating professional relationships with clients, families, and health care system colleagues.
4. Demonstrate clinical reasoning in planning, delivering and evaluating care directed at disease prevention, health promotion and restoration, across the life span to diverse clients.
5. Critically analyze research findings for application in the provision of therapeutic, evidence-based nursing interventions.
6. Analyze the effects of changing social, cultural, legal, economic, global political and ethical trends on health-care policy, financing and regulatory environments.
7. Collaborate effectively with multidisciplinary practitioners to promote illness prevention and the health and welfare of individuals, families and communities.
8. Apply standards of practice within an ethical decision making framework in the provision of nursing care that meets clients' health care needs.
9. Use leadership and management principles in the delegation and supervision of nursing care while retaining accountability for the quality of care given to the client.

10. Use emerging health care information technologies to evaluate client care and advance client education.
11. Articulate a philosophy of self-care and professional development.

GRADING:

All prelicensure ELMSN students must achieve a minimum of a “C” to pass a course. This requires a cumulative grade of 73% on all primary evaluation sources for the course. Examples of primary evaluation sources are examinations, projects, case studies or papers selected or designated by the faculty and totaling $\geq 50\%$ of the weighted grade for the course. All other evaluation source scores will be added into the final grade after the student achieves the 73% minimum on the primary evaluation sources. The grading scale for pre-licensure ELMSN is:

93-100% = A	80-82% = B-
90-92% = A-	77-79% = C+
87-89% = B+	73-76% = C
83-86% = B	< 73% = F

CURRICULUM OVERVIEW for Pre-licensure Course Work

SEMESTER I	UNITS
NURSG 500 Transition to Professional Role of Nursing	2.0
NURSG 520 Integration of Pathophysiology and Pharmacology	5.0
NURSG 524/524L Health Assessment	3.0
NURSG 534/534L Psychiatric/Mental Health Nursing	5.0
NURSG 542L Nursing Skills I	1.0
Total	16.0
SEMESTER II	UNITS
NURSG 543L Nursing Skills II	1.0
NURSG 546/546L Nursing Care of Adults and Older Adults	10.0
NURSG 550 Nurses as Consumers of Research	2.0
NURSG 562 Professional, Legal and Ethical Issues	3.0
Total	16.0
SEMESTER III	UNITS
NURSG 540/540L Reproductive Health Care	5.0
NURSG 556/556L Nursing Care of Pediatric & Youth Populations	5.0
NURSG 566/566L Nursing Care of Critically Ill Adults	5.0
Total	15.0
SEMESTER IV*	UNITS
NURSG 560 Leadership, Mgt, and Org Behavior in Health Care	3.0
NURSG 570/570L Community Health	5.0
NURSG 594L Clinical Internship	5.0
Total	13.0

*Upon completion of the first four semesters, students are eligible to take the RN licensure examination (NCLEX).

**CURRICULUM OVERVIEW
for the Case Management Track**

SEMESTER V	UNITS
NURSG 601 Research Methods	3.0
NURSG 602 Analysis of Health Policy Issues	3.0
NURSG 624 Advanced Pathophysiology for Nurse Case Managers	2.0
NURSG 625 Advanced Pharmacological Management for Nurse Case Managers	2.0
Total	10.0
SEMESTER VI	UNITS
NURSG 603 Epidemiology and Biostatistics	3.0
NURSG 607 Program Evaluation and Quality Improvement	3.0
NURSG 612 Health Care Finance	3.0
NURSG 623/623L Advanced Health Assessment for Nurse Case Managers	3.0
Total	12.0
SEMESTER VII	UNITS
NURSG 605/606 Thesis or Special Project (Synthesis)	3.0
NURSG 620/620L Case Management	8.0
Total	11.0
Total Units for ELMSN Case Management	93.0

**CURRICULUM OVERVIEW
for the Family Nurse Practitioner Track**

SEMESTER V	UNITS
NURSG 601 Research Methods	3.0
NURSG 602 Analysis of Health Policy Issues	3.0
Total	6.0
SEMESTER VI (SUMMER)	UNITS
NURSG 626 Theoretical Foundations of Advanced Practice Nursing	3.0
NURSG 672 Professional Role Development for Advanced Practice Nursing	1.0
Total	4.0
SEMESTER VII	UNITS
NURSG 619 Advanced Pathophysiology	3.0
NURSG 670 Family Centered Advanced Practice Nursing	2.0
NURSG 671/671L Advanced Physical Assessment	3.0
Total	8.0
SEMESTER VIII	UNITS
NURSG 674 Health Protection, Promotion and Screening For Individuals, Families, and Communities	3.0
NURSG 677 Advanced Pharmacology	3.0
NURSG 678L Clinical Practicum (90-120 hours)	2.0
Total	8.0
SEMESTER IX	UNITS
NURSG 675/675L Care of Acute and Episodic Conditions	4.0
NURSG 679L Clinical Practicum (240-270 hours)	6.0
Total	10.0
SEMESTER X	UNITS
NURSG 605/606 Thesis/Project/Directed Synthesis	3.0
NURSG 673 Professional Advocacy for Entry to the Advanced Practice Role	1.0
NURSG 676 Care of Chronic and Complex Conditions	3.0
NURSG 680L Internship (270 hours)	6.0
Total	13.0
Total units for ELMSN FNP	109.0

POST-PROFESSIONAL PROGRAMS CASE MANAGEMENT MSN PROGRAM

The purpose of this track is to prepare nurses with advanced theory and practice in a systematic case management approach to the delivery of health care to diverse populations. Case management emphasizes collaborative methods of coordination, continuity, and quality of care within a cost-sensitive perspective. Graduates will be prepared to practice in various case-management settings including provider-, client-, and payer-based models.

PROGRAM LEARNING OUTCOMES

Graduates of this program will:

1. Ensure coordination, continuity, and quality of care for a selected population.
2. Assume nursing case management roles in a variety of health care settings.
3. Demonstrate a clinical nursing foundation in the application of case management principles.

CURRICULUM OVERVIEW

Post-Professional Case Management Program**

FALL I

NURSG 601	Research Methods*	3.0
NURSG 560 or NURSG 608	Leadership, Management, and Organizational Behavior in Healthcare	3.0

Total **6.0**

SPRING I

NURSG 602	Analysis of Health Policy Issues*	3.0
NURSG 612	Healthcare Finance	3.0
NURSG 623/623L	Advanced Health Assessment for Nurse Case Managers	3.0

Total **9.0**

SUMMER I

NURSG 603	Epidemiology/Biostatistics	3.0
NURSG 624	Advanced Pathophysiology for Nurse Case Managers	2.0
NURSG 625	Advanced Pharmacological Management for Nurse Case Managers	2.0

Total **7.0**

FALL II

NURSG 607	Program Evaluation and Quality Improvement	3.0
NURSG 620/620L	Case Management	6.0

Total **9.0**

SPRING II

NURSG 605/606	Thesis or Special Project Synthesis Requirement*	3.0
NURSG 621L	Practice and Seminar	3.0

Total **6.0**

Total Units **37.0**

* These courses may be taken in a different sequence or term.

** Subject to change.

FAMILY NURSE PRACTITIONER MSN PROGRAM

The Family Nurse Practitioner (FNP) program focuses on preparing family-oriented primary care providers for multicultural and underserved populations. FNPs are advanced practitioners of nursing with a specialty in primary health care. They provide ongoing comprehensive care to individuals, families, and communities. FNPs are responsible for health promotion and maintenance, diagnosis, treatment, and management of health problems, consultation with other health care providers, and referral as indicated. FNPs function independently and interdependently with other providers of health care. Practice is based on concepts of family health nursing research and theory, as well as concepts from other related disciplines such as medicine and pharmacy. Students complete 49 graduate units and are awarded a Master of Science degree upon completion and are eligible for state and national certification. Full or part-time study is available for students who are licensed as registered nurses.

PROGRAM LEARNING OUTCOMES

Upon graduation the student will:

1. Provide family-oriented primary health care:
 - a. Elicit a detailed and accurate history, perform the appropriate physical exam, record pertinent data, and develops and implements plan of care.
 - b. Perform and/or order and interpret relevant diagnostic studies.
 - c. Perform appropriate office procedures.
 - d. Provide health promotion and disease prevention.
 - e. Integrate cultural considerations in the provision of primary care.
2. Consult and refer within an interdisciplinary practice model.
3. Collaborate with patients and families to provide evidence-based primary care that is theoretically sound.
4. Assume a leadership role in the profession at local, state, national and international level.
5. Produce quality work that demonstrates graduate level scholarly work and can withstand peer review.

The FNP curriculum consists of 49 semester units, including interdisciplinary core courses, FNP specialty courses, clinical practica, and internship. A total of 630 clinical hours are required. Clinical placements are available throughout Northern California in a variety of ambulatory settings. Master's prepared, advanced practice nurses serve as most of the primary preceptors. The curriculum and clinical sites reflect the track's emphasis on serving multicultural and underserved populations. The program is offered on a year-round basis with admission in the summer semester for the Oakland campus and for the fall semester for the Sacramento campus. Full-time students complete the program in five semesters, including two summer semesters. Part-time students complete the program in nine semesters. An option for post-professionals (those who already possess RN licensure) is the hybrid curriculum which is a combination of on-line delivery of didactic material and on-campus sessions. The curriculum is consistent with the highest national standards, including guidelines established by the National Organization of Nurse Practitioner Faculties and the American Association of Colleges of Nursing.

FNP CERTIFICATE PROGRAM

The Family Nurse Practitioner program welcomes applications from nurses who have already completed a master's degree in nursing who wish to expand or change their specialty focus to become FNPs. Each student is evaluated individually in relation to his/her previous graduate nursing coursework. Most post-masters students are required to complete only the FNP specialty courses in the curriculum which totals 37 semester units. Students progress through the curriculum over five semesters, including two summers. Evening courses and part-time study make this program accessible to working professionals. Upon completion of the program, students receive a certificate of completion and are eligible for state and national certification.

CURRICULUM OVERVIEW

for the Post-Professional Family Nurse Practitioner Track (Full-time)

SEMESTER I	UNITS
NURSG 601 Research Methods	3.0
NURSG 626 Theoretical Foundations of Advanced Practice Nursing	3.0
NURSG 672 Professional Role Development for Advanced Practice Nursing	1.0
Total	7.0
SEMESTER II	
NURSG 619 Advanced Pathophysiology	3.0
NURSG 670 Family Centered Advanced Practice Nursing	2.0
NURSG 671 Advanced Physical Assessment	2.0
NURSG 671L Advanced Physical Assessment Lab	1.0
Total	8.0
SEMESTER III	
NURSG 602 Analysis of Health Policy Issues	3.0
NURSG 674 Health Protection, Promotion, and Screening for Individuals, Families and Communities	3.0
NURSG 677 Advanced Pharmacology	3.0
NURSG 678L Clinical Practicum (90-120 hours)	2.0
Total	11.0
SEMESTER IV	
NURSG 675 Care of Acute and Episodic Conditions	3.0
NURSG 675L Care of Acute and Episodic Conditions Lab	1.0
NURSG 679L Clinical Practicum (240-270 hours)	6.0
Total	10.0
SEMESTER V	
NURSG 605/606 Thesis/Project/Directed Synthesis	3.0
NURSG 673 Professional Advocacy for Entry to the Advanced Practice Role	1.0
NURSG 676 Care of Chronic and Complex Conditions	3.0
NURSG 680L Internship (270 hours)	6.0
Total	13.0
Total Units	49.0
Total Clinical Units	14.0 (630 hours)

CURRICULUM OVERVIEW

Post-Professional Family Nurse Practitioner Track (Part-time)

SEMESTER I	UNITS
NURSG 601 Research Methods	3.0
NURSG 626 Theoretical Foundations of Advanced Nursing Practice	3.0
Total	6.0
SEMESTER II	
NURSG 619 Advanced Pathophysiology	3.0
NURSG 670 Family Centered Advanced Practice Nursing	2.0
Total	5.0
SEMESTER III	
NURSG 602 Analysis of Health Policy Issues	3.0
NURSG 677 Advanced Pharmacology	3.0
Total	6.0
SEMESTER IV	
NURSG 672 Professional Role Development for Advanced Practice Nursing	1.0
Total	1.0
SEMESTER V	
NURSG 671 Advanced Physical Assessment	2.0
NURSG 671L Advanced Physical Assessment Lab	1.0
Total	3.0
SEMESTER VI	
NURSG 674 Health Protection, Promotion, and Screening for Individuals, Families and Communities	3.0
NURSG 678L Clinical Practicum (90-120 hours)	2.0
Total	5.0
SEMESTER VII	
NURSG 675 Care of Acute and Episodic Conditions	3.0
NURSG 675L Care of Acute and Episodic Conditions Lab	1.0
NURSG 679L Clinical Practicum (240-270 hours)	6.0
Total	10.0
SEMESTER VIII	
NURSG 673 Professional Advocacy for Entry to the Advanced Practice Role	1.0
NURSG 676 Care of Chronic and Complex Conditions	3.0
NURSG 680L Internship (270 Clinical Hours)	6.0
Total	10.0
SEMESTER IX	
NURSG 605/606 Thesis/Project/Directed Synthesis	3.0
Total	3.0
Total Units	49.0
Total Clinical Units	14.0 (630 hours)

The above is an example of a typical course of study. However, the sequencing of courses may vary from year-to-year.

FAMILY NURSE PRACTITIONER DNP PROGRAM

The FNP/DNP program prepares the registered nurse to practice as an advanced practice family nurse practitioner in the primary care setting with multi-cultural and under-served populations. The current role and opportunities for the FNP are expected to expand with the implementation of the Affordable Care Act. The need for, and utilization of, FNPs in family practice and primary care will increase significantly. Advanced practice professional organizations and the American Academy of Colleges of Nursing (AACN) are in agreement with DNP as the recommended terminal degree for all advanced practice nurses by 2015. The SMU FNP/DNP program length is 3 ½ years (11 semesters) providing 79 semester units and 1000 practice hours. The curriculum is blended, a combination of face to face in-class sessions and online/distance learning. Students must have 1000 practice hours in their academic program completed by the end of their FNP/DNP program (this includes the 630 hours completed as part of their FNP program).

SAMUEL MERRITT UNIVERSITY Post-Baccalaureate RN to FNP/DNP Full-Time

SUMMER SEMESTER

NURSG 601	Research Methods	3.0
NURSG 626	Theoretical Foundations of Advanced Practice Nursing	3.0
NURSG 672	Professional Role Development for APN	1.0

FALL SEMESTER

NURSG 619	Advanced Pathophysiology	3.0
NURSG 670	Family Centered Advanced Practice Nursing	2.0
NURSG 706	Adv. Informatics	3.0

SPRING SEMESTER

NURSG 677	Adv. Pharmacology	3.0
NURSG 703	Epidemiology and Population Health	3.0
NURSG 704	Biostatistics	3.0

Total: **24.0**

SUMMER SEMESTER

NURSG 700	EB Research Methods	3.0
NURSG 710	HC Economics and Financial Analysis	3.0

FALL SEMESTER

NURSG 671/671L	Adv. Physical Assessment/APA Lab	3.0
NURSG 715	Outcomes Management & Evaluation	3.0
NURSG 720	Capstone Seminar	1.0

SPRING SEMESTER

NURSG 674	Health Protection, Promotion, & Screening	3.0
NURSG 678L	Clinical Practicum	2.0
NURSG 702	Adv. Health Policy & Advocacy	3.0

Total: **21.0**

SUMMER SEMESTER

NURSG 675/675L	Care of Acute & Episodic Conditions/Lab	4.0
NURSG 679L	Clinical Practicum (3/6)	3.0
NURSG 721	Capstone Development	2.0

FALL SEMESTER

NURSG 676	Care of Chronic & Complex Conditions	3.0
NURSG 679L	Clinical Practicum (3/6)	3.0

SPRING SEMESTER

NURSG 680L	Clinical Internship (4/6)	4.0
NURSG 705	Organizational & Systems Leadership	3.0

Total: **22.0**

SUMMER SEMESTER

NURSG 673	Professional Advocacy	1.0
NURSG 680L	Clinical Internship (2/6)	2.0
NURSG 714	Educational Innovations	3.0

FALL SEMESTER

NURSG 723	Capstone Presentation	1.0
NURSG 730	Capstone Residency	5.0

Total: **12.0**

Total Semester Units **79.0**

Includes 630 FNP practice hours & (minimum) 370 DNP practice hours

**Post-Baccalaureate RN to FNP/DNP
Sacramento Campus**

FALL SEMESTER

NURSG 601	Research Methods	3.0
NURSG 672	Professional Role Development for APN	1.0
NURSG 626	Theoretical Foundations for APN	3.0

SPRING SEMESTER

NURSG 619	Adv. Pathophysiology	3.0
NURSG 670	Family Centered Advanced Practice Nursing	2.0
NURSG 703	Epidemiology and Population Health	3.0

SUMMER SEMESTER

NURSG 677	Adv. Pharmacology	3.0
NURSG 700	EB Research Methods	3.0
NURSG 710	HC Economics and Financial Analysis	3.0

Total 24.0

FALL SEMESTER

NURSG 715	Outcomes Management & Evaluation	3.0
NURSG 706	Advanced Informatics	3.0

SPRING SEMESTER

NURSG 671/671L	Adv. Physical Assessment/Lab	3.0
NURSG 704	Biostatistics	3.0
NURSG 702	Adv. Health Policy & Advocacy	3.0

SUMMER SEMESTER

NURSG 674	Health Protection, Promotion, & Screening	3.0
NURSG 678L	Clinical Practicum	2.0
NURSG 714	Educational Innovations	3.0

Total 23.0

FALL SEMESTER

NURSG 675/675L	Care of Acute & Episodic Conditions/Lab	4.0
NURSG 679L	Clinical Practicum (3/6)	3.0
NURSG 720	Capstone Seminar	1.0

SPRING SEMESTER

NURSG 679L	Clinical Practicum (3/6)	3.0
NURSG 676	Care of Chronic & Complex Conditions	3.0
NURSG 705	Organizational & Systems Leadership	3.0

SUMMER SEMESTER

NURSG 680L	Internship	6.0
NURSG 721	Capstone Development	2.0

Total 25.0

FALL SEMESTER

NURSG 673	Professional Advocacy	1.0
NURSG 723	Capstone Presentation	1.0
NURSG 730	Capstone Residency	5.0

Total 7.0

Total Semester Units 79 units

Includes 630 FNP practice hours & (minimum) 370 DNP practice hours

NURSE ANESTHESIA MSN PROGRAM

Samuel Merritt University, in partnership with Kaiser Permanente Northern California, offers a graduate program in nurse anesthesia leading to the Master of Science in Nursing. The program is accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs. Successful completion of graduation requirements qualifies the student to take the national certification examination (NCE) to become a Certified Registered Nurse Anesthetist (CRNA). Clinical practice rights are granted by reciprocity in all states after successful completion of the NCE.

Nurse anesthetists are advanced practice registered nurses who provide the full range of anesthesia and related patient care services. They are responsible for the direct administration of anesthesia care and the provision of services required for patients throughout the perioperative course, in all current anesthetizing locations - surgical and obstetric suites, interventional radiology suites, and other areas in which anesthesia specialty skills are required. CRNAs work in a variety of settings including tertiary care hospitals, outpatient surgical centers, health maintenance organizations, and military and public health service centers. CRNAs nationwide are employed either as independent providers in collaboration with surgeons and dentists or in collaborative team practice with physician anesthesiologists.

PROGRAM LEARNING OUTCOMES

Graduates of the Program of Nurse Anesthesia will demonstrate knowledge, skills, and attitudes/behaviors in:

- 1. Maintaining patient safety, as evidenced by the ability to:**
 - a. Be vigilant in the delivery of patient care.
 - b. Protect patients from iatrogenic complications.
 - c. Participate in the positioning of patients to prevent injury.
 - d. Conduct a comprehensive and appropriate equipment check.
 - e. Comply with all current patient safety goals outlined by both the Joint Commission and the National Patient Safety Foundation. Utilize standard precautions and appropriate infection control measures.
 - f. Effectively implement skills and principles of Anesthesia Crisis Resource Management.
 - g. Refrain from engaging in extraneous activities that abandon or minimize vigilance while providing direct patient care (e.g., texting, reading, emailing, etc.).
- 2. Providing individualized perianesthetic management by demonstrating the ability to:**
 - a. Provide care throughout the perianesthetic continuum.

- b. Use a variety of current anesthesia techniques, agents, adjunctive drugs, and equipment while providing anesthesia.
- c. Administer general anesthesia to patients of all ages and physical conditions for a variety of surgical and medically related procedures.
- d. Provide anesthesia services to all patients, including trauma and emergency cases.
- e. Administer and manage a variety of regional anesthetics.
- f. Function as a resource person for airway and ventilatory management of patients.
- g. Possess current advanced cardiac life support (ACLS) recognition.
- h. Possess current pediatric advanced life support (PALS) recognition.
- i. Deliver culturally competent perianesthetic care throughout the anesthesia experience.
- j. Perform a comprehensive history and a physical assessment.

3. Critical Thinking, by demonstrating the ability to:

- a. Apply knowledge to practice in decision making and problem solving.
- b. Provide nurse anesthesia care based on sound principles and research evidence.
- c. Perform a preanesthetic assessment and formulate an anesthesia care plan for patients to whom they are assigned to administer anesthesia.
- d. Identify and take appropriate action when confronted with anesthetic equipment-related malfunctions.
- e. Interpret and utilize data obtained from noninvasive and invasive monitoring modalities.
- f. Calculate, initiate and manage fluid and blood component therapy.
- g. Recognize and appropriately respond to anesthetic complications that occur during the perianesthetic period.
- h. Pass the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA) certification examination.

4. Communication skills, as evidenced by the ability to:

- a. Effectively communicate with individuals influencing patient care.
- b. Utilize appropriate verbal, nonverbal, and written communication in the delivery of perianesthetic care.

5. Professional Role, by demonstrating the ability to:

- a. Participate in activities that improve anesthesia care.
- b. Function within appropriate legal requirements as a registered professional nurse, accepting responsibility and accountability for his or her practice.
- c. Interact on a professional level with integrity.
- d. Teach others.
- e. Participate in continuing education activities to acquire new knowledge and improve his or her practice.
- f. Demonstrate knowledge of wellness and chemical dependency in the anesthesia profession through completion of content in wellness and chemical dependency.

Course Learning Outcomes (CLOs) of all courses in the Program of Nurse Anesthesia curriculum are aligned with the above listed outcomes set by the Council on Accreditation of Nurse Anesthesia Educational Programs. Institutional Learning Outcomes (ILOs) are determined by Samuel Merritt University's commitment to performance excellence.

The nurse anesthesia program is 27 months in length. The academic curriculum is composed of basic science coursework, basic and advanced clinical anesthesia applications, and MSN core courses. A significant amount of simulation-based learning (utilizing human patient simulators in high-fidelity environments, screen-based microsimulation, and hybrid simulation techniques) is integrated into the program curriculum.

The 23-month, full-time clinical residency includes rotations at selected health care facilities throughout the greater Bay Area, the Sacramento metropolitan area, and the Central Valley. The degree is awarded upon successful completion of 63 required graduate credit hours. Due to the intensive and rigorous nature of the program, full-time enrollment is required once clinical rotations are initiated and outside employment is strongly discouraged. Students will spend approximately 60 hours per week in study, class, and clinical practice.

POST-MASTER'S CERTIFICATE TRACK

The Council on Accreditation of Nurse Anesthesia Educational Programs has approved this program as eligible to accept and graduate qualified registered nurses who already hold an MS degree in nursing. Successful graduates of the post-professional curriculum described in this section, will receive a certificate of completion that qualifies them to sit for the national certification examination in nurse anesthesia. The curriculum for these students is the same in scope, sequence and program length with the exception of required hours in nursing research, health care policy, and theoretical foundations (9 credits maximum), which may be transferred to this institution from another accredited college or university at which the original degree was obtained. Synthesis requirements of the School of Nursing will be required of all post-masters certificate students.

THREE-YEAR TRACK

The Samuel Merritt University Program of Nurse Anesthesia provides the opportunity for students to complete the initial year of enrollment on a part-time basis. During this period, students will complete 9 units of designated course work not specific to anesthesiology, and then enter the program full-time at the next regular fall admission. There is no part-time option available once the student has entered the full-time program. This option is designed for the student seeking early admission to accommodate geographical moves, gain more critical care experience or prepare in other ways for full-time study. Admission requirements are identical to those for students entering the full-time program immediately upon initial enrollment.

CURRICULUM OVERVIEW

for the Post-Professional Nurse Anesthesia Track

FALL I	UNITS
NURSG 600 Theoretical Foundations for Health Professionals	3.0
NURSG 649/649L Advanced Health Assessment—Nurse Anesthesia	3.0
NURSG 651/651L Principles of Anesthesia I	4.0
NURSG 652 Advanced Pharmacology I	4.0
NURSG 657/657L Human Anatomy and Physiology	5.0
Total	19.0
SPRING I	
NURSG 653 Advanced Pathophysiology	3.0
NURSG 654 Advanced Pharmacology II	3.0
NURSG 655/655L Principles of Anesthesia II	6.0
NURSG 656L Clinical Anesthesia I	1.0
Total	13.0
SUMMER I	
NURSG 601 Research Methods	3.0
NURSG 658L Clinical Anesthesia II	3.0
NURSG 660 Advanced Principles of Anesthesia I	4.0
Total	10.0
FALL II	
NURSG 659 Professional Aspects of Practice	3.0
NURSG 661L Clinical Anesthesia III	2.0
NURSG 662 Advanced Principles of Anesthesia II	3.0
Total	8.0

SPRING II	UNITS
NURSG 602 Analysis of Health Policy Issues	3.0
NURSG 663L Clinical Anesthesia IV	3.0
Senior Seminar	0.0
Total	6.0
SUMMER II	
NURSG 664L Clinical Anesthesia V	3.0
Total	3.0
FALL III	
NURSG 606 Special Project (Synthesis)	3.0
NURSG 665L Clinical Anesthesia VI	1.0
Total	4.0
Total Units	63.0

DOCTOR OF NURSING PRACTICE PROGRAM

The Doctor of Nursing Practice (DNP) program currently offers two entry options. One is a 24 month post-MSN professional program and the other is a 44 month post-baccalaureate professional program for registered nurses with either a nursing or non-nursing bachelor's degree. Both are designed to prepare graduates to practice at the highest level of advanced nursing practice. A graduate will demonstrate leadership in a clinical or administrative specialty area and a commitment to improve healthcare outcomes via practice, policy change, and practice leadership.

The post-MSN entry is designed for advanced practice nurses (nurse practitioners, nurse anesthetists, clinical nurse specialists, and nurse midwives) and nurses in organizational leadership positions who have a Master of Science in Nursing degree. Potential applicants with a non-nursing master's degree may undergo a portfolio review to demonstrate competency in the AACN Master's Essentials.

The SMU program curriculum offers a focus on either Organizational Practice or Clinical Practice. Students in either of these areas will register for the same courses. The curricular differentiation for these two practice areas will manifest in the student's Capstone project. The curriculum will be offered almost completely through online courses using distributed learning technology and is designed to accommodate the student who must continue to work full- or part-time while undergoing doctoral study. Students are admitted as a cohort and are strongly advised to progress sequentially through the courses designated in each of six semesters.

Students will be required to attend an on-campus session early in the program and once per year as part of the capstone courses.

The doctorate in nursing practice offers an alternative to research-focused doctoral programs, providing graduates with the knowledge and skills essential for accountability in advanced practice. The nurse prepared in the SMU DNP program will be a valuable counterpart to the nurse prepared in a PhD nursing program. The DNP graduate will focus on developing systems of care based on research utilization, while the PhD prepared nurse conducts research to provide new knowledge.

Upon acceptance into the DNP program, and prior to enrollment in the program, the student must complete the on-line learning course on the Samuel Merritt University Canvas site. Access will be provided upon acceptance into the program.

A total of up to nine (9) units may be waived based upon post acceptance portfolio review or doctoral courses transferred in from another program.

Students must have 1000 clinical practice hours in their academic program completed by the end of the DNP program. These practice hours must have been attained during supervised educational experiences (e.g., the clinical hours completed during the student's MSN program together with the clinical hours in the DNP program.).

The post-baccalaureate entry is designed for nurses who are also seeking their Family Nurse Practitioner (FNP) certificate in addition to their DNP degree.

Applicants for both entry points must have a current RN license in resident state, successful completion of statistics within the past three years, demonstrate proficiency in computer word processing and internet skills and fulfill all other admissions requirements.

ACCREDITATION STATEMENT

The DNP program is accredited by the Accrediting Commission for Senior Colleges and Universities of the Western Association of Schools and Colleges (WASC) and the Commission on Collegiate Nursing Education (CCNE).

PROGRAM LEARNING OUTCOMES

Graduates of the DNP program will be prepared to:

- Continue clinical or organizational practice in their area of expertise, demonstrating specialized competencies as defined by the specialty organization, and using defined assessment and decision-making skills, systems thinking, collaborative teamwork models and outcomes evaluations to improve the delivery of care.
- Analyze and utilize scientific knowledge from nursing as well as other scientific disciplines, as the underpinnings for the highest level of nursing practice.
- Use analytic methods to critically appraise existing literature and current research to determine and implement best evidence for nursing practice.
- Support and improve patient care delivery and healthcare systems through the utilization of information systems and technology.
- Design, influence and implement healthcare policies that affect practice regulation, access, safety, quality, efficacy, financing, ethics and social justice.
- Develop and evaluate healthcare delivery methods within an organizational structure to meet current and future needs of diverse patient populations.
- Employ consultative and leadership skills with intraprofessional and interprofessional teams to create change in healthcare and complex healthcare delivery systems.
- Analyze epidemiological, biostatistical, environmental and other appropriate scientific data related to individual, aggregate and population health and develop strategies and/or care delivery systems using concepts related to community, environmental, and occupational health as well as the cultural and socioeconomic aspects of health.
- Assume leadership roles in nursing, education, and healthcare.

CURRICULUM OVERVIEW

Post-MSN Doctor of Nursing Practice Program Full-Time

Students must have 1000 practice hours in their academic program completed by the end of the DNP program (this includes hours completed as part of their MSN program).

Year I

SPRING

NURSG 703	Epidemiology and Population Health	3.0
NURSG 704	Biostatistics	3.0

Total **6.0**

SUMMER

NURSG 700	Evidence Based Research Methods	3.0
NURSG 710	Health Care Economics and Financial Analysis	3.0

Total **6.0**

FALL

NURSG 706	Advanced Informatics	3.0
NURSG 715	Outcomes Management and Evaluation	3.0
NURSG 720	Capstone Seminar Emphasis	1.0

Total **7.0**

Year II

SPRING

NURSG 702	Advanced Health Policy and Advocacy	3.0
NURSG 705	Organizational and Systems Leadership in Complex Health Care Systems	3.0

Total **6.0**

SUMMER

NURSG 714	Educational Innovations	3.0
NURSG 721	Capstone Development	2.0

Total **5.0**

FALL

NURSG 723	Capstone Presentation	1.0
NURSG 730	Capstone Residency	5.0

Total **6.0**

Total for DNP **36 units**

Post-MSN Doctor of Nursing Practice Program Part-Time

YEAR I

SPRING

NURSG 703	Epidemiology and Population Health	3.0
-----------	------------------------------------	-----

Total **3.0**

SUMMER

NURSG 700	Evidence-Based Research Methods	3.0
-----------	---------------------------------	-----

Total **3.0**

FALL

NURSG 706	Advanced Informatics	3.0
-----------	----------------------	-----

Total **3.0**

YEAR II

SPRING

NURSG 704	Biostatistics	3.0
-----------	---------------	-----

Total **3.0**

SUMMER

NURSG 710	Health Care Economics and Financial Analysis	3.0
-----------	--	-----

Total **3.0**

FALL

NURSG 715	Outcomes Management and Evaluation	3.0
NURSG 720	Capstone Seminar Emphasis	1.0

Total **4.0**

YEAR III

SPRING

NURSG 702	Advanced Health Policy and Advocacy	3.0
NURSG 705	Organizational and Systems Leadership in Complex Healthcare Systems	3.0

Total **6.0**

Summer

NURSG 714	Educational Innovations	3.0
NURSG 721	Capstone Development	2.0

Total **5.0**

FALL

NURSG 723	Capstone Presentation	1.0
NURSG 730	Capstone Residency	5.0

Total **6.0**

Total for DNP **36 units**

COURSE DESCRIPTIONS

LOWER DIVISION (COURSES NUMBER 0-99)

BSCI 015/016

Human Anatomy

(4 units)

A preparatory course in anatomy for undergraduates, in which structure/function relationships and relevant physiological mechanisms are interwoven in a detailed study of the human body. Both systemic and regional anatomy will be examined using pre-dissected human cadavers. Special emphasis is given to positional relationships of musculoskeletal structures and neurovascular elements, their corresponding functional roles in human activity, and the clinical implications of anatomical dysfunction. Major physiological mechanisms will be examined that relate to the functions of musculoskeletal and neural tissues, and to the control of cardiovascular, respiratory, gastro-intestinal, urinary, and reproductive systems. (3 units lecture, 1 unit lab)

BSCI 025/026

Human Physiology

(4 units)

The study of the structure and function of the human body with emphasis on physico-chemical considerations and clinical laboratory approaches. Observation and measurement of the behavior of the human body on a cellular and organ system level using both real life examples and computer simulated models. The concept of homeostasis and its philosophical relationship with health and disease is emphasized throughout the course. Students are presented with a multi-system approach to discussing specific physiologic entities such as blood pressure or blood glucose regulation. Lab exercises are designed to further emphasize or explore the physiological concepts presented as part of the lecture. (3 units lecture, 1 unit lab)

UPPER DIVISION (COURSES NUMBER 100-199)

GENED 101

Foundations of Death, Dying and Bereavement

(3 units)

This general education course will provide a broad, interdisciplinary introduction to the essential topics and core knowledge – both classical and contemporary – that underlie death-related counseling and education. It will provide a basis for the student's personal growth and responsible social participation. It is intended to enhance the students' awareness of their life goals and priorities. Further the course will contribute to the education of those who through their professional career choice will be closely associated with people who are in the dying process. There will be an emphasis on developing cultural sensitivity related to the topics discussed. The students will examine and assess the following topics: infant deaths, childhood deaths, suicide, homicide, end-of-life legal issues, ethical issues, the funeral industry, bereavement and family considerations.

GENED 102

Drugs and Society

(3 units)

This general education course will provide a broad, interdisciplinary introduction to the abuse of drugs in the society. The intent is to help students from a variety of disciplines develop a realistic perspective of drug-related problems. It will provide current information and perspectives on the following critical issues: social and psychological reasons why drug use and abuse occurs; the results of drug use and abuse; how to prevent drug use and abuse. The most current information on drug abuse research, policy making and implementation will be discussed.

GENED 103

Sociological Inquiry

(3 units)

This class is designed to enhance students' skills in sociological thinking and analyzing the social world around us. At the end of the semester not only will the students have a clear understanding of what it means to have a sociologically informed world-view, but also they will have developed their own powers of critical reasoning and thinking through a reading schedule that covers a broad array of topics. The hope is that students will leave the class with a renewed appreciation of the discipline of sociology and the transformative potentials it holds in the making of a more just and equitable society.

GENED 104

The Global Implications of Genetics and Genomics

(3 units)

Advances in genetic and genomic health present both incredible opportunities and significant challenges for healthcare practitioners and society in general. Application of new research discoveries in this area compel individuals to address ethical, legal and social implications (ELSI) as well as health policy concerns for the consumer, the practitioner and those involved in healthcare delivery and allocation of resources. This course will employ lecture, discussion, group discussion, multi-media presentation and written and oral application to explore these issues related to genetics and genomics. Content includes evaluation of knowledge and attitudes about genetics and genomics; educational interventions to enhance genetic literacy; ethical, legal, social and policy issues related to genetics and genomics and emerging technologies (such as direct to consumer marketing of genetic tests, pharmacogenomics and epigenetics). The course content will be enriched by incorporating popular press and media in application assignments.

NURSG 108

Nursing Research: Using Best Practices and Evidence to Improve Clinical Outcomes

(2 units)

This course is designed to introduce nursing research and evidence-based practice as it relates to achieving clinical outcomes. The student will learn to use nursing research and the collection of evidence as a systematic process to inform practice and make clinical judgments. Students will learn to critically analyze research and understand how to utilize findings for evidence based practice. ABSN Prerequisites: NURSG 128; NURSG 136. BSN Prerequisite: NURSG 137.

NURSG 118**Pharmacology****(3 units)**

This course introduces the student to essential concepts in pharmacology for nursing practice. The course will focus on drug administration, legal issues, the major pharmacologic drug classes, practical information used in assessing patient response, medication side effects, and key patient education components. Prerequisite: Admission to the BSN program.

NURSG 119**Pathophysiology****(3 units)**

In this course the student explores the continuum of health from wellness to death. Emphasis is placed on the mechanisms by which disease occurs and/or body systems fail. Students will examine pathophysiologic phenomena occurring in diverse populations across the life span. Prerequisites: Physiology, and Microbiology

NURSG 120**Managing Care of the Adult and Clinical Integration Seminar****(5 units)**

Building upon the learner's previous knowledge, this course utilizes the nursing process to integrate theory with practice in promoting an individual's achievement of optimal health. Particular emphasis is placed upon the concept of wholeness, referring to the constant interactions of an individual's biological, emotional, sociocultural, spiritual, and environmental dimensions. Students will expand their knowledge of core competencies such as critical thinking, effective communication, ethics, diversity, professionalism, leadership, information management and an appreciation for the global environment in which health care is provided. The students will develop nursing psychomotor skills to provide competent and safe care in a variety of settings. Prerequisites: NURSG 137 or NURSG 138; NURSG 119; NURSG 125. Corequisite: NURSG 118. (2 units theory, 3 units clinical)

NURSG 125**Health Assessment I****(2.5-4 units)**

Using principles of effective communication and the concepts of nursing, environment, person, and health, the student develops skill in performing health assessment of well individuals throughout the lifespan from infancy to older adults. The course introduces the student to the nursing process, communication and interviewing techniques, health assessment, data collection for the nursing history, and accurate and concise documentation of findings. Pre-requisite: Admission to the ABSN or BSN program (BSN: 3 units lecture, 1 unit lab; ABSN: 1.5 units lecture, 1.0 unit lab)

NURSG 126**Health Assessment II****(2.5 units)**

Introducing principles of health promotion and health teaching and building upon principles of basic health assessment, the students will continue to develop health assessment techniques on individuals within a continuum of health care settings. Assessment also includes understanding the family, community, or population and utilizing data from organizations and systems in planning and delivering care. Pre-requisites: NURSG 125, NURSG 138 (1.5 units lecture, 1.0 unit lab)

NURSG 127**Managing Care of the Adults I-II****(10 units)**

This course focuses upon both caring for and caring about the adult client. Building upon the learner's previous knowledge, the course utilizes the nursing process in providing opportunity to integrate theory with a focus on nursing interventions directed towards protection, promotion, maintenance, and restoration of the health of patients and their human responses to both chronic and acute illness. Particular emphasis is placed upon the concept of wholeness, referring to the constant interactions of an individual's biophysical, emotional, socio-cultural, spiritual, and environmental dimensions. By applying the Nursing Process, the baccalaureate prepared student nurse continues to distinguish the health care needs of the adult patient within the context of the family constellation and the community. Theory content for this nursing course addresses selected areas of health alterations that beginning and intermediate nursing student will likely encounter in the clinical setting. The course content is designed to assist the learner in knowledge development of core competencies such as critical thinking, effective communication, ethics, diversity, professionalism, leadership, information management, and an appreciation for the global environment in which health care is provided. Prerequisites: NURSG 137; NURSG 119; NURSG 125, NURSG 129. Corequisites: NURSG 118, NURSG 128.

NURSG 128**Healthy Aging****(2 units)**

This course builds on prior learning experiences to facilitate caring for the older adult client. This course introduces students to the biopsychosocial, cultural, ethnogeriatric, and political concepts of aging. The student applies knowledge of the nursing process, human development, theories of aging, evidence based practice and environmental factors to promote the client's achievement of an optimal level of health and functioning across a continuum of health care settings. ABSN Prerequisites: NURSG 120; NURSG 126. BSN Prerequisites: NURSG 137, NURSG 119, NURSG 125, NURSG 129. Must be taken concurrently with NURSG 118, NURSG 120, and NURSG 136.

NURSG 129**Psychiatric/Mental Health Nursing (5 units)**

This course focuses on the application of psychiatric/mental health nursing concepts to the care of individuals, families, groups and communities. Within a therapeutic, interactive relationship the student assesses the client's mental health needs. Emphasis is placed on the application of concepts of communication. Theories of mental health will be explored. These theories are selectively integrated with concepts of mental health nursing in the care of clients in a variety of settings from the most restrictive to the least restrictive. Intensive experience will be offered in one clinical setting and in various community settings. Prerequisite: Admission to the BSN program. (2 units lecture, 3 units clinical)

NURSG 136**Managing Care of Adults II and Clinical Integration Seminar (5 units)**

The course builds on prior knowledge and learning experiences of the students. It focuses on nursing interventions directed towards, protection, promotion, maintenance, and restoration of the health of patients and their human responses to both acute and chronic illness. Through application of the Nursing Process, the baccalaureate prepared student nurse continues to distinguish the health care needs of the adult patient within the context of the family constellation and the community. ABSN Prerequisites: NURSG 120; NURSG126. (2 units lecture, 3 units clinical)

NURSG 137**Introduction to Professional Nursing (3 units)**

This course is an introduction to the role of the professional Registered Nurse, and the concepts of person, health, and environment. Students will consider aspects of professional practice including legal scope of practice, concepts of decision making, evidence-base for practice; and transfer of knowledge. The student will develop a beginning appreciation of how culture influences the expectations of persons and their rights and responsibilities in the healthcare system. This course introduces students to critical thinking and bioethics, and provides opportunity to examine the ethical issues facing professional nurses and the health care delivery system.

NURSG 138**Introduction to Professional Nursing and the Health Care Delivery System (2 units)**

Introduction to the health care system, nursing as a profession, and the concepts of health, illness and environment. Cultural sensitivity, patient's rights and responsibilities, critical thinking, and ethical foundations are discussed. Students examine nursing history, paradigm, ethical cases, nursing as a caring science, holistic and allopathic approaches to healing, and values and ethical decision making models. Prerequisite: Admission to the ABSN program.

NURSG 144**Care of the Childbearing Family (5 units)**

Students examine and practice the nursing role with diverse families in all phases of the childbearing process with an emphasis on the changes occurring in the biological, personal and social systems. The health needs of the childbearing family are studied from the perspective of the concepts of health promotion and disease prevention. Clinical experiences are provided in hospital and community settings. Pre-requisites: NURSG 136. (2 units lecture, 3 units clinical)

NURSG 158**Nursing Care of Infants, Children and Youth Populations (5 units)**

Exploring the concepts of health and human development, and using the nursing process, students apply the nursing role in providing care to children from birth to young adulthood and to their families. Children's health problems are examined within the context of family, social and community systems, and interdisciplinary health care systems in primary, secondary, and tertiary care. Developmental differences in response to health promotion, screening and acute and chronic illnesses in community agencies and hospitals are emphasized. Students will provide nursing care to children and youth in a variety of healthcare settings. Prerequisites: NURSG 136. (2 units lecture, 3 units clinical)

NURSG 160**Nursing Leadership, Management, and Health Policy (3 units)**

This course is designed to assist students to explore management and leadership issues as they assume the professional role of registered nurse in a complex health care environment. Content focuses on organizational and systems leadership, quality improvement and safety while providing integrated, cost-effective care to clients by coordinating, supervising, and/or collaborating with members of the multi-disciplinary health care team. The role of the professional nurse as a leader and change agent shaping policy at the unit, organizational, local, state, and national levels is explored. The nature of politics of the work unit and the health care organization and role in advocating for improvements in patient care and nursing practice are analyzed. Students will have the opportunity to apply leadership and management theories and concepts to practice in the Senior Synthesis (NURSG 181/190) course. Course must be taken concurrently with NURSG 181 or NURSG 190. ABSN Prerequisites: NURSG 129; NURSG 170. BSN Prerequisites: NURSG 144, NURSG 158, NURSG 164.

NURSG 164**Managing Care of Adults III and Clinical Integration Seminar (5 units)**

This course builds on prior learning experiences to develop knowledge and skills used to facilitate culturally competent, holistic, patient-centered care for adults experiencing complex health variations. The integration of basic with

advanced knowledge in pathophysiology, pharmacology, communication concepts, and therapeutic interventions provides the foundation for the provision of safe, effective, evidence-based professional nursing care. Students will become increasingly competent in the application of nursing process, problem-solving and critical thinking as they provide nursing care based on evidence that contributes to safe and high quality patient outcomes within healthcare micro-systems. ABSN Prerequisites: NURSG 128; NURSG 136. BSN Prerequisites: NURSG 136. (2 units lecture; 3 units clinical)

NURSG 170
Community Health Nursing (5 units)

Community health nursing is a synthesis of the practice of two disciplines: Nursing and public health. This course focuses on the promotion and maintenance of the health of aggregates with the community as client, and uses principles, concepts, and theories from nursing and public health to promote the special needs of vulnerable populations across the lifespan. ABSN Prerequisites: NURSG 108; NURSG 144, NURSG 158, NURSG 164. BSN Prerequisites: NURSG 144, NURSG 158, NURSG 164. (2 units lecture, 3 units clinical)

NURSG 176
Home Health Nursing Elective (4 units)

This course will be offered for students who wish to practice within the home health arena. Content and learning experience will be focused on care of ethnically diverse clients within their home, working with the interdisciplinary team and utilization of community resources. Students will be placed with preceptors for their clinical experience. Prerequisites: NURSG 164; NURSG 158 (2 units lecture, 2 units clinical)

NURSG 178L
Rural Health Nursing Elective (4 units)

This course is offered in conjunction with the Rural California Nursing Preceptorship Program. Designed to provide senior students with a planned opportunity to experience clinical nursing in a rural setting. This program coordinates placement of students in hospital and health care facilities and arranges low-cost room and board placement. Prerequisites: NURSG 164 required for critical care placements; NURSG 144 required for perinatal placements. (4 units clinical)

NURSG 180
Basic Dysrhythmia Analysis and Management (2 units)

NURSG 180 facilitates development of the learner's knowledge and skills in basic cardiac dysrhythmia interpretation and management. Emphasis is placed on causes and hemodynamic effects of rhythm disorders, clinical assessment parameters, and nursing care of the patient. Concepts are reinforced through specific application to simulated client situations. The simulated situations assist the learner in the development of analytical thinking and synthesis of course content.

NURSG 181L
Senior Synthesis (3 units)

This course is designed to assist the learner in using critical thinking, ethical reasoning and clinical judgment in synthesizing nursing theory/knowledge and nursing therapeutics into nursing practice. The learner will have an opportunity to focus on a selected area of nursing practice while providing quality care which maintains the safety of the patient. Through the use of the nursing process, the learner will provide culturally sensitive nursing care to diverse clients. This care will be increasingly self-directed, independent, creative and based on evidence. The learner will apply leadership and management principles to the clinical practice setting to further develop his/her understanding of the professional nursing role. Prerequisites: NURSG 129; NURSG 170. Must be taken concurrently with NURSG 160.

NURSG 190L
Senior Synthesis (6 units)

This course assists the student in synthesizing nursing theory, knowledge and nursing therapeutics in his/her selected area of clinical practice. The student will provide nursing care that is increasingly self-directed and independent. Application of leadership and management principles will also be incorporated in the clinical setting. Prerequisites: NURSG 144, NURSG 158, NURSG 164 (must be taken concurrently with NURSG 160). (6 clinical units)

NURSG 191L
Nursing Work Study

The work-study option provides the student with an opportunity for guided clinical practice of previously acquired nursing theory and skills in a variety of clinical settings. Working under the direct supervision of an RN preceptor employed by the clinical agency, the student plans, implements, and evaluates nursing care for a selected group of clients. The student works closely with the preceptor and a faculty representative to meet individualized learning objectives. Prerequisite: senior standing (1-4 units clinical)

NURSG 192
International Nursing Elective (4 units)

A course focusing on nursing and health care in the global environment. Content and learning experience may relate to the study of nursing and health care in one or more communities/countries outside the continental USA. Clinical experiences are designed to increase the student's knowledge of aggregate health care and nursing problems in foreign countries and to improve the student's ability to provide care to diverse clients in these settings. Prerequisite: senior standing

GRADUATE COURSES

(Lab courses denoted with an L.)

NURSG 500

Transition to Professional Role of Nursing (2 units)

This course is an introduction to the healthcare system, concepts of person, nursing, health, illness, and environment. Using a model of professional practice, history, and transition theory, the student develops a beginning knowledge of the RN role in contemporary society. Concepts of caring, ethics, the influence of culture on health, and wellness, and critical thinking techniques pertinent to the professional nurse will be explored. This course will also explore the history of nursing and how it shapes nursing as a scholarly discipline that defines practice. The focus of the historical review will be on how history continues to influence the future of nursing.

NURSG 520

Integration of Basic Principles of Pathophysiology and Pharmacology (5 units)

This course introduces and integrates general principles of pharmacology and pathophysiological phenomena. It explores the relationship of these two foundational sciences to the science of nursing. Placing emphasis on the mechanisms by which disease occurs and/or body systems fail and the nursing and pharmacological management of the disease process. Using the foundation of professional role and the process of clinical reasoning to make a decision, the RN's role in medical management and decision-making is explored.

NURSG 524/524L

Health Assessment (3 units)

Using principles of effective communication and the concepts of nursing, environment, person, and health, the student develops skill in performing health assessment of well individuals throughout the lifespan from infancy to older adults. The course introduces the student to the nursing process, communication and interviewing techniques, health assessment, data collection for the nursing history, and accurate and concise documentation of findings.

NURSG 534/534L

Psychiatric/Mental Health Nursing (5 units)

This course focuses on the application of psychiatric/mental health nursing concepts to the care of individuals, families, groups and communities. Within a therapeutic, interactive relationship, the student assesses the patient's and family's mental health needs and works with them to develop a plan that supports their desired health outcomes. Emphasis is placed on the application of concepts of communication and its use in shaping the individuals/families narrative as it relates to their health needs. Current theories of mental illness and treatment will be explored. Utilizing the individual/family narrative, theories are then selectively integrated into mental health nursing care. A variety of patient care settings are selected during the clinical portion in order to provide an opportunity for the student to relate theory to practice. The initial five weeks of clinical will be utilized to introduce the student to various communication approaches in order to help the student develop the basic skills needed to effectively communicate in a variety of settings. Therapeutic communication, motivational interviewing, lateral violence and professional communication, de-escalation and group will be central concepts in this portion of the course. (2 units lecture, 3 units clinical)

NURSG 540/540L

Reproductive Health Care (5 units)

Students examine and practice the nursing role with diverse families in all phases of the childbearing process with an emphasis on the changes occurring in the biological, personal and social systems. The health needs of the childbearing family are studied from the perspective of the concepts of health promotion and disease prevention. Clinical experiences are provided in hospital and community settings. Prerequisites: NURSG 520; NURSG 524/524L; NURSG 534/534L; NURSG 542L; NURSG 543L; NURSG 546/546L (2 units lecture, 3 units clinical)

NURSG 542L and NURSG 543L

Nursing Skills I and II (1 unit each)

The courses NURSG 542 and NURSG 543 provide the student with theory and practice of skills inherent in the professional nursing role. The student will learn to make informed decisions by utilizing inquiry, information technology and analysis in the application of evidence based nursing and clinical reasoning. Incorporating the concepts learned from the sciences into the nursing process, the student is accountable for demonstrating beginning competence with the following: medication administration via a variety of routes, dosage calculation, maintenance of a safe and hygienic environment, attention to correctly and safely mobilizing clients, assessment and management of acute pain, dressings and wound care, promoting gastrointestinal function, intubation

and maintenance, oral and enteral feeding measures, capillary blood glucose monitoring, urinary catheterization and care. Skills acquisition is presented within the context of the professional nursing role with the student held accountable for demonstrating comprehension of basic principles of teaching/learning, nursing documentation and medical and surgical asepsis.

NURSG 546/546L
Nursing Care of Adults and Older Adults (10 units)

This course builds on previous course work to promote nursing care for adults and older adults within an interdisciplinary team. The focus is on health promotion, disease prevention, maintenance and restoration of health in individuals who are healthy and those responding to acute and chronic illness across the life span. The student applies knowledge of the nursing process, human development and environmental factors to provide care to adults and older adults within a family support network. The student continues in building their knowledge about the professional role of RN's, exploring leadership, outcome management, and decision making in diverse population of the acutely ill hospitalized patient. Prerequisites: NURSG 520; NURSG 524/524L; NURSG 534/534L; NURSG 542L (4 units lecture, 6 units clinical)

NURSG 550
Nurses as Consumers of Research (2 units)

This course is designed to enhance student understanding of different types of research. By building on concepts of and utilizing tools of critical thinking, students will read a variety of research articles from selected disciplines. Nurse and other theorists will be explored in their relation to their contribution to research. The focus of the course is on developing an appreciation for research as a foundation for evidence based practice. By the end of this course, the student will have gained a deeper understanding of the integration among research, theory, evidence, and practice. This course lays foundational work for their graduate level research course. Co-requisites: NURSG 546-546L, NURSG 562

NURSG 556/556L
Nursing Care of Pediatric and Youth Populations (5 units)

Exploring the concepts of health and human development, and using the nursing process, students apply the nursing role in providing care to children from birth to young adulthood and to their families. Children's health problems are examined within the context of family, social and community systems, and interdisciplinary health care systems in primary, secondary, and tertiary care. Developmental differences related to screening, health promotion, and acute and chronic illnesses in community agencies and hospitals are emphasized. Prerequisites: NURSG 520; NURSG 524/524L; NURSG 534/534L; NURSG 542L; NURSG 543L; NURSG 546/546L (2 units lecture, 3 units clinical)

NURSG 560
Leadership, Management and Organizational Behavior in Health Care Delivery Systems (3 units)

This course is designed to assist the learner in developing as a professional nurse by investigating leadership, management and organizational theories and principles. The learner studies the leadership role, communication styles, and management characteristics within health care organizations, and explores patterns of decision-making, and concepts of change and innovation. The focus is to provide the learner with knowledge of and preparation for the first leadership and management position. Prerequisites: NURSG 556/556L; NURSG 566/566L. NURSG 560 must be taken concurrently with NURSG 594L.

NURSG 562
Professional, Legal & Ethical Issues (3 units)

This survey course is designed to acquaint you with major professional, legal and ethical concerns within the health care field and the nursing profession. The course is also intended to serve as a catalyst for continuing examination of your professional status in this changing world where, despite good intentions, professional, legal and ethical problems can and do arise. Prerequisites: NURSG 534/534L; NURSG 562 must be taken concurrently with NURSG 546/546L.

NURSG 566/566L
Nursing Care of Critically Ill Adults (5 units)

Care of adults with complex variations in health care patterns. Students integrate knowledge of pathophysiology, diagnostics, pharmacology, therapeutic interventions, and communication concepts as applied to the care of medical and surgical clients from a variety of ethnic backgrounds. Focus on increasing competence in the application of the nursing process, research, problem-solving, and critical thinking. A variety of health care settings will be used, including acute and critical care facilities. Prerequisites: NURSG 518; NURSG 519; NURSG 524/524L; NURSG 534/534L; NURSG 542L; NURSG 543L; NURSG 546/546L (2 units lecture, 3 units clinical)

NURSG 570/570L
Community Health Nursing (5 units)

Community Health is a synthesis of the practice of two disciplines: public health and nursing. This course focuses on the promotion and maintenance of health in selected settings with the culturally diverse families and the community as the units of analysis. Prerequisites: NURSG 534/534L; NURSG 540/540L; NURSG 546/546L; NURSG 556/556L; NURSG 566/566L (2 units theory, 3 units clinical)

NURSG 594L**Clinical Internship****(5 Units)**

This course will assist the student in synthesizing nursing theory/knowledge and nursing therapeutics in his/her nursing practice. The student will focus on a selected area of general nursing practice. Modeling care on based on the nursing process, the student will provide culturally sensitive nursing care that is increasingly self-directed, independent and creative. The student will apply leadership, professional, and management principles to the clinical practice setting to enhance understanding of the professional RN role and prepare for entry into the novice level of practice. Prerequisites: NURSG 534/534L; NURSG 542L; NURSG 543L; NURSG 546/546L; NURSG 540/540L; NURSG 556/556L; NURSG 566/566L. NURSG 560 must be taken concurrently. (5 units lab)

NURSG 600**Theoretical Foundations for Health Professionals (3 units)**

This course will introduce the structure and functions of theory within the sciences, the humanities, and the health care disciplines. Theory development will be examined in relation to major philosophical positions on knowledge development. The interrelationship among theory, research, and practice will be explored. Examples of prototypical theories will be used to demonstrate the structure and functions of theory and applications to real world settings. Further, selected discipline-specific and common substantive theories will be discussed.

NURSG 601**Research Methods****(3 units)**

This course presents an overview of the research process, with emphasis on using the scientific method to identify and investigate problems in clinical practice. Major topic areas include: types of research approaches, formulation of research problems and hypothesis/research questions, preparing a literature review including theoretical/conceptual framework, study designs and selecting a research method, sampling, measurement of variables, and data collection and analysis.

NURSG 602**Analysis of Health Policy Issues****(3 units)**

This course focuses on political structures, the political process, and development of health care policy. The course begins with an overview of the health care system as shaped by cultural and societal values, perceived purposes of health care, and modern technology. Attention will be given to issues of economics, finance, regulatory systems, and social justice for consumer groups.

NURSG 603**Epidemiology and Biostatistics****(3 units)**

This course presents an introduction to the principles, methods, and uses of epidemiology in determining the distribution of populations at high risk, surveillance of health status, and planning and evaluation of health services. The course focuses on determining the relevance of the findings of epidemiological studies to clinical practice of individuals, families, and communities.

NURSG 604**Foundations of Education****(3 units)**

Basic educational principles, methods, and theories applied to the role of a clinical specialist. Students will be asked to examine critically their current conceptions and understandings of academic and clinical education in light of education and behavioral theories and future trends in health care, the professions, and professional education. Topics include philosophical perspectives in education, use of educational technology and tools, analysis and application of learning theories across the life span, and evaluation and assessment strategies.

SYNTHESIS REQUIREMENT

The synthesis project is the final degree requirement for the MSN degree. This requirement is designed to provide the student with an opportunity to apply new knowledge and insight from graduate education in the completion of a thesis or special project. While there are various options from which a student can choose to demonstrate the Program Learning Outcomes (PLOs) objectives of the master's degree program, all of the options include the expectation that the student will be able to effectively articulate ideas in writing, use primary and secondary library and information sources, and produce the quality of work that can withstand peer review.

SYNTHESIS OPTIONS**NURSG 605****Thesis****(3 units)**

A thesis is a written report of a research study conducted under the guidance of and in keeping with the expertise of a faculty member with an established research agenda. A student desiring this option should declare this intention no later than the second semester of enrollment in order to ensure that a faculty advisor is formally assigned to provide early direction on the research project. Three semester units of credit are awarded upon successful completion of the thesis.

NURSG 606**Special Project****(3 units)**

The special project may take one of three forms: (a) Preparation of a scholarly paper for publication in concert with a faculty member. This assignment, which requires considerable student initiative, will include participation in the development of a topic, literature review, data collection and analysis as appropriate, and preparation of a scholarly paper for publication. (b) Preparation of a scholarly report on the implementation of a major health program or instructional innovation designed to improve health care to high-risk populations in the community. Such a project is the culmination of work initiated in the core theory and clinical courses in the student's area of concentration. (c) Completion of a comprehensive exam specific to the student's clinical specialty. The format, content and timing of administration of this exam vary with each of the MSN program tracks. Refer to the MSN

Synthesis Guidelines of the School of Nursing and program-specific documents for these details. Other scholarly projects are possible by arrangement. Three semester units of credit are awarded upon successful completion of the special project.

NURSG 607
Program Evaluation and Quality Improvement (3 units)

This course focuses on methodology for successful evaluation of health care programs, including comparative analysis of program purposes, cost-benefit analysis, and cost-effectiveness. A conceptual framework for quality improvement is presented and techniques for establishment of comprehensive quality improvement programs in a variety of settings are analyzed.

NURSG 608
Organizational Behavior in Health Care Delivery Systems (3 units)

This course begins with an overview of organizations, foundations and elements of organizational theory, and elements of organizational functioning in health care settings. The student studies the executive leadership role, communication, leadership and management characteristics within organizations, patterns of decision-making and concepts of change, and innovation relative to health care organizations.

NURSG 609
Health Care Economics (3 units)

This course is designed to provide a critical analysis of economic theories and public and private financing of health care. The effects of financial and reimbursement mechanisms on health care delivery systems are explored. The impact of current reimbursement patterns on nursing and professional practice, individuals, and families are discussed and critiqued.

NURSG 610
Financial Management (3 units)

This course presents the basic components of financial and management accounting as they apply to health care settings. The budget process is presented, including operating and capital budget preparation, budget management and control, and the use of variance reports. Managerial decisions are made by students based on analysis of case-study presentations.

NURSG 611
Personal Leadership Development (3 units)

This course focuses on personal leadership style and factors related to enhancing leadership effectiveness. Content covers leadership principles, visioning, creating a positive work climate, planning and implementing change, communication, working with groups using participative group process tools, and dealing with difficult people or situations. The course uses personal style assessments and outside projects to achieve personal application of concepts.

NURSG 612 Health Care Finance (3 units)

This course investigates the mechanisms by which health care is financed and health care providers are compensated in the United States. The effects of financing and reimbursement mechanisms on health care delivery systems, health care organizations, health care providers, and the patient are explored. Both public and private mechanisms of financing will be analyzed. The impact of current reimbursement patterns on health care delivery, professional practice, and the health care consumer are discussed and critiqued.

NURSG 613
Curriculum Design (3 units)

In this course, curriculum development in professional education is explored with emphasis on contemporary theories of and processes for various designs. Includes review of classical and current literature for planning, implementing, and assessing curricular plans. Principles can be applied to consumer and continuing education programs as well as degree programs.

NURSG 614
Methods of Teaching and Evaluation (3 units)

This course includes development, implementation, and evaluation of educational learning experiences based on adult learning theories. This course includes review of contemporary literature in the area of adult learning theory, teaching and learning methods, and assessment/evaluation methods for traditional and nontraditional education programs. Students will have the opportunity to practice a variety of teaching methods.

NURSG 615L
Clinical Practicum (3 units)

Guided clinical learning experiences provided in settings with clinical specialists as preceptors. Individual arrangements may be made with clinical centers in the student's geographic location. This course is designed to facilitate a higher level of clinical competence.

NURSG 616
Research Practicum (3 units)

This course includes supervised research experiences in an established research setting. Opportunities to participate in ongoing studies and for mentoring are provided.

NURSG 617
Teaching Practicum (3 units)

This course is designed to provide structured opportunities for students to engage in academic or clinical teaching. Individual arrangements with clinical centers and academic programs are made to facilitate development of competence in planning, teaching, and evaluating student learning.

NURSG 618**Multicultural Health Care****(3 units)**

Focuses on global awareness as a conduit to providing culturally sensitive care. Cultural relativism, human diversity in the meaning of health and illness, and the similarities and differences in the expectations, wants, and needs of the community and provider are explored and analyzed. Interdisciplinary care aimed at ways to bridge the health gap existing in the community are developed and applied. A developmental approach is used to compare cultural practices and expectations throughout the life cycle, especially during significant life change events. Topics include adaptation to chronic illness, expression of pain, culturally relevant care in acute care, and cross-cultural differences in mental health and family health care. Specific cultural groups covered would be representative of the demographic patterning of the community surrounding Samuel Merritt University. Prerequisite: senior or graduate standing

NURSG 619**Advanced Pathophysiology****(3 units)**

This is a course which builds on prior knowledge of anatomy, physiology, and pathophysiology. The major focus of the course is the exploration of current theory and research related to pathophysiological processes as applied to commonly encountered problems in family-oriented primary care practice, including physiological and mental health disorders. The course includes a life-span perspective, with content relevant to perinatal, pediatric, adult, and geriatric clients. Application of content to the care of diverse multicultural populations is emphasized. Prerequisite: graduate status

NURSG 620/620L**Case Management****(6-8 units)**

The course provides an overview of the health care delivery system and managed care systems as part of the delivery system. Health care organizational theory and structure, economics of health care, systems management, and ethical and legal issues are discussed in relation to managed care. Interdisciplinary collaboration and the role of nursing on the health care team and in managed care systems are examined. The clinical experience provides the student with an opportunity to apply theories and concepts to a select group of clients. Prerequisites: Licensure as a registered nurse; NURSG 612; NURSG 603 or NURSG 607; and completion of at least 12 units of graduate coursework (NURSG 600 and above courses). (3 units lecture, 3-5 units clinical)

NURSG 621L**Case Management Clinical Practice and Seminar****(3 units)**

The clinical focus course provides students the opportunity to expand skills in the delivery of nursing care within a managed care/case management framework to a population of interest. The seminar component of the course will allow

students to share insights into their developing roles. (3 units clinical: 8 hours practice, 1 hour seminar/week)

NURSG 622**Interpreting Healthcare in a Global World****(1 unit)**

This course explores primary healthcare as well being in the context of globalization in an international setting. The influences of history, tradition, culture, and language, are examined from an interpretive postmodern perspective. A service and learning tour in Southeast Asian village settings is used as a medium to develop new understandings concerning notions of care, ethical action, and identity based on the critical hermeneutics of Paul Ricoeur and Richard Kearney. In addition to the travel experience, course activities include reading, discussion and a trip journal.

NURSG 623/623L**Advanced Health Assessment for Nurse Case Managers****(3 units)**

This course focuses on the strategies and skills needed to assess individuals throughout the life span in a case management setting. The expected outcome is competency in advanced health assessment as a Nurse Case Manager. The analysis of assessment data, based on developmental and ethnic variation, is integrated into the case management clinical decision making process.

Advanced health/physical assessment includes the comprehensive history, physical and psychological assessment of signs and symptoms, pathophysiologic changes, and psychosocial variations of the client: the individual, family, or community. If the client is an individual, the assessment should occur within the context of the family and community and should incorporate cultural and developmental variations and needs of the client. The purpose of this comprehensive assessment is to develop a thorough understanding of the client in order to determine appropriate and effective health care including health promotion strategies. (2 units lecture, 1 unit lab)

NURSG 624**Advanced Pathophysiology for Nurse Case Managers****(2 units)**

This course provides the theoretical framework for understanding disease processes and physiological aberrations in all ages, including chronic illness and population health. Emphasis will be placed on the application of pathophysiology in the identification of common disease processes, clinical syndromes, and the trajectory and management of illness throughout a lifespan.

NURSG 625**Advanced Pharmacological Management for Nurse Case Managers****(2 units)**

The focus of advanced pharmacological management for nurse case managers is clinical therapeutics, and it builds

on prior knowledge of drug classifications, actions, interactions and side effects. The course concentrates learning on medications that are used in case management practice. Emphasis is placed on learning the clinical use of drugs in the management of specific illnesses throughout a lifespan; to include therapeutic dosages, clinical endpoints, patient monitoring plans and patient education.

Health-related information and medication compliance issues are of foremost concern throughout the course. This course builds on a sound foundation of pharmacology to facilitate comprehensive disease management.

NURSG 626 Theoretical Foundations of Advanced Practice Nursing (3 units)

This course explores the integration of contemporary theories with advance practice nursing. Learners will analyze selected theoretical frameworks and their application to modern day clinical practice. Foundational theories specific to the domains of informatics, patient safety and ethics, along with biopsychosocial model will be covered in this course, with interprofessional education and collaboration as a consistent conceptual theme. Emphasis will be placed on exploration of the substantive ideas being introduced and debated by health care thought leaders. The intent is to provide a solid knowledge base in aforementioned domains for subsequent learning activities in either nursing anesthesia or nurse practitioner program curriculum.

NURSG 649/649L Advanced Health Assessment—Nurse Anesthesia (3 units)

This course focuses on the refinement of skills and strategies required to assess individuals throughout the life span in preparation for the range of anesthesia patient services provided in acute care settings. The expected outcome is competency in the cognitive, psychomotor, and interpersonal skills required of nurse anesthetists to complete thorough patient assessments pre- and post- anesthetic procedures, and to develop a sound, evidence-based anesthetic plan. Analysis of the physical assessment data takes into account developmental and cultural patient variations, as well as the systems variations of acute care hospitals. Emphasis is placed on integration of assessment data in the clinical decision making process. Simulation-based methodologies (SBM) are heavily integrated into the course.

NURSG 651/651L Principles of Anesthesia I (4 units)

Lecture and seminar discussions introducing the basic principles of anesthesia practice. Includes historical perspectives of the profession, standards of practice, anesthesia assessment and monitoring principles, fundamental technical skills (airway management, use of essential anesthesia equipment) case planning protocols, and strategies for interventions and problem-solving throughout the perioperative period. Laboratory sessions, including the use of an anesthesia patient simulator, are designed to operationalize theoretical concepts. Co-requisite: SMILE. (3 units lecture, 1 unit lab)

NURSG 652 Advanced Pharmacology I (4 units)

First course in a series of two that focuses on advanced pharmacological concepts in anesthetic administration including pharmacodynamics, pharmacokinetics and toxicology profiles of primary anesthetic agents. Problem-solving applications in the clinical area are utilized.

NURSG 653 Advanced Pathophysiology (3 units)

Lecture and discussion of pathologic states common to the surgical population which may affect in some substantial way the delivery of anesthesia. Content will be focused on primary disease processes, common therapies, and their relation to perioperative planning and case management.

NURSG 654 Advanced Pharmacology II (3 units)

Second course in a series of two courses that focuses on advanced pharmacological concepts in anesthetic administration including pharmacodynamic, pharmacokinetic, and toxicology profiles of adjunct anesthetic drugs and agents. Problem-solving applications in the clinical area are utilized.

NURSG 655/655L Principles of Anesthesia II (6 units)

Lecture and seminar discussion in the study of the anesthetic implications of common and complex patient comorbidities (anemia, endocrine disorders, diabetes mellitus, morbid obesity, immunologic and mental disease) through the lifespan (pediatric through geriatric) and management of selected surgical procedures. Focus is on the procedural requirements of the surgeries, equipment used for anesthesia and surgery, and the appropriate anesthetic techniques and strategies, taking into account the patient's comorbidities including age related needs (and all other relevant facets of the perioperative setting). Advanced technical skills (regional anesthesia, difficult airway management, invasive monitoring) are covered in simulated sessions (laboratory) which also utilizes the anesthesia patient simulator to further operationalize theoretical and critical thinking concepts. (4 units lecture, 2 units lab)

NURSG 656L Clinical Anesthesia I (1 unit)

Supervised experiences in clinical anesthetic management of ASA class I and II patients involving all perioperative activities of general, regional and MAC cases. Case distribution and management will fulfill the requirements of the Council on Certification of Nurse Anesthetists (S/U).

NURSG 657/657L Human Anatomy and Physiology (5 units)

Lecture, laboratory, and discussion concerning functional activities of the living body in terms of both cellular and systemic functions. Content includes membrane characteristics and function, synaptic transmission, neurophysiology, cardiovascular function, respiratory mechanics, including

control and exchange, digestion, renal function, fluid regulation, and homeostasis. Gross anatomy includes study of head and neck, thorax, and plexus of the upper extremity. (3 units lecture, 2 units lab)

NURSG 658L
Clinical Anesthesia II (3 units)

Supervised experiences in clinical anesthetic management of ASA class I, II and III patients involving all perioperative activities of general, regional and MAC cases. Case distribution and management will fulfill the requirements of the Council on Certification of Nurse Anesthetists (S/U).

NURSG 659
Professional Aspects of Practice (3 units)

Course includes an analysis of the professional components of nurse anesthesia practice emphasizing ethical, social, legal, and regulatory responsibilities of the CRNA practitioner.

NURSG 660
Advanced Principles of Anesthesia I (4 units)

Integrated and comprehensive study of unique physiologic and pathologic states of primary body systems through the lifespan (prenatal to geriatric) related to the provision of anesthesia care to the patients undergoing complex vascular and thoracic procedures. Also includes comprehensive study of unique physiologic and pathologic states affecting anesthesia care to the high-risk obstetric patients.

NURSG 661L
Clinical Anesthesia III (2 units)

Supervised experiences in clinical anesthetic management of ASA I-IV classifications involving all perioperative activities of general and regional cases. Case distribution and management will fulfill the requirement of the Council on Certification of Nurse Anesthetists (S/U).

NURSG 662
Advanced Principles of Anesthesia II (3 units)

This course presents and explores an integrated and comprehensive approach to the unique physiologic and pathologic states of patients through the lifespan (neonatal through geriatric). Topics include anesthesia management of complex surgeries including the following: intracranial, extracranial, trauma, traumatic brain injury, cardiovascular, spinal, transplant and neuromuscular diseases. Areas of focus include the anesthesia management of multisystem disease states and management of their complications.

NURSG 663L
Clinical Anesthesia IV (3 units)

Supervised experiences in clinical anesthetic management of specialty cases involving high-risk obstetrics, neonates, and pediatrics, neurology, and cardiothoracic. Case distribution and management will fulfill the requirement of the Council on Certification of Nurse Anesthetists (S/U).

NURSG 664L
Clinical Anesthesia V (3 units)

Supervised experiences in clinical anesthetic management or specialty cases involving pain management, respiratory/critical care, and other Council on Accreditation requirements for advanced specialty practice. Case distribution and management will fulfill the requirement of the Council on Certification of Nurse Anesthetists (S/U).

NURSG 665L
Clinical Anesthesia VI (1 unit)

Supervised experiences in clinical anesthetic management of specialty cases involving advanced patient management techniques in medically complex cases involving multisystem disease. Case distribution and management will fulfill the requirement of the Council on Certification of Nurse Anesthetists (S/U).

NURSG 670
Family Centered Advanced Practice Nursing (2 units)

Healthcare in the 21st century requires APRNs to incorporate a broad set of concerns that influence health and family life. In this course global health and environmental justice are explored as pre-conditions for healthy families. The influences of culture, society, behavior, and human development on the health of families are explored. The course examines family-centered healthcare in relation to interprofessional collaboration, evidence based practice, quality improvement, and safety.

NURSG 671
Advanced Physical Assessment (2 units)

This course focuses on the strategies and skills needed to assess individuals throughout the life span in a family-oriented primary care setting with diverse populations. The expected outcome is advanced physical assessment competency appropriate for the primary care practice. Analysis of assessment data based on developmental and ethnic variation is included. The integration of assessment data in the clinical decision-making process is emphasized.

NURSG 671L**Advanced Physical Assessment Lab (1 unit)**

This lab course is taken concurrently with NURSG 671 that focuses on the strategies and skills needed to assess individuals throughout the life span in a family-oriented primary care setting with diverse populations. The expected outcome is advanced physical assessment competency appropriate for the primary care practice. Analysis of assessment data based on developmental and cultural variation is included. The integration of assessment data in the clinical decision making process is emphasized.

NURSG 672**Professional Role Development for Advanced Practice Nursing (1 unit)**

This course is an onsite/online hybrid seminar designed to introduce the APRN student to the role of the advanced practice nurse in the primary healthcare setting. The evolution of the role from an historical and legislative perspective is explored. Issues including the evolving scope of practice, key role competencies, and inter-professional collaboration are introduced. Each student will be expected to discuss his/her own philosophical/ethical framework for clinical practice. Using a case study approach the student will integrate a patient's cultural preferences, values, and health beliefs in a treatment plan. Prerequisite: Admission to the FNP program or consent of instructor.

NURSG 673**Professional Advocacy for Entry to the Advanced Practice Role (1 unit)**

This course is offered in the final semester of the FNP program and builds on NURSG 672, using an online hybrid format. The course is designed to socialize the graduating student to the role of a family nurse practitioner. Online modules and onsite seminars challenge students to explore the FNP scope of practice, prescribing regulations, and credentialing process as outlined in the Nurse Practice Act. Other topics discussed in the course include models for entrepreneurial practice, methods for negotiation of employment, and avenues for innovative leadership. The course will also explore methods for marketing the NP role to the general public as a high quality accessible alternative to current mainstream healthcare options. The student will graduate with an up-to-date e-portfolio that document achievement of NP core and population based competencies, professional achievements, and goals. Prerequisite: NURSG 672

NURSG 674**Health Protection, Promotion and Screening for Individuals, Families, and Communities (3 units)**

Collaborative inter-professional family-centered primary healthcare is influenced by 21st century innovations in technology, genetics, behavior/change theories, and environmental health. This course integrates these influences into the provision of healthcare services focused on health protection and promotion, disease prevention, and health screening

across the lifespan. Critical analysis of clinical strategies and interventions in health promotion and protection based on the evidence and relevant theoretical frameworks are included. The effects of social, cultural and developmental influences are emphasized. Prerequisites: NURSG 670, NURSG 671/671L, NURSG 619, NURSG 677

NURSG 675/675L**Care of Acute and Episodic Conditions (3 units)**

This course builds on NURSG 674 by focusing on the assessment, diagnosis, management, and patient education of common acute episodic illnesses across the lifespan. The course emphasizes evidence-based healthcare that is both patient-centered and provided in the context of a healthcare team. For each condition included the genetic, environmental, epidemiological, pathophysiological, cultural, and family implications are considered. Diagnostic reasoning/testing in primary care including radiology, laboratory, microbiology, advanced imaging, and EKG are identified for each condition along with considerations of access, cost, efficacy, and quality as essential elements in planning healthcare services. The role of the NP as patient advocate, the process of negotiating an individualized treatment plan, the patient's right to refuse care, safety, and privacy requirements are included. Prerequisites: NURSG 670, NURSG 601, NURSG 674, NURSG 677 (3 units lecture)

NURSG 675L**Care of Acute and Episodic Conditions Lab (1 unit)**

This lab course is taken concurrently with NURSG 675. Learning strategies include simulation-based case studies and skills lab hours. Skills lab sessions focus on common office procedures performed in the primary care setting and clinical case discussions. Emphasis will be placed on interpretation of laboratory and diagnostic results and evaluation and management of patients based on such results.

NURSG 676**Care of Chronic and Complex Conditions (3 units)**

Trends in healthcare include an aging population, multiple comorbidities, and increasing lifespan. Linked with these issues is a move to care for people in the community rather than in the acute care setting. The goal of this course is to identify and explore the care of persons with multiple co-morbidities including but not limited to diabetes, cardiovascular disease, rheumatologic, and pulmonary conditions. The focus of evaluation intervention and treatment emphasizes the importance of quality of life, normal aging, and the optimization of health status in persons with chronic illnesses. Prerequisite: NURSG 674, NURSG 675

NURSG 677**Advanced Pharmacology (3 units)**

This course in clinical pharmacotherapeutics builds on prior knowledge of drug classifications, prototypes within classifications, actions, interactions, and side effects. The major focus is on medications that are commonly prescribed in the

treatment and management of common acute and chronic illnesses in primary for patients across the lifespan. Emphasis is placed on safe and effective prescribing and supporting patient adherence. Legal considerations for furnishing controlled substances are also addressed. Prerequisite: Admission to the FNP program or consent of instructor

NURSG 678L
Clinical Practicum (2 units)

Healthcare is undergoing an information explosion. Implementation of new and evolving standards for practice addresses issues of patient safety, the use of culturally and linguistically appropriate services (CLAS), informatics, and healthcare that is both team-based and patient-centered. Moreover it is crucial that everyone involved in healthcare work together to improve both the health care system and the health of people through practice inquiry. In this course the learner is immersed in a variety of clinical settings and given the opportunity to apply these evolving standards in the provision of healthcare services. This clinical course is taken concurrently with NURSG 674 with an emphasis on health protection and promotion.

NURSG 679L
Clinical Practicum (6 units)

This course builds on NURSG 678L and continues to investigate healthcare services within the context of evolving standards for evidence-based practice. In this course the learner is immersed in a variety of clinical settings and given the opportunity to apply these evolving standards in the provision of healthcare services. This course emphasizes acute episodic healthcare conditions across the lifespan. This clinical course is taken concurrently with NURSG 675 with an emphasis on acute and episodic healthcare.

NURSG 680L
Internship (6 units)

This course builds on NURSG 678L and NURSG 679L by expanding the learner's focus to include the management of common complex chronic conditions. Again, in this course the learner is immersed in a variety of clinical settings and given the opportunity to apply the knowledge, skills, and attitudes to assess, diagnose, and develop a treatment plan across the lifespan. This clinical course is taken concurrently with NURSG 676 with an emphasis on chronic and complex healthcare problems. (6 units practicum)

NURSG 686
Health Care Informatics (3 units)

Using an interactive, evidenced-based learning methodology, this course provides participants with a broad-based introduction to healthcare informatics. Students explore application and functionality of information technology, develop skills in evaluation of systems interfaces and come to appreciate how a strong information technology infrastructure enhances healthcare systems performance and outcomes, quality process improvement, tracking, compliance, and strategic planning.

NURSG 697
Individual Independent Study (3 units)

Individual study with emphasis on special problems in health sciences (under the direction of faculty). Students may select areas of study which are related to their area of interest or future goals.

NURSG 698
Group Independent Study (3 units)

Groups of two or more collaborate in studies of special problems in health sciences (under the direction of faculty). Students may select areas related to their future research or clinical program.

NURSG 700
Evidence-Based Research Methods (3 units)

This course builds on the foundation of research methods to prepare students to integrate knowledge from interdisciplinary sources to solve practice problems and improve health outcomes for individuals and populations. Emphasis is on the critique of current research and translation of evidence into the best practices available according to the scientific literature as well as clinical practice guidelines. Discussions will focus on ethical issues in research, advanced critique of research design, methods, and outcomes, factors that might impede or facilitate evidence-based practice changes within health care systems; and strategies for successful implementation of evidence-based practice change within organizations.

NURSG 702
Advanced Health Policy and Advocacy (3 units)

The focus of this course is on critical analysis of health policy in support of strategic action and advocacy. The course will cover models of health policy analysis and economic, legal and ethical contexts and debates for decision-making and action. Students will partner with professional and/or community agencies to apply and evaluate health policy interventions.

NURSG 703
Epidemiology and Population Health (3 units)

This course examines the patterns of disease and health related problems in populations and the potential for health promotion and health service program to address health disparities. Students will apply epidemiological principles, concepts, and methodologies in their evaluation of health related data and research to selected populations. The course will provide the students with a foundation to develop an epidemiological overview of their population of interest. Pre-requisite: statistics

NURSG 704
Biostatistics (3 units)

This course provides a deeper understanding of statistical concepts and analytical methods as applied to data encountered in health sciences. Topics include probability theory and distributions; population parameters and their sample

estimates; descriptive statistics for central tendency and dispersion; hypothesis testing and confidence intervals for means, variances, and proportions; linear correlation and regression model; analysis of variance; and nonparametric methods. The course provides students a solid foundation to evaluate research more critically. Pre-requisite: statistics

NURSG 705
**Organizational and Systems Leadership
in Complex Health Care Systems** (3 units)

This course provides students with the theoretical and analytical preparation to evaluate organizations from a macro perspective. It focuses on organizational leadership and incorporates theory and research as it applies to the role of the Doctor of Nursing Practice in a variety of settings. Students will critically examine the purpose and function of health care organizations, from the discipline-specific theories of sociology, political science, anthropology and economics. Students will become familiar with a variety of perspectives and theoretical frameworks often used to describe organizational structure. Students will also examine theories of organizational change and analyze how these can be applied to increase safety, effectiveness and quality in the health care setting. Demonstrate understanding of the purpose and function of organizations, specifically human service organizations.

NURSG 706
Advanced Informatics (3 units)

This online course will focus on healthcare informatics and its use to improve patient care and health care delivery systems. The aim is for students to gain the knowledge, skills, and attitudes which will support evidence-based care at a leadership level. Students will learn healthcare informatics concepts and theories, as well as cultural, ethical, and legal implications and applications. The course will immerse students in the development, use and evaluation of clinical information systems; knowledge management principles; issues and trends affecting the development and implementation of information systems and technologies; and emerging healthcare technology.

NURSG 710
**Health Care Economics and
Financial Analysis for Health Professionals** (3 units)

This course addresses the role of health care economics and financing within the US healthcare system and their influence on the ability to improve population health. A variety of essential health economic and financial theories and principles are introduced. Students will examine the inter-relationship of health care financing and regulations to the structure and delivery of care within a range of practice models and health-care delivery systems. Students will apply selected economic, financing and business principles for the purpose of making pragmatic decisions that support improved health care delivery through practice and or system re-design. .

NURSG 714
Educational Innovations (3 units)

This course will provide the students an opportunity to explore innovative educational techniques utilized in either the practice or educational setting. Students will explore current literature and research on diverse teaching strategies and their effectiveness in promoting learning. Students will have the opportunity to analyze theories of learning, innovative pedagogical methodologies and evaluate their effectiveness.

NURSG 715
Outcomes Management and Evaluation (3 units)

This course will focus on the development of a structured framework of concepts and core competencies designed to promote achievement, measurement and evaluation of desired health outcomes in individuals, groups and populations. Quality of care, quality improvement, consumer-driven care and evidence-based practice are increasingly important in the health care system and these concepts will be included in this course. The delivery of care will be evaluated in terms of best evidence, client values/beliefs, available resources, and clinical expertise.

NURSG 720
Capstone Seminar Emphasis (1 unit)

This seminar course formally introduces the student to the DNP capstone project process and lays the foundation for the subsequent project development, implementation, evaluation and presentation. It is designed to assist the student to further focus their capstone project, demonstrating knowledge application from coursework and practice. Each student will work closely with his or her academic and practice advisors and identified content experts. By the completion of this seminar, students will have developed a capstone proposal draft using a logic model format. This course includes a two day seminar on campus for students to present their proposals and to participate in the critique of others' proposals.

NURSG 721
Capstone Development (2 units)

This course builds on the Capstone Proposal work done in NURSG 720, the Capstone Emphasis Seminar. Students will work closely with their Capstone Chairs, Practice Mentors and content experts to complete their written Capstone Proposal and prepare for its implementation and evaluation.

NURSG 723**Capstone Presentation Seminar (1 unit)**

This course includes an on campus seminar for students to present their completed Capstone projects and to participate, along with peers, advisors and faculty, in meaningful dialogue and evaluations of the projects and the implications for practice.

NURSG 730L**Capstone Residency (5 units)**

This residency provides a mentored experience in a practice setting and is designed to allow students to synthesize and integrate knowledge in the implementation of their capstone project. It is expected that each student will complete a minimum 270 hours of DNP practice immersion planned conjointly by the nurse doctorate student, the faculty advisor and the practice mentor.

OCCUPATIONAL THERAPY

DEPARTMENT OF OCCUPATIONAL THERAPY

HISTORY

Established in 1994, the graduate program in Occupational Therapy graduated its first class in August, 1996. Graduates are prepared for entry-level positions in occupational therapy and for eventual leadership positions in the field.

MISSION

The Occupational Therapy Program offers graduate professional education for the preparation and continued development of skilled clinicians using a Mind/Body Model that recognizes the wholeness of each individual. We promote skilled service to the profession and community, serving diverse populations according to the highest ethical standards. The program's mission is actualized through excellence and leadership in teaching, scholarship, and involvement in professional and community activities.

PROGRAM PHILOSOPHY

The Occupational Therapy Program recognizes the importance of treating the "whole person" in the context of their physical, psycho-social, cultural, and spiritual realm. We believe that human occupation, or engagement in purposeful activities, promotes a "holistic" recovery process.



The philosophy of Adolph Meyer has provided the theoretical foundation for the program. Meyer believed that human occupation follows the biological rhythms of life, whereas work, play, rest, and sleep constitute rhythms that promote balance. The program is committed to ongoing development and research to determine how human occupation provides a vehicle for the interconnectedness of a person's daily activities, social support, values, ritual, and how one's community contributes to his/her well being.

Our belief about the nature of learning is that individuals have unique differences and learning styles and that the complexity of each person's experiences, values, and knowledge impact the learning process. It is our belief that learning is dynamic and that knowledge is built upon a solid foundation. We facilitate the process of Bloom's Taxonomy; knowledge, comprehension, application, analysis, synthesis, and evaluation. Students must take an active role in their learning process as adult learners.

MASTER OF OCCUPATIONAL THERAPY PROGRAM

PROGRAM LEARNING OUTCOMES

Upon graduation the student will:

- > Synthesize knowledge and concepts from the sciences and liberal arts with occupational therapy theory to provide comprehensive service to persons with limitations in occupational performance.
- > Demonstrate logical thinking, critical analysis, problem-solving, creativity, and independent clinical judgment in the provision of occupational therapy.
- > Provide a broad range of functional performance skills to individuals and families from diverse and multicultural populations throughout the life span.
- > Utilize oral, nonverbal, and written communication skills to develop and maintain therapeutic, goal-directed interactions with individuals, families, caregivers, staff, and community groups.
- > Design, evaluate, and implement therapeutic strategies directed toward assisting individuals, team members, and community groups in preventing disease, promoting health, and maximizing occupational performance.
- > Participate in scientific inquiry designed to improve occupational therapy practice and to enhance the occupational therapy profession.
- > Maintain responsibility and accountability for service provision to assure adherence to legal, ethical, and professional standards.
- > Collaborate with other professionals as a leader, advocate, and team member.
- > Demonstrate a commitment to the core values of the University.

CURRICULUM IMPLEMENTATION

In the spirit of adult learning, the curriculum uses learning contracts to further facilitate competence in the clinical domain. Students become well versed in the process of developing meaningful learning objectives in both research seminars and Fieldwork I and II. Documents in the planning and curriculum process include: Guidelines for an Accredited Program for the Occupational Therapist, established by the Accreditation Commission for Occupational Therapy Education (ACOTE, 1998), Uniform Terminology for Occupational Therapy, the Guide to Occupational Therapy Practice (AJOT, 1998), and most recently, the Occupational Therapy Practice Framework (AOTA, 2003).

GRADUATION AND CREDENTIALING REQUIREMENTS

In order to advance to Level II Fieldwork, the student must have successfully completed 67 semester units of didactic coursework. This didactic coursework includes the completion of all Level I Fieldwork assignments. Upon completion of the coursework, the student is assigned to two three-month Level II placements. The student is expected to perform in accordance with the Samuel Merritt University Fieldwork Manual for the Master of Occupational Therapy Program. Both Level II fieldwork internships must be completed within two years of completion of all didactic coursework. Upon satisfactory completion of Level II Fieldwork, the student is qualified to sit for the certification examination which is administered by the National Board for Certification in Occupational Therapy (NBCOT). A felony conviction may affect a graduate's ability to sit for the NBCOT certification exam or attain state licensure. Prior to fieldwork, students may be required to complete a background check and fingerprinting. Graduates are eligible for licensure to practice in California through the California Board of Occupational Therapy (CBOT).

MASTER OF OCCUPATIONAL THERAPY DEGREE

The Master of Occupational Therapy is an entry-level degree program that prepares students to become a general practitioner in occupational therapy. The hallmark of the occupational therapy program is the emphasis on treating the "whole person" rather than one segment of his/her being. The program is based upon the mindbody model which views the mind, body, and spirit as one entity. The mindbody model derives its scientific support from research in neuroscience, health, psychology, and the developing field of psychoneuroimmunology. The program is committed to the ongoing development of research on the concept of wholism and occupational wellness as modes of intervention.

The professional coursework in the occupational therapy program emphasizes wellness, prevention, and community health. Occupational therapy goes far beyond the realm of physical disability and encompasses the social, cultural, and psychological factors that are embedded in the meaning of illness. This program emphasizes adult learning and collaborative and cooperative modes of interaction.

The curriculum provides a sequential and developmental progression. The courses are taken in sequence because the previous course material provides the foundation for more advanced concepts and practice skills. The first year provides traditional courses in anatomy and physiology, research, and human growth and development to establish its anatomical and physiological basis for human occupation. The second year incorporates more intervention strategies and clinical application courses.

CURRICULUM OVERVIEW

Occupational Therapy

Year I

FALL		UNITS
OCCTH 610/610L	Anatomical and Physiological Bases for Human Occupation I	5.0
OCCTH 611	Foundations of Occupational Therapy Practice	3.0
OCCTH 612	Theories of Inquiry and Research Methodology	3.0
OCCTH 619	Human Occupation Throughout the Life Span	3.0
Total		14.0 Units
SPRING		
OCCTH 601	Integrative Seminar in Occupational Therapy Practices I	1.0
OCCTH 613	Introduction to Psychopathology	1.0
OCCTH 615	Guided Research Seminar	1.0
OCCTH 616/616L	Therapeutic Media, Materials, and Processes	3.0
OCCTH 617/617L	Interprofessional Communication in Healthcare (Core)	2.0
OCCTH 618	Functional Neuroscience	3.0
OCCTH 623	Health Care Industry	2.0
OCCTH 627/627L	Applied Kinesiology and Biomechanics	3.0
Total		16.0 Units
SUMMER		
OCCTH 609	Introduction to Professional Documentation	1.0
OCCTH 621L	Introduction to Fieldwork Level I	3.0
Total		4.0 Units

Year II

FALL		UNITS
OCCTH 622L	Guided Research Seminar	1.0
OCCTH 624	Conditions of Human Dysfunction	3.0
OCCTH 626/626L	Theory and Practice in Psycho-social Dysfunction	4.0
OCCTH 628	Administration and Management	3.0
OCCTH 632/632L	Advanced Clinical Practice (Children)	4.0
OCCTH 634	Professional Development Seminar	2.0
Total		17.0 Units
SPRING		
OCCTH 602	Integrative Seminar in Occupational Therapy Practices II	2.0
OCCTH 629/629L	Theory and Practice in Physical Dysfunction	4.0
OCCTH 630	Research Synthesis Project	1.0
OCCTH 631/631L	Occupational Adaptations and Introduction to Modalities	3.0
OCCTH 633	Complementary Systems of Health Care	2.0
OCCTH 636/636L	Advanced Clinical Practice (Adults)	4.0
Total		16.0 Units
SUMMER		
OCCTH 640L	Fieldwork Level II Internship A— (12 weeks or 470 hours)	6.0
OCCTH 641L	Fieldwork Level II Internship B— (12 weeks or 470 hours)	6.0
Total		12.0 Units
Total Units to Graduate		79.0 Units
ELECTIVE COURSE		
OCCTH 642L	Post Professional Level III Internship	2.0

COURSE DESCRIPTIONS

OCCTH 601

Integrative Seminar in Occupational Therapy Practices I (1 unit)

This is one of a two course series that intends to facilitate students' acquisition of clinical and critical reasoning skills necessary for occupational therapy practices. The course integrates the knowledge that students have gained in program coursework by applying the acquired OT skills and knowledge to specific and/or general life and clinical scenarios. The course uses a problem-based learning (PBL) format as the context by infusing high fidelity simulation learning modules in order for students to develop clinical reasoning and sound theoretical bases essential to the work of an occupational therapist. Prerequisites: Enrollment in the MOT program and successful completion of first semester MOT coursework.

OCCTH 602

Integrative Seminar in Occupational Therapy Practices II (2 units)

This is the second of a two course series that intends to facilitate students' acquisition of clinical and critical reasoning skills necessary for occupational therapy practices. The course integrates the knowledge that students have gained in program coursework by applying the acquired OT skills and knowledge to specific and/or general life and clinical scenarios. The course uses a problem-based learning (PBL) format as the context by infusing high fidelity simulation learning modules in order for students to develop clinical reasoning and sound theoretical bases essential to the work of an occupational therapist.

OCCTH 609

Introduction to Professional Documentation (1 unit)

This course provides an introduction to professional documentation appropriate to the practice needs of occupational therapists.

OCCTH 610/610L

Anatomical & Physiological Bases for Human Occupation I (5 units)

Structure/function relationships and relevant physiological mechanisms are examined in a detailed study of regional anatomy in the human body. Special emphasis is given to positional relationships of musculoskeletal structures and neurovascular elements; their corresponding functional roles in human activity, and the clinical implications of anatomical dysfunction. (3 units lecture, 2 units lab)

OCCTH 611

Foundations of Occupational Therapy Practice (3 units)

Introduction to the profession of occupational therapy, including history, philosophies, frames of reference, organization, standards, and supervision of aides and assistants. Introduction to methods and utilization of professional publication and audiovisual media. Therapeutic intervention will be critically examined with the model of human occupation.

OCCTH 612

Theories of Inquiry and Research Methodology (3 units)

Introduction to the philosophy and principles of the research process in the realm of occupational therapy. Includes scientific writing, literature reviews, methods of inquiry, research design, data collection, ethics, informed consent, and clinical reasoning used in field research.

OCCTH 613

Introduction to Psychopathology (1 unit)

This course provides the students an introduction to psychopathological diagnoses, disease processes, and symptoms and behavioral manifestations that are commonly seen in occupational therapy practice.

OCCTH 615

Guided Research Seminar (1 unit)

A forum for discussion and writing of a literature review and informed consent. This course is a continuation of the course OCCTH 612 Theories of Inquiry and Research Methodology. Emphasis will be on collaborative research, and the development of a research proposal with a specific MOT faculty member. Prerequisite: OCCTH 612. (1 unit seminar)

OCCTH 616/616L

Therapeutic Media, Materials and Processes (3 units)

Laboratory and didactic course in daily living skills evaluation and activity analysis for the physically, psychologically, and cognitively impaired. Emphasis on strategies and media that promote adaptation to disabilities and increase role independence are taught using adaptive equipment, redesigning the environment, exploration of tools, materials, and uniform terminology. (2 units lecture, 1 unit lab)

OCCTH 617/617L

Interprofessional Communication in Healthcare (2 units)

This course allows the student to enhance professional effectiveness through the improvement of communication skills. Learning is achieved through active participation in individual and group interactions that mirror professional practice. (1 unit lecture, 1 unit lab)

OCCTH 618

Functional Neuroscience (3 units)

Review of neuroanatomy and physiology with emphasis on clinical manifestations of peripheral and central nervous system lesions. The anatomical review of blood supply, somatosensory motor systems, special senses, pain mechanisms, and cognitive, perceptual, and nerve pathways. Prerequisites: OC

OCCTH 619**Human Occupation Throughout the Life Span (3 units)**

Exploration of the stages of human development from conception to death with attention to occupational performance, biological, psychological, cognitive, and sociocultural elements health determinants. Emphasis will be on normal development and observation skills. Prerequisites: OCCTH 611, OCCTH 616, OCCTH 625.

OCCTH 621L**Introduction to Fieldwork I (3 units)**

This occurs after successful completion of the first year of studies. Guided observations and supervised fieldwork under the direction of clinical educators in clinical settings appropriate for the first year of the curriculum. The primary goal is for students to experientially enhance their observational skills and be introduced to OT practice with a variety of patients with whom an OT might work. Supervision of the student at this level does not need to be by an OT for one of the two experiences, but could be supervised by an individual in an allied health profession. The student must complete a minimum of 60 hours in each of two required settings (psychosocial and adult physical disabilities). An optional site in pediatrics may be requested, for 40 hours. In addition, students must attend an introductory seminar and a final seminar, each held on campus for a full day, immediately after finals week in the spring, and in the week before the start of the fall semester. Prerequisites: All first year coursework. (3 units clinical lab)

OCCTH 622L**Guided Research Seminar (1 unit)**

Implementation of a study or investigation of a specific treatment strategy or teaching module used in occupational therapy. Prerequisites: OCCTH 612, OCCTH 615. (1 unit lab)

OCCTH 623**Health Care Industry (2 units)**

History and current structure of the American health care industry with focus on changing environments, economics, role, and function of health professions, ethics, legislation, and issues in the delivery of services.

OCCTH 624**Conditions of Human Dysfunction (3 units)**

An overview of pathophysiology and management of neurological disorders, as well as general medical, surgical, and orthopedic conditions commonly seen in clinical practice. Emphasis will be placed on learning medical terminology, pathologic processes, medical management, remediation, and clinical techniques for therapeutic intervention. Prerequisites: OCCTH 610, OCCTH 611, OCCTH 614, OCCTH 627; Corequisite: successful completion or concurrent enrollment in OCCTH 618.

OCCTH 626/626L**Theory and Practice in Psycho-social Dysfunction (4 units)**

Evaluation methods, social and psychological theories, and pharmacologic intervention strategies. Focus on group process, exploration of self-esteem, stress management, and purposeful activities for persons experiencing psycho-social dysfunction. Exploration of acute and chronic substance abuse and social issues. A clinical component of this class will allow students to provide group and individual treatment to individuals who are dually diagnosed in an area outpatient clinic. Prerequisites: OCCTH 611, OCCTH 612, OCCTH 616, OCCTH 617, OCCTH 619. (3 units lecture, 1 unit lab)

OCCTH 627/627L**Applied Kinesiology and Biomechanics (3 units)**

Analysis of human movement during occupations utilizing biomechanical principles. Laboratory experiences include manual testing, joint range of motion measurement, and kinesiological activity analyses. Osteokinematic as well as arthrokinematic concepts and abnormal movement patterns will be examined. Prerequisites: successful completion of OCCTH 610. (2 units lecture, 1 unit lab)

OCCTH 628**Administration and Management (3 units)**

Administration and organization of occupational therapy services within the current and future health care environment. Emphasis on consultation, quality assurance, program evaluation, functional outcome assessment, program evaluation, strategic planning, marketing, and budgeting in community-based services. Health care reform and third-party reimbursement issues are examined. Lab experiences will be incorporated within each class. Prerequisite: OCCTH 623

OCCTH 629/629L**Theory and Practice in Physical Dysfunction (3 units)**

Methods of evaluation, treatment planning, and implementation as it applies to individuals with physical dysfunction are presented in this course. Emphasis on sensorimotor, cognitive, neurodevelopmental techniques. Biopsychosocial mind-body considerations will accompany therapeutic intervention strategies. A one hour seminar, as part of this course facilitates discussion, problem solving, therapeutic application, and goal setting within the occupational therapy framework. Prerequisites: OCCTH 611, OCCTH 612, OCCTH 616, OCCTH 624, OCCTH 625, OCCTH 627, OCCTH 632/632L. Corequisites: OCCTH 631, OCCTH 636. (2 units lecture, 1 unit lab)

OCCTH 630 Research Synthesis Project (1 unit)

This course focuses on the successful completion of a synthesis project or a scholarly work which shows evidence of academic rigor, scientific inquiry, critical reasoning, creativity and/or clinical expertise. Prerequisites: OCCTH 612, OCCTH 615, OCCTH 622L

OCCTH 631/631L**Occupational Adaptations and Introduction to Modalities****(3 units)**

An introduction to a variety of technologies used in the practice of occupational therapy. Evaluative, assistive, and adaptive equipment used to facilitate the occupational performance areas are discussed and demonstrated. Medical devices and procedures used in medical care and nursing are also investigated to prepare students for treating patients with a variety of medical conditions. Ergonomics, accessibility, and physical agent modalities are introduced. Prerequisites: OCCTH 610, OCCTH 611, OCCTH 614, OCCTH 616, OCCTH 618, OCCTH 624, OCCTH 625, OCCTH 627; Corequisites: OCCTH 629, OCCTH 636. (2 units lecture, 1 unit lab)

OCCTH 632/632L**Advanced Clinical Practice (Children)****(4 units)**

Clinical experience to learn screening and assessment of conditions affecting children. Students will learn how to evaluate, develop treatment plans, provide intervention and discharge planning for children with physical, psycho-social, neurological, and sensory integrative delays. Labs will consist of evaluation and treatment of pediatric clients in the OT clinic. Prerequisites: OCCTH 610, OCCTH 611, OCCTH 612, OCCTH 614, OCCTH 616, OCCTH 617, OCCTH 619, OCCTH 625, OCCTH 627; Corequisites: OCCTH 618, OCCTH 624. (2 units theory, 2 units lab)

OCCTH 633**Complementary Systems of Health Care****(2 units)**

A critical review of allopathic (Western scientific medicine) is compared to complementary or integrative (alternative medicine) systems of health care. Traditional Chinese Medicine and Eastern philosophy will be discussed. In addition various complementary systems, such as acupressure, myofascial release, shiatsu, yoga, and other selected methods will be examined to develop an appreciation for the range of health beliefs and practices as they may be applied for use in occupational therapy. Prerequisites: OCCTH 610, OCCTH 611, OCCTH 614, OCCTH 616, OCCTH 618, OCCTH 624, OCCTH 625, OCCTH 627. Corequisites: OCCTH 629, OCCTH 636. (1 unit lecture, 1 unit lab)

OCCTH 634**Professional Development Seminar****(2 units)**

Graduate seminar and an independent study course providing students with the opportunity to explore an area of occupational therapy practice in greater detail. Students will develop an individual learning contract of personal professional interest, which may take place in a variety of settings. The outcome will be a professional quality manuscript to be submitted for presentation at a professional conference. Students will meet once a week in seminar to discuss progress and professional and practice issues. Prerequisite: OCCTH 628.

OCCTH 636/636L**Advanced Clinical Practice (Adults)****(4 units)**

Clinic class to introduce students to a variety of conditions treated in clinical practice with the adult and elderly population. Students learn how to perform clinical assessments, write treatment goals, document, and implement short term treatment programs. Labs will consist of evaluation and treatment of adult patients within the clinic. Prerequisites: OCCTH 610, OCCTH 611, OCCTH 612, OCCTH 614, OCCTH 616, OCCTH 618, OCCTH 619, OCCTH 624, OCCTH 625, OCCTH 627. Corequisites: OCCTH 629, OCCTH 633. (2 units theory, 2 units lab)

OCCTH 640L/641L**Fieldwork Level II Internship A and B****(12 units)**

This is the final stage of coursework designed to introduce the student to the full responsibilities of the profession working in the capacity of a practitioner under the supervision of a certified occupational therapist. Students are able to register for their Level II fieldwork only after successful completion of their two years of didactic coursework. A variety of settings are considered. The student will utilize occupational theory for the assessments, treatment interventions, and competency in practice skills. The student completes the fieldwork requirements in two consecutive 6 unit modules. OCCTH 640L must be successfully completed before being eligible to register and complete OCCTH 641L. After the successful completion of the total six months of Fieldwork II, the student is eligible to sit for the national certification exam provided through the National Board for Certification in Occupational Therapy. Prerequisite: all prior coursework completed. (12 units clinical lab)

OCCTH 642L**Post Professional Level III Internship****(2 units)**

An optional third internship for those individual students who choose to spend an additional three months in a specialty environment such as in pediatrics or hand therapy. Thi

PHYSICAL THERAPY

DEPARTMENT OF PHYSICAL THERAPY

HISTORY

The Department of Physical Therapy was founded in 1990, the first health science discipline added to the then single-purpose nursing institution, Samuel Merritt College. For the first 11 years, the department offered an entry-level Master of Physical Therapy (MPT) degree, which was designed to prepare practitioners for autonomous professional practice. The department's proposal to offer an entry-level Doctor of Physical Therapy (DPT) degree was approved in 2002 by the Western Association of Schools and Colleges (WASC) and by the Commission on Accreditation in Physical Therapy Education. The first DPT class enrolled in the fall 2002 semester.

MISSION

The Department of Physical Therapy at Samuel Merritt University serves students, the public, the profession and the University by educating highly skilled and compassionate Doctors of Physical Therapy. Our graduates provide patient-centered care using evidence informed practice to positively transform society and the experience of care in diverse communities. We are dedicated to advancing the profession through a commitment to life-long learning, critically reflective practice, scholarship, service and socially responsible action on behalf of patients, the public, and the profession.



PHILOSOPHY OF THE DEPARTMENT OF PHYSICAL THERAPY

It is the belief of the faculty that each human being is a uniquely organized and functioning combination of body, mind, and spirit. We believe that health is a state of complete physical, emotional and psychological well-being. We believe that each individual is responsible for his or her own life and possesses the power to achieve an optimum state of health; empowering individuals to achieve this optimum state of health is the core purpose of health professionals. We believe that all human beings are deserving of interactions consistent with an inherent respect for their dignity and recognition of their unique cultural and social beliefs and values. A biopsychosocial-cultural

model of health care and physical therapist practice best supports these beliefs and is one of the foundations of the curriculum. Physical therapy is a profession dedicated to service, to people and society; physical therapists must practice in an artful, competent, compassionate, caring, legal and ethical manner. Physical therapists must practice in a manner that is mindful of the art and science of the profession. Physical therapists must have commitments to lifelong learning and to searching for the evidence that supports and advances practice. Critical thinking, problem solving, intellectual perseverance and courage are all essential characteristics of the successful physical therapist and must be present at entry to the program and fostered during matriculation.

The practice of physical therapy spans the continuum from health promotion to prevention to rehabilitation for individuals and populations throughout the lifespan. Physical therapists diagnose movement dysfunctions based on skillful examination and evaluation regardless of the cause or etiology and provide skilled therapeutic intervention to foster improvement in physical functioning and maximizing overall quality of life. Physical therapists provide the initial access into the health care system for persons with impairments, activity limitations, and participation restrictions amenable to physical therapy and engage in collegial referral relationships with other health care professionals. The physical therapist's role also includes that of case manager, teacher, researcher, and consultant. The faculty believes the first priority of education is to prepare people for a well-rounded, balanced life with broad social and cultural interests and as involved, active citizens of our country. The faculty believes that a professional doctoral degree in physical therapy (DPT) must be built on a strong foundation in the liberal arts and sciences and the values and ethical behaviors consistent with a life as a professional serving all of the members of a diverse culture.

We believe that education programs for the physical therapist must be conducted in an environment that fosters the intellectual challenge, spirit of inquiry, and commitment to excellence in practice characteristic of the community of scholars of Samuel Merritt University.

The curriculum of the professional doctoral degree is an integrated hierarchical, spiraling design that emphasizes the scientific bases of human movement, humanistic values, and the artful application of physical therapy. The curriculum is an integrated balance of the basic, clinical, social, and management sciences, with interpersonal communication, the psychosocial and cultural aspects of health and illness, and morals and ethics woven throughout the program. The curriculum implicitly and explicitly develops critical thinking and inquiry, effective problem solving, professionalism, responsibility, and high intellectual standards. We believe that education is a shared experience wherein the responsibility for learning rests with the student and the role of the faculty is to facilitate that learning. We expect students will assume responsibility for learning and pursue their education at a depth and breadth commensurate with doctoral-level education.

The faculty believes the academic environment must provide students the opportunity to build awareness of and appreciation for multiple styles of thinking and diverse social concepts and values that will help prepare them for identifying, redefining, and fulfilling their responsibilities to society and the profession. Physical therapists must understand and appreciate the professional, historical, and social context in which they operate; the relevance of physical therapy to these and the essential role physical therapists play in helping to modify the environment of practice.

The faculty believes they must provide positive role models for scholarly activity, clinical expertise, and active involvement in the professional community and therefore a

responsibility to develop this commitment among the students. We also promote service to the community to ensure excellent physical therapy services are available and accessible to all its members.

As a community of scholars, educators, and practitioners, the faculty serves as leaders in assuring availability of continuous learning and competency in the professional community through publication of scholarly work and sharing of knowledge and abilities in educational programs.

DOCTOR OF PHYSICAL THERAPY DEGREE PROGRAM

This 33 month professional program is designed to prepare students seeking licensure as physical therapists. The curriculum includes professional doctoral-level study in the theory and practice of physical therapy and prepares students to assume leadership roles in the profession and the health care delivery system. In order to prepare students to become competent clinicians who are capable of performing as autonomous practitioners in direct access and other health care systems, the curriculum emphasizes problem solving and critical thinking. Courses that focus on learning physical therapy clinical skills and knowledge are closely integrated with the basic sciences such as anatomy, kinesiology, and biomechanics. Pharmacology, imaging and the medical management of patients are simultaneously covered in concert with the corresponding clinical courses. Physical therapy services through the lifespan, from pediatrics through geriatrics, are interwoven in the clinical courses and there are additional, specific courses that address the needs of these special populations served by physical therapists. The role of physical therapy in the health care system, the role of health care in society and cultural diversity are also integrated throughout the curriculum. There are clinical case study courses in small-group seminar format that also synchronize with the other courses each semester. Students have part-time clinical experiences under the mentorship of physical therapists during which they are able to see patients who have problems similar to those being covered in the classroom.

Students see patients who have neuromuscular problems under faculty supervision in an outpatient free-clinic during two semesters. Two full-time clinical experiences are interspersed after key semesters so that classroom learning is reinforced with clinical experience. Students begin the full-time program each fall. The final six months of the program are spent on a full-time clinical internship. Upon completion of the doctoral program in physical therapy, program graduates are prepared to assume entry-level positions as physical therapists.

PROGRAM LEARNING OUTCOMES

Upon graduation the student will:

1. Provide effective physical therapy informed by best available evidence for people with health conditions that result in impairments, activity limitations or participation restrictions regardless of the person's age, and in the most common practice environments for physical therapists.
2. Use sound clinical reasoning, including the evaluation and integration of best available evidence, clinical experience and judgment, and the patient/client's perspectives and values, to guide their decisions through their examination, evaluation, diagnosis, planning, and intervention to achieve optimal outcomes of care.
3. Refer patients and clients to other health care practitioners, community agencies, or health care services and serve as advocates to assure that patients' and clients' needs for these services are met.
4. Provide collaborative, patient-centered care that is compassionate, caring, and culturally competent.
5. Consistently engage in critical reflection on physical therapy practice with the intent of being effective learners throughout their careers and advancing their effectiveness as physical therapists.
6. Function as collaborative and effective members of an interprofessional team providing health care to meet the needs of patients, clients, and the public.
7. Provide health, wellness, and prevention services for individuals or groups who will benefit from those services.
8. Identify the need and develop systematic efforts for quality improvement in clinical practice settings.
9. Be actively engaged in the profession of physical therapy and the society it serves through the professional association, service to the community, and advocacy for the health needs of society.
10. Act responsibly with sound reasoning and integrity to achieve just resolution of ethical problems that affect individuals, organizations or society.
11. Identify as an emerging professional who demonstrates the hallmarks of excellence that are the foundation of physical therapy practice.

THE DPT CURRICULUM

The DPT curriculum is a sequential curriculum in which courses build on a liberal arts and sciences foundation. Students are expected to use knowledge from prior coursework, building knowledge and expertise as they progress through the curriculum. In the Patient and Client Management course series, students will learn to perform an examination, evaluate the examination to formulate a diagnosis, prognosis, and plan of care, and provide interventions for patients with impairments, activity limitations and participation restrictions encountered by physical therapists. Emphasis will be placed on the development of fluid, proficient psychomotor skills used in practice. Students will also use evidence-based decision making with increasing levels of critical analysis and complexity in reasoning and decision making.

Content in the course series, Patient/Client Management, Structure and Function, Pathology and Medical Management, and Case Studies, is coordinated each semester. The Case Studies series, offered in small group seminar format, emphasizes critical thinking and clinical reasoning to complement and promote application, integration, and furtherance of concepts learned in other classes. Students will study various cases representing a large variety of diagnoses, issues, settings, and populations, including considerations of patients' psychological, social, and cultural perspectives and their situation within the health care system.

DPT CASE REPORT GRADUATION REQUIREMENT

The Doctor of Physical Therapy program requires that all students complete a case report project to meet the requirements for graduation from the program. The case report is a write-up of a patient managed during the clinical experience or the six-month internship. Students begin the case report process in PHYTH 757, Research III, during the final fall semester. Students are continuously enrolled in PHYTH 757 during the following spring and summer semesters. Students who do not successfully complete the case report project by the end of the summer semester must re-enroll in PHYTH 757 and pay the tuition for this class (refer to University policy, page 120). Each student is assigned to a full-time faculty member who serves as the case report advisor. The requirements for successful completion of the case report graduation requirement include presenting the case report findings at a Case Report Day and submitting a final, written report approved by the faculty research advisor. Students may, by petition, meet this requirement by completing another form of research. Procedures for completion of the Case Report Project are in the Department of Physical Therapy Student Handbook.

COURSE OVERVIEW

Physical Therapy

Year I

FALL SEMESTER (TERM 1)

	UNITS
PHYTH 710 Clinical Foundations in Physical Therapy	3.0
PHYTH 722 Clinical Physiology	3.5
PHYTH 723 Gross Anatomy I	3.5
PHYTH 724 Functional Anatomy, Biomechanics and Kinesiology I	3.0
PHYTH 727 Neurosciences I	1.0
PHYTH 735 Exercise Prescription for Patients and Clients I	1.0
PHYTH 741 Professional Issues in PT	1.0
PHYTH 755 Research I	2.0
Total	18.0

SPRING SEMESTER (TERM 2)

PHYTH 711 Patient/Client Management: Musculoskeletal I	5.0
PHYTH 725 Gross Anatomy II	2.5
PHYTH 726 Functional Anatomy, Biomechanics, and Kinesiology II	3.0
PHYTH 732 Pathology and Pharmacology I	2.0
PHYTH 738 Musculoskeletal Medical Management and Imaging I	1.5
PHYTH 743 Interprofessional Communication in Healthcare	2.0
PHYTH 761 Integrated Clinical Experience I	0.5
Total	16.5

SUMMER SEMESTER (TERM 3)

PHYTH 712 Patient/Client Management: Musculoskeletal II	5.0
PHYTH 719 Physical Agents and Electrotherapy	1.0
PHYTH 728 Neurosciences II	2.0
PHYTH 733 Pathology and Pharmacology II	1.5
PHYTH 736 Exercise Prescription for Patients and Clients II	1.0
PHYTH 739 Musculoskeletal Medical Management and Imaging II	1.5
PHYTH 742 Teaching and Learning	1.5
PHYTH 745 Communications in Health Care II	2.0
PHYTH 752 Case Studies I	1.0
PHYTH 762 Integrated Clinical Experience II	0.5
Total	17.0

Year II

FALL SEMESTER (TERM 4)

PHYTH 756 Research II	2.0
PHYTH 763 Clinical Experience I	5.0
Total	7.0

SPRING SEMESTER (TERM 5)

PHYTH 713 Patient/Client Management: Neuromuscular I	6.0
PHYTH 714 Patient/Client Management: Pediatrics	3.0
PHYTH 729 Neuroscience III	3.0
PHYTH 730 Medical Screening for the Physical Therapist	0.5
PHYTH 734 Pathology and Medical Management in Neurology	2.0
PHYTH 737 Exercise Prescription for Patients and Clients III	1.0
PHYTH 753 Case Studies II	1.0
PHYTH 764 Integrated Clinical Experience III	0.5
Total	17.0

SUMMER SEMESTER (TERM 6)

PHYTH 717 Patient/Client Management: Cardiopulmonary	3.0
PHYTH 744 Health Care Systems and Regulatory Aspects of Physical Therapy	2.0
PHYTH 765 Clinical Experience II	5.0
Total	10.0

Year III

FALL SEMESTER (TERM 7)

PHYTH 715 Patient/Client Management: Special Populations	3.0
PHYTH 716 Patient/Client Management: Musculoskeletal III	3.0
PHYTH 718 Patient/Client Management: Neuromuscular II	3.0
PHYTH 746 Management of Physical Therapy Services	2.0
PHYTH 747 Professional Issues II	1.0
PHYTH 754 Case Studies III	1.0
PHYTH 757 Research III	2.0
Electives (optional)	0-4
Total	16.0

SPRING & SUMMER SEMESTERS (TERMS 8 & 9*)

Students are continuously enrolled in PHYTH 757 Research III from the fall semester.

PHYTH 766 Internship (six months)

(*Part of Term 9)

COURSE DESCRIPTIONS

PHYTH 710

Clinical Foundations in Physical Therapy (3 units)

Introduces fundamental skills used throughout physical therapy practice and among practice settings. Theoretical concepts of enablement/disablement, disease, and management of the patient/client in physical therapy will serve as the basis of the course, including an introduction to clinical reasoning strategies. Basic patient history, physical examination, and interventions will be introduced, including therapeutic exercise, functional mobility and gait, with an emphasis on patient and therapist safety. Introduction to patient/client management in an inpatient setting will be used to synthesize information over the course. A framework for documentation will be incorporated throughout the course. (1.5 hours lecture, 4.5 hours lab)

PHYTH 711

Patient/Client Management: Musculoskeletal I (5 units)

Focuses on physical therapist patient/client management of simple musculoskeletal movement impairments and functional limitations in the lower extremities and lumbar spine in persons across the life span. Procedural interventions of lower extremity orthotics and taping will be included. (3 hours lecture, 6 hours lab)

PHYTH 712

Patient/Client Management: Musculoskeletal II (5 units)

Focuses on physical therapist patient/client management of simple musculoskeletal impairments and functional limitations in the upper extremities and cervical/thoracic spine in persons across the life span. (3 hours lecture, 6 hours lab)

PHYTH 713

Patient/Client Management: Neuromuscular I (6 units)

Focuses on physical therapist management of patients/clients with neuromuscular impairments and functional limitations. Patient problems that include musculoskeletal dysfunction and special problems of some representative neurological disorders of adults will be included. (3 hours lecture, 9 hours lab)

PHYTH 714

Patient/Client Management: Pediatrics (3 units)

Focuses on the study of normal growth and development of humans from birth to adolescence, and the common pathological conditions encountered by physical therapists, whether in a pediatric or general PT practice, when managing the pediatric patient population. The Physical Therapist Patient Client Management Model is applied to the pediatric patient population. Specialized skills and knowledge relative to equipment, funding issues, and delivery systems pertinent to pediatrics are reviewed. Interwoven throughout the course is the impact of childhood disability on the family unit. (2 hours lecture, 3 hours lab)

PHYTH 715

Patient/Client Management: Special Populations (3 units)

Focuses on the physical therapist patient/client management for patients with complex, inter-related impairments and functional limitations associated with geriatrics, oncological diagnoses, immunosuppression, chronic pain, integumentary system, diabetes mellitus, amputation and gender-related health issues including pregnancy, incontinence and pelvic pain. In addition, the principles of case management of special populations will be explored. (2 hours lecture, 3 hours lab)

PHYTH 716

Patient/Client Management: Musculoskeletal III (3 units)

Focuses on physical therapist patient/client management of musculoskeletal impairments and functional limitations involving complex, multi-regional, multisystem involvement in persons across the life span. Refinement and development of the entry-level student's clinical reasoning, critical thinking, and clinical decision-making applied to these patients and populations are central themes. Includes physical therapy management of patients with impairments and functional limitations from ribs, TMJ, pelvic girdle/SIJ, altered neural dynamics, and thoracic outlet syndrome/neurovascular dysfunctions and chronic pain. (2 hours lecture, 3 hours lab)

PHYTH 717

Patient/Client Management: Cardiopulmonary (3 units)

Focuses on physical therapist management of patients/clients with complex impairments and functional limitations associated with the cardiopulmonary system across the life span. Students will use evidence-based decision making throughout this course. (2.5 hours lecture, 1.5 hours lab)

PHYTH 718

Patient/Client Management: Neuromuscular II (3 units)

Focuses on physical therapist patient/client management of neuromuscular impairments and functional limitations involving complex, multi-regional, and multisystem involvement in persons across the life span. Learning activities emphasize the refinement and development of the entry-level student's clinical reasoning, critical thinking, and clinical decision-making applied to these patients and populations. (2 hours lecture, 3 hours lab)

PHYTH 719

Physical Agents and Electrotherapy (1 unit)

This course will enable the student to use clinical reasoning to properly select and safely and competently apply the various physical and electrotherapeutic modalities used by physical therapists. The course will also teach the student to appropriately instruct supportive personnel on the use of these modalities and to instruct patient and families in the correct use of these modalities in the home setting. Topics covered will include physiological responses, uses, limitations, indications, contraindications and precautions for use of each modality. In addition to practice in performance of examination and treatment procedures related to the use of physical

agent and electrotherapeutic modalities, lab activities will incorporate correct body mechanics, positioning and draping and documentation. (3 hours lab)

PHYTH 722
Clinical Physiology (3.5 units)

This course is an in depth study of physiology of the musculoskeletal, cardiovascular, blood and lymphatic, pulmonary, renal, endocrine, autonomic, immune, metabolic systems and digestive systems. Energetics, basic nutrition and metabolism will be covered. Physiologic aging and effects of immobilization will also be studied. Lecture/laboratory sessions and case studies will be used to study, measure, evaluate and interpret normal and abnormal physiologic responses.

PHYTH 723
Gross Anatomy I (3.5 units)

This course is the first of two semesters devoted to the study of regional gross structure of the human body. This course covers the lower extremity, lumbar and thoracic spine, thorax, abdomen, pelvis and perineum. The emphasis is on anatomy relevant to clinical practice in physical therapy, with emphasis on the skeletal, muscular, vascular and neurological systems. Basic embryology is included and histology is introduced. (2 hours lecture, 6 hours lab for 10 weeks)

PHYTH 724
Functional Anatomy, Biomechanics and Kinesiology I (3 units)

This course is the first of two semesters devoted to the application of anatomy, biomechanics and kinesiology to movement disorders of the lumbar spine and lower quarter. The emphasis is on the relationship between structure and function of the systems involved in movement and the implications of pathologies and impairments that affect movement. There is significant laboratory time in which the student applies concepts of kinesiology and biomechanics to problems associated with movement and analyzes movement using these concepts. (2 hours lecture, 3 hours lab)

PHYTH 725
Gross Anatomy II (2.5 units)

This is the second part of a course devoted to the study of regional gross structure and function of the human body. This semester covers the superficial back, upper extremity, head and neck. The emphasis is on anatomy relevant to clinical practice in physical therapy, with emphasis on the skeletal, muscular, vascular and neurological systems. Development of the head, neck, brain and spinal cord will also be covered. (2 hours lecture, 6 hours lab for 10 weeks)

PHYTH 726
Functional Anatomy, Biomechanics and Kinesiology II (3 units)

This course is the second of two semesters devoted to the application of anatomy, biomechanics and kinesiology to movement disorders of the cervical spine and upper quarter.

The emphasis is on the relationship between structure and function of the systems involved in movement and the implications of pathologies and impairments that affect movement. There is significant laboratory time in which the student applies concepts of kinesiology and biomechanics to problems associated with movement and analyzes movement using these concepts. Abnormal gait analysis is included. (2 hours lecture, 3 hours lab)

PHYTH 727
Neuroscience I (1 unit)

This course is the first of a three-course sequence devoted to the study of the structure and function of the human nervous system. The emphasis of this course is on the 1) the basic gross structure of the central nervous system; 2) histology and functions of neurons and neuroglia; 3) physiology of excitable membranes, synapses, basic sensory physiology, and spinal cord reflexes. (1 hour lecture)

PHYTH 728
Neuroscience II (2 units)

This is the second of a three-course sequence devoted to the study of the structure and function of the human nervous system. The emphasis of this course is on: the gross and intrinsic structure of the central nervous system., somatosensory and motor and cranial nerve pathways structure and function, and identification of lesion sites along the neuraxis and description of patient signs or symptoms. (2 hours lecture)

PHYTH 729
Neuroscience III (3 units)

This is the last of a three-course sequence devoted to the study of the structure and function of the human nervous system. The emphasis of this course is an in-depth study of the physiology of the nervous system that control human movement. Students will apply this information to understand physical therapy examination, evaluation, diagnosis, prognosis, plan of care, and intervention for people with impairments and functional limitations of the nervous system. Course content will be integrated with PHYTH 713, PHYTH 734, and PHYTH 753. (2 hours lecture)

PHYTH 730
Medical Screening for the Physical Therapist (.5 unit)

An important element of physical therapist practice is the recognition of clinical red flags that may suggest physician referral is warranted. This course will help prepare the student to assume the role of an interdependent practitioner working within a collaborative medical model. The components of medical screening, namely identification of health risk factors, recognitions atypical symptoms/signs, and review of systems, will be covered through lecture and laboratory sessions. A proposed examination scheme designed to promote efficient and effective collection of patient data will also provide the structure for laboratory sessions. Professional communication with patients and physicians/physician extenders will also be a central theme throughout the course.

PHYTH 732**Pathology and Pharmacology I (2 units)**

This is the first of a three-course sequence discussing pathology, pharmacology, and medical management of disease as foundational to understanding physical therapy intervention. Concept of injury, inflammation and stages of healing will be discussed. Pathology and medical management associated with the rheumatologic, immune system, infections, oncology, the integumentary system, the endocrine and metabolic systems, the hematologic, lymphatic, and cardiac systems will be examined. (2 hours lecture)

PHYTH 733**Pathology and Pharmacology II (1.5 units)**

This is the second of a three-course sequence discussing pathology, pharmacology and medical management of disease as foundational to understanding physical therapy examination and intervention. Pathology and medical management associated with the vascular, pulmonary, hepatobiliary, renal and urinary, reproductive systems and musculoskeletal neoplasms will be examined. (1.5 hours lecture)

PHYTH 734**Pathology and Medical Management in Neurology (2 units)**

Focusing on the etiology, pathology, diagnosis, medical management, clinical presentation and prognosis of diseases and disorders of the peripheral and central nervous system and neuromuscular diseases, this course explores medical management including pharmacology, surgical interventions and referral to other health care professionals. (2 hours lecture)

PHYTH 735**Exercise Prescription for Patients and Clients I (1 unit)**

This course is the first in a three-course series designed to cover the concepts of exercise and therapeutic exercise as applied to different conditions and patient populations. This particular course focuses on the introduction of exercise and therapeutic exercise and application of theories and techniques of exercise intervention in patients and clients with movement dysfunctions. An introductory discussion of motor control and motor learning concepts will give the students the necessary foundation for making appropriate clinical decisions when providing interventions. This course will also include content on home exercise program prescription and discuss facilitators to maximize patient adherence. Students will be encouraged to discuss and build upon their knowledge of basic therapeutic techniques attained from previous volunteer or work experiences.

PHYTH 736**Exercise Prescription for Patients and Clients II (1 unit)**

This course is the second in a three-course series designed to cover principles and concepts of exercise prescription as applied to different conditions and patient/client populations. This course focuses on the application of foundational knowledge of exercise learned in the preceding introductory exercise prescription course to patients and clients with

participation restrictions and/or activity limitations related primarily to impairments of the musculoskeletal system. Students will gain experience and practice in integrating the cognitive and psychomotor skills required to develop, administer, and progress therapeutic exercise for patients/clients with various symptomatic musculoskeletal conditions, underlying pathological musculoskeletal conditions, in the context of pre-and post-operative situations, work-related injuries, and with older adults. Students will learn how to use a model of movement analysis and apply concepts of motor control and motor learning in the analysis of functional activities to provide a foundation for both neuromuscular re-education intervention planning and to serve as a foundation from which to generate hypotheses about potentially related impairments that may be appropriately addressed through therapeutic exercise interventions. Students will gain experience in reasoning through situations where a focus of intervention is addressing impairments in static posture, balance, flexibility, muscle performance (strength, power, endurance), and situations where it is appropriate to integrate concepts of wellness, health promotion, and disease/injury prevention. The course will explicitly reinforce a collaborative, patient-centered approach to health care, with examples of ways in which personal and environmental factors (including culture/ethnicity, socioeconomic status, literacy, and psychological factors) are factored into clinical reasoning in the context of exercise prescription.

PHYTH 737**Exercise Prescription for Patients and Clients III (1 unit)**

This course is the third in a three-course series designed to cover the concepts of therapeutic exercise as applied to different conditions and patient/client populations. This particular course focuses on the application of theories and techniques of therapeutic exercise in patients and clients with movement dysfunctions secondary to neuromuscular conditions, and in pediatric populations. An in-depth analysis and discussion of motor control and motor learning concepts as applicable to the above-mentioned populations will give the students the necessary foundation for making appropriate clinical decisions when providing interventions. This course will also include content on postural control, coordination and neuromuscular reeducation. Students will be encouraged to discuss and build upon their knowledge of basic therapeutic techniques attained from previous coursework and clinical training experiences.

PHYTH 738**Musculoskeletal Medical Management and Imaging I (1.5 units)**

This is the first of a two-course sequence that covers medical management and medical imaging of musculoskeletal-related pathologies or conditions affecting the lumbar spine and lower extremities. This course will cover basic concepts of medical imaging, routine and special views of the spine and lower extremities, and selection of most appropriate imaging modality given a particular patient/client presentation. This

course will also cover basic information concerning sprains, strains and fractures as well as clinical signs and symptoms, etiology, incidence, prevalence and basic medical management for common musculoskeletal pathologies of the lumbar spine and SIJ region, hip, knee and ankle foot regions. The intent of this course is to provide the foundations for understanding the physical therapy patient/client management of these conditions.

PHYTH 739
Musculoskeletal Medical Management and Imaging II (1.5 units)

This is the second of a two-course sequence that covers medical management and medical imaging of musculoskeletal-related pathologies or conditions affecting the cervical and thoracic spine, temporomandibular joint and the upper extremities. This course will cover basic concepts of medical imaging, routine and special views of the cervical and thoracic spine, temporomandibular joint and the upper extremities, and selection of most appropriate imaging modality given a particular patient/client presentation. This course will also cover clinical signs and symptoms, etiology, incidence, prevalence and basic medical management for common musculoskeletal pathologies of the cervical and thoracic spine, temporomandibular joint, shoulder, elbow, wrist and hand. The intent of this course is to provide the foundations for understanding the physical therapy patient/client management of these conditions.

PHYTH 741
Professional Issues in Physical Therapy (1 unit)

This course covers the professional, legal, and ethical foundations of physical therapy practice, including an historic perspective on the development of the profession and current and future trends in practice. (2 hours seminar)

PHYTH 742
Teaching and Learning (1.5 units)

Explores the role of physical therapists as teachers and learners. The focus of this course will be on patient/client education. Emphasis will be given on learning and motivational theories and their applicability in the clinical, professional, and academic environments. The course also includes content on critical thinking. (1.5 hours lecture)

PHYTH 743
Interprofessional Communication in Healthcare (2 units)

This course allows the student to enhance professional effectiveness through the improvement of communication skills. Learning is achieved through active participation in individual and group interactions that mirror professional practice. (1 hour lecture, 3 hours lab)

PHYTH 744
Health Care Systems and Regulatory Aspects of Physical Therapy (2 units)

This course addresses how the design of the American health care system and the regulation of practice affect physical therapy practice. Students learn how they can successfully adapt and respond to a dynamic health care system in which change is a constant. (2 hours lecture)

PHYTH 745
Communications in Health Care II (2 units)

Application of communication skills learned in Interpersonal and Interprofessional Communication I to clients who are experiencing psychological distress in addition to their physical illness or injury. Interpersonal issues will be addressed in the form of recognizing the signs of physical or emotional abuse, mood or anxiety disorders, substance abuse, and suicidal ideation. Negotiation expertise and stress management within the context of management and delivery of physical therapy services will be covered. (2 hours lecture)

PHYTH 746
Management of Physical Therapy Services (2 units)

Students study leadership and management of physical therapy service delivery. Principles of management as applied to physical therapy, including organizational behavior, resource planning and management, program planning, financial planning, marketing, personnel direction and management, quality management, risk management, and legal and ethical issues are explored. Units on contracting, consulting, health maintenance organizations, and Medicare and Medicaid requirements are included. The concept of a physical therapist as an autonomous practitioner will be discussed in this course. (2 hours lecture)

PHYTH 747
Professional Issues II (1 unit)

This course addresses professional ethics, including ethical reasoning, moral agency, and moral courage based on the authentic experiences of students during clinical experiences. The course also addresses current issues affecting the profession of physical therapy. In both ethics and current issues, the importance of advocacy and leadership is addressed. Additionally, career planning and lifelong professional development are approached through portfolio development.

PHYTH 752
Case Studies I (1 unit)

This course is the first in a three-course series designed to complement and promote application, integration, and furtherance of concepts learned in other physical therapy classes. Students will study various cases representing a large variety of diagnoses, issues, settings, and populations. Critical thinking and clinical decision-making will be emphasized as students prepare material about the cases for presentation and discussion, and then select and defend a choice of action in various aspects of the case. Small groups of students will

meet with an instructor in a seminar format. Topics in this semester may include: medical screening issues, application of evidence to decision-making in practice, lower and upper quarter examination, evaluation, and management issues. Other topics may include ergonomic settings, referrals, delegation, working with difficult patients, group treatment, lack of insurance/resources, various demographic differences, and therapist burn-out.

(2 hours seminar)

PHYTH 753

Case Studies II

(1 unit)

This course is the second in a three-course series designed to complement and promote application and integration of concepts learned in other physical therapy classes. Small groups of students will meet with an instructor in a seminar format, and will study various cases representing a variety of diagnoses, issues, settings, and populations. Students will need to include considerations of patients' psychological, social, and cultural perspectives and their situation within the health care delivery system in the United States to make clinical decisions resulting in efficient and effective physical therapy patient/client management. Topics in this semester include the following: patients with movement dysfunctions due to neuromuscular conditions that are acute, chronic, or progressive in nature across the lifespan and in a variety of settings in the health care delivery system. A special focus of this course is the integration of issues surrounding diversity and inclusion in healthcare settings. (2 hours seminar)

PHYTH 754

Case Studies III

(1 unit)

This course is the third in a three-course series designed to complement and promote application, integration, and furtherance of concepts learned in other physical therapy classes. Students will study various cases representing a large variety of diagnoses, issues, settings, and populations. Critical thinking and clinical decision-making will be emphasized as students prepare material about the cases for presentation and discussion, and then select and defend a choice of action in various aspects of the case. Small groups of students will meet with an instructor in a seminar format. Topics in this semester may include: complex and multiple diagnoses, intensive care, consultation, geriatrics, abusive situations, ethical dilemmas, screening, health risks, and emergency situations. (2 hours seminar)

PHYTH 755

Research I

(2 units)

The three-semester research sequence is designed to prepare the student to be a competent consumer of research and a knowledgeable participant in clinical research. This first course is designed to introduce students to the basic principles of the scientific method and prepare them to analyze research studies critically. Focus will be on the role of research, methodologies, sampling, levels of measurement, probability, hypothesis testing, reliability and validity, and standard error. Students will be prepared to critique articles in the literature. (2 hours lecture)

PHYTH 756

Research II

(2 units)

The three-semester research sequence is designed to prepare the student to be a competent consumer of research and a knowledgeable participant in clinical research. This second course is designed to give students practical experience with data collection, input, analysis, and documentation. Focus will be on how to design a research project, ethical conduct in science, and tests of significance such as ANOVA, correlation, and regression. Students will develop hypotheses and research questions, and continue to critique literature, particularly related to development of clinical practice guidelines. (2 hours lecture)

PHYTH 757

Research III (2 units)

The three-semester research sequence is designed to prepare the student to be a competent consumer of research and a knowledgeable participant in clinical research. This third course is designed to give students practical experience with data collection, input, analysis, and documentation in single subject design studies. Students will critique literature and will write a single subject design study based on a patient case from prior clinical experiences. This course includes completion of the case study report during the six-month internship during the following spring and summer semesters.

PHYTH 761

Integrated Clinical Experience I

(0.5 unit)

PHYTH 761 is the first in a series of one week full-time, supervised clinical learning experiences. It provides the student with the opportunity to observe competent physical therapists engaged in physical therapy patient management, including examination, evaluation, diagnosis, prognosis, intervention and outcomes as well as to begin participating in portions of the interventions with patients. Students will have an opportunity to develop skill in conducting a patient interview of a patient with a single or simple movement dysfunction as well as practicing the skills learned during their first semester (refer to activities sheet). Patient/family education and interdisciplinary communication are also major considerations.

PHYTH 762

Integrated Clinical Experience II

(0.5 unit)

PHYTH 762 is the second in a series of one week full-time, supervised clinical learning experiences. It provides the opportunity for students to continue their learning through observation and practice of: physical therapy patient management, including examination, evaluation, diagnosis, prognosis, intervention and outcomes for patients with musculoskeletal dysfunctions; and to explore the role of physical therapy in the health care delivery, legal and ethical considerations, and age, socioeconomic, and cultural considerations affecting treatment outcomes and utilization of services. Students have the opportunity to develop skill in conducting subjective and objective examinations and diagnosis of movement dysfunctions with musculoskeletal etiology. Patient and family education and inter-professional

communication are also major considerations.

PHYTH 763
Clinical Experience I (5 units)

Experiential learning in clinical settings with the primary emphasis on the physical therapy patient/client management process for persons with musculoskeletal dysfunctions. This is a full-time, eight-week-long clinical experience.

PHYTH 764
Integrated Clinical Experience III (0.5 unit)

PHYTH 764 is third in a series of three semesters of one week supervised integrated clinical experiences (ICE), this ICE provides students with the opportunity to examine, evaluate, determine appropriate interventions, and assess the outcomes of physical therapy patient management for adults and/or children with neurological movement dysfunctions.

PHYTH 765
Clinical Experience II (5 units)

Experiential learning in clinical settings with the primary emphasis on the physical therapy patient/client management process for persons with neuromuscular dysfunctions with the adult and/or pediatric population. This is a full-time, eight-week-long clinical experience.

PHYTH 766
PT Internship (no credit assigned)

The internship is a full-time, six-month clinical experience following successful completion of the academic portion of professional program. During the internship, interns will fully integrate her/his academic and clinical experiences to achieve the transition from student to independent practitioner capable of practicing in a direct access environment. The intern will have the opportunity to exhibit competence in all aspects of physical therapy patient management for a variety of patients with impairments, functional limitations and disabilities typically seen in PT practice. In addition, they will achieve competence as practitioners on interdisciplinary teams and effective participants in the health care delivery system.

ELECTIVES

PHYTH 700
**The Interdisciplinary Team:
Improving the Care of Our Elders** (1.5 units)

The need and benefit of interdisciplinary healthcare teams is vital to integrated geriatric care. This course will help the student understand the work style and contributions of a variety of healthcare team members (physician, nurse, pharmacist, chaplain, therapists, etc.) to the geriatric team. Overviews of the roles of interdisciplinary teams in geriatric healthcare will lead to exposure to the variety of disciplines in interdisciplinary geriatric team practice, including field observations of geriatric interdisciplinary teams in practice. A framework for understanding the dynamics of interdisciplinary team practice will be provided so students will have a working background for how to participate productively as a team member of a geriatric interdisciplinary team.

PHYTH 771 Individual Independent Study (1-3 units)

PHYTH 772 Group Independent Study (1-3 units)

PHYTH 781
Advanced Pediatrics (2 units)

Focuses on physical therapist patient/client management of complex multisystem involvement in the pediatric population. The use of standardized pediatric tests, measurements and evidenced based practice to guide decision making is emphasized throughout the course.

PHYTH 782
Physical Therapy in Sports Medicine (2 units)

This course focuses on physical therapist management of patients/clients with sports-related musculoskeletal impairments and functional limitations. Knowledge of anatomy, biomechanics, exercise and rehabilitation principles is applied along with clinical reasoning processes to this patient population.

PHYSICIAN ASSISTANT

DEPARTMENT OF PHYSICIAN ASSISTANT

HISTORY

The Physician Assistant (PA) program started in 1999 as the first entry-level graduate PA program in the state of California. Coursework and clinical experiences were planned to provide for development of skill as primary care providers, as well as to offer opportunities for students to get a beginning foundation in a variety of medical and surgical clinical specialties.

MISSION

The 27 month graduate program at Samuel Merritt University is designed to prepare students for entry-level practice as physician assistants. In keeping with the mission of Samuel Merritt University, the physician assistant program is committed to educating students for a life of highly skilled and compassionate service in health care. This program is designed to provide the comprehensive clinical and didactic training necessary to develop highly skilled, well-educated physician assistants capable of providing quality health care in a wide variety of clinical settings. Upon completion of this program, the student is prepared to take the national certifying examination and assume entry-level practice as a physician assistant.

PHILOSOPHY OF THE PHYSICIAN ASSISTANT DEPARTMENT

The Physician Assistant Department strives to prepare graduates to assume the role of an interdependent medical



provider. Graduates will demonstrate commitment to the community and the profession through active leadership, manifest critical and creative thinking, use effective communication skills, and possess the educational foundation for continued growth and development in a changing world of diverse cultures. In addition, they will display a commitment to lifelong learning.

The practice of medicine is both an art and a science and its practitioners must be schooled in the diagnosis and treatment of pathologies as well as patient instruction in identifying and engaging in health promoting activities and disease preventing lifestyles. Professional practice demands the melding of contemporary biological science with the art of compassionate teaching, listening,

facilitating, and guiding. It embodies a continuum of ages from neonatal to geriatrics, illnesses from acute to chronic, and practice arenas from ambulatory to intensive care. Further, it demands the highest ethical and moral standards. Historically, physician assistants have always believed that one of their highest priorities is to promote the public's interest and the patient's needs before any other considerations and to serve as active patient advocates. We are committed to assuring that health care services are accessible and compassionate.

The faculty believe that the academic environment should provide students with opportunities to learn from a wide variety of clinical disciplines and an equally broad array of health

professionals. By working and learning in this environment, students gain an appreciation of different styles of thinking, approaches, functions, and responsibilities. These experiences will shape the graduate's understanding of their role and responsibilities in the provision of health care and to society as a whole. We believe that physician assistants must understand the historical and social environment in which the profession began as well as contemporary environments in which they practice.

Specifically, the program is committed to the following goals:

1. The education of highly skilled, knowledgeable physician assistants who contribute to the provision of high-quality health care to all individuals in a wide variety of clinical settings.
2. The provision of a rigorous didactic and clinical education in the basic and behavioral sciences and medical disciplines necessary to produce excellent clinicians.
3. The development of physician assistants who can engage in the scholarly advancement of the profession by participation in investigative studies. In addition, s/he must critically evaluate contemporary medical literature and appropriately apply this material to practice through a thorough understanding of research methodologies, study design, and epidemiologic principles.
4. The demonstration of appreciation for social and cultural effects on the delivery of health care through exposure to a wide variety of clinical settings reflecting the diversity of patients and the communities in which they reside.
5. The preparation of clinicians with an understanding of health policies and delivery systems to allow their participation as health care leaders in identifying solutions to community and professional endeavors.
6. The education of students in current information exchange systems and their associated technologies to enhance their productivity as students and professionals.
7. The development of clinicians who appreciate the value of human dignity, individual and societal decision-making, and the overarching ethical issues driving health care today, insuring the demonstration of exemplary ethical and legal conduct in daily practice.
8. The development of clinicians with a commitment to lifelong learning through both informal and formal professional development activities.

MASTER PHYSICIAN ASSISTANT DEGREE

The Physician Assistant Department offers a 27 month entry-level master's degree program. Upon completion of program requirements, graduates are prepared to take the Physician Assistant National Certifying Examination (PANCE).

PROGRAM LEARNING OUTCOMES

The Physician Assistant Department has adopted the Competencies for the Physician Assistant Profession established by the four national PA organizations (National Commission on Certification of Physician Assistants, American Academy of Physician Assistants, Physician Assistant Education Association, and the Accreditation Review Commission for Education of the Physician Assistant) as program learning outcomes. The PA Department uses these outcomes to guide curricular change and development. The competencies, published in 2003, are grouped into six content areas defining the Program Learning Outcomes for the PA Department. Graduates of the PA Program are expected to demonstrate competence in the following outcome areas:

1. Medical Knowledge:

- > Understand etiologies, risk factors, underlying pathologic process, and epidemiology for medical conditions
- > Identify signs and symptoms of medical conditions
- > Select and interpret appropriate diagnostic or lab studies
- > Manage general medical and surgical conditions to include understanding the indications, contraindications, side effects, interactions, and adverse reactions of pharmacologic agents and other relevant treatment modalities
- > Identify the appropriate site of care for presenting conditions, including identifying emergent cases and those requiring referral or admission
- > Identify appropriate interventions for prevention of conditions
- > Identify the appropriate methods to detect conditions in an asymptomatic individual
- > Differentiate between the normal and the abnormal in anatomy, physiology, laboratory findings, and other diagnostic data
- > Appropriately use history and physical findings and diagnostic studies to formulate a differential diagnosis
- > Provide appropriate care to patients with chronic conditions.

2. Interpersonal Communication

- > Create and sustain a therapeutic and ethically sound relationship with patients
- > Use effective listening, nonverbal, explanatory, questioning, and writing skills to elicit and provide information
- > Appropriately adapt communication style and messages to the context of the individual patient interaction
- > Work effectively with physician and other health care professionals as a member or leader of a health care team or other professional group
- > Apply an understanding of human behavior
- > Demonstrate emotional resilience and stability, adaptability, flexibility, and tolerance of ambiguity and anxiety
- > Accurately and adequately document and record information regarding the care process for medical, legal, quality, and financial purposes.

3. Patient Care

Patient care includes age appropriate assessment, evaluation, and management. Physician assistants must demonstrate care that is effective, patient-centered, timely, efficient, and equitable for the treatment of health problems and the promotion of wellness. Physician assistants are expected to:

- > Work effectively with physicians and other health care professionals to provide patient-centered care
- > Demonstrate caring and respectful behaviors when interacting with patients and their families
- > Gather essential and accurate information about their patients
- > Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment
- > Develop and carry out patient management plans
- > Counsel and educate patients and their families
- > Competently perform medical and surgical procedures considered essential in the area of practice
- > Provide health care services and education aimed at preventing health problems or maintaining health.

4. Professionalism

Patient care includes age appropriate assessment, evaluation, and management. Physician assistants must demonstrate care that is effective, patient-centered, timely, efficient, and equitable for the treatment of health problems and the promotion of wellness. Physician assistants are expected to:

- > Work effectively with physicians and other health care professionals to provide patient-centered care

- > Demonstrate caring and respectful behaviors when interacting with patients and their families
- > Gather essential and accurate information about their patients
- > Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment
- > Develop and carry out patient management plans
- > Counsel and educate patients and their families
- > Competently perform medical and surgical procedures considered essential in the area of practice
- > Provide health care services and education aimed at preventing health problems or maintaining health.

5. Practice-based learning and improvement

Practice-based learning and improvement includes the processes through which clinicians engage in critical analysis of their own practice experience, medical literature, and other information resources for the purpose of self-improvement. Physician assistants must be able to assess, evaluate, and improve their patient care practices. Physician assistants are expected to:

- > Analyze practice experience and perform practice-based improvement activities using a systematic methodology in concert with other members of the health care delivery team
- > Locate, appraise, and integrate evidence from scientific studies related to their patients' health problems
- > Obtain and apply information about their own population of patients and the larger population from which their patients are drawn
- > Apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness
- > Apply information technology to manage information, access online medical information, and support their own education
- > Facilitate the learning of students and/or other health care professionals
- > Recognize and appropriately address gender, cultural, cognitive, emotional, and other biases; gaps in medical knowledge; and physical limitations in themselves and others.

6. Systems-based practice

Systems-based practice encompasses the societal, organizational, and economic environments in which health care is delivered. Physician assistants must demonstrate an awareness of and responsiveness to the larger system of health care to provide patient care that is of optimal value. PAs should work to improve the larger health care system of which their practices are a part. Physician assistants are expected to:

- > Use information technology to support patient care decisions and patient education
- > Effectively interact with different types of medical practice and delivery systems
- > Understand the funding sources and payment systems that provide coverage for patient care
- > Practice cost-effective health care and resource allocation that does not compromise quality of care

- > Advocate for quality patient care and assist patients in dealing with system complexities
- > Partner with supervising physicians, health care managers, and other health care providers to assess, coordinate, and improve the delivery of health care and patient outcomes
- > Accept responsibility for promoting a safe environment for patient care and recognizing and correcting systems-based factors that negatively impact patient care
- > Use information technology to support patient care decisions and patient education
- > Apply medical information and clinical data systems to provide more effective, efficient patient care
- > Utilize the systems responsible for the appropriate payment of services.

CURRICULUM OVERVIEW

Physician Assistant

Year I

FALL

PA 601/601L	Human Gross Anatomy	5.0
PA 603	Microbiology/Infectious Disease	3.0
PA 615/615L	Physical Diagnosis	4.0
PA 617	Interpersonal/Interprofessional Communication	2.0
PA 690	Introduction to Evidence Based Practice	2.0

Total **16.0**

SPRING

PA 602	Physiology & Mechanisms of Disease I	3.0
PA 608	Pharmacology I	3.0
PA 620	Medicine I	4.0
PA 630	Medical Ethics and Professionalism	2.0
PA 646	Behavioral Medicine	3.0
PA 660	Integrating Seminar I	1.0

Total **16.0**

SUMMER

PA 604	Physiology & Mechanisms of Disease II	3.0
PA 609	Pharmacology II	3.0
PA 621	Medicine II	4.0
PA 624	Geriatrics	2.0
PA 628L	Diagnostic Imaging	1.0
PA 631	Interpretation of Electrocardiograms	1.0
PA 661	Integrating Seminar II	1.0

Total **15.0**

Year II

FALL

PA 605	Clinical Simulation Lab	1.0
PA 622	Pediatrics	3.0
PA 623	Obstetrics/Gynecology	3.0
PA 625	The Role of the PA in General Surgery	3.0
PA 626	Emergency Medicine	3.0
PA 627	Policies and Systems of US Health Care	2.0
PA 629	Clinical Skills Lab	1.0
PA 662	Integrating Seminar III	1.0

Total **17.0**

Year II-III

CLINICAL YEAR

PA 606	Summative Evaluation	3.0
PA 607	Pre-Clinical Preparation	3.0
PA 680L	Family Medicine Clerkship	2.0
PA 681L	Internal Medicine Clerkship	2.0
PA 682L	General Surgery Clerkship	2.0
PA 683L	Pediatric Clerkship	2.0
PA 684L	Geriatric Clerkship	2.0
PA 685L	Obstetrics and Gynecology Clerkship	2.0
PA 686L	Emergency Medicine Clerkship	2.0
PA 687L	Elective Clerkship I	2.0
PA 688L	Elective Clerkship II	2.0

Total **24.0**

COURSE DESCRIPTIONS:

PA 601/601L Human Gross Anatomy (5 units)

This one-semester course is designed to familiarize the student with the clinically relevant aspects of human anatomy with an in-depth examination of anatomical structure and function. Emphasis is placed on relationship of structure and normal variants with clinical correlation to pathology and disease presentation. The course includes an embryology component to aid students in understanding normal anatomical development and the congenital malformation. A cadaver lab with dissection focuses attention on spatial relationships, anatomic variation, embryological origin, and relationships of organ systems. (3 units lecture, 2 units lab)

PA 602 Physiology and Mechanisms of Disease I (3 units)

The first course in a two part series, this course introduces students to fundamental physiological principles which apply to the human body. The integrated functioning mechanisms of the body will be presented in detail with special emphasis on the cardiovascular, respiratory, and central nervous systems. Clinical case presentations are presented to enable students to understand the pathophysiology of major diseases of each organ system.

PA 603 Microbiology and Infectious Disease (3 units)

This course will provide the student with advanced microbiology, virology, and immunology to understand the complexities of infectious disease. Emphasis will be placed on clinically relevant pathogens, isolation and aseptic techniques, identification, and treatment.

PA 604 Physiology and Mechanisms of Disease II (3 units)

The second part of a two course series, this course introduces students to fundamental physiological principles which apply to the human body. The integrated functioning mechanisms of the body will be presented in detail with special emphasis on the renal, gastrointestinal, and endocrine systems. Clinical case presentations are presented to enable students to understand the pathophysiology of major diseases of each organ system.

PA 605 Clinical Simulation Lab (1 unit)

This one unit lab will incorporate clinical simulation experiences from the medicine specialty courses taught in the final didactic semester, including OB/GYN, emergency medicine and pediatrics.

PA 606 Summative Evaluation (3 units)

The Summative Evaluation course contains the PA Program summative evaluation process for soon-to-be graduates. There are four elements to this course. All course elements must be completed satisfactorily in order to pass the course and be progressed to graduation. These elements are: 1) an Objective Structured Clinical Examination (OSCE), 2) an oral "board-like" examination, 3) an on-line certification preparation examination, the ePACKRAT, 4) An oral presentation of a clinical, case-based topic.

PA 607 Pre-Clinical Preparation (3 units)

This course will incorporate discipline-specific didactic and skills training during an intensive clinical preparatory period prior to the start of clinical rotations. During the clinical preparation period, instruction will focus on training necessary for the clinical rotation student, including blood borne pathogens, patient privacy and discipline-specific didactic and skills training. Students will be videotaped in a mock clinical encounter. The student will then be required to review and critique their own performance with feedback from faculty proctors.

PA 608 Pharmacology I (3 units)

This is the first in a series of two courses which focuses on pharmacokinetics, pharmacodynamics, and pharmacotherapeutic concepts in the major drug classifications. Problem-solving is emphasized through case studies designed to highlight proper drug selection, interactions, physiological implications, and administration.

PA 609 Pharmacology II (3 units)

The second semester of a two course series which focuses on the clinical application of pharmacotherapeutics, drug interactions and contraindications. Problem solving continues through the introduction of case studies designed to integrate knowledge and application.

PA 615/615L Physical Diagnosis (4 units)

This course focuses on the skills and knowledge necessary to gather a medical history, perform a complete physical examination, (including special maneuvers), integrate the findings into a diagnosis and, communicate the findings through a number of methods. Competence in examining the pediatric, geriatric, and obstetric patient will be expected in addition to adults. (3 units lecture, 1 unit lab)

PA 617
Interpersonal/Interprofessional Communication (2 units)

Personal and professional effectiveness training and communication skills building; includes role of the health professional as a team member, patient interviewing skills, patient/provider relationships, cultural diversity, sexuality, values, and coping skills. This course also provides instruction in elicitation of a medical history.

PA 620
Medicine I (4 units)

This is the first of a two-semester course, divided into systemic units, which focuses on the identification and treatment of medical conditions, syndromes, and diseases encountered in the integumentary, respiratory, cardiovascular, endocrine, gastrointestinal, genitourinary, neurological, musculoskeletal, renal, biliary, and hematopoietic systems. A case-based approach is used to familiarize the physician assistant student with the variety of presentations seen and the treatment options available.

PA 621
Medicine II (4 units)

This is the second of a two-semester course, divided into systemic units, which focuses on the identification and treatment of medical conditions, syndromes and diseases encountered in the integumentary, respiratory, cardiovascular, endocrine, gastrointestinal, genitourinary, neurological, musculoskeletal, renal, biliary and hematopoietic systems. A case-based approach is used to familiarize the physician assistant student with the variety of presentations seen and the treatment options available.

PA 622
Pediatrics (3 units)

This course uses a case-based learning format to aid students in understanding the physical and psycho-social fundamentals of normal growth and development, anticipatory guidance, immunizations and health maintenance. In addition, it focuses on the presentation of major pediatric disorders and conditions, their signs and symptoms, diagnosis, and management.

PA 623
Obstetrics and Gynecology (3 units)

This course provides the student with an overview of commonly encountered obstetric and gynecologic conditions in women's health care. Major topics include pregnancy and prenatal care, menopause, lactation, uterine and breast disorders, the menstrual cycle, its hormonal regulation, and commonly encountered conditions.

PA 624
Geriatrics (2 units)

This one-semester course is designed to provide the physician assistant student with an understanding of medical problems of the elderly, including the changes commonly associated with aging. In addition, it focuses on the increased opportunity for undesirable drug interactions, multi-organ system failure, limitations in mobility and communication, and other impairments.

PA 625
The Role of the PA in General Surgery (3 units)

This one semester course presents the fundamentals of care of surgical patients. It will introduce students to the role of the PA in the surgical environment and surgical patient management. This is a practical, case based course focusing on common general surgery topics and skills needed to succeed in a surgery clinical rotation. Students will draw on the medical knowledge gained throughout didactic training and apply it in various case scenarios and simulated patient encounters. The skill set and knowledge gained will assist the transition from didactic training to becoming a productive part of a surgical inpatient team during clinical rotations. (3 units lecture)

PA 626
Emergency Medicine (3 units)

This one-semester course focuses on the identification and diagnosis of the acutely ill or injured patient. Management of conditions commonly encountered in the emergency department will be covered, as will principles of trauma resuscitation.

PA 627
Policies and Systems of US Health Care (2 units)

This course explores issues of health policy with a focus on the provision of care in various delivery systems, reimbursement policies and their effect on patient access, physician assistant practice and the economics of public and private financing.

PA 628L
Diagnostic Imaging (1 unit)

Techniques of radiologic assessments will be emphasized in this laboratory course. Principles of radiologic examination will be provided with a focus on identifying normal variants and common pathologies in various diagnostic imaging modalities such as X-ray, CT, MRI, and nuclear studies.

PA 629
Clinical Skills Lab (1 unit)

This course is a one semester introduction to basic medical procedures utilized for diagnostic and therapeutic purposes in primary care, surgery, and emergency medicine practices. (1 unit lab)

PA 630
Medical Ethics and Professionalism (2 units)

This course explores medical ethics and clinical decision making, including the bioethics concepts of autonomy, beneficence/nonmaleficence, and justice. Issues around end of life, disabilities, healthcare disparity and every day ethical decision making are discussed. Professionalism, physician/PA relationships, cultural competency, and health literacy are introduced.

PA 631
Interpretation of Electrocardiograms (1 unit)

Techniques of electrocardiographic assessments will be emphasized in this laboratory course. Principles of electrocardiographic examination will be provided with a focus on electrophysiology, identifying normal variants and common pathologies on electrocardiography, and diagnosis of cardiac disease.

PA 646
Behavioral Medicine (3 units)

This course is designed to instruct the physician assistant student on the major psychiatric and mental disorders encountered in the outpatient setting. Included in the topics will be depression, anxiety, phobias, substance and eating disorders, somatoform, psychoses, neuroses, and personality disorders.

PA 660
Integrating Seminar I (1 unit)

This three-semester, small group experience provides the student with the opportunity to apply theory gained from lecture and laboratories to problems and cases designed to integrate knowledge and skills. Three hours of seminar/discussion weekly.

PA 661
Integrating Seminar II (1 unit)

This second semester of a three-semester series is designed to integrate the knowledge obtained in the previous semesters into evaluation, clinical problem-solving, assessment, and management of commonly-encountered disorders. Three hours of seminar/discussion weekly.

PA 662
Integrating Seminar III (1 unit)

The third semester of a three-semester series is designed to integrate the knowledge obtained in the previous semesters into evaluation, clinical problem-solving, assessment, and management of commonly-encountered disorders. Three hours of seminar/discussion weekly.

PA 680L
Family Medicine Clerkship (2 units)

A full time internship experience which exposes the student to outpatient family medicine. The student is expected to fully participate in the diagnosis and treatment of the commonly presenting disorders. (2 units clinical lab)

PA 681L
Internal Medicine Clerkship (2 units)

During this rotation, the student learns to apply basic medical knowledge to the problems and situations encountered on an inpatient service. By collecting history and physical exam information, formulating a complete problem list, participating in daily rounds and in the management of patient problems, the student develops an awareness of the complexity of disease processes and differential diagnosis. (2 units clinical lab)

PA 682L
General Surgery Clerkship (2 units)

This rotation emphasizes preoperative evaluation and preparatory procedures, assisting at the operating table, and management of patients through the postoperative period to discharge. Surgical clerkships can be completed in a variety of settings, including major academic hospitals, community hospitals and small private practices. (2 units clinical lab)

PA 683L
Pediatric Clerkship (2 units)

In this rotation, the student is assigned to either an institutional setting or a community-based pediatric site. Special emphasis is placed on communication skills and relating sensitively to both children and parents. The student gains familiarity with normal growth and development, pediatric preventive medicine, and evaluation and management of common childhood illnesses. (2 units clinical lab)

PA 684L
Geriatric Clerkship (2 units)

In this rotation, the student is assigned to an institution caring for the geriatric patient. Special emphasis is placed on the identification, and management of common problems in the elderly population. (2 units clinical lab)

PA 685L
Obstetrics and Gynecology Clerkship (2 units)

The student learns about common gynecological problems, pregnancy and prenatal care. The rotation emphasizes clinical experience with abnormal menstruation and bleeding, infections and contraception counseling. (2 units clinical lab)

PA 686L**Emergency Medicine Clerkship (2 units)**

This rotation stresses the evaluation and management of problems of the patient presenting to the emergency department. The student gains experience in the initial evaluation of potential life-threatening conditions and in performing problem-specific examinations and procedures. This rotation takes place in community hospital emergency departments as well as major trauma centers. (2 units clinical lab)

PA 687L**Elective Clerkship I (2 units)**

This is the first of two rotations designed to enhance the students' knowledge in a disciplinary area of their choosing. Students may repeat a rotation of particular interest to them or explore a medical or surgical specialty. (2 units clinical lab)

PA 688L**Elective Clerkship II (2 units)**

This is the second of two rotations designed to enhance the students' knowledge in a disciplinary area of their choosing. Students may repeat a rotation of particular interest to them or explore a medical or surgical specialty. (2 units clinical lab)

PA 690**Introduction to Evidence Based Practice (2 units)**

This course introduces students to evidence based medical practice, including the philosophy and principles of scientific methods of inquiry. Topics include library resources, conducting a search for medical literature, interpretation and critical evaluation of medical literature; NIH training modules including IRB training and human subjects research. Students will have the opportunity to evaluate current literature from the medical journals in light of research design and data collection. (2 units lecture)

PODIATRIC MEDICINE

CALIFORNIA SCHOOL OF PODIATRIC MEDICINE

HISTORY

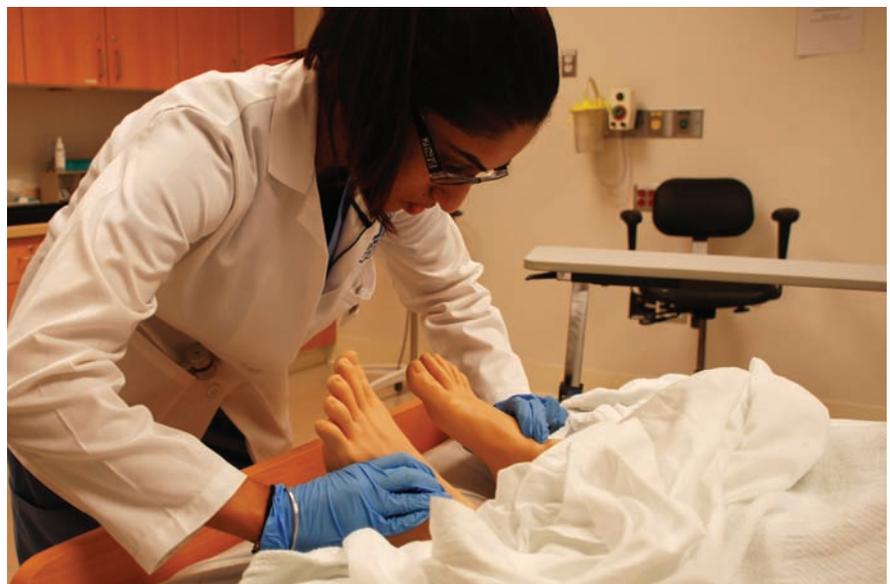
The California School of Podiatric Medicine was founded as the California College of Podiatric Medicine in 1914 in San Francisco where it operated as a single-purpose professional school. In 2001, CCPM sold its campus, including the Pacific Coast Hospital facility, and moved to Vallejo. In 2002, CCPM merged with Samuel Merritt University, becoming the California School of Podiatric Medicine within Samuel Merritt University. The merger was completed with the relocation of facilities to the Alta Bates Summit Medical Center campus in Oakland in July, 2002. CSPM is one of nine schools of podiatric medicine in the United States.

CSPM MISSION

The California School of Podiatric Medicine is committed to provide excellent podiatric medical education across the spectrum of healthcare delivery, meaningful community service, and innovative research. To achieve this mission we will treat everyone with compassion and respect, work cooperatively and inter-professionally, hold ourselves to the highest levels of ethical conduct, continuously strive to improve our performance, and manage our resources prudently.

OVERVIEW AND PHILOSOPHY

Podiatric medicine is a branch of the medical sciences devoted to the prevention, diagnosis and treatment of foot and ankle disorders, diseases, and injuries. Doctors of Podiatric Medicine are highly trained health care providers



and the only health professionals who exclusively specialize in problems affecting the foot and ankle. They see people of all ages and are often the first medical specialists to use mechanical, electrical, surgical, and medical means to:

1. Diagnose and treat traumatic injuries such as fractures, sprains, tendon ruptures, stress fractures, and dislocations.
2. Diagnose and treat neurological complaints such as neuroma, neuropathy, nerve entrapment, and pain syndromes.
3. Diagnose and treat musculoskeletal disorders and deformities such as bunions, hammertoes, muscle paralysis, bone tumors, heel spurs, fasciitis, and cysts.
4. Diagnose and treat cutaneous conditions such as ingrown nails, athlete's foot, warts, bacterial infections, malignancy, corns, and calluses.
5. Diagnose and treat complications of circulatory problems such as venous insufficiency, chronic edema, and arterial insufficiency.
6. Diagnose and treat complications of chronic illnesses such as diabetes, rheumatoid arthritis, osteoarthritis, and gout.
7. Diagnose and treat congenital and childhood deformities such as clubfeet, metatarsus adductus, flatfeet, polydactyly, and apophysitis.
8. Prescribe custom footwear, orthotics, and bracing.

CSPM TEACHING PHILOSOPHY

CSPM faculty members are committed to serve as positive role models, who promote excellence in teaching to produce graduates who are well prepared for podiatric residency. Through the CSPM Program Learning Outcomes, faculty members will ensure that each graduating student possesses the attributes that are necessary to meet their individual and collective responsibilities to the profession of podiatric medicine and to society.

PROGRAM LEARNING OUTCOMES

Prior to graduation, each DPM student must demonstrate, to the satisfaction of the faculty, knowledge and skills reflecting the following Program Learning Outcomes. The knowledge and skills will be attained as a result of the didactic instruction and clinical training received in the courses and clinical rotations and clerkship assignments from year one through year four.

Upon graduation, the student will:

1. Be knowledgeable in the preclinical sciences and use this knowledge as a foundation for learning outcomes two through nine.
2. Formulate and implement successful patient management strategies based upon thorough diagnostic and assessment skills.
3. Identify and perform clinical practice behaviors that hallmark professionalism, empathy and ethical decision making.
4. Select, interpret and apply historic and current scientific medical literature to clinical practice.
5. Acknowledge, value, and respect the role of all health care professionals.
6. Understand systems and healthcare policy.
7. Facilitate the promotion, maintenance and restoration of health for culturally diverse individuals, groups, families, and communities.
8. Understand that a life-long commitment to exhibit professional responsibility is part of professional behavior.
9. Demonstrate effective skills in verbal, written and technological interactions in communication with patients, families and colleagues and in information retrieval using relevant data bases.

DOCTOR OF PODIATRIC MEDICINE DEGREE

The educational program leading to the Doctor of Podiatric Medicine degree consists of a comprehensive curriculum in the preclinical and clinical sciences. The didactic coursework is completed during the first three years of the program. Clinical rotations begin at the start of the second academic year in June. During the summer months, second-year students begin to participate in clinical rotations, which cover biomechanics, radiology, general, and primary podiatric medicine. The majority of the third year and the entire fourth year are devoted to clinical rotations at inpatient and outpatient facilities, both in the Bay Area and throughout the United States.

As a requirement for graduation from CSPM, students must satisfactorily complete all of the required courses and clinical rotation assignments, have at least a cumulative grade point average of 2.0 (class of 2015) or 2.5 (class of 2016 and henceforth), take and pass the 3rd Year Clinical Rotation Practical Examinations, the 3rd Year Objective Structured Clinical Examination (OSCE), and the American Podiatric Medical Licensing Examination (APMLE) Part I examination, and take the APMLE Clinical Skills Patient Encounter (CSPE) and the APMLE Part II examination.

CURRICULUM OVERVIEW

Podiatric Medicine

Year I

FALL SEMESTER		UNITS
PM 701	Human Anatomy I	6.0
PM 705	Biochemistry I	3.0
PM 706	Histology	4.0
PM 723	Critical Thinking	1.0
PM 732	General Medicine I	3.0
PM 750	Podiatric Medicine I	1.0
Total		18.0

SPRING SEMESTER		UNITS
PM 707	Physiology	6.0
PM 709	Lower Extremity Anatomy I	3.5
PM 710	Human Anatomy II	3.0
PM 711	Biochemistry II	3.0
PM 752	Introduction to Clinical Medicine	1.5
PM 758	Public Health	1.0
PM 770	Biomechanics I	2.0
Total		20.0

Students will begin their second year clinical rotations during the summer between the end of the first year and the start of the fall semester of the second year.

Year II

SUMMER SEMESTER		UNITS
PM 714	Medical Microbiology	4.0
PM 716	Pharmacology I	4.0
PM 717	Immunology	3.0
PM 751	Radiology I	1.0
Total		12.0

FALL SEMESTER		UNITS
PM 715	Pathology I	3.0
PM 722	Lower Extremity Anatomy II	3.5
PM 771	Biomechanics II	2.0
PM 790	Podiatric Surgery I	2.0
Total		10.5

SPRING SEMESTER		UNITS
PM 718	Pathology II	3.0
PM 719	Pharmacology II	4.0
PM 734	General Medicine II	3.0
PM 744	Neuroscience and Clinical Neurology	6.0
PM 753	Podiatric Medicine II	2.0
PM 754	Radiology II	1.0
PM 791	Podiatric Surgery II	3.0
Total		22.0

YEAR II CLINICAL ROTATIONS

Students will complete clinical rotation assignments in the following inpatient, outpatient and specialty clinical facilities.

PM 733	Second Year Medicine Rotation	0.5
PM 735	Second Year Radiology Rotation	0.5
PM 756	Second Year Highland Hospital Rotation	1.0
PM 773	Second Year Biomechanics Workshop	1.0
PM 781	Second Year Simulation Center Rotation	0.5
PM 782	Second Year Clinical Skills Rotation	1.0
PM 788	Second Year Homeless Clinic Rotation	0.5
PM 789	Second Year Laguna Honda Hospital Rotation	0.5
Total		5.5

Year III

FALL SEMESTER		UNITS
PM 736	Dermatology I	1.5
PM 738	General Medicine III	3.0
PM 755	Jurisprudence	1.0
PM 772	Biomechanics III	2.0
PM 792	Pod Surgery III	2.0
Total		9.5

SPRING SEMESTER		UNITS
PM 737	Pediatrics	2.0
PM 739	Dermatology II	1.5
PM 743	General Medicine IV	2.0
PM 793	Podiatric Trauma	2.0
Total		7.5

YEAR III CLINICAL ROTATIONS

Third year students will complete the following clinical rotation assignments at affiliated Bay Area medical centers, outpatient facilities, and community practice clerkships.

PM 741	Third Year Medicine	3.0
PM 759	Third Year Diabetic Wound Care Rotation	4.0
PM 760	Third Year Highland Hospital Rotation	2.5
PM 761	Third Year Private Office Clerkship	2.0
PM 762	Third Year Radiology Rotation	1.0
PM 794	Third Year Biomechanics and Sports Medicine Rotation	2.0
PM 796	Third Year Surgery Rotation	7.5
Total		22.0

YEAR IV CLINICAL ROTATIONS

In the fourth year, students have the opportunity to base their clinical training at one of several affiliated medical centers as specified below. Students receive 4 units of credit for each month they complete a rotation or clerkship assignment. A minimum of 48 units of credit is required to complete the twelve-month fourth year curriculum.

PM 799-1 Albuquerque, New Mexico Core	48
PM 799-2 Arizona Core	48
PM 799-3 CSPM Core	48
PM 799-4 Tacoma, Washington Core	48
PM 799-5 Los Angeles Core	48
PM 799-7 Salt Lake City, Utah Core	48

COURSE DESCRIPTIONS

PRECLINICAL SCIENCES

PM 701/PM 710 Human Anatomy I & II (9 units)

These courses, offered over two semesters, provide an opportunity for students to learn human gross and developmental anatomy. The human body will be the key source of information, and dissection and observation of the gross structure of the human cadaver will be an important activity. Lectures on the development of the various body systems will be closely correlated with the gross dissection of these systems (see Human Anatomy below) allowing students to gain an understanding of common congenital anomalies and how the adult form develops.

Lectures, conferences, demonstrations and textbook assignments will be used to present anatomical information that has both practical and clinical importance and to supplement and reinforce the knowledge gained through dissection. The study of the human body is approached by regions and includes the upper extremity, thorax, abdomen, pelvis-perineum, back, head and neck. Course content emphasizes the relationship of structures to one another, the importance of these relationships for normal function, and their clinical relevance.

PM 705/PM 711 Biochemistry I & II (6 units)

A two course sequence, Biochemistry encompasses the general principles of human biochemistry. Focusing on the chemical process which occurs in all living systems, biochemistry provides the necessary biochemical knowledge for those in the medical profession. The course adopts a "whole-body" approach to the study of modern biochemistry and takes into account the rapidly expanding corpus of knowledge in this area.

Emphasis is on the normal metabolic activities of living cells and their relation to selected disease states. An introduction to several biochemical techniques (experimental and practical) employed in the diagnosis and treatment of disease is provided. Upon completion of the course, students are expected to apply biochemical principles to describe and treat metabolic disorders based on clinical findings.

PM 706 Histology (4 units)

Histology includes lectures, small group work, and case studies. The course presents normal histology and correlates physiological function with cellular structure and tissue organization. Basic elements of cell biology and systems physiology are correlated with the microscopic and ultra-structural anatomy of specific cells, tissues and organs.

Ultimately, histology prepares the student to apply knowledge of normal structure to disease processes and pathological conditions that are either structure or function and to understand the sub-cellular structures involved in pharmacological processes. Lectures and small group work use diagrams and micrographs of sectioned material of healthy normal cells, tissues, and organs of the body. Functional aspects of the structures are stressed in lecture. Small group work emphasis is on identification of sectioned material at the light microscope level, with some incorporation of specialized cellular components at the ultra-structural level. This course enables students to visualize normal microscopic structure and function when confronted with pathological conditions.

PM 709 Lower Extremity Anatomy I (3.5 units)

This course presents detailed osteology and arthrology of the lower extremity, involving both lecture and laboratory sessions. Lecture material is supplemented with learner centered activities, including case method teaching and simulation. The laboratory portion emphasizes detailed examination of osteological features of the lower limb including cross-sections and radiographs. Upon successful completion of Lower Extremity Anatomy I, the student is prepared to advance to Lower Extremity Anatomy II.

PM 722 Lower Extremity Anatomy II (3.5 units)

Continuing where Lower Extremity Anatomy I ends, this course presents the soft tissue anatomy (myology, neurology, and angiology) of the lower extremity, involving both lecture and laboratory sessions. Lecture material is supplemented with learner centered activities, including case method teaching and simulation. The laboratory portion emphasizes detailed donor body dissection, but also includes demonstration of prosected specimens, three-dimensional models, radiographs, cross-sections, and other special preparations of the lower limb

A small number of students are assigned to each cadaver so that each student can gain experience in the use of instruments and in dissection technique. Upon successful completion of Lower Extremity Anatomy II, the student is prepared to advance to studies in podiatric medicine and surgery, equipped with the necessary morphological knowledge of the lower limb. Prerequisite: PM 709.

PM 707**Physiology****(6 units)**

Present day podiatric medical practice depends on a broad knowledge of physiological systems and mechanisms. The physiology course provides a solid foundation in human physiology in preparation for subsequent clinical training and prepares students for assessing pathophysiology as it arises in podiatric medicine.

Basic physiological concepts such as homeostasis, membrane transport and membrane potential are addressed and these concepts are applied to each of the major physiological systems. The physiology course combines several approaches to explore physiology, including power point lecture presentations and animations of physiological mechanisms.

PM 714/PM 717**Medical Microbiology and Immunology****(7 units)**

Medical Microbiology and Immunology is the study of host-parasite relationships, with particular emphasis on humans as the host, and on the parasites that cause infections and diseases in humans. These two second year summer semester courses are divided into six general subject areas: general bacteriology, medical mycology, medical virology, medical parasitology, and immunology.

Students are required to perform laboratory exercises as part of the Medical Microbiology course. The laboratory exercises emphasize basic laboratory techniques used for the isolation and identification of the most common bacteria and fungi encountered in podiatric practice. After completion of these two courses, the student will be able to identify the normal microbial flora of the human body and to recognize true pathogens, opportunistic pathogens, and non-pathogens. The student will also be able to identify the different immune processes used by healthy humans to prevent infections by pathogens.

PM 715/PM 718**Pathology I & II****(6 units)**

Pathology is the study of the structural and functional changes in tissues and organs of the body as a result of disease. This two-semester lecture course begins with the fundamental concepts of pathology including topics such as reaction to injury, regeneration, repair mechanisms, inflammation and neoplasia.

Following this introductory material, a systematic approach to each organ system is adopted that covers both neoplastic and non-neoplastic disorders. Special emphasis is given to the diseases of the musculoskeletal system. This basis is then expanded to investigation of diseases of each organ system with emphasis on pathology of the lower leg and foot.

PM 716/PM 719**Pharmacology I & II****(8 units)**

Pharmacology I is the study of drugs, how they work, and how they affect the human body. The course is taught over two semesters and is presented as a systematic investigation into pharmacological agents used in medicine based on drug group classification. During the summer semester, the course centers on a variety of basic pharmacological principles, as well as the study of certain therapeutic drug classes.

Basic principles include: drug agonism and antagonism, drug-receptor bonds, pharmacokinetics and pharmacodynamics. Topics for the spring semester include antimicrobials, drugs affecting endocrine function, gastrointestinal agents, respiratory agents, botanicals, drugs affecting joint and connective tissue, hematopoietic agents, and neoplastic agents.

For all of the drugs learned, students are expected to recognize the agent's primary mechanism of action, potential for drug-drug or drug-disease interactions, major side effects, and use in a clinical setting. Clinical pharmacists who specialize in the topic area on which they lecture primarily teach the course. Lectures draw from personal experience, and often relay patient vignettes to students, based on actual clinical cases. This allows students to learn both the pharmacology of the agents as well as how they are used in clinical practice. Special emphasis is given to those agents, which are widely used in the practice of podiatric medicine.

PM 723**Critical Thinking****(1 unit)**

This course will provide the student with an opportunity to develop a higher order set of thinking skills. The students will engage in small group discussion and tasks that will allow students to learn the differences between implicit and explicit reasoning and to apply this reasoning to clinical scenarios.

CLINICAL SCIENCES

PM 732/PM 734/PM 738/PM 743

General Medicine I, II, III, & IV (11 units)

The didactic medicine curriculum is four semesters, starting with cardiovascular medicine in the fall of the first year, followed by dermatology, neurology and principles of internal medicine. The medicine curriculum includes physiology, physical diagnosis, emergency medicine and medical ethics. Upon completion of the general medicine curriculum, students will have a thorough understanding of the diagnosis and management of medical illness.

PM 744

Neuroscience and Clinical Neurology (6 units)

This medical neuroscience and neurology course is designed to provide a thorough understanding of the human nervous system. This course will cover topic areas which include neuroanatomy, neurohistology, neurophysiology, neurochemistry, neuroembryology, sensory systems and pathways, motor systems and pathways, clinical identification of specific neurological disorders and diseases, neuroanatomical identification of nervous system lesions, and neurological diseases and their clinical implications.

PM 750

Podiatric Medicine I (1 unit)

This introductory podiatric medicine course focuses on the common clinical foot conditions that are treated by practicing podiatric physicians. The course covers the etiology, diagnosis, and treatment of common clinical pathology, including hyperkeratosis, intermetatarsal neuroma, gout, plantar fasciitis, verrucae, onychomycosis, and cold injury.

PM 753

Podiatric Medicine II (2 units)

This course focuses on diabetic wounds and peripheral arterial disease, two conditions that are abundant in any podiatric practice. Topics covered include wound pathogenesis, diagnosis, classification and management as well as several lectures on the diagnosis and management of peripheral arterial disease.

PM 752

Introduction to Clinical Medicine (1.5 units)

Taught in the spring of the first year, Introduction to Clinical Medicine is designed to help students with the transition from learning in a classroom to learning in a clinical setting. This course covers introductory techniques in obtaining a patient history, formulating a diagnosis, learning to present patients, and performing fundamental podiatric treatment. By the end of this course, students should be better prepared to start second year clinical rotations.

PM 751

Radiology I (1 unit)

This second year summer semester course introduces students to the principles of radiography, with an emphasis on radiation safety, technique and the material required to pass the California radiological licensing examination (which is typically taken upon completion of your residency). Radiology I also introduces advanced imaging modalities such as MRI, CT and diagnostic ultrasound. Upon successful completion of Radiology I, students will be better prepared for Radiology II and for clinical radiology rotations.

PM 754

Radiology II (1 unit)

In this second year spring semester course, students will learn to recognize key radiographic findings and link those findings to diseases that affect the lower extremity. Upon completing Radiology II, students will be better prepared to interpret foot and ankle radiographs during clinical rotations.

PM 736/PM 739

Dermatology I & II (3 units)

This two-semester course provides an integrated approach to dermatologic diagnosis and therapy. Particular emphasis is given to history-taking pertinent to the patient with a dermatological problem, techniques of physical examination, and relevant diagnostic laboratory procedures. The courses are designed to teach an effective biomedical and clinical approach to patients with dermatological disease throughout the body, including the lower extremities.

PM 737

Pediatrics (2 units)

This one-semester third year course introduces students to clinical pediatrics. The course discusses issues of the history and physical relevant to the pediatric patient and includes lectures on child development, pediatric orthopedics, pediatric infections and pediatric oncology.

PM 755

Jurisprudence (1 unit)

This third year course is taught by the attorney for the California Podiatric Medical Association. The course exposes students to the legal aspects of the podiatric medical profession.

PM 758

Public Health (1 unit)

This course is dedicated to public health and exposes students to epidemiology and medical statistics. In addition, research design and interpretation are emphasized.

PM 772 Biomechanics III**(2 units)**

A series of lectures designed to aid third-year students in applying the concepts and principles of lower extremity biomechanics to treatment modalities. Specific foot types and pathologies that were identified in Biomechanics I and II will be reviewed with emphasis on treatment. Concepts related to the mechanism of pathology will be presented specifically relating to the podiatric patient, gait disturbances, orthotic prescription writing and shoe therapy.

PM 790 Podiatric Surgery I**(2 units)**

Podiatric Surgery I is an introductory course offered in the fall semester of the second year, which provides lectures on surgical principles, fixation techniques, evaluation and surgical management of infections, nail pathology and soft tissue lesions, laboratories, suturing and other skills. Upon completion of the course the student will be able to apply surgical principles in the diagnosis and treatment of infections, nail and soft tissue pathology as well as being familiar with the various types of fixation techniques.

PM 791 Podiatric Surgery II**(3 units)**

This course introduces second year podiatric medical students to the pathomechanics and surgical treatment for digital, lesser metatarsal, and 1st ray pathology. Students also receive workshops on fabrication and use of preoperative templates. At the conclusion of this course, students will have a basic understanding of how to evaluate and manage common forefoot pathologies.

PM 792 Pod Surgery III**(2 units)**

Building upon the surgical principles presented in Podiatric Surgery I and II, this advanced surgery course instructs students in reconstructive surgical techniques and procedures of the rearfoot and ankle. The course includes discussion of the underlying causes of rearfoot and the ankle pathology as well as the surgical approaches used to manage these conditions.

PM 793 Podiatric Trauma**(2 units)**

This surgery course instructs students in the medical and surgical management of the patient who has suffered lower extremity trauma. Students are first instructed on the basic principles of trauma management followed by instruction on applying these principles to specific foot and ankle injuries. Although the instruction describes both direct and indirect trauma, the emphasis is on indirect trauma, which represents the majority of lower extremity injuries. The majority of trauma situations of the lower extremity are the result of indirect mechanisms, and it is the understanding of these mechanisms that are tantamount to the successful treatment of these injuries.

The course presentations are in Powerpoint with intraoperative photographic slides that illustrate the actual surgeries and compare the preoperative and postoperative clinical and radiographic appearance of the foot and ankle. Upon completion of the four podiatric surgery courses, students will have the necessary didactic knowledge to begin their residency training.

CLINICAL ROTATIONS DESCRIPTIONS

PM 756

Second Year Highland Hospital Rotation (1 unit)

This one-month second-year rotation provides an opportunity for students to evaluate and treat a variety of patients and pathologies in a busy urban podiatric medicine clinic. In addition to performing palliative care, students will participate in wound care, trauma, and sports medicine.

PM 789

Second Year Laguna Honda Hospital Rotation (.5 unit)

This one-month rotation for second year students meets for 8 hours each week. At Laguna Honda Hospital, one of the nation's largest municipally operated nursing facilities, students gain familiarity with the diseases and conditions commonly seen in a geriatric population. Students learn to diagnose and treat foot problems while improving their foot care skills.

PM 788

Second Year Homeless Clinic Rotation (.5 unit)

Second year students participate in this one-month Homeless Clinic rotation, which provides podiatric medical care at several clinics for homeless residents of San Francisco. This rotation, which is done in collaboration with the City and County of San Francisco, gives students an opportunity to evaluate patients and render podiatric medical services to individuals who do not have access to foot care. The Homeless Clinics operate two evenings per week. First year students also have an opportunity to visit these clinics to observe as well as participate in patient care.

PM 782

Second Year Clinical Skills Rotation (1 unit)

This second year clinical skills rotation is a four week rotation that uses a variety of learning techniques from a multi-disciplinary faculty in a small group setting. Each week students will learn different clinical skills, which will help solidify fundamental patient evaluation skills. Students will develop an increased level of awareness of medical ethics, medical errors and communication with patients of different ethnicities and cultural backgrounds. During the rotation, students will also gain basic expertise in suturing, interpretation of clinical labs, EKGs, and chest films.

PM 735

Second Year Radiology Rotation (.5 unit)

In this two-month rotation, students spend four hours each week in a small group setting interpreting normal plain film radiographs and normal MRI studies of the foot and ankle under the direct supervision of an attending podiatrist. Upon completion of this rotation, students will be prepared to begin their third-year radiology rotation (DPM-762)

PM 781

Second Year Simulation Center Rotation (0.5 unit)

The second year Simulation Center Rotation, taught within the Health Sciences Simulation Center (HSSC) facility, is a 4 week course that uses a variety of simulation-based learning techniques in a small group setting. Topics covered include patient evaluation, medical emergencies, operating room protocol, and interdisciplinary collaboration. By the end of this rotation students should have increased confidence working in an operating room environment, increased confidence interacting with patients and other health care professionals and should have more confidence when starting their third-year clinical rotations.

PM 733

Second Year Medicine Rotation (.5 unit)

This rotation is designed to prepare podiatric medical students for general medicine and emergency medicine clinics. Students are taught how to perform a complete history and physical. This rotation takes place in a state of the art physical diagnosis laboratory. After completion of this rotation, students are able to perform a full history and physical exam and develop a differential diagnosis.

PM 773

Second Year Biomechanics Workshop (1 unit)

A series of seven 8-hour workshops and demonstrations designed to develop necessary skills that will allow students to apply the concepts of lower extremity biomechanics to orthotic therapy. Students will perform arthrometric examinations, under faculty supervision, as well as participate in gait evaluations. Students will be required to develop the skills necessary to take an accurate non-weight bearing and semi-weight bearing negative cast. Included in this course are two sessions at a professional orthotic laboratory where the student will participate in the various stages of production of their own functional orthotic. Included are workshops on orthotic prescription writing, orthotic evaluation and orthotic troubleshooting.

PM 760

Third-Year Highland General Hospital Rotation (2.5 units)

This two-month third-year rotation provides an advanced opportunity for students to evaluate and treat a variety of patients and pathologies in a busy urban podiatric medicine clinic. During this rotation, students will also spend two half-days each week in the third-year radiology rotation (PM-762).

PM 762

Third Year Radiology Rotation (1 unit)

During this two-month, small-group rotation, students will become more proficient at reading, identifying, and interpreting foot and ankle pathology on plain film radiographs, MRIs, CT scans and diagnostic ultrasound images.

PM 794**Third Year Biomechanics and Sports Medicine Rotation****(2 units)**

This one-month, third year clinical rotation focuses on treating patients with lower extremity pathology that is mechanical in origin. The overall goal is to improve student proficiency in gait analysis, musculoskeletal evaluation of the foot and ankle and treatment using orthotic devices. In addition this rotation is designed to capture the excitement and challenges presented in treating sports medicine related injuries. Emphasis will be placed on clinical recognition, detection, and conservative treatment so that the athlete can safely return to their sport as soon as possible. Upon completion of this rotation, students will be better prepared for their 4th year clerkships.

PM 759**Third Year Diabetic Wound Care Rotation****(4 units)**

Presented as a two-month rotation in the third year, students will see patients in several wound care clinical settings. Students learn and use the most appropriate and up-to-date evaluation and treatment modalities for a patient population at high risk for amputation. There is an emphasis on student initiative in increasing their knowledge base by outside readings, journal club, and student representation.

PM 741**Third Year Medicine Rotation****(3 units)**

The third year Medicine rotation, taught within the Health Sciences Simulation Center (HSSC) facility, is a 4 week course (16 sessions) that uses a variety of simulation-based learning techniques in a small group setting. Each session covers different clinical scenarios, which use simulated patients (both actors and mannequins) followed by small-group debriefing. Task simulators are also used to gain proficiency in fundamental medical procedures.

PM 761**Third Year Private Office Clerkship****(2 units)**

During this one-month assignment students experience the full scope of a private office, i.e. palliation, biomechanics, office surgery and hospital surgery. Students also gain an understanding of patient flow in a private office and the importance of good relationships between a private practitioner and patients. The private office clerkship helps students appreciate the complexities of the business operations of a private practice.

PM 796**Third Year Surgery Rotation****(7.5 units)**

This three month 3rd year student rotation is held at St. Mary's Medical Center in San Francisco. During the 3 months students function in the operating room scrubbing on podiatric, vascular and general surgery cases as well as working with residents and faculty in the management of patients on

an outpatient and inpatient basis. When not in the operating room, the students will function in a private office setting learning how to properly evaluate patients preoperatively and postoperatively as well as providing regular podiatric care.

PM 799**(48 units)**

During the fourth year, students have the opportunity to base their clinical training at one of several affiliated medical centers. These include: CSPM Core, VA Albuquerque Medical Center, Arizona Maricopa Medical Center, VA Salt Lake City Utah Medical Center, VA Tacoma/Madigan Army Hospital, and Long Beach Memorial Medical Center. Students receive 4 units of credit for each month they complete a rotation or clerkship assignment. A minimum of 48 units of credit is required to complete the twelve-month fourth year curriculum.

INTERPROFESSIONAL EDUCATION

INTERPROFESSIONAL EDUCATION

Interprofessional education (IPE) is defined as occasions when students from two or more professions learn about, with and from each other to improve collaborative practice and the outcomes of health care. The goal is to develop health care practitioners who effectively engage in interprofessional collaborative practice in order to achieve safe, high quality, accessible, patient-centered care from the moment they enter health care practice.

IPE is a University-wide effort involving faculty, staff and students from all of the University's academic programs.

Our IPE Mission at the University is to provide a learning environment in which interprofessional teaching, practice, service, and scholarship are valued and experienced as key components in the preparation of health science graduates to become engaged and productive health care team members.

There are four main categories of Interprofessional Education at Samuel Merritt University in the 2014-2015 academic year.

IPE ELECTIVE COURSES

IPE 100 (Undergraduate)

IPE 600 (Master's), IPE 700 (Doctoral)

Interprofessional Team Practice for Error Management

(2 Units)

Students in this course will learn how an interprofessional team of health care practitioners can effectively address errors that occur in clinical practice. They will learn effective interprofessional team communication, how errors occur, can be prevented, and how the effect of those errors on the patient/client, caregivers, and health care practitioners can be mitigated.

Notes: This course is an optional elective course in all academic programs. The credits earned do not contribute to meeting the degree requirements in any academic program.

Student eligibility to enroll is determined by the academic program Chair or Director.

Instruction in this course occurs through the fall and spring semesters. Students stay continuously enrolled in the course with the final grade and credit earned upon successful completion of the course.

First year medical students from the University of California, San Francisco/University of California, Berkeley Joint Medical Program participate in all aspects of this course with the students from Samuel Merritt University.



IPE CAMPUS EVENTS

There will be campus-wide interprofessional learning experiences during the 2014-2015 academic year. Academic programs determine which students in the program will participate. The focus of these learning experiences in 2014-2015 is on health disparities in the local community and in the United States.

IPE INTEGRATED IN EXISTING COURSES

Several academic programs are integrating interprofessional learning experiences in required courses in the curriculum for those programs. These learning experiences are focused on patient safety and communication among members of the interprofessional team. Students who are enrolled in the courses that are part of this program will be oriented to the program in that course. The student learning outcomes related to IPE for these courses are:

1. Students will apply best practices related to adverse event or sentinel event identification, analysis, reporting, and follow-through.
2. Students will demonstrate the ability to effectively communicate as a member of an interprofessional team to address a specific problem with patient safety.
3. Students will be able to identify their strengths and weaknesses during an interprofessional team approach to adverse events or sentinel events, including interprofessional communication, and develop a plan for improvement.
4. Students will exhibit a patient-centered approach to care throughout the experience of addressing patient safety, including a perspective on the patients' and their caregivers' values, culture and beliefs.

Courses by Program and Content for IPE on Patient Safety and Interprofessional Communication

	ELMSN Pre-licensure	MPA	MOT	DPT
PATIENT SAFETY				
Course	NURSG 500	PA 660	OCCTH 611	PHYTH 710
COMMUNICATION				
Course	NURSG 560/ NURSG 594L	PA 617	OCCTH 617	PHYTH 743
SIMULATION				
Course	NURSG 546L	PA 660	OCCTH 617	PHYTH 743

There are other courses that offer interprofessional learning experiences as part of that course. For example, BSN and PA students participate in a simulation experience in the Health Sciences Simulation Center during MPA 629.

INSTITUTE FOR HEALTHCARE IMPROVEMENT OPEN SCHOOL CHAPTER

The Institute for Healthcare Improvement (IHI) Open School Chapter at Samuel Merritt University is a face-to-face, interprofessional group that brings students from all of the University’s programs together through a shared interest in learning about quality improvement and improving care for patients. The Chapter offers a forum for like-minded students to interact and help each other gain skills to improve care. The IHI Open School Chapter provides opportunities for students to learn, network with peers, connect with faculty who have similar interests, get involved with community service, and accomplish scholarly activities such as publishing and presenting work.

www.ihl.org/education/ihopenschool/Chapters/Pages/default.aspx

Contact **Dr. Craig Elliott** (celliott@samuelmerritt.edu) for more information.

ADMISSION POLICIES

PREFERRED APPLICATION DATES

Program	Preferred Application Date*
Bachelor of Science in Nursing (BSN) (Transfer)*	September 1 for spring March 1 for fall
Accelerated Bachelor of Science in Nursing (ABSN)*	September 1 for an April start (San Mateo) September 1 for a May start (Oakland) September 1 for a June start (San Mateo) March 1 for a November start (San Mateo) July 1 for a January start (Sacramento) July 1 for a January start (San Mateo)
Entry-Level Master of Science in Nursing (ELMSN)*	November 1 for a fall start (Oakland) July 1 for a spring start (Sacramento)
MSN-CRNA*	November 1 for a fall start
MSN-FNP*	January 1 for a summer start (Oakland) January 1 for a fall start (Sacramento)
MSN-Case Management*	January 15 for fall October 1 for spring March 1 for summer
Master of Occupational Therapy*	November 1 for a fall start, but October 15 is strongly recommended because of processing time required by OTCAS.
Master Physician Assistant	October 1 for a fall start
Doctor of Nursing Practice*	August 1 for a spring start
Doctor of Physical Therapy	October 1 for a fall start
Doctor of Podiatric Medicine*	The application filing period extends from the first week of August through June 30 for the next fall entering class. Applications received before April 1 will receive priority consideration.

* Deadlines are subject to change. It is possible that applications will be accepted after the preferred application date on a space available basis. Please check with the Office of Admission.

GENERAL INFORMATION

Samuel Merritt University welcomes applications from those who are likely to benefit from its rigorous academic programs and who seek an environment which is conducive to intellectual, professional, and personal development. In particular, the University seeks students of diverse backgrounds who have the potential to become competent, compassionate, and contributing health care professionals. Admission decisions are made on the basis of an assessment of the student's previous academic record and personal achievements, national test scores (if applicable), letters of recommendation, personal essays, interviews (if applicable), and the likelihood of success in the academic program.

Admission decisions issued by the University are final.

SPECIAL STATUS

It is possible for students not seeking a degree from Samuel Merritt University to take a class as a Special Status Student. A brief application is available online and should be submitted to the Office of Admission along with a non-refundable application fee. Enrollment is subject to class availability and this information generally is not available until just before the start of the term. If the course involves a clinical assignment, there may be some special requirements such as a criminal background check, health insurance, immunization records, and a physical examination.

COMPUTER REQUIREMENTS & COMPUTER LITERACY

Samuel Merritt University faculty and staff routinely distribute important and official documents via computer. All undergraduate and graduate students are expected to have basic computer word processing skills before enrollment. In addition, courses use the web-based Canvas program for enhancing or delivering course content. Thus, all students, upon admission, must have access to a personal computer that meets the University standard for software and electronic communication, and have basic computer skills before enrollment. The list of University standards for hardware and software is available on the website.

CRIMINAL BACKGROUND CHECK

A criminal background check is now required of all entering students. Information on the background checks is sent to accepted students in the admission acceptance packet. The cost of the background check is a student responsibility.

INTERNATIONAL STUDENTS

This school is authorized under Federal law to enroll nonimmigrant students. International students may enroll on the Oakland campus only.

INTERNATIONAL TRANSCRIPTS

All international academic transcripts must be evaluated by a U.S. evaluation service that is a member of the National Association of Credential Evaluations Services (NACES) for degree, course content, semester unit equivalencies, and science and cumulative GPAs prior to the application deadline. Information on NACES may be found at www.naces.org.

For those applying to the MPA program, see special requirements.

FINANCIAL ASSISTANCE—INTERNATIONAL STUDENTS

There is no financial aid available for international students and a certification of finances verifying the ability to provide for the costs associated with the chosen course of study must be provided by all accepted applicants.

ADVISING—INTERNATIONAL STUDENTS

Samuel Merritt University does not maintain an international Student Advisor/Office, and while we are willing to work together with international students with questions related to studying in the United States, there are limitations to both our knowledge and our ability to be of assistance.

REQUIRED STANDARDIZED TESTS

At this time, no standardized tests are required of applicants to the Master Physician Assistant, Master of Occupational Therapy, or Doctor of Nursing Practice programs.

TEST OF ESSENTIAL ACADEMIC SKILLS (TEAS)

The TEAS is required of all applicants to the BSN, ABSN and ELMSN programs. The TEAS is used in the admission decision process and must be taken before the deadline of the program for which you are applying and the results must be available at the time of application review.

GRADUATE RECORD EXAMINATION (GRE)

The Graduate Record Examination (GRE) is required of applicants to the Doctor of Physical Therapy (DPT) and Master of Science in Nursing-CRNA programs. For both programs, the GRE is used in the admission decision process and must be taken before the application deadline and the results must be available at the time of application review.

MEDICAL COLLEGE ADMISSION TEST (MCAT)

The MCAT is required for admission into the School of Podiatric Medicine. Please refer, in the subsequent section, DOCTOR OF PODIATRIC MEDICINE, for details regarding this requirement.

TEST OF ENGLISH AS A FOREIGN LANGUAGE (TOEFL) REQUIREMENT

It is the responsibility of the University to make sure that all students, regardless of academic background and country of citizenship, have a thorough command of the English language prior to entering our programs.

If the TOEFL is required, a minimum internet based test (iBT) score of 100, with a speaking score of 26, is required for those applying to BSN, ABSN and ELMSN programs. A minimum TOEFL score of 100 (internet based test) is required for those applying to all other programs. Applicants to the DPM program must complete the Test of Spoken English (TSE) in addition to the TOEFL. This is an admission requirement.

TOEFL is required of all international medical school graduates who are applying to the MPA program.

FOR MORE INFORMATION

Please visit our website for additional information on our academic programs, financial aid opportunities and campus visit opportunities.

Our website is WWW.SAMUELMERRITT.EDU

OFFICE OF ADMISSION

Samuel Merritt University
3100 Telegraph Avenue, Suite 1000
Oakland, California 94609
510.869.6576 or
800.607.6377
admission@samuelmerritt.edu

BACHELOR OF SCIENCE IN NURSING

FRESHMAN ENTRY: PARTNERSHIP PROGRAMS

Students interested in entering the program as a freshman must apply directly to one of our partnership programs for pre-nursing at Holy Names University, Mills College (women only), Saint Mary's College of California or Notre Dame de Namur University.

Following completion of two years of pre-nursing courses, students who meet all conditions of the partnership program are given priority admission to Samuel Merritt University for the completion of the Bachelor of Science in Nursing degree.

DIRECT ADMISSION OPTION— TRANSFER STUDENTS:

Samuel Merritt University admits transfer students on a limited basis in fall and spring. The admission is as a first semester junior and it will take 4 semesters to complete the program.

ADMISSION AND PREREQUISITE INFORMATION—TRANSFER STUDENTS

To be considered for admission, prospective students must meet the following criteria:

1. A minimum of 66 semester units of transferable work, including all prerequisites by the time of entry into the program.
2. While there are no minimum GPAs required for admission, it is strongly recommended that applicants have a 3.0 or higher on prerequisite courses.
3. At least one term with a minimum of 9 semester or 14 quarter units of academic courses completed in the past two years with a GPA for the term of 2.50 or better.
4. The TEAS is used in the admission decision process and must be taken before the deadline and the results must be available at the time of application review.
5. If the TOEFL is required, a minimum internet based test (iBT) score of 100, with a speaking score of 26, is required.
6. Letter of reference
7. If you have attended a nursing program at another college or university, a statement explaining your reasons for seeking a transfer will be required. Additionally, a letter from the dean or director of your nursing program indicating that you are in good standing and eligible for continued enrollment in the nursing program will be required. A student who has been dismissed or academically disqualified from another institution and who cannot gain readmission to that institution will not be admitted to Samuel Merritt University.
8. All prerequisites must be in progress or planned at the time of application and must be completed before the program starts. It is not possible to complete any prerequisites concurrently with the BSN program. The following prerequisites must be completed with a "C-" or better:
 - > Human Anatomy with Lab
 - > Human Physiology with Lab
 - > Microbiology with Lab
 - > Chemistry with Lab (minimum of 4 semester units; biochemistry content preferred but not required)
 - > English Composition (equivalent to English 1A)
 - > English Literature/Critical Thinking (equivalent to English 1B or English 1C)
 - > Interpersonal Communication (a public speaking course is not acceptable)
 - > General Sociology or Cultural Anthropology
 - > General Psychology
 - > Statistics
 - > Life Span Developmental Psychology (content to include birth through death)
 - > Nutrition
 - > Fine Arts (Theory) Class (example: Art History or History of Music; not painting or piano)
 - > Introduction to Philosophy, Ethics or Bioethics (one class only)
 - > 1 Humanities elective (example: Humanities course, religious studies, foreign language, theory courses in art, music or theatre, or an additional philosophy course)
 - > American History (any time period)
 - > Modern World History (1865 to Present)
 - > Course in Diversity/Ethnic Studies (culture, race, ethnicity; no specific department required)
9. Technical standards as described in the program specific brochure and/or the website.

LVN ENTRY

Entry for Licensed Vocational Nurses (LVNs) is available in fall and spring each year. LVNs have two entry options: the baccalaureate nursing program or the 30-unit option.

LVNs applying for admission to the Bachelor of Science in Nursing Program must meet regular admission requirements.

LVNs may also apply for the 30-unit option plan. The 30-unit option is designed to enable the LVN student to meet requirements to sit for the Registered Nurse licensure examination in California. Possession of a current valid vocational nurse license from the state of California and completion of human physiology and microbiology are required for admission; LVNs in the 30-unit option do not have to meet the regular admission requirements of the BSN program. The LVN student who completes the 30-unit option does not receive a degree and is not considered a graduate of the University. All applicants for the 30-unit option are admitted on a space-available basis.

THE 30-UNIT OPTION FOR RN LICENSURE

GENERAL EDUCATION:

Microbiology with lab 3.5 units
(3 units theory, 0.5 unit lab)

Human Physiology with lab 3.5 units
(3 units theory, 0.5 unit lab)

NURSING COURSES TO BE COMPLETED: (SEE BSN FOR COURSE DESCRIPTIONS)

NURSING 129 Mental Health 5 units
(2 units theory, 3 units lab)

NURSING 136 Managing Care of Adults II 5 units
(2 units theory, 3 units clinical)

NURSING 144 Reproductive Health 5 units*
(3 units theory, 2 units lab)

NURSING 154 Nursing Care of Infants, Children and Youth 5 units
(2 units theory, 3 units clinical)

NURSING 160 Nursing Leadership, Management & Health Policy 2 units*
(3 units theory)

*By special arrangement with the faculty.

ADVANCED PLACEMENT—BSN PROGRAM

Advanced placement options are designed to facilitate the admission of students to advanced standing. Advanced standing is granted in accordance with University policies and in compliance with state regulations and regional and professional accreditation standards.

Applicants with previous education and/or experience in nursing or other health care fields are eligible for advanced placement.

These mechanisms for advanced-placement credit are available:

- > Transfer Credit is available to applicants who have completed work at a regionally accredited institution. Individual assessment determines the comparability of course(s). Repetition of science courses taken more than five years previously may be required.

- > Credit by challenge examination is a process designed to evaluate knowledge and skill achieved through previous education and/or work experience which cannot be documented through evaluation for transfer credit.

The challenge examination process for individual courses includes a theory and, when indicated, a clinical/laboratory component. Courses may be challenged only once. A student cannot challenge a course which s/he previously completed unsuccessfully. The minimum passing grade is a "C-."

Audit, transfer, and challenge courses may not be used to satisfy the residence requirement.

The units and grades earned as a result of successful challenge shall be recorded on the official transcript. Unsuccessful challenge results are not recorded. Enrolled students must be in good academic standing in order to be eligible for credit by challenge examination.

APPLICATION PROCEDURES

See the Samuel Merritt University website, www.samuelmerritt.edu on how to obtain an application for admission.

SELECTION CRITERIA

Selection criteria for consideration of admission to the BSN program include, but are not limited to, prerequisite grade point average, science prerequisite GPA, prerequisite coursework completed, TEAS score, letter of recommendation, the writing sample provided in the application essay, leadership experience, community service activities, and volunteer or paid experience in a health care environment.

ENROLLMENT ELIGIBILITY

Selection for admission is an administrative decision based on a review of the applicant competitiveness when compared to the entire applicant pool, qualifications, and compliance with general admission policies. Final admission is contingent upon:

- > Receipt of all required official documents
- > Compliance with other requirements as specified in the acceptance letter
- > Receipt of a tuition deposit in the amount of \$350
- > Successful completion of a pre-entrance physical examination
- > Criminal background check
- > American Heart Association Basic Life Support-Health Care Provider CPR certificate

When all provisions of acceptance are met, the applicant is eligible for enrollment.

RECEIPT OF OFFICIAL TRANSCRIPTS

All accepted and deposited students are responsible for submitting official transcripts from all previous colleges/universities attended in the time frame requested by the Office of Admission. Failure to do so will result in an admission hold which will preclude future course registration. The academic department may also be notified of failure to comply and class attendance may be restricted. It is the responsibility of the student to make sure all official transcripts are received by the Office of Admission.

HEALTH RECORD COMPLIANCE

Registered Nurses are committed to the promotion of health, the prevention of illness and adhering to those principles and practices that promote safety and wellbeing for their patients and themselves. Therefore, the following policies are in accordance with the California Department of Health, Centers for Disease Control's Recommendations for Immunization for Health-Care Workers (MMWR-12/26/97/46(RR-18));(1-42) and the various clinical agencies affiliated with Samuel Merritt University.

INCOMING STUDENTS

All incoming students are expected to provide validated proof of compliance with all health records and all related requirements for admission as outlined in the University Catalog and pre-admission materials, and as outlined by Student Health (approximately six weeks in advanced of the start of term).

Applicants who do not fulfill all of these requirements on the day of orientation will be considered to have relinquished their place in the class.

APPLICANTS WHO ARE ON A WAIT LIST

To assure the ability to move from wait list to active status, applicants will be expected to abide by the policy above; that is, they are expected to provide validated proof of compliance with all health records and all related requirements for admission. If the applicant is unable to comply, she/he will forfeit their place in the class.

ACCELERATED BACHELOR OF SCIENCE IN NURSING

The ABSN is designed for someone who has his/her bachelor's degree in a non-nursing field. The ABSN will be completed in 12 months of intensive nursing theory courses and clinical education. The ABSN program is offered on the Oakland campus, the Sacramento Regional Learning Center, and at the San Francisco Peninsula Learning Center in San Mateo.

ADMISSION REQUIREMENTS

- > Ability to complete baccalaureate and all prerequisites within the specified time frame for each campus.
- > While there are no minimum GPAs required for admission, it is strongly recommended that applicants have a 3.0 or higher on the last 60 semester or 90 quarter units and on the science prerequisites
- > If the TOEFL is required, a minimum internet based test (iBT) score of 100, with a speaking score of 26, is required for those applying to BSN, ABSN and ELMSN programs.
- > Letters of reference
- > The TEAS is required of all applicants to the ABSN program. The TEAS is used in the admission decision process and must be taken before the deadline of the program for which you are applying and the results must be available at the time of application review.
- > If you have attended a nursing program at another college or university, a statement explaining your reasons for seeking a transfer will be required. Additionally, a letter from the Dean or Director of your nursing program indicating that you are in good standing eligible for continued enrollment in the nursing program will be required. A student who has been dismissed or academically disqualified from another institution and who cannot gain readmission to that institution will not be admitted to Samuel Merritt University.
- > Technical standards as described in the program specific brochure and/or the website.

PREREQUISITE COURSES

The following prerequisites (semester units) must be completed with a “C-” or better. The time frame within which prerequisites must be completed varies by campus location.

English Composition/English Literature	6 semester units
Interpersonal Communication (a public speaking course is not acceptable)	3 semester units
General Sociology or Cultural Anthropology	3 semester units
Social Science Elective	3 semester units
Statistics	3 semester units
Human Anatomy with lab	4 semester units
Human Physiology with lab	4 semester units
Chemistry with lab	4 semester units
Microbiology with lab	4 semester units
Human Development (covering the life span)	3 semester units
Nutrition	3 semester units
*Pharmacology	2-3 semester units
*Pathophysiology	2-3 semester units

**Courses must be from an approved list provided on the website.*

RECEIPT OF OFFICIAL TRANSCRIPTS

All accepted and deposited students are responsible for submitting official transcripts from all previous colleges/universities attended in the time frame requested by the Office of Admission. Failure to do so will result in an admission hold which will preclude future course registration. The academic department may also be notified of failure to comply and class attendance may be restricted. It is the responsibility of the student to make sure all official transcripts are received by the Office of Admission.

ENROLLMENT ELIGIBILITY

Selection for admission is an administrative decision based on a comprehensive assessment of likelihood of success in the ABSN program, congruency of the student’s educational background with program goals and resources, and enrollment capacity. While student preference for a particular campus location is considered, it is not guaranteed, and final decision of assignment of campus locations lies with Samuel Merritt University.

Final admission is contingent upon:

- > Receipt of all required official documents
- > Compliance with other requirements as specified in the acceptance letter
- > Receipt of a tuition deposit in the amount of \$350
- > Successful completion of a pre-entrance physical examination
- > American Heart Association Basic Life Support-Health Care Provider CPR certificate
- > Criminal background check.

When all provisions of acceptance are met, the applicant is eligible for enrollment.

HEALTH RECORD COMPLIANCE

Registered Nurses are committed to the promotion of health, the prevention of illness and adhering to those principles and practices that promote safety and wellbeing for their patients and themselves. Therefore, the following policies are in accordance with the California Department of Health, Centers for Disease Control’s Recommendations for Immunization for Health-Care Workers (MMWR-12/26/97/46(RR-18);(1-42) and the various clinical agencies affiliated with Samuel Merritt University.

INCOMING STUDENTS

All incoming students are expected to provide validated proof of compliance with all health records and all related requirements for admission as outlined in the University Catalog and pre-admission materials, and as outlined by Student Health (approximately six weeks in advanced of the start of term).

Applicants who do not fulfill all of these requirements on the day of orientation will be considered to have relinquished their place in the class.

APPLICANTS WHO ARE ON A WAIT LIST

To assure the ability to move from wait list to active status, applicants will be expected to abide by the policy above; that is, they are expected to provide validated proof of compliance with all health records and all related requirements for admission. If the applicant is unable to comply, she/he will forfeit their place in the class.

MASTER OF SCIENCE IN NURSING

The Master of Science in Nursing offers an entry-level program and three post-professional options. The entry-level program is designed for those who have a baccalaureate in a non-nursing field and who are not registered nurses. There are three clinical options that provide the registered nurse who has a baccalaureate (usually in nursing) with advanced skills: nurse anesthesia (CRNA), family nurse practitioner (FNP), and case management.

The following master's degrees are offered on the Oakland campus and at the Sacramento Regional Learning Center:

- > ELMSN—Case Management
- > ELMSN—FNP
- > Post Professional MSN—Case Management
- > Post Professional MSN-FNP

ADMISSION REQUIREMENTS—ELMSN

- > Completion of a baccalaureate in a non-nursing field by the time of entry. It is highly recommended that both the baccalaureate and prerequisites are completed at a regionally accredited college.
- > Completion of all prerequisites in the specified time frame.
- > It is strongly recommended that applicants have a 3.0 or higher on the last 60 semester or 90 quarter units and on the science prerequisites.
- > The TEAS is required of all applicants to the ELMSN program. The TEAS is used in the admission decision process and must be taken before the deadline of the program for which you are applying and the results must be available at the time of application review.
- > Basic computer word-processing skills.
- > Two letters of reference are required. References should address academic preparedness for graduate study and potential as a nurse. Applicants should seek letters of reference from: health care professionals strongly preferred (not relatives), who know you well through volunteer or paid work experiences, current or previous professors, a person in a supervisory position at current or previous places of employment.
- > If the TOEFL is required, a minimum internet based test (iBT) score of 100, with a speaking score of 26, is required for those applying to BSN, ABSN and ELMSN programs.
- > Technical standards as described in the program specific brochure and/or the website.

If you have attended a nursing program at another college or university, a statement explaining your reasons for seeking a transfer will be required. Additionally, a letter from the Dean or Director of your nursing program indicating that you are in good standing and eligible for continued enrollment in the

nursing program will be required. A student who has been dismissed or academically disqualified from another institution and who cannot gain readmission to that institution will not be admitted to Samuel Merritt University.

PREREQUISITE COURSES—ELMSN

English Composition/English Literature	6 semester units
Interpersonal Communication (a public speaking course is not acceptable)	3 semester units
General Sociology or Cultural Anthropology	3 semester units
Social Science Elective	3 semester units
Statistics	3 semester units
Human Anatomy with lab	4 semester units
Human Physiology with lab	4 semester units
Chemistry with lab	4 semester units
Microbiology with lab	4 semester units
Human Development (covering the life span)	3 semester units
Nutrition	3 semester units

ENROLLMENT ELIGIBILITY

Selection for admission is an administrative decision based on a comprehensive assessment of likelihood of success in the ELMSN program, congruency of the student's educational background with program goals and resources, and enrollment capacity. Final admission is contingent upon:

- > Receipt of all required official documents
- > Successful completion of an interview
- > Compliance with other requirements as specified in the acceptance letter
- > Receipt of a tuition deposit in the amount of \$350
- > Successful completion of a pre-entrance physical examination
- > Basic Life Support-Health Care Provider CPR certificate
- > Criminal background check

When all provisions of acceptance are met, the applicant is eligible for enrollment.

RECEIPT OF OFFICIAL TRANSCRIPTS

All accepted and deposited students are responsible for submitting official transcripts from all previous colleges/universities attended in the time frame requested by the Office of Admission. Failure to do so will result in an admission hold which will preclude future course registration. The academic department may also be notified of failure to comply and class attendance may be restricted. It is the responsibility of the student to make sure all official transcripts are received by the Office of Admission.

MS NURSING POST-PROFESSIONAL ADMISSION REQUIREMENTS

Applicants must meet the following requirements in order to receive consideration for admission to an advanced MSN program:

1. A baccalaureate in nursing from a nationally accredited program. RNs with degrees in other fields will be evaluated individually and additional coursework may be required.
2. Current California licensure as a registered nurse.
3. Official transcripts of all previous academic and professional coursework completed or in progress prior to admission.
4. Evidence of recent experience in clinical practice as a registered nurse, if applicable.
5. Goal statement that clearly articulates the academic and career goals of the applicant.
6. Two letters of reference attesting to clinical expertise and academic preparedness for graduate study.
7. Satisfactory completion of a personal interview.
8. Minimum TOEFL score of 100 (internet based test) as applicable.
9. Successful completion (“C” or above) of a statistics course.
10. Technical standards as described in the program specific brochure and/or the website.

Criteria for interview will be based upon the above criteria, quality and presentation of application materials, quality and professionalism of communication with the Office of Admission and program during the application process and a well communicated understanding of the advanced practice role.

CRNA APPLICANTS

The following requirements are in addition to those listed under MS Nursing Post-Professional Admission Requirements:

- > Minimum cumulative grade point average of 3.0; minimum 3.0 grade point average for the last 60 semester or 90 quarter units of academic course work taken.
- > Evidence of experience in clinical practice as a registered nurse, with at least one year of recent intensive care experience at the time of the interview. Two to three years of critical care nursing experience, in addition to the one year of ICU experience, is preferable. Practice areas that are considered critical care are: surgical intensive care (including trauma, post-cardiovascular surgery and neurosurgical specialty units), medical intensive care (coronary care, pulmonary care, and other medical sub-specialty units), pediatric and neonatal intensive care units.
- > ACLS and PALS Certification.

- > Introductory physics is highly recommended.
- > A combined (verbal + quantitative) GRE score on the new, revised exam of 290 is required. Candidate selection is based upon evaluation of multiple qualifications and not solely based upon GRE scores. GRE scores must be current and taken within five years of the application.
- > Chemistry: successful completion of six to eight semester units of University chemistry. One chemistry course should include inorganic chemistry; the additional chemistry course should include content in either organic chemistry or biochemistry.
- > Completion of a 1-2 day clinical observation experience with a CRNA (highly preferred) or physician anesthesiologist.
- > A written goal statement that clearly articulates academic and career goals as well as an understanding of the CRNA role and profession at large.
- > A minimum of three letters of recommendation are required. One must be from applicant’s ICU manager. Two letters must be from individuals who can readily assess current levels of critical care experience, academic preparation for graduate school, or preparedness for the profession (letter from a CRNA or anesthesiologist).
- > Technical standards as described in the program specific brochure and/or the website.

ADMISSION POLICIES

1. Selection of candidates for interview will be based on criteria listed above, quality and presentation of application material, quality and professionalism of communication with the program during the application process and an informed understanding about the role of a CRNA.
2. Faculty reserves the right to interview and accept qualified students at any time after the University priority application deadline of November 1.
3. The applicant may substitute the GRE with successful performance scores on the MCAT.

ENROLLMENT ELIGIBILITY FOR POST- PROFESSIONAL PROGRAM APPLICANTS

Selection for admission is an administrative decision based on a comprehensive assessment of likelihood of success in the MSN program, congruency of the student’s background and experience with program goals and resources, and enrollment capacity. Final admission is contingent upon:

- > Receipt of all required official documents
- > Successful completion of an interview
- > Compliance with other requirements as specified in the acceptance letter
- > Receipt of a tuition deposit in the amount of \$350

- > Successful completion of a pre-entrance physical examination
- > Criminal background check

When all provisions of acceptance are met, the applicant is eligible for enrollment. Final selection for admission is an administrative decision.

RECEIPT OF OFFICIAL TRANSCRIPTS

All accepted and deposited students are responsible for submitting official transcripts from all previous colleges/universities attended in the time frame requested by the Office of Admission. Failure to do so will result in an admission hold which will preclude future course registration. The academic department may also be notified of failure to comply and class attendance may be restricted. It is the responsibility of the student to make sure all official transcripts are received by the Office of Admission.

DOCTOR OF NURSING PRACTICE

The Doctor of Nursing Practice (DNP) program at Samuel Merritt University (SMU) prepares students to practice at the highest level of advanced nursing practice, demonstrating leadership in a clinical or organizational specialty area, as well as a commitment to improving health care outcomes via practice, policy change, and practice scholarship. The post-MSN DNP program is designed for advanced practice nurses (nurse practitioners, nurse anesthetists, nurse midwives, and clinical nurse specialists) and nurses in organizational leadership positions who have a Master of Science in Nursing degree. The program is designed to accommodate students who desire to continue working full or part time while pursuing doctoral study. Students are admitted to the DNP program as a cohort and are strongly advised to progress sequentially through the courses designated in each of the six semesters.

ADMISSION REQUIREMENTS

To be considered for admission, applicants must meet the following criteria:

- > Master of Science in Nursing (Master's degrees in other health-related fields along with a BSN will be evaluated on a case-by-case basis.)
- > Current RN licensure in state of residence
- > Minimum GPA of 3.0 or higher on MSN coursework
- > The need for a TOEFL will be assessed based on information provided by applicants on the application for admission. If required, a minimum score of 100 (Internet Based Test), with a speaking score of 26, must be achieved and official score results must be provided.
- > A college or university level Statistics course must have

been completed within the past three years with a grade of "B" or higher.

- > Receipt of three letters of recommendation.
- > Technical standards as described in the program specific brochure and/or the website.

The post-Baccalaureate FNP/DNP program is designed to be a full-time academic program. FNP coursework is offered using a hybrid format (combination of face-to-face and online).

ADMISSION REQUIREMENTS

To be considered for admission, applicants must meet the following criteria:

- > Bachelor of Science in Nursing (bachelor's degrees in other health-related fields will be evaluated on a case-by-case basis.)
- > Current RN licensure in state of residence
- > Minimum GPA of 3.0 or higher on previous coursework
- > The need for a TOEFL will be assessed based on information provided by applicants on the application for admission. If required, a minimum score of 100 (Internet Based Test), with a speaking score of 26, must be achieved and official score results must be provided.
- > A college or university level Statistics course must have been completed within the past three years with a grade of "B" or higher.
- > Receipt of three letters of recommendation.
- > Technical standards as described in the program specific brochure and/or the website.

ENROLLMENT ELIGIBILITY

Selection for admission is an administrative decision based on a comprehensive assessment of likelihood of success in the DNP program, congruency of the student's educational background with program goals and resources, and enrollment capacity.

Final admission is contingent upon:

- > Receipt of all required official documents
- > Compliance with other requirements as specified in the acceptance letter
- > Receipt of a tuition deposit in the amount of \$350
- > Criminal background check.

When all provisions of acceptance are met, the applicant is eligible for enrollment.

RECEIPT OF OFFICIAL TRANSCRIPTS

All accepted and deposited students are responsible for submitting official transcripts from all previous colleges/universities attended in the time frame requested by the Office of Admission. Failure to do so will result in an admission hold which will preclude future course registration. The academic department may also be notified of failure to comply and class attendance may be restricted. It is the responsibility of the student to make sure all official transcripts are received by the Office of Admission.

ACCREDITATION

The DNP program is accredited by the Accrediting Commission for Senior Colleges and Universities of the Western Association of Schools and Colleges (WASC), 510.748.9001, and the Commission on Collegiate Nursing Education (CCNE).

MASTER OF OCCUPATIONAL THERAPY

This professional program consists of five consecutive semesters (including summers) plus a six-month internship. Classes are held during daytime hours and full-time study is required. The curriculum emphasizes treating the “whole person” while mastering specific skills and practices. Students will have clinical experiences throughout the program and a cumulative six-month internship experience.

ADMISSION REQUIREMENTS

Applications are evaluated and candidates are selected for interview based on the following criteria:

- > Baccalaureate must be completed by the end of the spring term prior to entry; Baccalaureate must be from a regionally accredited institution.
- > Suggested minimum cumulative grade point average of 3.0 for last 60 semester units or 90 quarter units.
- > Suggested minimum science grade point average of 3.0.
- > Completion of prerequisites in the time frame described.
- > Evidence of 40 to 70 volunteer hours or work experience that shows knowledge of the occupational therapist’s role and demonstrates maturity of career choice.
- > Two letters of reference are required. One should be from a person who has known you in an academic or professional setting. The second recommendation must be from an occupational therapist who has supervised you as a paid or volunteer worker in an active clinical setting. It is highly desirable that both letters of reference be included when the application for admission is submitted. However, if the letter of recommendation from the occupational therapist is not available at the time of application, it must be submitted prior to or at the point of interview.

- > Minimum TOEFL score of 100 (internet based test) as applicable
- > Technical standards as described in the program specific brochure and/or the website

MASTER OF OCCUPATIONAL THERAPY PREREQUISITES

Prerequisites must be completed with a grade of “C-” or higher. The unit value is based on semester units. Unless otherwise specified, all prerequisites must be completed by the end of the spring term prior to the start of the program. Additionally, it is recommended that no more than 2-3 prerequisites be in progress during the spring:

English Composition/Critical Thinking	6 units
General Psychology	3 units
Abnormal Psychology	3 units
Developmental Psychology	3 units
Statistics	3 units
Sociology, Anthropology, Ethnic Studies, or additional Psychology course	6 units
Public Speaking ¹	3 units
3 Dimensional Skills/Crafts ²	3 units
General Biology ³	3 units
Basic or Introductory Physics ⁴	3 units
Human Anatomy ¹	3 units
Human Physiology ¹	3 units

¹ While Anatomy and Physiology are highly recommended, but not required, preferential admission will be given to those who have completed one or both of these courses at the time of application. Public speaking is recommended, but not required.

² In lieu of a course, students may submit a portfolio documenting extensive skill and participation in one particular craft area. This prerequisite may be completed during the summer prior to the start of the fall program. Please note the following skills/crafts are not acceptable: painting, drawing, graphic design, photography, playing an instrument, and other two dimensional areas.

³ The required Biology prerequisite must be completed with grade available at the time of application.

⁴ A basic or introductory Physics course is required. This course may be taken online and does not require a lab. It is preferred to have the Physics course completed prior to the application deadline, but may also be taken fall semester.

ENROLLMENT ELIGIBILITY

Selection for admission is an administrative decision. Applicants are evaluated based upon the interview score, an assessment of the student’s previous academic record and personal achievements, essays, the letters of reference with the application, and the likelihood of success in the academic program. Final admission is contingent upon:

- > Receipt of all required official documents
- > Successful completion of a required interview
- > Compliance with other requirements as specified in the acceptance letter

- > Receipt of a tuition deposit of \$350
- > Successful completion of a pre-entrance physical examination
- > Criminal background check

When all provisions of acceptance are met, the applicant is eligible for enrollment.

RECEIPT OF OFFICIAL TRANSCRIPTS

All accepted and deposited students are responsible for submitting official transcripts from all previous colleges/universities attended in the time frame requested by the Office of Admission. Failure to do so will result in an admission hold which will preclude future course registration. The academic department may also be notified of failure to comply and class attendance may be restricted. It is the responsibility of the student to make sure all official transcripts are received by the Office of Admission.

DOCTOR OF PHYSICAL THERAPY

ADMISSION REQUIREMENTS

Applications are evaluated and candidates are selected for interview based on the following criteria:

- > Completion of a baccalaureate and all prerequisites must be completed by the end of the spring term before entry. Baccalaureate and all prerequisites must be completed at a regionally accredited college.
- > Minimum cumulative GPA of 3.00.
- > Minimum prerequisite GPA of 3.00.
- > Minimum GRE verbal score of 150.
- > Minimum GRE quantitative score of 144.
- > 40 hours of inpatient physical therapy experience (paid or volunteer) with verification by a physical therapist.
- > Two letters of reference; one letter must be submitted by a physical therapist who has supervised you in a physical therapy setting and one letter from a professor (science or non-science).
- > Application essay questions.
- > Minimum TOEFL score of 100 (internet based) as applicable
- > Technical standards as described in the program specific brochure and/or the website.

PART-TIME PROGRAM

A very limited number of part-time students may be admitted to the DPT program. Interest in the part-time program should be discussed with the Office of Admission no later

than at the time of application. Part-time students must meet all regular admission requirements with applications submitted by October 15. Admission is for the fall term.

DOCTOR OF PHYSICAL THERAPY PREREQUISITE COURSES

Prerequisites must be completed with a C- or better.

General Psychology	3 semester units
Statistics	3 semester units
Chemistry with lab ¹	8 semester units or 12 quarter units
Physics with lab ¹	8 semester units or 12 quarter units
Intro to Biology with lab ^{1,2}	8 semester units or 12 quarter units
Human Anatomy with lab ³	4 semester units or 6 quarter units
Human Physiology with lab ³	4 semester units or 6 quarter units

¹ Prefer a standard two semester or three quarter course sequence.

² Four semester or six quarter units must be an Introduction to Biology course and the other four semester or six quarter units can be fulfilled by Microbiology, Genetics, or other Biology lab classes. Exercise physiology will not fulfill this requirement.

³ Anatomy and physiology must be completed within the last ten (10) years from the time of application to the program.

ENROLLMENT ELIGIBILITY

Selection for admission is an administrative decision. Applicants are evaluated based upon the interview score, an assessment of the student's previous academic record and personal achievements, GRE scores, essays, letter(s) of reference in the application, and the likelihood of success in the academic program. Final admission is contingent upon:

- > Receipt of all required official documents
- > Successful completion of a required interview
- > Compliance with other requirements as specified in the acceptance letter
- > Receipt of a tuition deposit of \$350
- > Successful completion of a pre-entrance physical examination
- > Criminal background check

When all provisions of acceptance are met, the applicant is eligible for enrollment.

RECEIPT OF OFFICIAL TRANSCRIPTS

All accepted and deposited students are responsible for submitting official transcripts from all previous colleges/universities attended in the time frame requested by the Office of Admission. Failure to do so will result in an admission hold which will preclude future course registration. The academic department may also be notified of failure to comply and class attendance may be restricted. It is the responsibility of the student to make sure all official transcripts are received by the Office of Admission.

MASTER PHYSICIAN ASSISTANT

The MPA program is offered at the graduate level and leads to an MPA degree. The program is 27 months in length, including four semesters of coursework and three semesters of intense clinical rotations for a total of 89 units.

APPLYING FOR ADMISSION

The MPA program at Samuel Merritt University participates in the Centralized Application Service for Physician Assistants (CASPA). Applicants apply online at www.caspaonline.org. Applications for the upcoming fall are generally available on the CASPA website beginning May 1st. Although CASPA will continue to process applications previously received, no additional applications will be accepted after October 1st.

ADMISSION REQUIREMENTS:

In order to be considered for an interview, applicants must meet the following criteria:

- > Completion of a baccalaureate from a regionally accredited college or university by the end of the spring term prior to entry.
- > Completion of all course prerequisites by the end of the spring term prior to entry. It is preferred that students have only one prerequisite course in progress during the spring.
- > Cumulative all-University GPA of 3.0, as calculated on the CASPA application.
- > Overall science GPA of 3.0, as calculated on the CASPA application.
- > Health care experience: The MPA program defines health care experience as direct, "hands on" patient contact. This must be gained through paid experience as an EMT, paramedic, health educator, RN, patient care attendant or nurse's aide, clinic assistant, Peace Corps volunteer or other cross-cultural health care training, technologist, therapist, clinical research coordinator, etc.
- > Letters of reference
- > Minimum TOEFL score of 100 (internet based test), as applicable
- > Technical standards as described in the program specific brochure and/or the website

MASTER PHYSICIAN ASSISTANT PREREQUISITE COURSES

- > Statistics (3 semester units)
- > Minimum of 16 semester units of Biological Sciences, including the following courses: Human Anatomy*, Human Physiology*, Microbiology*, Biology elective
- > Organic chemistry (4 semester units or 6 quarter units)
- > General chemistry or inorganic chemistry (4 semester units or 6 quarter units)

**Strong preference will be given to those who have completed these courses within the past five years. This recency recommendation is less stringent for those currently working in the health care field.*

ENROLLMENT ELIGIBILITY

Selection for admission is an administrative decision. Final admission is contingent upon:

- > Receipt of all required official documents
- > Successful completion of a required interview
- > Compliance with other requirements as specified in the acceptance letter
- > Receipt of a tuition deposit in the amount of \$350
- > Successful completion of a pre-entrance physical examination
- > Criminal background check

When all provisions of acceptance are met, the applicant is eligible for enrollment.

RECEIPT OF OFFICIAL TRANSCRIPTS

All accepted and deposited students are responsible for submitting official transcripts from all previous colleges/universities attended in the time frame requested by the Office of Admission. Failure to do so will result in an admission hold which will preclude future course registration. The academic department may also be notified of failure to comply and class attendance may be restricted. It is the responsibility of the student to make sure all official transcripts are received by the Office of Admission.

INTERNATIONAL MEDICAL GRADUATES

International medical graduates and students educated abroad may apply for admission. Regardless of previous professional training and academic degrees earned, Samuel Merritt's MPA curriculum must be completed in its entirety. The TOEFL is required of all international Medical Graduates. All international academic transcripts must be evaluated by a U.S. evaluation service that is a member of the National Association of Credential Evaluations Services (NACES) for degree, course content, semester unit equivalencies, and science and cumulative GPAs prior to the application deadline. Information on NACES may be found at www.naces.org. For all applicants educated outside the United States it is strongly recommended that they should complete one semester (15 units) of graduate or undergraduate work at a U.S. college or university. In addition, all other admission requirements must be met.

DOCTOR OF PODIATRIC MEDICINE

Admission to the University is the result of a competitive selection process. The responsibility of the Admissions and Standards Committee is to select applicants who are best qualified to make a contribution to the public and the profession. The Committee evaluates applicants' suitability for admission by considering academic competence, previous achievements, strong moral characteristics, demonstrated leadership skills, creative abilities, honors and awards, extra-curricular activities, experience in health care, likelihood to practice in under-served areas and other non-cognitive factors.

The admission process begins with a preliminary screening of scholastic qualifications, including an applicant's academic credentials, Medical College Admission Test (MCAT) scores and letters of recommendation.

Applicants selected from the preliminary selection process are invited to the University for interviews. Invited applicants must first visit the office of a practicing podiatric physician prior to the interview to learn about the responsibilities of a podiatric medical practitioner and to observe the scope of the practice.

ADMISSION REQUIREMENTS:

Successful completion of three years of undergraduate pre-professional education at an accredited institution is required for a total of at least 90 semester hours. Nearly all entering students have a baccalaureate or advanced degree.

- > Completion of all prerequisites prior to entry.
- > Grades and GPAs are used in determining both admission and eligibility for scholarships and are expected to be of the same caliber of other pre-med students applying for admission to medical colleges.
- > The need for a TOEFL will be assessed based on information provided by applicants on the application for admission. If required, a minimum score of 100 (internet based test) must be achieved and official score results must be provided. In addition, applicants must take the Test of Spoken English (TSE).
- > In addition to other letters of recommendation, one is required from a podiatric physician.
- > All applicants must visit the office of a podiatric physician prior to the on-campus interview.
- > Please see website for computer literacy information.
- > MCAT is required; GRE or DAT will not be accepted. MCAT is used in determining both admission and eligibility for scholarships and should be available at the time of application. The MCAT score used to apply for admission is expected to be of the same caliber of other pre-med students applying for admission to medical colleges. MCAT must have been taken within the past three years.
- > Technical standards as described in the program specific brochure and/or the website.

Most matriculated students have had a curriculum that includes three or more courses of the following recommended courses: anatomy, biochemistry, histology, microbiology, and physiology, as well as a spectrum of liberal arts subjects. A combination course such as genetics, embryology, virology, and immunology will also be beneficial.

SPECIFIC COURSE REQUIREMENTS

General Biology*	8 semester units
General Chemistry* (including content in Inorganic)	8 semester units
Organic Chemistry*	4 semester units
Biochemistry**	4 semester units
Physics*	8 semester units
English/Communication Skills	8 semester units
Liberal Arts electives	12 semester units

*All science prerequisites require laboratories.

**A total of 8 semester units of organic chemistry may be substituted for biochemistry.

It is possible that the prerequisite of Biochemistry may shift from a required course to a recommended course.

APPLICATION PROCEDURE

The DPM program at Samuel Merritt University participates in the central application service of the American Association of Colleges of Podiatric Medicine Application Service (AACPMAS). For an application, contact AACPMAS at www.aacpm.org.

The application filing period extends from the first week of August through June 30 for the next fall entering class. Applications received before April 1st will receive priority consideration, though applications will be accepted after the deadline date on a space available basis. Admission decisions are made on a rolling basis.

ALL APPLICANTS MUST SUBMIT THE FOLLOWING:

1. The Medical College Admission Test (MCAT) is required of all applicants. GRE or DAT scores will not be accepted. Test results are valid only for three years. The MCAT is used in determining both admission and eligibility for scholarships and should be available at the time of application. The MCAT score is expected to be of the same caliber as that of other pre-med students applying for admission to medical colleges. The Office of Admission must receive the official MCAT test scores prior to matriculation to the University.

For information regarding the MCAT contact: MCAT Registration

American College Testing Service
Post Office Pox 4056
Iowa City, IA 52213
(319) 337-1357

2. Recommendations from a Pre-professional Advisory Committee (or two science faculty members) and one "Proof-of-Visit" letter from a podiatric physician as noted in the Admission Policy Section. Send recommendations to:

Office of Admission (DPM Program)
Samuel Merritt University
3100 Telegraph Avenue, Suite 1000
Oakland, CA 94609

Applicants are responsible for submitting appropriate materials including official transcripts from all colleges attended and standardized test score results to the Office of Admission. Applications are considered on a continuing basis, and applicants are notified of admission decisions after all required materials are received and evaluated.

ENROLLMENT ELIGIBILITY

Selection for admission is an administrative decision. Applicants are evaluated based upon the interview score, an assessment of the student's previous academic record and personal achievements, MCAT scores, essays, letter(s) of

reference in the application, and the likelihood of success in the academic program. Final admission is contingent upon:

- > Receipt of all required official documents
- > Successful completion of a required interview
- > Compliance with other requirements as specified in the acceptance letter
- > Receipt of a tuition deposit of \$1000 (non-refundable)
- > Successful completion of a pre-entrance physical examination
- > Criminal background check

When all provisions of acceptance are met, the applicant is eligible for enrollment.

RECEIPT OF OFFICIAL TRANSCRIPTS

All accepted and deposited students are responsible for submitting official transcripts from all previous colleges/universities attended in the time frame requested by the Office of Admission. Failure to do so will result in an admission hold which will preclude future course registration. The academic department may also be notified of failure to comply and class attendance may be restricted. It is the responsibility of the student to make sure all official transcripts are received by the Office of Admission.

EVALUATION OF INTERNATIONAL ACADEMIC CREDENTIALS

All international applicants are required to have their academic credentials evaluated for U.S. equivalency and forwarded to the Admission Office. One such organization is World Education Services (www.wes.org).

TRANSFER/ADVANCED STANDING APPLICANTS:

- > Transfer/Advanced Standing Applicants:
- > Transfers will not be considered beyond the first semester of year two.
- > Must have a minimum cumulative GPA of 3.0.
- > Cannot have received any failing grades or be in jeopardy of receiving failing grades at the prior podiatric medicine or other medical school, or have a record of disciplinary proceedings. This must be verified in writing by the Dean of Academic Affairs at the prior institution.
- > The student's entire academic record from the previous podiatric or other medical school, including any leaves of absence, will be evaluated in the transfer request for advanced standing.
- > The student's first year curriculum must parallel CSPM's first year curriculum for advanced standing beyond the first year.

FINANCIAL INFORMATION

BSN

BACHELOR OF SCIENCE IN NURSING

NON-REFUNDABLE FEES & DEPOSITS

INITIAL FEES & DEPOSITS—Application fees and tuition deposits are non-refundable, whether or not the student withdraws in the first week of the term.

Application Fee: \$50

Tuition Deposit: \$350

TUITION & FEES

Tuition (10+units/term)	\$42,880	Annual
Tuition (1-9.5units/term)	\$1,807	Unit
Student Body Fee	\$50	Annual
HESI Testing Fee-Nursing 137	\$344	Course
HESI Live Review Fee-Nursing 190L	\$270	Course
Lab Fee-Nursing 120/136 or 127-Managing Care of Adults I & II	\$840	Course
Health Insurance Fee-Enhanced Student Only	\$4,692	Annual
Graduation Fee	\$130	Final Semester

COST OF ATTENDANCE

The information table listed below provides the estimated cost of attendance for attending Samuel Merritt University Bachelor of Science in Nursing program for the current academic year and an estimate of the cost of attendance for future semesters. This cost analysis assumes a traditional, full-time track and does not take into account any **annual** tuition and fee **increases**, which become effective every **Fall**.

	Fall	Spring	Fall	Spring	Total
	2014	2015	2015	2016	
Tuition	\$21,440	\$21,440	\$21,440	\$21,440	\$85,760
Student Body Fee	\$50		\$50		\$100
HESI Testing Fee-Nursing 137	\$344				\$344
HESI Live Review Fee-Nursing 190L				\$270	\$270
Lab Fee-Nursing 120/136 or 127		\$840			\$840
Health Insurance Fee-Enhanced	\$2,346	\$2,346	\$2,346	\$2,346	\$9,384
Graduation Fee				\$130	\$130
Totals	\$24,180	\$24,626	\$23,836	\$24,186	\$96,828

ABS N

ACCELERATED BACHELOR OF SCIENCE IN NURSING

NON-REFUNDABLE FEES & DEPOSITS

INITIAL FEES & DEPOSITS—Application fees and tuition deposits are non-refundable, whether or not the student withdraws in the first week of the term.

Application Fee: \$50

Tuition Deposit: \$350

TUITION & FEES

Tuition	\$65,749	Annual
Student Body Fee	\$50	Annual
HESI Testing Fee-Nursing 138	\$344	Course
HESI Live Review Fee-Nursing 170	\$270	Course
Lab Fee-Nursing 120/136 or 127-Managing Care of Adults I & II	\$840	Course
Health Insurance Fee-Enhanced Student Only	\$4,692	Annual
Graduation Fee	\$130	Final Semester

COST OF ATTENDANCE

The information table listed below provides the estimated cost of attendance for attending Samuel Merritt University Accelerated Bachelor of Science in Nursing program for the current academic year corresponding to the listed location start and end dates. This cost analysis assumes a traditional full-time track.

	Semester 1	Semester 2	Semester 3	Total
Tuition	\$21,916	\$21,916	\$21,917	\$65,749
Student Body Fee	\$50			\$50
HESI Testing Fee-Nursing 138	\$344			\$344
HESI Live Review Fee-Nursing 170			\$270	\$270
Lab Fee-Nursing 120/136 or 127	\$840			\$840
Health Insurance Fee-Enhanced	\$1,564	\$1,564	\$1,564	\$4,692
Graduation Fee			\$130	\$130
Totals	\$24,714	\$23,480	\$23,881	\$72,075

2014-2015

LOCATION START AND END DATES

OAKLAND CAMPUS
5/27/2014 - 5/26/2015

**SACRAMENTO REGIONAL
LEARNING CENTER**
01/05/2015 - 12/18/2015

**SAN FRANCISCO PENINSULA
LEARNING CENTER**
4/21/2014 - 4/19/2015

6/02/2014 - 5/31/2015

11/03/2014 - 11/02/2015

01/05/2015 - 12/18/2015

ELMCM

ENTRY LEVEL CASE MANAGEMENT PROGRAM

NON-REFUNDABLE FEES & DEPOSITS

INITIAL FEES & DEPOSITS—Application fees and tuition deposits are non-refundable, whether or not the student withdraws in the first week of the term.

Application Fee: \$50

Tuition Deposit: \$350

TUITION & FEES

Tuition	\$1,215	Unit
Student Body Fee	\$50	Annual
Lab Fee-Nursing 542-Nursing Skills I	\$400	Course
Lab Fee-Nursing 543-Nursing Skills II	\$400	Course
HESI Testing Fee-Nursing 524	\$390	Course
HESI Live Review Fee-Nursing 594L	\$270	Course
Health Insurance Fee-Enhanced Student Only	\$4,692	Annual
Graduation Fee	\$160	Final Semester

COST OF ATTENDANCE

The information table listed below provides the estimated cost of attendance for attending Samuel Merritt University Entry Level Case Management program for the current academic year and an estimate of the cost of attendance for future semesters. This cost analysis assumes a traditional, full-time track and does not take into account any **annual** tuition and fee **increases**, which become effective every **Fall**.

	Fall	Spring	Summer	Fall	Spring	Summer	Fall	Total
	2014	2015	2015	2015	2016	2016	2016	
Tuition	\$19,440	\$19,440	\$18,225	\$15,795	\$12,150	\$14,580	\$13,365	\$112,995
Student Body Fee	\$50			\$50			\$50	\$150
Lab Fee-Nursing 542	\$400							\$400
Lab Fee-Nursing 543		\$400						\$400
HESI Testing Fee-Nursing 524	\$390							\$390
HESI Live Review Fee-Nursing 594L							\$270	\$270
Health Insurance Fee-Enhanced	\$2,346	\$1,173	\$1,172	\$2,346	\$1,173	\$1,172	\$2,346	\$11,728
Graduation Fee							\$160	\$160
Totals	\$22,626	\$21,013	\$19,397	\$18,191	\$13,323	\$15,752	\$16,191	\$126,493

ELMFNP

ENTRY LEVEL FAMILY NURSE PRACTITIONER PROGRAM

NON-REFUNDABLE FEES & DEPOSITS

INITIAL FEES & DEPOSITS—Application fees and tuition deposits are non-refundable, whether or not the student withdraws in the first week of the term.

Application Fee: \$50

Tuition Deposit: \$350

TUITION & FEES

Tuition	\$1,215	Unit
Student Body Fee	\$50	Annual
Lab Fee-Nursing 542-Nursing Skills I	\$400	Course
Lab Fee-Nursing 543-Nursing Skills II	\$400	Course
Lab Fee-Nursing 671-Advanced Physical Assessment	\$240	Course
HESI Testing Fee-Nursing 524	\$390	Course
HESI Live Review Fee-Nursing 594L	\$270	Course
Health Insurance Fee-Enhanced Student Only	\$4,692	Annual
Graduation Fee	\$160	Final Semester

COST OF ATTENDANCE

The information table listed below provides the estimated cost of attendance for attending Samuel Merritt University Entry Level Family Nurse Practitioner Program for the current academic year and an estimated cost of attendance for future semesters. This cost analysis assumes a traditional, full-time track and does not take into account any **annual** tuition and fee **increases**, which become effective every **Fall**.

	Fall	Spring	Summer	Fall	Spring	Summer	Fall	Spring	Summer	Fall	Total
	2014	2015	2015	2015	2016	2016	2016	2017	2017	2017	
Tuition	\$19,440	\$19,440	\$18,225	\$15,795	\$7,290	\$4,860	\$9,720	\$9,720	\$12,150	\$15,795	\$132,435
Student Body Fee	\$50			\$50			\$50			\$50	\$200
Lab Fee-Nursing 542	\$400										\$400
Lab Fee-Nursing 543		\$400									\$400
Lab Fee-Nursing 671							\$240				\$240
HESI Testing Fee-Nursing 524	\$390										\$390
HESI Live Review Fee-Nursing 594L										\$270	\$270
Health Insurance Fee-Enhanced	\$2,346	\$1,173	\$1,172	\$2,346	\$1,173	\$1,172	\$2,346	\$1,173	\$1,172	\$2,346	\$16,419
Graduation Fee										\$160	\$160
Totals	\$22,626	\$21,013	\$19,397	\$18,191	\$8,463	\$6,032	\$12,356	\$10,893	\$13,322	\$18,621	\$150,914



CASE MANAGEMENT PROGRAM

NON-REFUNDABLE FEES & DEPOSITS

INITIAL FEES & DEPOSITS—Application fees and tuition deposits are non-refundable, whether or not the student withdraws in the first week of the term.

Application Fee: \$50

Tuition Deposit: \$350

TUITION & FEES

Tuition	\$1,215	Unit
Student Body Fee	\$50	Annual
Health Insurance Fee-Enhanced Student Only	\$4,692	Annual
Graduation Fee	\$160	Final Semester

COST OF ATTENDANCE

The information table listed below provides the estimated cost of attendance for attending Samuel Merritt University Case Management program for the current academic year and an estimate of the cost of attendance for future semesters. This cost analysis assumes a traditional, full-time track and does not take into account any **annual** tuition and fee **increases**, which become effective every **Fall**.

	Fall	Spring	Summer	Fall	Spring	Total
	2014	2015	2015	2015	2016	
Tuition	\$7,290	\$10,935	\$8,505	\$10,935	\$7,290	\$44,955
Student Body Fee	\$50			\$50		\$100
Health Insurance Fee-Enhanced	\$2,346	\$1,173	\$1,172	\$2,346	\$2,346	\$9,383
Graduation Fee					\$160	\$160
Totals	\$9,686	\$12,108	\$9,677	\$13,331	\$9,796	\$54,598

FNP

FAMILY NURSE PRACTITIONER PROGRAM

NON-REFUNDABLE FEES & DEPOSITS

INITIAL FEES & DEPOSITS—Application fees and tuition deposits are non-refundable, whether or not the student withdraws in the first week of the term.

Application Fee: \$50

Tuition Deposit: \$350

TUITION & FEES

Tuition	\$1,215	Unit
Student Body Fee	\$50	Annual
Lab Fee-Nursing 671-Advanced Physical Assessment	\$240	Course
Health Insurance Fee-Enhanced Student Only	\$4,692	Annual
Graduation Fee	\$160	Final Semester

COST OF ATTENDANCE

The information table listed below provides the estimated cost of attendance for attending Samuel Merritt University Family Nurse Practitioner program for the current academic year and an estimate of the cost of attendance for future semesters. This cost analysis assumes a traditional, full-time track and does not take into account any **annual** tuition and fee **increases**, which become effective every **Fall**.

	Fall	Spring	Summer	Fall	Spring	Total
	2014	2015	2015	2015	2016	
Tuition	\$8,505	\$9,720	\$13,365	\$12,150	\$15,795	\$59,535
Student Body Fee	\$50			\$50		\$100
Lab Fee-Nursing 671		\$240				\$240
Health Insurance Fee-Enhanced	\$2,346	\$1,173	\$1,172	\$2,346	\$2,346	\$9,383
Graduation Fee					\$160	\$160
Totals	\$10,901	\$11,133	\$14,537	\$14,546	\$18,301	\$69,418

CRNA

NURSE ANESTHESIA PROGRAM

NON-REFUNDABLE FEES & DEPOSITS

INITIAL FEES & DEPOSITS—Application fees and tuition deposits are non-refundable, whether or not the student withdraws in the first week of the term.

Application Fee: \$50

Tuition Deposit: \$350

TUITION & FEES

Tuition	\$1,215	Unit
Student Body Fee	\$50	Annual
Lab Fee-Nursing 651 Principles of Anesthesia I	\$240	Course
Lab Fee-Nursing 655 Principles of Anesthesia II	\$240	Course
Lab Fee-Nursing 657 Human Anatomy & Physiology	\$240	Course
Lab Fee-Nursing 664 Clinical Anesthesia V	\$240	Course
Health Insurance Fee-Enhanced Student Only	\$4,692	Final
Graduation Fee	\$160	Final Semester

COST OF ATTENDANCE

The information table listed below provides the estimated cost of attendance for attending Samuel Merritt University Nurse Anesthesia program for the current academic year and an estimate of the cost of attendance for future semesters. This cost analysis assumes a traditional, full-time track and does not take into account any **annual** tuition and fee **increases**, which become effective every **Fall**.

	Fall	Spring	Summer	Fall	Spring	Summer	Fall	Total
	2014	2015	2015	2015	2016	2016	2016	
Tuition	\$23,085	\$15,795	\$12,150	\$9,720	\$7,290	\$3,645	\$4,860	\$76,545
Student Body Fee	\$50			\$50			\$50	\$150
Lab Fee-Nursing 651	\$240							\$240
Lab Fee-Nursing 657	\$240							\$240
Lab Fee-Nursing 655		\$240						\$240
Lab Fee-Nursing 664						\$240		\$240
Health Insurance Fee-Enhanced	\$2,346	\$1,173	\$1,172	\$2,346	\$1,173	\$1,172	\$2,346	\$11,728
Graduation Fee							\$160	\$160
Totals	\$25,961	\$17,208	\$13,322	\$12,116	\$8,463	\$5,057	\$7,416	\$89,543

DNP

DOCTOR OF NURSING PRACTICE PROGRAM

NON-REFUNDABLE FEES & DEPOSITS

INITIAL FEES & DEPOSITS—Application fees and tuition deposits are non-refundable, whether or not the student withdraws in the first week of the term.

Application Fee: \$50

Tuition Deposit: \$350

TUITION & FEES

Tuition	\$1,052	Unit
Health Insurance Fee-Enhanced Student Only	\$4,692	Annual
Graduation Fee	\$300	Final Semester

COST OF ATTENDANCE

The information table listed below provides the estimated cost of attendance for attending Samuel Merritt University Doctor of Nursing Practice program for the current academic year and an estimate of the cost of attendance for future semesters. This cost analysis assumes a traditional, full-time track and does not take into account any **annual** tuition and fee **increases**, which become effective every **Spring**.

	Spring	Summer	Fall	Spring	Summer	Fall	Total
	2015	2015	2015	2016	2016	2016	
Tuition	\$6,312	\$6,312	\$7,364	\$6,312	\$5,260	\$6,312	\$37,872
Health Insurance Fee-Enhanced	\$1,564	\$1,564	\$1,564	\$1,564	\$1,564	\$1,564	\$9,384
Graduation Fee						\$300	\$300
Totals	\$7,876	\$7,876	\$8,928	\$7,876	\$6,824	\$8,176	\$47,556

FNP DNP

POST BACCALAUREATE FAMILY NURSE PRACTITIONER DOCTOR OF NURSING PRACTICE PROGRAM

NON-REFUNDABLE FEES & DEPOSITS

INITIAL FEES & DEPOSITS—Application fees and tuition deposits are non-refundable, whether or not the student withdraws in the first week of the term.

Application Fee: \$50

Tuition Deposit: \$350

TUITION & FEES

Tuition	\$1,052	Unit
Student Body Fee	\$50	Annual
Lab Fee-Nursing 671 Advanced Physical Assessment	\$240	Course
Health Insurance Fee-Enhanced Student Only	\$4,692	Annual
Graduation Fee	\$300	Final Semester

COST OF ATTENDANCE

The information table listed below provides the estimated cost of attendance for attending Samuel Merritt University Post Baccalaureate Family Nurse Practitioner Doctor of Nursing Practice program for the current academic year and an estimate of the cost of attendance for future semesters. This cost analysis assumes a traditional, full-time track and does not take into account any **annual** tuition and fee **increases**, which become effective every **Summer**.

	Summer	Fall	Spring	Summer	Fall	Spring	Summer	Fall	Spring	Summer	Fall	Total
	2014	2014	2015	2015	2015	2016	2016	2016	2017	2017	2017	
Tuition	\$7,364	\$8,416	\$9,468	\$6,312	\$7,364	\$8,416	\$9,468	\$6,312	\$7,364	\$6,312	\$6,312	\$83,108
Student Body Fee		\$50			\$50			\$50			\$50	\$200
Lab Fee-Nursing 671					\$240							\$240
Health Insurance Fee-Enhanced	\$1,173	\$2,346	\$1,172	\$1,173	\$2,346	\$1,172	\$1,173	\$2,346	\$1,172	\$1,173	\$2,346	\$17,592
Graduation Fee											\$300	\$300
Totals	\$8,537	\$10,812	\$10,640	\$7,485	\$10,000	\$9,588	\$10,641	\$8,708	\$8,536	\$7,485	\$9,008	\$101,440

MOT

MASTER OF OCCUPATIONAL THERAPY PROGRAM

NON-REFUNDABLE FEES & DEPOSITS

INITIAL FEES & DEPOSITS—Application fees and tuition deposits are non-refundable, whether or not the student withdraws in the first week of the term.

Application Fee: \$50

Tuition Deposit: \$350

TUITION & FEES

Tuition	\$43,368	Annual
Student Body Fee	\$50	Annual
Lab Fee-OT 610 Anatomical Physiological I	\$235	Course
Health Insurance Fee-Enhanced Student Only	\$4,692	Annual
Graduation Fee	\$160	Final Semester
Post Professional Internship (Elective-OT 642)	\$1,215	Unit

COST OF ATTENDANCE

The information table listed below provides the estimated cost of attendance for attending Samuel Merritt University Master of Occupational Therapy program for the current academic year and an estimate of the cost of attendance for future semesters. This cost analysis assumes a traditional, full-time track and does not take into account any **annual** tuition and fee **increases**, which become effective every **Fall**.

	Fall	Spring	Summer	Fall	Spring	Summer	Fall	Total
	2014	2015	2015	2015	2016	2016	2016	
Tuition	\$14,456	\$14,456	\$14,456	\$14,456	\$14,456	\$14,456	\$0	\$86,736
Student Body Fee	\$50			\$50			\$50	\$150
Lab Fee-OT 610	\$235							\$235
Health Insurance Fee-Enhanced	\$2,346	\$1,173	\$1,172	\$2,346	\$1,173	\$1,172	\$2,346	\$11,728
Graduation Fee							\$160	\$160
Totals	\$17,087	\$15,629	\$15,628	\$16,852	\$15,629	\$15,628	\$2,556	\$99,009

DPT

DOCTOR OF PHYSICAL THERAPY PROGRAM

NON-REFUNDABLE FEES & DEPOSITS

INITIAL FEES & DEPOSITS—Application fees and tuition deposits are non-refundable, whether or not the student withdraws in the first week of the term.

Application Fee: \$50

Tuition Deposit: \$350

TUITION & FEES

Tuition	\$44,400	Annual
Electives-Optional	\$353	Unit
Student Body Fee	\$50	Annual
Lab Fee-DPT 723 Gross Anatomy I	\$240	Course
Lab Fee-DPT 725 Gross Anatomy II	\$240	Course
Health Insurance Fee-Enhanced Student Only	\$4,692	Annual
Graduation Fee	\$300	Final Semester

COST OF ATTENDANCE

The information table listed below provides the estimated cost of attendance for attending Samuel Merritt University Physical Therapy program for the current academic year and an estimate of the cost of attendance for future semesters. This cost analysis assumes a traditional, full-time track and does not take into account any **annual** tuition and fee **increases**, which become effective every **Fall**.

	Fall	Spring	Summer	Fall	Spring	Summer	Fall	Spring	Summer	Total
	2014	2015	2015	2015	2016	2016	2016	2017	2017	
Tuition	\$14,800	\$14,800	\$14,800	\$14,800	\$14,800	\$14,800	\$14,800	\$1,500	\$0	\$105,100
Student Body Fee	\$50			\$50			\$50			\$150
Lab Fee-PT 723	\$240									\$240
Lab Fee-PT 725		\$240								\$240
Health Insurance Fee-Enhanced	\$2,346	\$1,173	\$1,172	\$2,346	\$1,173	\$1,172	\$2,346	\$1,173	\$1,172	\$14,073
Graduation Fee									\$300	\$300
Totals	\$17,436	\$16,213	\$15,972	\$17,196	\$15,973	\$15,972	\$17,196	\$2,673	\$1,472	\$120,103

MPA

MASTER PHYSICIAN ASSISTANT PROGRAM

NON-REFUNDABLE FEES & DEPOSITS

INITIAL FEES & DEPOSITS—Application fees and tuition deposits are non-refundable, whether or not the student withdraws in the first week of the term.

Application Fee: \$50

Tuition Deposit: \$350

TUITION & FEES

Tuition	\$44,400	Annual
Student Body Fee	\$50	Annual
Lab Fee-PA 601 Gross Anatomy	\$240	Course
Lab Fee-PA 629 Clinical Skills	\$240	Course
Health Insurance Fee-Enhanced Student Only	\$4,692	Annual
Graduation Fee	\$160	Final Semester

COST OF ATTENDANCE

The information table listed below provides the estimated cost of attendance for attending Samuel Merritt University Master Physician Assistant program for the current academic year and an estimate of the cost of attendance for future semesters. This cost analysis assumes a traditional, full-time track and does not take into account any **annual** tuition and fee **increases**, which become effective every **Fall**.

	Fall	Spring	Summer	Fall	Spring	Summer	Fall	Total
	2014	2015	2015	2015	2016	2016	2016	
Tuition	\$14,800	\$14,800	\$14,800	\$14,800	\$14,800	\$14,800		\$88,800
Student Body Fee	\$50			\$50			\$50	\$150
Lab Fee-PA 601 Gross Anatomy	\$240							\$240
Lab Fee-PA 629 Clinical Skills				\$240				\$240
Health Insurance Fee-Enhanced	\$2,346	\$1,173	\$1,172	\$2,346	\$1,173	\$1,172	\$2,346	\$11,728
Graduation Fee							\$160	\$160
Totals	\$17,436	\$15,973	\$15,972	\$17,436	\$15,973	\$15,972	\$2,556	\$101,318

DPM

DOCTOR OF PODIATRIC MEDICINE PROGRAM

NON-REFUNDABLE FEES & DEPOSITS

INITIAL FEES & DEPOSITS—Application fees and tuition deposits are non-refundable, whether or not the student withdraws in the first week of the term.

Application Fee: \$50

Tuition Deposit: \$1,000

TUITION & FEES

Tuition	\$37,211	Annual
Student Body Fee	\$50	Annual
CPMSA Association Fee	\$180	Annual
Instrument Fees	\$2,225	1st Semester
Lab Fee-1st & 2nd Year	\$160	Annual
APMLE Examination Fee-2nd & 4th Year	\$900	Annual
CSPE Examination Fee-4th Year	\$1,230	Annual
Health Insurance Fee-Enhanced Student Only	\$4,692	Annual
Graduation Fee	\$300	Final Semester

COST OF ATTENDANCE

The information table listed below provides the estimated cost of attendance for attending Samuel Merritt University Doctor of Podiatric Medicine program for the current academic year and an estimate of the cost of attendance for future semesters. This cost analysis assumes a traditional, full-time track and does not take into account any **annual** tuition and fee **increases**, which become effective every **Summer**.

	Fall	Spring	Summer	Fall	Spring	Summer	Fall	Spring	Summer	Fall	Spring	Total
	2014	2015	2015	2015	2016	2016	2016	2017	2017	2017	2018	
Tuition	\$18,606	\$18,605	\$12,404	\$12,404	\$12,403	\$12,404	\$12,404	\$12,403	\$12,404	\$12,404	\$12,403	\$148,844
Student Body Fee	\$50			\$50			\$50			\$50		\$200
CPMSA Association Fee	\$180			\$180			\$180			\$180		\$720
Lab Fees	\$80	\$80	\$53	\$53	\$54							\$320
Instrument Fees	\$2,225											\$2,225
APMLE Examination Fee-2nd & 4th Year				\$900						\$900		\$1,800
CSPE Examination Fee-4th Year									\$1,230			\$1,230
Health Insurance Fee-Enhanced	\$2,346	\$1,173	\$1,172	\$2,346	\$1,173	\$1,172	\$2,346	\$1,173	\$1,172	\$2,346	\$2,346	\$18,765
Graduation Fee											\$300	\$300
Totals	\$23,487	\$19,858	\$13,629	\$15,933	\$13,630	\$13,576	\$14,980	\$13,576	\$14,806	\$15,880	\$15,049	\$174,404

MISCELLANEOUS FEES AND MORE

PREREQUISITE BASIC SCIENCE COURSES

Anatomy (BSCI 015)	\$554	Unit
Anatomy (BSCI 016)	\$554	Unit
Pharmacology (NRSNG 118)	\$554	Unit
Pathophysiology (NRSNG 119)	\$554	Unit
Physiology (BSCI 025)	\$554	Unit
Physiology Lab (BSCI 026)	\$554	Unit

MISCELLANEOUS FEES

Transcript Fee (5-10-day Request)	\$5	Transcript
Transcript Fee (24-hour Request)	\$15	Transcript
Return Check Fee	\$15	Item
Challenge Fee/Audit Fee (Theory)	\$100	Course
Challenge Fee/Audit Fee (Clinical)	\$150	Unit
Synthesis Continuation Fee	\$100	Semester

PAYMENT OF TUITION AND FEES

PAYMENT OPTIONS

Payments can be made by cash, check, credit card (Visa & MasterCard only), to <https://smurf.samuelmerritt.edu> and/or Payment Plan. Payment plan information is available by contacting the Business Office at 510.869.6511 x4451 or by e-mail at studentaccounts@samuelmerritt.edu. Please note that all checks should be made payable to Samuel Merritt University. Mail or deliver checks to Samuel Merritt University, Attn: Business Office, 3100 Telegraph Ave, Suite 1110, Oakland, CA 94609.

DUE DATES

Tuition is billed at least 30 days in advance of each semester and is due and payable before the first day of each semester. Tuition and fee payments must be received on the due date, at the close of the business, to be considered paid on time. Students who have been approved for financial aid and do not see their "Anticipated Aid" on SMURF, should consult the Financial Aid Office at 510.869.1590.

LATE FEE

Late Charge Fee 1%/month

The University will assess a 1% late payment fee on any account per month on any account that remains unpaid after the payment due date. Students who do not have an active Payment Plan, Financial Aid, Active Payment Plan or 3rd Party Billing to cover their student account, will incur a 1% late charge fee on the unpaid balance. The 1% late charge fee will incur each month until the balance is paid in full or arrangements have been made with the Business Office.

CREDITS ON STUDENT ACCOUNTS

With the exception of tuition deposits, credit balances will be disbursed to the student as soon as possible, but no later than 14 days after the first day of class or 14 days from the date the credit balance occurs.

NONPAYMENT OF TUITION AND FEES

In order to receive clearance from the Business Office, the student must either have paid all amounts owed or present proof that the outstanding amounts will be covered by financial aid or 3rd party billing. Students who have an unpaid balance with SMU may not register for subsequent terms. A "hold" will be placed on the students' account and a 1% monthly late fee will accrue until payment, in full, is received. Students with poor payment histories are required to pay, in full, at the time of registration for any charges related to tuition and fees.

Transcripts & diplomas will not be issued to a current or a former student, with past due tuition balance, and/or past-due balances on Federal Perkins, Federal Nursing and/or Federal HPSL Loans. Samuel Merritt University will assign delinquent accounts to collection agencies. Samuel Merritt University further reserves the right to recover all costs involved with collection due to nonpayment of the outstanding balance. Reasonable collection costs up to 30% on the first agency referral and 40% on the second agency referral resulting from failure to pay may be incurred and will be the responsibility of the student. Clearance from the Business Office is required in order to register for each semester.

3RD PARTY BILLING

For 3rd party or outside agency billing, which may pay all or part of your tuition and fees, submit all paperwork to the Business Office. If you have additional questions on this process, please contact Tami Bechtle, Bursar, tbechtle@samuelmerritt.edu 510.869.6702.

ADDITIONAL TUITION INFORMATION FOR THE FOLLOWING PROGRAMS

Master Physician Assistant (**MPA**), Master Occupational Therapy (**MOT**), Doctor Podiatric Medicine (**DPM**), Doctor Physical Therapy (**DPT**), Accelerated Bachelor of Science

Nursing(**ABS**N), Doctor of Nursing Practice (**DNP**), Post-Baccalaureate Doctor of Nursing Practice (**FNP**DNP):

MPA Program—Tuition for this program is billed at the program rate, amortized over six semesters in equal installments and no tuition in the seventh semester.

MOT Program—Tuition for this program is billed at the program rate, amortized over six semesters in equal installments and no tuition in the seventh semester.

DPT Program—Tuition for this program will be billed in the following method:

Semesters One through Six are billed at the annual program rate and amortized over six semesters in equal installments. Tuition for the Seventh semester; is 1/3 of the annual tuition cost. For semester Eight, an internship fee is charged and for semester Nine, there is no tuition.

DPM Program—Tuition for this program is billed at the annual program rate: Year 1 is amortized over two semesters: Years 2, 3, & 4 are amortized over three semesters. This program has annual tuition increases effective Summer of each year.

ABSN Program—Tuition for this program is billed at the annual program rate and amortized over three semesters in equal installments. This program has annual tuition increases effective Summer of each year. See ABSN Financial Information “Location Start and End Dates.”

DNP Program—Tuition for this program has annual increases effective Spring of each year.

FNPDNP Program—Tuition for this program has annual increases effective Summer of each year.

ADDITIONAL NOTATION:

Some programs at Samuel Merritt University are sequential in nature; therefore students must receive clearance from the department chair to be classified as part time. Students who qualify and are classified as part time, will be billed at the current per-unit rate for each semester.

LOA/WD/DISMISSAL—

ADDITIONAL INFORMATION

Students who take a leave of absence, withdraw or are dismissed from Samuel Merritt University programs for any reason, will owe for current semester units and units completed in prior semesters at the current per unit rate. These programs are sequential in nature; therefore, re-admitted students will be charged and billed at the current per-unit rate for the remainder of their matriculation.

OVERLOAD

Undergraduate students in good academic standing may request to enroll in more than 17.5 units in any semester, with Registrar’s approval.

REFUND OF FEDERAL AID (TITLE IV FUNDS)

The financial aid a student may keep is determined by the percentage of the term completed in days. For example, if a student withdraws from all classes on the 20th day of attendance of an academic term with one hundred (100) days, twenty percent (20%) of financial aid is considered earned and eighty percent (80%) is refunded to the appropriate student financial aid agency. This applies until sixty percent (60%) of the term is earned. When more than sixty percent (60%) of a term is earned, no federal funds must be refunded.

Note: it is possible for a student to be responsible for one hundred percent (100%) of tuition charges but have “earned” only a portion of financial aid. For example, if a student withdraws after the 18th day of attendance in a term with 72 days and the withdrawal day is also the 5th week of class, no tuition refund is due the student; however, the student who earned only 25% of financial aid is responsible for a balance equal to 75% of tuition. Students should consult with the financial aid office.

SAMUEL MERRITT UNIVERSITY TUITION REFUND

FALL, SPRING, SUMMER SEMESTERS

- > 1st week 85% tuition refunded
- > 2nd week 80% tuition refunded
- > 3rd week 75% tuition refunded
- > 4th week 75% tuition refunded
- > 5th-end 0% tuition refunded

NOTE: THE ABOVE SCHEDULE IS BASED ON THE DATE THE OFFICIAL NOTICE OF WITHDRAWAL IS RECEIVED BY THE REGISTRAR.

COURSE REPETITION

In the event that a student repeats a course for any reason, the student will be charged the tuition and fees in effect at the time the course is repeated.

REFUNDS FOLLOWING GRIEVANCE

If the dismissal is upheld, the effective date will be the end of the previous term. At the point of dismissal, all eligible financial aid will be returned to the appropriate financial aid agency.

REFUND POLICY

The student must complete the online withdrawal form to request a refund. Once the online withdrawal form is completed, all necessary SMU offices will automatically be notified. Refunds are based upon the schedules on the previous page. Fees are generally non-refundable. The University must follow current federal regulations in effect for students who receive Title IV (federal) financial aid. Students may petition for an exception to the refund policy. Students who wish to petition for an exception to the refund policy, may do so by submitting an e-mail of explanation and any verification documents to studentaccounts@samuelmerritt.edu.

FINANCIAL ASSISTANCE

FINANCIAL AID

Samuel Merritt University maintains a Financial Aid Office to assist those students who require financial aid to pursue their higher education. Every effort is made to see that no student is denied access to the University because of inability to meet educational expenses. Financial aid is awarded in the form of scholarships, grants, loans, and employment (work study). All financial aid recipients are expected to maintain satisfactory academic progress. Undergraduate students must be enrolled in 10 semester units per term (12 units for the PELL and Cal Grant programs) to be considered for full financial aid. Undergraduate students enrolled in at least six semester units per term are eligible for consideration for partial financial aid. Graduate students must be enrolled in six (6) semester units per term to be considered for full financial aid. Graduate students enrolled in at least three semester units per term are eligible for consideration for partial financial aid. Should a financial aid recipient drop below the minimum academic load, the unearned portion of the financial aid award must be refunded.

Counseling and information are available by appointment. Literature and application forms are available in the Campus Service Center and will be mailed upon request. In addition, financial aid staff offer counseling at open houses held at the University.

A number of grants, loans, and scholarships are available for students. For specific information or how to apply, please contact the Financial Aid Office at 510.869.1550.

APPLYING FOR FINANCIAL ASSISTANCE

The following forms and data must be on file to apply:

- > The Free Application for Federal Student Aid (FAFSA) must be filed with the processing center by the date specified.
- > Students interested in applying for the State Cal Grant program must also submit the Grade Point Average Verification Form to the California Student Aid Commission by the March deadline.

The Free Application for Federal Student Aid (FAFSA) must be filed with the processing center by the date specified.

Students interested in applying for the State Cal Grant program must also submit the Grade Point Average Verification Form to the California Student Aid Commission by the March deadline.

SATISFACTORY ACADEMIC STATUS (SAP)

Section 484(a)(2) of the Higher Education Act of 1965 requires a student to be making Satisfactory Academic Progress (SAP) in order to be eligible for any Title IV federal student aid. Students are evaluated on the basis of credit hour completion, maximum time frame limitation and GPA. Students receiving financial aid are required to make satisfactory progress toward their degree objectives. The specific definition of satisfactory progress varies from one curriculum to another. Students in each component are held to meeting both qualitative and quantitative standards for financial aid eligibility.

SAP will be reviewed after the end of each grading period, as defined by the component's academic division.

- > Students not meeting SAP for the first time will be placed on SAP Warning, and given their next enrolled term as a probationary period in which financial aid eligibility will continue.
- > If SAP requirements are met in the next review, eligibility for financial aid will be restored for the following academic period.
- > If SAP requirements are not met in the next review, eligibility will be discontinued the student will be placed on SAP Probation. Students must submit an Appeal (see SAP Appeal Process in this section) or continue without financial aid funding until SAP is met.

QUALITATIVE MEASUREMENT

The Financial Aid Office has established parameters for minimum GPA in accordance with federal regulations that require students to maintain a 2.0 (C average) cumulative GPA.

The SMU Registrar supplies all qualitative measurements used by the Financial Aid Office to determine a student's status in regards to SAP. GPA calculation is determined by the Registrar Office and pursuant to their policies which include calculations involving incomplete and repeated coursework.

QUANTITATIVE MEASUREMENT

A student will be permitted a time limit of eligibility for financial aid according to the following table:

QUANTITATIVE MEASURE—PERIOD OF TIME TO COMPLETE PROGRAM

Degree	Standard (Years)	150% Maximum (Years)
POD	4	6
DPT	3.5	5.25
DNP	2	3
PP-FNP	1.6	2.4
PP-CM	1.6	2.4
OT	2	3
PA	2.33	3.5
ELM-CM	2.33	3.5
ELM-FNP	2	4
FNP-DNP	3.5	5.5
CRNA	2.33	3.5
ABSN	1	1.5
BSN 2+2	2	3

A student registering for less than full-time enrollment will be allowed additional time of eligibility based upon a proportion of the actual registered hours since the time of first enrollment, as compared with normal full-time hours for the same time period. A student failing to meet this standard will be suspended from financial aid eligibility.

Time spent completing approved transfer credits have been taken into consideration in the determination of the maximum period of time to complete programs at SMU. Due to the nature of the some health professions programs, prerequisite coursework from educational institutions other than SMU is required for admission. Thus transfer credits are not a factor in the components calculation of the standard length of time to complete the degree. Therefore the time frames given above are only in relation to enrollment at SMU.

A student must complete at least sixty-seven percent (67%) of the total credit hours enrolled in the respective increment (academic period between SAP evaluations) under review. Incomplete coursework includes receiving failing grades, withdrawals and incompletes.

WITHDRAWAL, REMEDIATION AND REMEDIAL COURSES

Course withdrawal from SMU is initiated by the student by using the online process (mySMU pick up form). A grade of "I", "F", "W" or "U" will be calculated in the number of hours of attempted, but not completed, course work.

Remediation mandated by the component will not adversely impact the student's financial aid.

Any student failing to meet the qualitative or quantitative requirements will be placed on financial aid probation and notified by email or letter of this status by the Financial Aid Office. A student placed on probation for financial aid eligibility must, by the end of the following grading period, attain the standing specified for satisfactory academic progress. Failure to do so will result in suspension of Federal Title IV and State student financial aid eligibility.

SAP APPEAL PROCESS

Students who wish to appeal their SAP decision, should meet with the Associate Director or Director of Financial Aid and obtain the SAP appeal form. This form must be submitted along with the following documents within 15 days of meeting with Financial Aid.

- 1) A written explanation of the special circumstances (e.g., date of the event, health reasons, death of relative, other type of undue hardships).
- 2) Any supporting documentation:
 - Health reasons — Include medical documentation (physician's note, copy of medical bills, etc.)
 - Death of an immediate family member — Include a copy of the death certificate.
 - Undue hardship — Include document from a third party professional (instructor, counselor, clergy, court records, etc.) who can verify your claim.
- 3) Written statement on academic plan moving forward.

Once the Financial Aid Office has received and reviewed the above documentation, we will carefully evaluate your past academic performance as well as your written explanation to determine if Federal Student Aid funds can be reinstated. All students will be notified in writing of the decision.

REINSTATEMENT OF TITLE IV FINANCIAL AID ELIGIBILITY

It is the student's responsibility to present evidence to the Financial Aid Office at the time he or she has met minimum requirements for reinstatement of Federal Title IV and State student financial aid.

A student seeking to re-establish eligibility of Title IV student financial aid may do so by:

- > Achieving the required standards over time.
- > Appealing the financial aid decision.

CONSEQUENCES OF DENIAL OF APPEAL

Students who do not maintain satisfactory academic progress and whose appeal is denied lose eligibility for Federal Title IV and State student financial aid for the entire grading period, as defined by the component's academic division.

VETERANS EDUCATION BENEFITS

The Veterans Administration and the State Department of Education have approved Samuel Merritt University to certify enrolled veterans for education benefits and tutorial assistance. A veteran or eligible person who is interested in obtaining education benefits or tutorial assistance should contact the Office of the Registrar for applications and information. Veterans and eligible persons should be aware they are subject to the VA approved "Standards of Progress" while receiving benefits.

Details and procedures are available from: VA Regional Processing Office, PO Box 8888, Muskogee, OK 74402-8888, Telephone: 1.800.827.1000 or 1.888.GIBILL.1 (1.888.442.4551). Website: www.gibill.va.gov or www.va.gov.

VETERAN'S POLICY STATEMENT

1. Evaluation of previous education/training CFR 21.4253(d)(3): Samuel Merritt University will conduct an evaluation of previous education and training, grant appropriate credit, shorten the veteran or eligible person's duration of the course proportionately, and notify the VA and student accordingly.
2. Standards of progress CFR §21.4253(d)(1)(i) A veteran or eligible person who remains on probation for grade point deficiency below a 2.0 cumulative GPA beyond two semesters will have his/her veteran's benefits discontinued and any further certification of benefits interrupted. A 3.0 cumulative GPA must be maintained for the MSN program with respect to this policy.



ACADEMIC POLICIES

ACADEMIC ADVISING

Each student is assigned an academic advisor who will assist him/her in identifying academic needs, assessing strengths and weaknesses, and in fulfilling educational goals. Academic advisors may work with students in degree planning in some programs, provide general academic counseling, advise on adherence to academic requirements and regulations, suggest strategies for study skill enhancement, offer career counseling, and provide referral to University resources as necessary. Academic advisors are assigned by the academic departments and are recorded by the Registrar.

ACADEMIC FORGIVENESS

See BS Nursing admission policies.

ACCESS TO RECORDS

Currently enrolled and former students may review their academic records by appointment with the Registrar. Qualified personnel are available to assist students in interpreting their records. The student must provide a written consent for the release of records. Standard release forms are available in the Office of the Registrar. Policies and procedures for implementation of the Privacy Act of 1974 are available in the Office of the Registrar.

ATTENDANCE

Regular classroom attendance is expected and essential for successful academic achievement. Faculty may elect to establish attendance policies, including the assignment of a failing grade for excessive absences. Students are responsible for all work missed because of absences and must make arrangements with their instructors to make up work. Make-up work for unexcused absences, including missed examinations, is at the discretion of the faculty member.

Attendance is required at all clinical assignments. These clinical experiences may include, but are not limited to, direct client care, skills labs, and observational experiences. The clinical experience is necessary for application of knowledge

and skills, as well as for socialization to the professional role. A student is expected to give timely notice of any absence to his/her instructor and to the clinical site, when appropriate. Unexcused absences may be interpreted as failure to meet course objectives and may result in a clinical grade of unsatisfactory for the course. See also specific department requirements.

AWARD OF ACADEMIC CREDIT

Applicants with previous education and/or experience in health care fields may be eligible for transfer or challenge credit. Audit, challenge and transfer credit may not be used to satisfy the residency requirement.

ADVANCED STANDING CREDIT FOR POST-PROFESSIONAL GRADUATE PROGRAMS (NURSING)

Post-professional graduate programs may award advanced standing credit to students who have completed a formal post-professional course of study in a program accredited by a specialized accreditation agency. Advanced placement credits will be posted to the transcript only after completion of all other required coursework in residence. Award of such credit will be made at the discretion of the program; however, the following criteria must be met for advanced standing in the Master's degree program:

1. Total hours awarded as advanced standing credit shall be determined by the program; however, the student must complete a minimum of 18 hours of additional Samuel Merritt University coursework for the master's degree as outlined by the department/program.
2. The applicant must be in active clinical practice in the advanced practice specialty as evidence of currency in the specialty for which award of credit has been made.
3. The applicant must hold and maintain current certification/recertification in an advanced practice clinical specialty at the time of admission and throughout the program.

- Advanced standing credit toward the Master's degree will be awarded only to students holding a BSN or bachelor's degree in a related field.

TRANSFER CREDIT

Applicants and students may petition to transfer coursework completed at a regionally accredited institution.

COMPLETION OF BSN COURSEWORK OFF CAMPUS AFTER ADMISSION

Following admission to the undergraduate nursing program, students are expected to take all courses at Samuel Merritt University. Permission to complete a degree requirement at another institution may be granted under special circumstances. The student must complete a transfer credit petition which must be approved by the School of Nursing. In the absence of an approved petition, the University reserves the right to deny transfer credit.

EVALUATION OF TRANSFER COURSES IN THE GRADUATE PROGRAMS

Courses taken at a regionally accredited institution may be transferred with approval from the department chair or program director who will determine that the transfer course fulfills the content and course objectives of the University's requirement. **All courses submitted for transfer credit must have been completed prior to admission to Samuel Merritt University.** The student must have received a minimum grade of "C" in professional program courses, or "B" in post-professional courses. Transfer credit is limited to nine (9) semester units.

Procedure for the Evaluation of Transfer Credit:

- Student submits transfer credit petition, course description, and course syllabus to the Registrar.
- The Registrar submits the petition and documentation to the department chair or program director to review and approve or deny credit. The petition and documentation is then returned to the Registrar.
- The Registrar notifies the student of the action and records approved credit on the student's transcript. Documentation is retained in the student's file.

CHALLENGE CREDIT

Students may petition to challenge by examination knowledge and skills obtained through previous education and/or work experience which cannot be documented as transfer credit. Enrolled students must be in good academic standing to be eligible for a challenge examination. A course can be challenged only once, and a student cannot challenge a course he or she previously completed unsuccessfully. The units and grades earned as a result of a successful challenge will be recorded on the official transcript and will show as credit by examination. Unsuccessful challenge results will not be recorded. All challenge petitions must be filed by the end of the fourth week of the semester.

All challenge fees are non-refundable and are to be paid at the time the petition is filed with the Office of the Registrar. The student obtains a petition form from the Office of the Registrar and receives approval from the appropriate department chair or program director and faculty member. The student returns the signed petition to the Registrar and pays the fee to the Financial Services Office. In a Nursing course involving both theory and clinical components, the theory component must be completed successfully before the clinical challenge is attempted.

GRADES, GRADE REPORTS, GRADING

GRADING, ALL PROGRAMS

Each school, department or program is responsible for establishing and providing to its students both a progression policy and a grading policy. Under no circumstances will any form of "D" or "F" be considered a passing grade for any course or clinical experience in University programs. At the end of each semester a student's work in each course is evaluated and assigned a grade. Samuel Merritt University recognizes the following letter grades and assigns point value as listed below:

GRADE	DESCRIPTION	VALUE
A		4.0
A-		3.7
B+		3.3
B		3.0
B-		2.7
C+		2.3
C		2.0
C-		1.7
D+		1.3
D		1.0
D-		0.7
F		0
I	Incomplete	Not computed
IP	In Progress	Not computed
P*	Pass	Not computed
S	Satisfactory	Not computed
U	Unsatisfactory	0
W	Withdrawal	Not computed
Z	Audit	Not computed

* May be used only if designated in the catalog course description or by petition

PLUS/MINUS GRADING

Each school, department, and program shall determine to what extent and under what circumstances plus/minus grading is used. If used, a plus adds three-tenths (.3) to the grade point value up to a maximum of four grade points, while a minus reduces the grade point value by three-tenths (.3).

ACADEMIC DIFFICULTY

If a student receives a deficient grade, it is strongly recommended that the student seek assistance from the faculty of record or his/her academic advisor to develop a plan for success. The University strongly advises students to take advantage of the following services: academic advising, tutorial services, and workshops on study skills, time management, and test taking. In addition, the Library maintains excellent tutorial materials.

AUDIT

UNDERGRADUATE

Audit is a contract to attend theory classes without active participation, e.g., discussion, seminars, exams and handouts. Audits are permitted only when space is available in the class. Full-time students may audit one course per term. No credit is received for the audited course. Upon completion of the course, a grade of "Z" for audit is recorded on the permanent transcript. Audited courses may not be used to satisfy the residency requirement. A student may not challenge a previously audited course.

Audit petitions are available on the Samuel Merritt University website (www.samuelmerritt.edu) and in the Campus Service Center, and approved by the faculty member. Audit petitions must be filed with the Registrar's Office during the first two weeks of the term. Please refer to audit fees on page 116.

GRADUATE

A graduate student may audit a non-clinical course with the approval of the department chair. The auditor may receive handouts but does not participate actively in discussion or take exams and, therefore, does not receive formal credit. Audits are permitted only when space is available in that class. A student may not challenge a previously audited course.

Audit petitions are available on the Samuel Merritt University website (www.samuelmerritt.edu) and in the Campus Service Center, and approved by the faculty member. Audit petitions must be filed with the Office of the Registrar during the first two weeks of the term. Please refer to audit fees on page 116.

GRADE REPORTS

The faculty report final grades to the Registrar. Final grades for all terms are available on SMURF within two weeks after grades are received. Grades are released only directly to students. Grades are not disclosed over the telephone.

GRADE CHANGES

Final grades are permanent with the exception of "I" (incomplete) and "IP" (in progress) and are to be changed only in the case of error in computation or recording. The student may not submit additional work, rewrite papers, nor make up or retake examinations to improve a grade which has been officially recorded in the Office of the Registrar. All grade change requests must be submitted to the instructor within the first two weeks of the next full semester after the grade was assigned. Once this period has passed, no grade changes will be made. The student may appeal the denial of a grade change request by following the Grievance Policy and Procedures listed in this *Catalog/Handbook*.

INCOMPLETE GRADES

A grade of "I" or "incomplete" may be assigned by the faculty member when the student's work is substantially complete yet incomplete due to circumstances beyond the student's control. A petition for an incomplete must be initiated by the student, and approved in writing by the faculty member, prior to the deadline for the submission of the term grades. It is not the responsibility of the faculty member to petition for an incomplete grade, but an instructor may originate an incomplete grade if the student is unable to do so and has specifically requested an incomplete grade from the instructor. The petition must include the reason for the incomplete grade, the coursework to be completed, and the deadline for submitting the work. The student must satisfactorily complete the work prior to the end of the next semester in which the course is offered.

Upon completion of the coursework, the instructor may submit a change of grade form to the Office of the Registrar. An incomplete grade not changed by the due date will be changed to an "F." An extension of the due date, not to exceed one semester, may be requested for extraordinary reasons. An incomplete grade, even when cleared, is part of the student's academic record. An incomplete grade may be used to satisfy prerequisite requirements at the discretion of the appropriate department chair.

REPEATING A COURSE

UNDERGRADUATE

The grade achieved in a repeated course does not replace the original grade on the transcript. Only the most recent grade, however, will be used in computing the cumulative grade point average. Refer to the section on Undergraduate Progression and Graduation for information about repeating required courses. For tuition charges on repeated courses, please see Financial Information.

When a course is failed and is not scheduled to be offered again because of a curriculum revision, efforts will be made to assist the student in completing requirements for the degree in the new curriculum or, where feasible, by independent study.

GRADUATE

The grade achieved in a repeated course does not replace the original grade on the transcript. Only the most recent grade, however, will be used in computing the cumulative grade point average. Refer to the section on Graduate Progression and Graduation for information about repeating required courses. For tuition charges on repeated courses, please see Financial Information.

MSN only: A student who has earned a grade lower than a “B” in a course may petition to retake that course one time. A student will be allowed only one such course repetition during his or her graduate studies at Samuel Merritt University. In the case of a course repetition, only the most recent grade will be used in calculating the student’s cumulative grade point average, although both grades will be permanently inscribed on the student’s record. Students should file a petition with the Registrar to request a course repetition. Final approval is made by the department chair.

COURSE ENROLLMENT WITH PASS/FAIL GRADING

UNDERGRADUATE COURSES

Pass/Fail grading is offered for certain elective courses. In courses taken on this basis, the passing grade (the equivalent of a “C-” or higher on the regular grading scale) will not affect the student’s grade point average and the units will be counted towards the degree. The “F” (Fail grade) is calculated in the grade point average. Pass/Fail petitions are available in the Office of the Registrar and must be filed within the first two weeks of the Fall and Spring Term. The Pass/Fail grading option is not offered in those courses required by the Board of Registered Nursing or the nursing major.

GRADUATE PROGRAMS

Pass/Fail grades are not an option in those courses required for state licensure or national registration or certification. Pass/Fail is an option in graduate program elective courses and in Directed Research and Synthesis. In courses taken on this basis, the passing grade (the equivalent of a “C” or higher on the regular grading scale) will not affect the student’s grade point average and the units will be counted towards the degree. Any grade less than “C” is recorded as a failure (“F”) and is calculated in the grade point average.

PROCEDURE TO REQUEST PASS/FAIL GRADING

The student submits a pass/fail petition signed by the instructor to the Registrar’s Office by the published deadline.

IN PROGRESS GRADES

The symbol “IP” is employed in theses/synthesis projects, special research studies and field studies, and other courses as approved by the department chair where assigned work extends beyond a single academic term and may include enrollment in more than one term. The symbol indicates that

work in progress has been evaluated as satisfactory to date; assignment of a final grade must await completion of additional coursework. All work is to be completed within one calendar year of the date of first enrollment. An extension may be permitted with the approval of the instructor and the department chair as long as the student completes the program within the required length of time (see Length of Study for Graduate Program). A final grade will be assigned to all segments of the course based on overall quality. The grading symbol “IP” will not be used in calculating grade point average. If the “IP” grade is not converted to a letter grade within the appropriate period, it becomes an “F” and is used in computing the grade point average in the semester the “IP” changes. Approval to assign an “IP” grade in courses other than those listed below requires the written approval of the appropriate department chair and must accompany the official grade sheet submitted to the Office of the Registrar.

COURSES APPROVED FOR THE “IP” GRADE:

MOT

OCCTH 615	
OCCTH 622L	Focused Research Seminar
OCCTH 630	Research Synthesis Project
OCCTH 621L	Fieldwork Level I
OCCTH 640L/641L	Fieldwork Level II

DPT

PHYTH 757	Research III
PHYTH 761	Integrated Clinical Experience I
PHYTH 762	Integrated Clinical Experience II
PHYTH 763	Clinical Experience I
PHYTH 764	Integrated Clinical Experience III
PHYTH 765	Clinical Experience II
PHYTH 766	Internship
PHYTH 771	Individual Independent Study
PHYTH 772	Group Independent Study

MPA

PA 680L	Family Medicine Clerkship
PA 681L	Internal Medicine Clerkship
PA 682L	General Surgery Clerkship
PA 683L	Pediatric Clerkship
PA 684L	Geriatric Clerkship
PA 685L	Obstetrics/Gynecology Clerkship
PA 686L	Emergency Medicine Clerkship
PA 687L	Elective Clerkship I
PA 688L	Elective Clerkship II

MSN

NURSG 605/606	Thesis/Special Project
---------------	------------------------

WITHDRAWAL FROM A COURSE

After the end of the drop/add period, a student may withdraw from a course without academic penalty up until the **midpoint of the course, as specified in the course syllabus, or when no more than 50 percent of the course has been completed, which ever occurs last.** A student may withdraw from a single course only once. The course remains on the student transcript with a grade of "W." Petitions to withdraw from a course beyond this period would be approved only for serious and compelling reasons such as serious accident or illness. The approval of the instructor and the department chair are required on the petition form, which the student files in the Registrar's Office. If the petition is granted, the course remains on the student record with a "W" grade. If the petition is denied or the student fails to complete course requirements without formally withdrawing, the grade will be determined by the instructor based on the grading policy and requirements as noted in the course syllabus (See Withdrawal from the University and Refund Policies).

WITHDRAWAL FROM SAMUEL MERRITT UNIVERSITY

A student wishing to withdraw from the University must follow the proper procedures. Any student who leaves the University during a term or who terminates enrollment at the end of a term must complete a withdrawal form available on the Samuel Merritt University website (www.samuelmerritt.edu) and in the Campus Service Center. Notice of clearance with several other University offices is to be secured on this form. Final transcripts may be released only after the completed form is on file in the Registrar's Office. Students are to make an appointment to meet with the Vice President of Enrollment & Student Services for an exit interview. Withdrawal from the University through the tenth week of instruction will result in grades of "W" in all courses. Eligibility to withdraw from the University after the tenth week will be determined individually. A student who has withdrawn from the University may request readmission by applying to the Director of Admission.

SCHEDULING OF CLASSES

All continuing students register for his/her next semester's courses during pre-registration week. Students meet with their advisors, obtain their signature on the registration form, and return the form to the Office of the Registrar at the assigned time. Pre-registration dates, times, and priorities are published and posted each term. Entering students are pre-registered after admission and prior to the start of the term. The process varies according to the student program. Students receive pre-registration materials by email from the Office of the Registrar. Course schedules and the registration form are available on the Samuel Merritt University website (www.samuelmerritt.edu).

REGISTRATION

Pre-registration is held for all students several weeks before the beginning of each semester. Tuition and fees are due and payable prior to the first day of class. Any other financial arrangement must be established with the Business Office prior to registration day. Each student must complete a registration form each term. During registration the student receives registration materials including a course schedule. The schedule shows the student's current class schedule based on pre-registration and subsequent adjustments. The student is financially and academically responsible for all courses on the course schedule.

STUDENTS IN GRIEVANCE PROCESS

A student suspended or dismissed from the University under the graduate and undergraduate progression and graduation policies and who is involved in the grievance process outlined in this catalog will be allowed to register for non-clinical classes in the semester immediately following the ruling while his/her appeal is being heard. This policy does not apply to students whose next semester involves only clinical courses as defined by the program.

The student, if otherwise eligible, will be allowed to collect financial aid and will be required to pay tuition as any regularly registered student. If applicable, the student's refund will be held on account until the grievance is resolved.

If the dismissal is upheld, the effective date will be the end of the previous term. Any financial aid refunds will be retained by the University until the decision has been made. At that point, all eligible financial aid will be returned to the appropriate financial aid agency.

If the dismissal is overturned, any financial aid refunds will be processed.

If, at the end of the grievance procedure, the appeal is denied (upholding the suspension or dismissal from the University), the student's registration status will be revoked and the student will be suspended or dismissed.

If, at the end of the grievance procedure, the appeal is upheld (overturning the suspension or dismissal) the registrar will return the student to a regular registration status.

CLASS LISTS

Faculty receive class lists prior to the start of each semester and at the end of the drop/add period. The final class list sent during the third week of classes should accurately reflect the students attending the class. The faculty member and/or student must contact the Office of the Registrar concerning any discrepancies. Students will not receive credit for classes for which they have not registered or may receive a failing grade for a course in which they registered but did not attend or follow the drop procedures.

CLINICAL REQUIREMENTS

Before beginning clinical rotations, certain clinical facilities may require drug testing and/or finger printing or other

requirements. The University and its students participating in these clinicals must cooperate with these requirements. Students are also required to be enrolled in the University's insurance plan, or other insurance plan that meets the University's requirements for waiver, through the duration of their enrollment at the University.

Any student may be required to go out of the Bay Area for at least one of their clinical rotations. The student will be responsible for their own transportation and housing.

CLIENT/PATIENT PARTICIPATION IN COURSE-RELATED ACTIVITIES (NOT INCLUDING ACTIVITIES IN CLINICAL FACILITIES WITH WHICH THE UNIVERSITY ALREADY HAS A CONTRACTUAL AGREEMENT)

Faculty or students will obtain agreement from potential subjects before subjects participate in activities or assignments related to a specific course of instruction. Potential subjects include individuals in the community or individuals from within the University who are not registered in the specific course. Activities or assignments are those designed or provided by an instructor for students in a specific course, and may include physical examination or treatment procedures in the classroom, elsewhere on campus, or in the community.

LICENSURE REQUIREMENTS/DENIAL OF LICENSURE

Samuel Merritt University complies with all professional requirements for licensure. These include criteria for denial of licensure for crimes or acts which are substantially related to professional qualifications, functions, or duties. Felony convictions or history of substance abuse may lead to a denial of licensure/certification. Specific policies may be obtained from the department chair or from the appropriate licensing or credentialing agency.

Most of the licensing/certification boards require background checks of students. Felony convictions may prevent licensure by the profession's regulatory board. Applicants to the Post-Professional MSN degree programs must hold a current active license as a registered nurse. This does not apply to the Entry-Level MSN program.

DOCTOR OF PODIATRIC MEDICINE

Admission to and graduation from the California School of Podiatric Medicine at Samuel Merritt University does not guarantee licensure for the practice of podiatric medicine. However, graduates of CSPM who successfully complete Parts I and II of the National Boards and satisfactorily complete one year of approved postgraduate podiatric medical and podiatric surgical training in a general acute care hospital are eligible to apply for licensure to practice podiatric medicine in the State of California. All candidates for licensure are required to take and pass an oral and practical examination administered by the California Board of Podiatric Medicine to ascertain clinical competence.

DISCLOSURES/TRUTH IN INFORMATION

Samuel Merritt University relies upon the documents supplied and statements made by its applicants and students, faculty and staff. If discrepancies appear between documents or statements provided and information otherwise obtained, applicants may be rejected for admission or employment and students may be subject to dismissal. Felony convictions may delay or prevent licensure in that jurisdiction.

DROP AND ADD

The Drop/Add period occurs the first two weeks of the semester. During that period, a student may drop and add courses without academic and/or financial penalty on completion of the appropriate forms. A course that is dropped will not appear on the transcript. If by dropping a course a student ceases to be enrolled, he or she is considered to have withdrawn from the University and must follow the readmission process if the student wishes to return to the University. Only elective courses may be dropped or added in the MOT, DPT, and CRNA programs.

THE DROP/ADD PROCESS

1. Obtain Drop/Add form from the Samuel Merritt University website (www.samuelmerritt.edu) or from the Campus Service Center.
2. Obtain the instructor/instructor's signature(s), and the advisor's signature if changing courses (a section change does not require the advisor's signature).
3. Return the signed form to the Campus Service Center by the deadline.

EVALUATIONS

STUDENT OUTCOME EVALUATION/PROGRAM EVALUATION

All students are required to complete evaluation instruments assessing the outcomes of their educational program. Ongoing evaluations are conducted in all programs to assess and ensure quality educational experiences. The evaluation instruments are collected each semester and/or during the final term prior to graduation. Failure to complete the instruments may result in a hold (Stop List) on the academic record.

PRE-LICENSURE CLINICAL PERFORMANCE

Clinical evaluation is ongoing and is based upon safe practice and achievement of course objectives. The faculty member/clinical instructor and student share written evaluations at appropriate intervals (usually at midterm) and at the conclusion of each course or clinical affiliation. Midterm evaluations indicate satisfactory or unsatisfactory progress in meeting clinical course objectives. Nursing clinical evaluations are filed in the School of Nursing. Following graduation, nursing students may request the file of clinical evaluations. The clinical files are destroyed after graduation.

FINALS WEEK

The final week of the academic semester is designated “Finals Week.” Departments may choose to conduct final examinations or require submission of final projects/papers prior to this week. Due dates for papers and projects and dates/times for final examinations outside of the designated finals week must be approved by the Department Chair/Program Director and defined in course syllabi. The academic department is responsible for conducting final examinations in a reasonable and pedagogically sound manner, and for ensuring that instructional hours delivered in all courses are consistent with assigned united loads. The department chair is responsible for the maintenance of this policy.

FORMS AND PETITIONS

Petitions and forms are available from the Samuel Merritt University website (www.samuelmerritt.edu) and in the Campus Service Center and are filed in the Campus Service Center. These may include Drop/Add, Independent Study Forms, Petition for Graduation, Petition for Leave of Absence, Withdrawal from the University, and open petitions. It is the student’s responsibility to file all appropriate petitions and forms by the dates set in the Registrar’s calendar distributed at the beginning of each academic year. Forms are available online at the Samuel Merritt University website (www.samuelmerritt.edu).

OPEN PETITIONS

The open petition, available from the Samuel Merritt University website (www.samuelmerritt.edu) and in the Campus Service Center, is used for academic requests for which there are no specific petition forms. For example:

- a) Exceptions to the prerequisite requirement
- b) Request for exception to a general education requirement

The student obtains the petition from the Samuel Merritt University website (www.samuelmerritt.edu) or in the Campus Service Center. The student returns the signed petition to the Campus Service Center and is notified in writing of the results of the petition.

GRIEVANCE

Formal grievance procedures are available to the student who wishes to appeal a disciplinary decision. For a description of the grievance procedure, consult the section on Academic, Personal, and Professional Integrity in this *Catalog/Handbook*.

INDEPENDENT STUDY

The purpose of an independent study course is to provide the student an opportunity to meet his/her educational needs which exceed course content available in the regular curriculum. Students must be able to work with minimal supervision. An independent study course is ordinarily taken by an upper-division or graduate student in good academic standing. The student must petition for approval of the course by the course instructor and program director or department chair. All independent study courses must

be completed within one semester. An independent study course may range from one to three semester units. The calculation of theory and clinical units into hours is as follows: 1 theory unit = 1 hour/week for semester; 1 clinical unit = 3 hours/week for semester.

REGULAR COURSES TAKEN IN INDEPENDENT STUDY FORMAT

Upper division or graduate students in good academic standing may be allowed to take regular catalog courses in an “Independent Study” format only during a semester in which the course is not normally offered. The student must petition for approval of the course by the course instructor and program director or department chair. No department will be required to offer courses in this format. The course must be essentially identical to the most recent regularly scheduled offering of said course (i.e., the course must use the same syllabus with the same learning objectives and similar evaluation methods as used in the regular course). Regularly scheduled courses may not be taken as independent study courses as a means of “remediating” an unsatisfactory grade. Students may not take more than one regularly scheduled course in an independent study format in a single academic year.

LEAVE OF ABSENCE

PERSONAL LEAVE OF ABSENCE

At the discretion of the University, a personal leave of absence may be granted for up to one year for students in good academic standing and for compelling reasons. The request form is available on the Samuel Merritt University website (www.samuelmerritt.edu) and in the Campus Service Center. Students must clear with financial services and financial aid before receiving approval from the department chair or program director and Vice President of Enrollment & Student Services. For financial aid recipients, under federal guidelines, a student on leave of absence is considered withdrawn from the University. A leave of absence guarantees enrollment upon the student’s return but does not ensure placement in specific coursework. A physical examination is required prior to re-entry. All prior account balances must be cleared and the student must reapply for financial aid. A student must submit a written request for re-entry to the Office of the Registrar a minimum of 60 days prior to re-entry. Students will be charged the current tuition rate upon return.

ACADEMIC OR ADMINISTRATIVE LEAVE OF ABSENCE

is an involuntary leave required by the University. An example is the unsuccessful completion of a course for which a student must wait for the course to be taught again. This leave is approved at the discretion of the program chair and the Academic Vice President and Provost or the Vice President of Enrollment and Student Services for behavioral matters

LIABILITY AND MALPRACTICE INSURANCE

Samuel Merritt University provides professional liability coverage for faculty and students which pertains to educational

experiences required by the University. The acquisition of additional coverage for faculty and students is an individual decision based on individual circumstances

READMISSION AFTER WITHDRAWAL

Students who have voluntarily withdrawn from the University and are seeking readmission must comply with current admission policies. Readmission is competitive and not guaranteed. The student may not have an outstanding balance on his or her tuition account. The request for readmission is reviewed by the dean, department chair or program director, and their decision regarding readmission is communicated to the Vice President of Enrollment and Student Services who will notify the applicant.

READMISSION AFTER DISMISSAL

Samuel Merritt University does not grant readmission to the same program from which a student has been dismissed. A student dismissed from the Doctor of Physical Therapy program, Master of Occupational Therapy program, or Master Physician Assistant program at Samuel Merritt University may not be readmitted to that program. A student dismissed from the California School of Podiatric Medicine (with the exception of dismissal for failure to pass the APMLE Part I boards) may not be readmitted to that program. The School of Nursing may consider an application for readmission following dismissal.

STUDENT CLASSIFICATION

UNDERGRADUATE STUDENTS ARE CLASSIFIED AS FOLLOWS

- > Full-time status is accorded any student taking 10 or more units per regular term.
- > Federal regulations obligate students to be enrolled in a minimum of 12 units each regular term in order to retain full-time financial aid eligibility for PELL grants.
- > Part-time status is assigned to those students taking less than 10 units per regular-term.
- > Special status is accorded students enrolled without the intention of pursuing a degree.

GRADUATE—REGULAR

- > A regular student is one admitted by the University to work toward a graduate degree.
- > Full-time status is accorded any student taking 6 or more units per term.
- > Part-time student status is assigned to those with less than 6 units per term.
- > Half-time student status is assigned to those with 3-6 units.

GRADUATE—CONDITIONAL (MSN)

A graduate student whose admission to become a regular student is conditional, but who has obtained the permission of the chair of the department to enroll in coursework

for that department, or a student whose prior academic preparation does not include courses which are prerequisite for admission to regular graduate status, or a student whose prior academic work is not sufficiently strong to merit full acceptance as a regular graduate student, but who has obtained the permission of the chair/dean of his/her department to enroll for a specific set of courses, has conditional status. A graduate student with conditional status must meet the specific conditions set by the chair/dean of his/her department before s/he will be reclassified to regular graduate student status. If specifically approved by the chair, courses taken by a student with conditional status will count towards the completion of regular graduate degree requirements. Conditional graduate students may register for two courses per semester for two semesters (total of four courses).

GRADUATE—SPECIAL (MSN)

A student with special status is one admitted by the University for coursework only, or a modified program of study, but who is not working towards a degree or certificate within the MSN program. Special student status is approved by the chair on a form provided by the Admission Office and must be renewed each semester. Conditions for obtaining special student status and for the renewal of this status are set by each department. Students with special status may register for classes only if space is available. A student with special status who wishes to change to regular status must apply for admission, must meet all regular graduate admission standards, and if accepted, will be expected to complete all requirements for the degree. Special students may register for two courses per semester for two semesters (for a maximum of four courses). Upon acceptance as a regular student, courses taken while on special student status may count towards graduate degree requirements upon recommendation by the graduate advisor and approval by the chair.

GRADUATE—(MOT/MPA/DPT)

The MOT, MPA, and DPT curricula are full-time programs with sequential coursework. Students are expected to take all courses in a semester and each semester in sequence. Normally all courses are taken in residence. Part-time status is defined as anything less than enrollment in all required courses in a given semester. Part-time status may be granted by the department chair in the following cases:

1. A student who was administratively withdrawn from a course(s) and is now completing the course(s).
2. A student who was suspended from the program for unsatisfactory performance in a course or affiliation and is now repeating that course or affiliation.
3. A special student requests to take a course(s).
4. A student who has completed transferable work (see Transfer Credit).

STUDENT RESEARCH DEGREE REQUIREMENTS

Select programs require completion of a student research requirement or synthesis project for graduation. Each program

will designate the course(s) in which the student completes this requirement. Once a student enrolls in the course/s that fulfill the requirement, s/he must be continuously enrolled in that course each semester until completed. If the research requirement is not met within one semester, the student received an IP grade to maintain continuous enrollment in the course for a maximum of three continuous semesters. If the requirement is not met within three continuous semesters, an extension may be granted with the approval of the instructor and the dean/chair. In this case, the student must re-enroll in the course in each subsequent semester and pay tuition for that course until degree requirements are met. In all cases, students must successfully complete degree requirements within the allowed length of study for graduate programs (see Length of Study for Graduate Programs).

SYNTHESIS EXPERIENCE (MSN)

All candidates must successfully complete a synthesis project to satisfy the requirement for scholarly activity. Students must complete a directed study or synthesis project or thesis with the guidance of the director/advisor of the project or thesis. For each semester the student enrolls in the synthesis experience after completion of other coursework, both registration for the synthesis and a synthesis fee are required. A grade of "IP" is assigned until the synthesis experience is complete.

TRANSCRIPT REQUESTS (SAMUEL MERRITT UNIVERSITY)

Transcripts are issued by the Samuel Merritt University Office of the Registrar. In compliance with the Privacy Act of 1974 (Section 552A), telephone requests for transcripts cannot be accepted. Requests must be in writing and will be processed within seven working days of receiving the written request. A \$5.00 fee is charged for each copy of the transcript requested — \$15.00 for 24-hour service. Unofficial transcripts are available, free of charge, on SMURF. The University withholds transcripts from students who have outstanding financial, academic, or other obligations to the University.

UNDERGRADUATE PROGRESSION AND GRADUATION

All students must satisfactorily complete all required prerequisite courses to progress in the major. In order to graduate, students must be in good standing, meet all program and residency requirements, and attain a cumulative and major grade point average of 2.0.

UNDERGRADUATE NURSING

HEALTH RECORDS COMPLIANCE— CONTINUING NURSING STUDENTS

Registered Nurses are committed to the promotion of health, the prevention of illness and adhering to those principles and practices that promote safety and wellbeing for their patients and themselves. Therefore, the following policies are in accordance with the California Department of Health, Centers for Disease Control's Recommendations

for Immunization for Health-Care Workers (MMWR-12/26/97/46(RR-18);(1-42) and the various clinical agencies affiliated with Samuel Merritt University.

All students are expected to provide validated proof of compliance with all health requirements and all related requirements as outlined in the University Catalog or on the Canvas site for clinical agency requirements, throughout their course of study. There can be no expirations of required immunizations, TB skin tests, BLS for health care provider, or Blood Borne Pathogens certification during the term. Failure to complete these requirements by the deadlines stated in the program calendar will result in the student being administratively dropped from the course. Students so dropped will be required to enroll in the next course offering based on space availability.

Note

Students will be expected to maintain currency such that all health records and requirements are up to date, meaning that they are up to date six weeks prior to a rotation and will continue to be up-to-date during the course of every rotation. There are to be no expiration dates during the term.

For example, if BLS expires during the course, it must be renewed BEFORE registering for the course. At no time during the term may the health records have expired.

PROGRESSION

For satisfactory progression, students must achieve a minimum grade of "C" in all courses in fulfillment of the degree, including:

- > Anatomy
- > Chemistry
- > University-level Mathematics (Statistics highly recommended)
- > Communications
- > Cross-cultural Psychology or equivalent
- > English Composition (two courses)
- > Human Development
- > Microbiology
- > Physiology

A student who receives a grade of lower than "C" in a theory course and/or a grade lower than "S" in a clinical course required by the Board of Registered Nursing may, providing space is available, repeat the course only once. The theory and clinical components of repeated courses must be taken concurrently.

In those courses for which there is both a theory and clinical component, failure to achieve the theory grade designated by the program will result in the student being required to repeat both theory and clinical regardless of the grade in the clinical component. Failure to successfully complete the clinical component is recorded as an F grade for theory regardless of the grade calculated in the theory component and requires a repeat of both theory and clinical components of the course.

Given the rapid pace of the ABSN program, a student who fails or withdraws from a clinical course may not be able to repeat the course for an extended period of time depending on availability.

During the final term prior to graduation, students are required to complete evaluation instruments assessing the outcomes of their educational program. Refer to the policy on Filing for Graduation outlined in this *Catalog/Handbook*.

DEGREE PLANNING (NURSING)

Students meet with their advisor to review a degree plan which outlines their course of study; advisors sign the student course schedule each term. Each student is responsible for monitoring his or her degree plan and progression toward successful completion of degree requirements.

DEAN'S LIST—UNDERGRADUATES (BSN)

To recognize academic excellence, at the conclusion of each full semester the names of undergraduate students who achieve a current grade point average of 3.5 or higher in a minimum enrollment of 10 semester units are published.

GRADUATION WITH HONORS

Graduation with honors is awarded to undergraduate students who have achieved the following minimum cumulative grade point average in all University work completed toward the baccalaureate degree:

- > Summa cum laude — 3.85
- > Magna cum laude — 3.7
- > Cum laude — 3.5

PROBATION

At the conclusion of each term, students enrolled in Samuel Merritt University are subject to academic probation if:

- > The current semester, cumulative, or major grade point average is less than 2.0.
- > Readmitted following dismissal.

If academic probation is not removed, the student may then be subject to dismissal from the University. After one term on probation, students may also lose eligibility for financial aid. All students on probation are encouraged to meet with their academic advisor. Probationary status is removed following a semester of satisfactory work completed in residence, provided the overall cumulative grade point average and the major grade point average are restored to 2.0.

CRITICAL BEHAVIORS

Critical Behaviors, which if proven can immediately result in failure of the course, as well as disciplinary action by the University:

- > Purposeful falsification of a client's record.
- > Denying responsibility for one's own deviation from standard practice

- > Act or threat of intimidation, harassment or physical aggression
- > Actions which place the client or others in physical or emotional jeopardy
- > Abusive behavior toward clients or others
- > Failure to disclose actions, which place the client or others in physical or emotional jeopardy
- > Ignoring the need for essential information before intervening.

DISMISSAL

An undergraduate student is dismissed from Samuel Merritt University if:

- > Probationary status is not removed at the conclusion of the next semester and the required minimum cumulative GPA is not maintained during all remaining semesters.
- > She or he receives two grades of less than "C" in courses completed while enrolled at Samuel Merritt University.
- > The current semester or cumulative grade point average falls below 1.4 at the conclusion of a regular term.

A student is subject to dismissal from Samuel Merritt University if:

- > At any time during a course, performance or behavior jeopardizes the safety of self or others.
- > At any time during a course, behavior does not comply with the code of ethics and code of conduct of Samuel Merritt University.

Students may appeal dismissal through the Academic Vice President. Contact that office for the appropriate form.

GRADUATION PROCEDURES

All graduating students are required to complete and submit a Petition for Graduation form to the Campus Service Center. The deadline for petition submission is the first week of the term in which the student expects to graduate. The Petition for Graduation form must be filed even if the student is not planning to participate in commencement activities. All graduating students are assessed a graduation fee whether or not they plan to participate in commencement exercises. The graduation fee is applied to the cost of the final degree audit, preparation of records for licensing agencies, the diploma and cover, academic regalia worn at Commencement, and expenses for the commencement ceremony.

PETITION FOR GRADUATION— DEGREE CONFERRAL

Forms are available in the Campus Service Center and on the Samuel Merritt University website. The form is used for several reasons, among them are the printing of the student's name for the commencement program and diploma.

Without this form, the Registrar's Office cannot guarantee that a student's name will appear in the program. Diplomas

will not be printed without a petition on file in the Registrar's Office. The appropriate program director/chair must approve all such petitions.

Waiver and substitutions to Catalog requirements must be submitted by department chairs and approved by the Academic Vice President and Provost.

UNDERGRADUATES: EARLY PARTICIPATION IN THE UNDERGRADUATE CEREMONY

BSN students are eligible to participate in commencement ceremonies provided they have completed all of the degree requirements or have no more than six (6) required course credits to be completed in the following term.

UNDERGRADUATE DEGREE CONFERRAL

The BSN Program has two degree conferral dates each academic year. The degree conferral date for the Fall and Spring terms is the last day of a student's final term. If a student's eligibility status changes after filing for a designated candidacy degree date, the subsequent degree conferral date will be in effect contingent upon the completion of all degree requirements. The degree conferral date for the ABSN program is the last day of a student's final term.

GRADUATE PROGRESSION AND GRADUATION

CONTINUED ENROLLMENT

To be successfully enrolled at Samuel Merritt University, students must be admitted, have a mutually agreed-upon course of study, and a graduate advisor as assigned by the dean or department chair. Either students or advisors may withdraw from such arrangements. A new advisor will be appointed with mutual consideration if the replacement faculty member agrees. It is understood that faculty must have appropriate expertise to guide the graduate student, thus the University may limit areas of specialization and concentrations in advanced programs to those areas represented within the expertise of the faculty.

All students are expected to provide validated proof of compliance with all health requirements and all related requirements as outlined in the University Catalog or on the Canvas site for clinical agency requirements, throughout their course of study.

All students must satisfactorily complete all required prerequisite courses to progress in the major. In order to matriculate into the 5th semester of either the Family Nurse Practitioner or Case Management programs, the Entry-level Master of Science in Nursing student must successfully complete the curriculum as outlined in the current catalog and pass a standardized assessment test as determined by the School of Nursing at the prescribed passing score.

Graduate students in the Master of Occupational Therapy (MOT), Master Physician Assistant (MPA), Doctor of Physical Therapy (DPT) and Master of Science in Nursing (MSN)

programs must achieve satisfactory academic performance, including: a passing grade in all didactic courses; a grade of "S" on all clinical experiences; and a cumulative grade point average of: 2.0 (MOT/MPA) and 2.7 (DPT), 3.0 (MSN). Graduate students are also required to complete evaluation instruments assessing their learning experiences, including clinical coursework, at periodic intervals.

Graduate students in the Doctor of Podiatric Medicine program who satisfactorily complete the four year curriculum as outlined in the current catalog, have at least a cumulative grade point average of 2.0 (classes of 2014 and 2015) or 2.5 (class of 2016 and henceforth), take and pass the 3rd year Clinical Rotation Practical Examinations, the 3rd Year Objective Structured Clinical Examination (OSCE), the American Podiatric Medical Licensing Examination (APMLE) Part I, and take the APMLE Part II Examination are eligible for the degree of Doctor of Podiatric Medicine. Applications for graduation are available on the Samuel Merritt University website (www.samuelmerritt.edu) and in the Campus Service Center.

DOUBLE CREDIT (UNDERGRADUATE/GRADUATE) COURSES

The same course may not be used to fulfill the course requirements in both professional (undergraduate nursing and first professional masters in nursing, occupational therapy or physician assistant or entry-level doctor of physical therapy) and post-professional graduate programs.

TRANSFER BETWEEN GRADUATE NURSING PROGRAMS/TRACKS

Graduate nursing students in good academic standing may apply for transfer from one graduate nursing program to another graduate nursing program. Transfer is contingent upon approval of the director of the program to which the student wishes to transfer. The "Request to Change Graduate Nursing Program" form may be obtained from the Office of the Registrar.

LENGTH OF STUDY FOR GRADUATE PROGRAM

MPA, DPT, DPM

MPA, DPT, DPM: Students are expected to complete the programs in the full-time, sequential two and one-half year curriculum as described in the MPA curriculum overview. The DPT and DPM curriculum must be completed within six years of enrollment.

The MOT program offers both full-time sequential two and one half year curriculum or part-time length of study.

POST-PROFESSIONAL MASTER'S DEGREES

Post-professional master's degrees: Since students may pursue the master's degree either as a full-time (minimum six units/semester) or as a part-time student, the time necessary for completion of the degree varies considerably. Students are expected to complete their programs in no more than six years from the date of matriculation.

STUDY LOAD AND RESIDENCY REQUIREMENTS (MSN)

Students in post-professional master's degree programs are required to register for three units each semester in order to maintain part-time enrollment (see Leave of Absence policy). The minimum full-time load is six units per semester. Maximum study load limitations may be exceeded by approval of the appropriate chair/dean and will be billed accordingly. A minimum of 36 units are required; 27 units must be completed in residency.

GRADUATE PROBATION AND DISMISSAL (MSN)

Graduate students whose semester or cumulative grade point average falls below 3.0 will be placed on academic probation. Students on academic probation who fail to raise their cumulative grade point average to 3.0 by the time they have completed the next two sequential semesters are subject to dismissal from the program. Students whose cumulative average falls below 2.5 after any semester, or who receive a grade of "F" in any one course, are also subject to dismissal.

GRADUATE PROBATION, SUSPENSION, AND DISMISSAL (MOT/MPA/DPT)

MASTER OF PHYSICIAN ASSISTANT

An entry-level physician assistant student may be suspended from the program if s/he earns a grade of "D" in a required class or "Unsatisfactory" on a field experience, affiliation or the internship. The physician assistant curriculum is sequential. Courses and affiliations must be taken in sequence. Therefore, the student is suspended until the course is repeated or another affiliation can be arranged. S/he may not progress in the curriculum until the course or affiliation is successfully completed or graduate until the internship is completed. A MPA student is subject to dismissal if (1) a course, field experience, affiliation, or internship is not successfully repeated at its next offering; or (2) the student receives a second "D"/"U" grades in required courses or field experiences, affiliations or internships; or (3) a student receives a grade of "F" in any required course.

MASTER OF OCCUPATIONAL THERAPY

An entry-level occupational therapy student may be suspended from the program if s/he earns a grade of "D" in a required class or "Unsatisfactory" on a field experience, affiliation or the internship. The occupational therapy curriculum is sequential. Courses and affiliations must be taken in sequence. Therefore, the student is suspended until the course is repeated or another affiliation can be arranged. S/he may not progress in the curriculum until the course or affiliation is successfully completed or graduate until the internship is completed. A MOT student is subject to dismissal if (1) a course, field experience, affiliation, or internship is not successfully repeated at its next offering; or (2) the student receives a second "D"/"U" grades in required courses or field experiences, affiliations or internships; or (3) a student receives a grade of "F" in any required course.

DOCTOR OF PHYSICAL THERAPY

A student in the Doctor of Physical Therapy (DPT) program must maintain a cumulative grade point average (GPA) of 2.70 (a B- average) throughout the program. A student whose cumulative GPA falls below 2.70 will be placed on probation. A student on probation who fails to raise her/his cumulative GPA to a minimum of 2.70 in the next two didactic semesters after being placed on probation will be dismissed from the program.

A student who does not pass one didactic or clinical course will have one opportunity to repeat the course at its next offering. If the student does not pass the course on the second attempt, the student will be dismissed.

The physical therapy curriculum is sequential. Both didactic and clinical courses must be taken in sequence. Therefore, a student cannot continue on in the curriculum while waiting to repeat a course.

A student with two or more instances of a D or an F recorded on his/her transcript will be dismissed.

DOCTOR OF PODIATRIC MEDICINE

REGULATIONS GOVERNING STUDENT PERFORMANCE, PROMOTION AND GLOBAL REVIEW

POLICY

This policy describes procedures for determining whether students at CSPM have satisfied the academic requirements for continuation at the University and their qualifications to receive the Doctor of Podiatric Medicine degree (DPM). These regulations and procedures supersede all prior regulations and procedures regarding academic performance. Samuel Merritt University reserves the right to refuse promotion or re-admission to a student who is believed, for any reason, to be in breach of the regulations, policies and procedures of the University.

The Student Performance, Promotion and Global Review Committee is charged with the responsibility to assess all matters pertaining to student progress on academic and graduation of requirements. The Committee is also responsible for recommending policy changes to the CSPM Dean. The Committee will be composed of a minimum of eight members with at least one representative from each of the following departments: Preclinical Sciences, Podiatric Surgery, Applied Biomechanics and Medicine. In addition, a third or fourth year student, recommended by the CPMSA, will serve as a voting member of the Committee. The Associate Dean for Administrative Affairs is a non-voting member.

MEETINGS

The Student Performance, Promotion and Global Review Committee shall meet at least once following the close of each term to review students who have one or more of the following deficiencies:

1. Are currently on academic probation
2. Have a GPA that is below 2.000 (classes of 2014 and 2015) or that is below 2.500 (class of 2016 and henceforth)
3. Have In Progress grades that are past due
4. Have Incomplete grades that are past due
5. Have received one or more F's in a semester

Advanced notice of each scheduled meeting date shall be given by the Associate Dean for Administrative Affairs, to students up for review and members of the Student Performance, Promotion and Global Review Committee. Additional meetings may be called as required. A quorum consists of a majority of the voting membership.

REGULATIONS AND REQUIREMENTS

At the end of each term of instruction, the Associate Dean for Administrative Affairs shall arrange a meeting date and provide committee members with the names of students to be reviewed and the reasons for review. Prior to the meeting date, faculty members will be surveyed to obtain recommendations for possible committee action and student decisions. All students who appear before the Student Performance, Promotion and Global Review Committee will receive notification via e-mail, informing them that a meeting has been scheduled and that they are required to personally meet with the Associate Dean for Administrative Affairs prior to the scheduled Committee meeting date to discuss the review process and their rights and responsibilities. Failure to do so may result in forfeiture of specific rights and/or responsibilities.

Academic performance and promotion shall be determined by CSPM policies as specified below and may be amended from time to time:

If a student at the end of any term is on academic probation, has an incomplete in any course or rotation, has less than a 2.000 cumulative average (classes of 2014 and 2015), or has less than a 2.500 cumulative average (class of 2016 and henceforth), or has received a failing grade in any course or clinical rotation during the term, the committee shall review the student's academic standing and make recommendations for action. Academic deficiency recommendations may include one or more of the following at the Committee's discretion:

1. Remedial work to be completed within one term.
2. Remedial work to be completed during the summer semester through an outside institution that has been approved by CSPM. The student must pass the summer remediation course with a minimum grade of "C".
3. Repetition of a course during the next academic year with a grade requirement of at least a "C". Repetition of a clinical rotation shall be taken as arranged by the Associate Dean for Clinical Affairs (2nd or 3rd year rotations) with a grade requirement of at least a "C" or a "Pass".
4. Repetition of part or all of an academic year. A student repeating the year shall be on academic probation for the

entire academic year and must take and pass all courses and rotations in that year's curriculum. No student shall be permitted to repeat more than one year. All remedial work or repeated courses must be completed with a grade requirement of at least a "C".

5. Mandatory tutorial assistance.
6. Academic Probation:
 - a. If a student's cumulative GPA falls below 2.000 (classes of 2014 and 2015), or below 2.500 (class of 2016 and henceforth) the student will be automatically placed on academic probation. The Committee may also elect to place a student on Academic Probation if the student has failed a course or clinical rotation but has a cumulative GPA of 2.000 or higher (classes of 2014 and 2015), or has a cumulative GPA of 2.500 or higher (class of 2016 and henceforth). Failure to meet these requirements will subject the student to a recommendation for dismissal from the Performance, Promotion and Global Review Committee.
 - b. A student on academic probation must pass all courses and clinical rotations completed during the probation period and raise their grade point average to a 2.000 (classes of 2014 and 2015) or to a 2.500 (class of 2016 and henceforth) by the end of the term specified. Failure to meet these requirements will subject the student to a recommendation for dismissal from the Performance, Promotion and Global Review Committee
 - c. In order to continue on to fourth year clinical rotations or be eligible for graduation from the CSPM, a student must have cleared all failing grades and have achieved a cumulative GPA of at least 2.000 (classes of 2014 and 2015), or have achieved a cumulative GPA of at least 2.500 (class of 2016 and henceforth).
 - d. Removal from Academic Probation must be approved by the Committee.
7. Mandatory Counseling. The Committee reserves the right to recommend that the student be evaluated for academic and/or personal counseling.
8. Medical Leave of Absence.
9. Suspension for a finite or an indefinite period of time.
10. Recommendation for dismissal from the University.
11. If a student in any class fails a course, a clinical rotation, is placed on academic probation, or has a cumulative GPA of less than 2.500 the student will not be allowed to hold an office in a class, the CPMSA, a club or an organization. If the student already holds an office, the student will be required to resign from the office.
12. If a student does not meet all of the stipulated requirements, the student will be subject to dismissal as recommended by the Performance, Promotion and Global Review Committee.

POLICY REGARDING FAILED COURSES AND/OR CLINICAL ROTATIONS

Grade Received	Options
1. Any failure in a course in any one semester	(A) Re-examination at the discretion of the course coordinator prior to submission of the final course grade. If a student is allowed to take a re-examination for a course prior to submission of the final course grade, the highest grade that will be recorded for the course is a "C". Approval to take the re-examination is not automatic but will be determined by the course coordinator. (B) Students who have received a final course grade of "F" in any course in their first two academic years will not be permitted to continue their scheduled classes or clinical rotations until the course failures have been remediated. The appropriate remediation will be determined by the Committee.
2. Any failure in a clinical rotation in any one semester	(A) Re-examination at the discretion of the clinical rotation supervisor prior to submission of the final rotation grade. If a student is allowed to take a re-examination for a clinical rotation practical examination prior to submission of the final rotation grade, the highest grade that will be recorded for the rotation is a "C". Approval to take the re-examination is not automatic but will be determined by the clinical rotation supervisor. (B) Re-take the clinical rotation with the approval of the Committee when next offered at CSPM. Students may be allowed to continue with the next semester.
3. Two F grades in any one semester	(A) The student will be subject to a recommendation for dismissal from the Committee.
4. A student who is on Academic Probation is subject to a recommendation for dismissal by the Committee.	
5. A student is subject to a recommendation for dismissal by the Committee based on the student's overall academic performance.	
6. Extenuating circumstances may be considered at the discretion of the Committee.	

DECISION OF THE COMMITTEE

The decision of the Student Performance, Promotion and Global Review Committee will be sent by e-mail to the student within five (5) working days of the meeting. Letters of dismissal and letters that require a student to repeat an academic year shall be sent via certified mail as well as e-mail to the student at the address currently on file with the Registrar.

The Student Performance, Promotion and Global Review Committee reserves the right to amend a decision based upon the addition of new material.

If a student does not wish to appeal the decision of the Committee, the student will be required to schedule a meeting with the Associate Dean for Administrative Affairs who will explain and clarify the Committee's decision. This meeting must be scheduled within ten (10) working days from receipt of the Performance, Promotion and Global Review Committee's notification. Failure to schedule and attend this meeting will serve as confirmation that the student fully understands the stipulations of the Committee.

APPEAL PROCEDURE

If the student does not agree with the decision of the Student Performance, Promotion and Global Review Committee the student may appeal to the CSPM Dean. This meeting must be scheduled within five (5) working days from receipt of the Performance, Promotion and Global Review Committee's notification. The actual appeal meeting must occur within twenty (20) days from receipt of the Committee's notification. To initiate the appeal hearing the student must contact the CSPM Dean to schedule an appeal meeting appointment time and advise the Dean that they are appealing the decision of the Student Performance, Promotion and Global Review Committee. This will ensure that the appropriate academic records are obtained prior to the meeting with the Dean.

Following the appeal meeting with the CSPM Dean, notification of the Dean's decision shall be emailed and mailed by the Dean's office to the student within five (5) working days. A copy of the decision will also be forwarded to the Chair of the Performance, Promotion and Global Review Committee and the Associate Dean for Administrative Affairs. If the decision of the Committee is modified or overturned, the student's file must be referred back to the Performance, Promotion and Global Review Committee for adjudication.

SMU STUDENT GRIEVANCE POLICY

The decision of the CSPM Dean may be reviewed according to the SMU Student Grievance Policy. The request for review must be submitted in writing by the student to the Office of the Academic Vice President and Provost within five (5) working days from the date listed on the CSPM Dean's appeal decision letter. Please refer to the SMU Catalog/ Handbook, Section on Academic Affairs, for further information regarding this process. **Students should note in the Student Grievance Policy that not all infractions qualify for review by the Academic Vice President or the Student Grievance Committee.**

Students must continue to attend classes and laboratory sessions until the final appeal decision has been reached. If a student has been recommended for dismissal, the student will not be allowed to participate in clinical rotation assignments, unless required to do so by the Performance, Promotion and Global Review Committee.

ANNUAL GLOBAL REVIEW PROCESS

At the end of each academic year, a Student Global Review will be performed by the Performance, Promotion and Global Review Committee. Fourth year students will be reviewed at the end of the fall semester with a final review conducted during the spring semester of the student's final term at the University to determine suitability for entrance into the podiatric medical profession. The Global Review, which is not generated by academic problems, is conducted for all students in an effort to remediate problems when a student has exhibited inappropriate professional or ethical conduct or has demonstrated inappropriate personal attributes during the review period.

All full-time faculty members will be queried about non-academic concerns of students that may need to be remedied. Other relevant instructors, clinical faculty, clerkship directors or other University officials in the CSPM/SMU community may also be asked to provide input.

CRITICAL BEHAVIORS

Critical Behaviors, which if proven can immediately result in failure of the course, as well as disciplinary action by the University:

- > Purposeful falsification of a client's record.
- > Denying responsibility for one's own deviation from standard practice
- > Act or threat of intimidation, harassment or physical aggression
- > Actions which place the client or others in physical or emotional jeopardy
- > Abusive behavior toward clients or others
- > Failure to disclose actions, which place the client or others in physical or emotional jeopardy
- > Ignoring the need for essential information before intervening.

GRADUATE DISMISSAL (ALL PROGRAMS)

A student is subject to dismissal if at any time during a course, unsafe clinical performance or behavior jeopardizes the safety of the student or others.

PARTICIPATION IN COURSE ACTIVITIES

For all courses in which they are registered, students are expected to participate in course activities as designed by their course faculty. Such course activities could include, but are not limited to, invasive, manipulative procedures/techniques or demonstrations (i.e. venous blood draws, and intravenous needle insertions or injections, intramuscular or subcutaneous) or other non-invasive procedures. Faculty must inform students of the reasonable risks of any procedure/s required in the course.

Students are expected to both act as provider and recipient of these procedures. The student must notify the Instructor of Record of any condition or circumstance that would prevent them from acting as provider or recipient as soon as possible. In those cases, the faculty and student must identify alternative learning activities that would satisfy course requirements. In all cases, the student must be able to fulfill regular or alternative course activities in order to successfully complete the course.

GRADUATION PROCEDURES

All graduating students are required to complete and submit a Petition for Graduation form to the Registrar's Office. The deadline for petition submission is the first week of the term in which the student expects to graduate. The Petition for Graduation form must be filed even if the student is not planning to participate in commencement activities. All graduating students are assessed a graduation fee whether or not they plan to participate in commencement exercises. The graduation fee is applied to the cost of the final degree audit, preparation of records for licensing agencies, the diploma and cover, academic regalia worn at Commencement, and expenses for the commencement ceremony.

PETITION FOR GRADUATION— DEGREE CONFERRAL

Forms are available in the Office of the Registrar and on the Samuel Merritt University website. The form is used for several reasons, among them are the printing of the student's name for the commencement program and diploma. **Without this form, the Registrar's Office cannot guarantee that a student's name will appear in the program. Diplomas will not be printed without a petition on file in the Registrar's Office.** The appropriate program director/chair must approve all such petitions.

Waiver and substitutions to Catalog requirements must be submitted to the Registrar's Office by department chairs and approved by the Academic Vice President and Provost.

GRADUATES: ELIGIBILITY TO PARTICIPATE IN THE GRADUATION CEREMONY

A petition for graduation must be approved and filed in the Office of the Registrar no later than the end of the first week of the semester in which commencement occurs. Commencement exercises are ceremonial only and in no way imply completion of program requirements or degree conferral. Completion dates (end of term) are posted on the transcript and the diploma is awarded only upon completion of all requirements for the degree.

DATES OF DEGREE CONFERRAL

Graduation dates posted on the transcript and on the diploma are the last day of the student's final term.

SAFE AND PROFESSIONAL PRACTICE IN CLINICAL SETTINGS

POLICY

A student whose pattern of behavior is found to be unsafe and/or unprofessional may be excluded from a clinical practicum at any time and could receive a failing grade in the course. The student is referred to the program director/department chair and may be subject to further disciplinary action.

GUIDELINES

The student will demonstrate patterns of health care professional behavior which follow the legal and ethical professional codes; promote the well being of clients, health care workers, and self in the biological, psychological, sociological, and cultural realms; demonstrate accountability in preparation, documentation and continuity of care; and show respect for the human rights of individuals.

Indicators to be used as guidelines for evaluating safe and professional practice are:

REGULATORY

The student practices within the boundaries of the applicable State Practice Act, the guidelines and objectives of the department, and the rules and regulations of the health care agencies. Examples of safe and/or professional practice include, but are not limited to the following:

- a) notifying the agency and/or instructor of clinical absence.
- b) adhering to the dress code.
- c) presenting for clinical practicum free from the influence of unprescribed psychoactive drugs, including alcohol.
- d) demonstrating accountability by making up missed clinical experiences, as designated by faculty member.
- e) arriving promptly for clinical assignments.
- f) meeting obligations in a timely manner.

ETHICAL

The student practices according to the relevant professional association's Code of Ethics, Standards of Practice, and the State Practice Acts. Examples of safe and/or professional practice include, but are not limited to the following:

- a) accepting assignments in keeping with the University's policy of non-discrimination.
- b) appropriately performing any activity related to clinical practice.
- c) reporting unethical behavior of other health care providers, including other students.
- d) demonstrating honesty in all aspects of clinical practice.

BIOLOGICAL, PSYCHOLOGICAL, SOCIAL, AND CULTURAL REALMS

The student's practice meets the needs of the human from a biological, psychological, sociological and cultural standpoint. Examples of safe and/or professional practice include, but are not limited to the following:

- a) displaying stable mental, emotional and physical behavior.
- b) following through on referrals or interventions to correct own areas of deficiency in clinical practice which, if ignored, may result in harm to others.
- c) building interpersonal relationships with agency staff, coworkers, peers and/or faculty that result in clear, constructive communication, promoting quality client care and/or unit functioning.
- d) being physically capable of carrying out essential procedures.

ACCOUNTABILITY

The student's practice demonstrates accountability in the responsible preparation, documentation and promotion of continuity in the care of clients. Examples of safe and/or professional practice include, but are not limited to the following:

- a) communicating concisely both orally and in writing.
- b) documenting client behavior accurately and comprehensively.
- c) reporting questionable professional practices.
- d) undertaking activities with adequate orientation, theoretical preparation and appropriate assistance.
- e) demonstrating honesty in all aspects of practice

HUMAN RIGHTS

The student's conduct shows respect for the individual, client, health team member, faculty and self, including, but not limited to the inherent legal, ethical and cultural realms. Examples of safe and/or professional practice include, but are not limited to the following:

- a) maintaining confidentiality of interactions.
- b) maintaining confidentiality of records.
- c) demonstrating honesty in relationships.
- d) using individual assessments which support quality patient care.
- e) recognizing and promoting patient's rights.

DRESS CODE

The purpose of the dress code is to establish standards which are consistent with the professional image and provide for patient safety while allowing for some individuality. Students are required to comply with the dress code policy of each affiliating clinical agency and adhere to faculty directive(s) regarding dress.

ACADEMIC, PERSONAL, AND PROFESSIONAL INTEGRITY

ACADEMIC INTEGRITY

Academic integrity is expected of all faculty, staff and students in order to promote a productive and safe environment for learning. Key components of academic integrity are communication and mutual respect among the members of the Samuel Merritt University community. Faculty, staff, and students are expected to abide by the codes of conduct and ethics of this University, as well as, the code of ethics of their respective professions, which includes reporting misconduct to the appropriate authorities. Lack of academic integrity includes, but is not limited to, plagiarizing, cheating, deception, breach of confidentiality, failure to report a clinical error, falsifying research results, and failure to confront and/or report misconduct of others.

Faculty members reserve the right to evaluate individual cases of academic dishonesty by a student and to take appropriate action, which may include failure on a paper or exam or failure in the course. Faculty may also recommend censure, probation, suspension or dismissal to the Academic Vice President. A written report of any action will be placed in the student's file in the Office of the Registrar. If the student's status in the program is affected, a permanent notation will be made on his/her transcript.

Regardless of any action taken by the course faculty member, lack of academic integrity constitutes grounds for suspension or dismissal from Samuel Merritt University through the Office of the Academic Vice President.

Faculty and staff standards of conduct and consequences are delineated in the *Faculty-Staff Handbook*.

CODE OF ETHICS

We, the faculty, staff, and students of Samuel Merritt University, share the conviction that the interactions among ourselves and between us and our community are founded in mutual trust, respect, and consideration. We are dedicated to a code of ethics which sets forth moral principles for positive human interaction.

- > We agree to be trustworthy.
- > We agree to be just in our evaluations and decisions.
- > We agree to respect human dignity and cultural and personal differences among people, and to be sensitive to these in our respective roles.
- > We support individuals' rights to autonomy and to pursue their own life decisions as long as they do not infringe upon the rights of others.
- > We agree to be accountable for our decisions and actions, and for our roles and interactions among others.
- > We are committed to life-long learning, continual self-assessment, and the conscientious and diligent pursuit of excellence in our respective fields.
- > We believe in working together as a team toward the common good and for academic purposes.
- > We observe the confidentiality of information and records in our charge.
- > We agree to abide by the written standards and codes of ethics and conduct of our respective professions.

There are related policies and procedures which expand the Code of Ethics. Some of these include the codes of ethics and standards of practice for the respective professions, the Academic Integrity Policy and the student Code of Conduct, faculty and staff personnel policies (published in the *Faculty-Staff Handbook*), and individual departmental policies and handbooks.

CODE OF CONDUCT

Students enrolled at Samuel Merritt University assume an obligation to conduct themselves in a manner compatible with the philosophy of the institution, the codes of ethics, and California laws and regulations pertaining to their respective professions. Behaviors for which students are subject to discipline include but are not limited to the following categories:

1. Violation of University policies;
2. Dishonesty, including but not limited to, cheating, plagiarism, forgery, alterations, or misuse of University documents or records;
3. Obstruction or disruption of teaching, research, administration, disciplinary procedures, or other authorized University activities, including clinical experiences;
4. Physical, verbal, or written abuse or intimidation of any person, implicit or explicit, or endangering the health or safety of any person;
5. Theft of or damage to physical or intellectual property belonging to the University or to a member of the University community or a campus visitor;
6. Unauthorized entry, access, or use of University facilities;
7. Failure to comply with directions of University officials acting in the performance of their duties, including the reasonable request for students to identify themselves;
8. Possession or use of weapons, firearms or explosive devices of any description (see “Weapons” policy, Campus Policies);
9. Violations of policy on alcoholic beverages and illegal substances;
10. Failure to conform with stated institutional policies and procedures;
11. Misrepresentation of the University and/or its policies and philosophy;
12. Behavior that seriously jeopardizes the safety of others;
13. Violation of California laws and regulations;
14. Violation of codes of ethics and standards of practice for the respective professions.

DISCLOSURES/TRUTH IN INFORMATION

Refer to the policy in the Academic Policies section.

SAMUEL MERRITT UNIVERSITY STUDENT GRIEVANCE POLICY, PROCESS, AND PROCEDURES

POLICY

Samuel Merritt University (SMU) provides a process by which student grievances are managed and resolved. The procedures below must be used by grievants who are enrolled as students of the University. Grievances cannot be filed on behalf of another person.

This policy does not apply to grievances involving claims or violations under the Sexual Violence Policy on page 142.

PROCESS AND PROCEDURES

Step 1

Students shall make good faith efforts to resolve grievances with those directly involved, within 5 (five) working days after the event(s).

Step 2

If the grievance is not resolved following Step 1 within (5) five working days of the event(s), the student may submit the grievance to the highest academic or administrative officer (hereinafter called “Step 2 Officer”) of the school (Dean), department (Chair), or program (Director), in which the student is enrolled. Such submission shall be in writing. The Step 2 Officer will provide the student with any applicable internal grievance procedure (required by the department or school) and attempt to achieve a satisfactory resolution of the grievance. A written decision by the academic or administrative officer shall be provided within a reasonable period of time and presented to the appropriate parties to the grievance.

Step 3

If a decision adverse to the student is made, the student may accept the terms of the decision and comply with its conditions or the student may request a review of the decision by the Student Grievance Committee (SGC). A request for review by the SGC must be submitted in writing to either the Academic Vice President or the Vice President of Enrollment and Student Services by the student within five (5) working days of the Step 2 Officer’s decision.

If the issue involves an academic matter, the written grievance shall be submitted by the student to the Academic Vice President. If the issue involves a disciplinary matter, that is wholly unrelated to any academic matter, the written grievance shall be submitted by the student to the Vice President of Enrollment and Student Services and a copy shall also be provided to the Academic Vice President. If the Academic Vice President, in his or her sole discretion, determines that the grievance is related to Academic Matters, the Academic Vice President shall retain jurisdiction over the grievance to its conclusion.

The request for review by the student shall be in writing and contain:

1. A statement of the reason(s) for the request;
2. Identification of the University policies or regulations alleged to have been violated, if any;
3. All documents the student wants the SGC to consider, and
4. Remedy sought.

No supplemental filing of documents or materials shall be permitted unless requested by the SGC.

Within five (5) working days of receipt of the request for review, the jurisdictional Vice President shall request all pertinent documentation from the Step 2 Officer and insure that

the grievant and parties involved in the grievance are given an opportunity to review a complete set of these documents. Documents will be made available for supervised review in the office of the respective Vice President and may not be removed, copied, or transcribed in any manner.

The respective Vice President shall record the notification of grievance and forward all pertinent written information to the SGC Chair for the Committee's review and recommendation.

ACADEMIC MATTERS

Scope. Grievances relating to academic matters include academic, classroom/clinical behavior, or any circumstances that occur within the learning environment are under the final jurisdiction of the Academic Vice President. **Didactic grading, assessment of clinical performance, policies related to matriculation or failure to meet the program's technical standards are not subject to grievance review**, unless the student can demonstrate evidence of failure by the institution to follow department/University policy/procedure, evidence of discrimination, or evidence that the student has not violated standards of academic integrity or professionalism.

DISCIPLINARY MATTERS

Scope. Grievances related to disciplinary matters outside of the classroom or clinical setting which are unrelated to academic matters are under the final jurisdiction of the Vice President of Enrollment and Student Services and may include acts of intimidation/physical aggression, or violation in any of the following: non-academic student rights, code of ethics, code of conduct, and issues of accommodation related to Section 504 of the Rehabilitation Act of 1973 and Title III of the Americans with Disabilities Act (ADA) of 1990 as amended by the ADA Amendments Act (ADAAA) of 2008.

GRIEVANCE REVIEW PROCESS AND MEETING

The SGC Chair shall select a meeting date occurring within a reasonable time after the filing of the request for review. The SGC shall have full discretion regarding the conduct of the review including any additional information to be received. In all cases, the grievant will be provided an opportunity to review all available documents and meet with the SGC.

The Committee shall deliberate and render its recommendation within a reasonable time to the appropriate Vice President. A valid recommendation will constitute a simple majority of the SGC.

ACTION

The decision of the SGC on a request for review of a grievance shall be limited to the following recommendations.

1. Dismissal of the grievance;
2. Recommendation that the University uphold the decision of the academic program or Step 2 Officer;
3. Recommendation that the program reconsider its decision due to substantial evidence of discrimination or

failure at the program level to follow standard policies and procedures;

4. Recommendation to the appropriate Vice President, that the program's decision be reversed based on stated grounds.

Decisions to uphold probation, suspension or dismissal shall be posted on the student's academic record.

Step 4

The appropriate Vice President shall review the SGC's recommended decision and within a reasonable period of time provide written notice of an approval, disapproval or modification of the SGC recommendation. The Vice President has the right to extend this review period to accommodate further review with written notification to the parties involved. The written decision will be distributed by the Vice President to the grievant(s) and the administrative (Step 2) officer of the program in which the student is enrolled.

In cases involving recommendation of suspension or dismissal, and the Vice President disapproves such recommendation; he/she shall provide written notice to the SGC of that decision including the reason for disapproval prior to notification of the grievant. The SGC Chair may request a meeting with the SGC and the Vice President to resolve differences. If such differences are not resolved the decision of the Vice President shall be final.

Any action resulting in dismissal or suspension of the grievant from the University is subject to review and approval of the Vice President under whose jurisdiction the grievance rests. The decision of the Vice President is considered final.

STUDENTS IN GRIEVANCE PROCESS

A student suspended or dismissed from the University under the graduate and undergraduate progression and graduation policies and who is involved in the grievance process outlined in this catalog will be allowed to register for non-clinical classes in the semester immediately following the ruling while his/her appeal is being heard. This policy does not apply to students whose next semester involves only clinical courses as defined by the program.

The student, if otherwise eligible, will be allowed to collect financial aid and will be required to pay tuition as any regularly registered student.

If the dismissal is upheld, the effective date will be the end of the previous term. At that point, all eligible financial aid will be returned to the appropriate financial aid agency.

If, at the end of the grievance procedure, the appeal is denied (upholding the suspension or dismissal from the University), the student's registration status will be revoked and the student will be suspended or dismissed.

If, at the end of the grievance procedure, the appeal is upheld (overturning the suspension or dismissal) the registrar will return the student to a regular registration status.

GRIEVANCE COMMITTEE OPERATIONAL GUIDELINES

1. The Student Grievance Committee (SGC) is a standing committee of the Faculty Organization. The Committee will consist of two faculty members from the School of Nursing, and one faculty member from each additional school or department. These faculty members shall be nominated by their departments and selected by the President of Faculty Organization. There shall be one student for every 100 enrolled from each School or Department (nominated by the Student Body Association (SBA) and appointed by the Division of Enrollment and Student Services). There shall be three staff members on the Committee, two from Enrollment and Student Services and one from Business Affairs. Staff members will be appointed by the Vice Presidents of Enrollment and Student Services and Finance and Administration. The SCG Chair, selected from members of the Committee, will hold a faculty appointment. For each grievance review, the membership will include the Chair, two faculty, one staff, and one student.
2. In the event that the appointed members of the SGC cannot be convened, the President of the Faculty Organization may convene a committee consisting of a minimum of three, based on the nature of the grievance. The President of Faculty Organization may exercise the right to appoint other representatives as necessary.
3. The meeting shall be closed to the public and only the grievant(s), members of the Committee, the person whose decision is being grieved, and other individuals approved by the SGC Chair, shall be present. Staff in the Office of Student Services may serve as a student resource during the grievance process; however they are not voting members of the Committee.
4. The SGC Chair has full operational authority to plan and conduct the meeting as he/she determines.
5. In the case of grievances or allegations involving more than one grievant, the SGC Chair has the discretion to convene one meeting for all parties concerned or a separate one for each person.
6. Committee deliberations will only be open to members of the SGC.
7. Formal rules of evidence shall not be in effect. No attorney, who represents any of the involved parties, shall attend or take part in the meeting.
8. Any and all written records of the proceedings shall be forwarded to the appropriate Vice President's office after the hearing and archived. There will be no recording devices allowed during the grievance proceedings.

9. All relevant information from the review will be kept in confidence, in accordance with the federal Family Educational Rights and Privacy Act (FERPA) or other applicable federal law.

Note

The timelines specified in this policy may be extended due to extenuating or extraordinary circumstances, with approval of the appropriate Vice President.

IMPARTIAL HEARING

Samuel Merritt University as an academic community recognizes that any student whose conduct (academic or non-academic) has been questioned by appropriate authority or who has been penalized for inappropriate conduct has the right to a fair and impartial hearing. (See Grievance Procedure).

SEXUAL VIOLENCE POLICY

Samuel Merritt University believes that sexual violence has no place in the academic environment, and the University will not tolerate it. Additionally, under state and federal laws, sexual violence (inclusive of, but not limited to: sexual harassment, sexual misconduct, dating violence, domestic violence, stalking and sexual assault of employees or students is illegal. Samuel Merritt University community seeks to eliminate sexual violence through education and by encouraging faculty, staff, and students to report concerns or complaints. The University takes the matter of sexual violence very seriously; indeed, the University and individual employees and/or students may be legally liable for acts of sexual violence. Therefore, any acts of sexual violence should be reported immediately to the Executive Director of Human Resources (Title IX Coordinator). After a thorough investigation, anyone found to have violated this policy will be subject to disciplinary action —up to and including dismissal/discharge from the University.

DEFINITION OF SEXUAL MISCONDUCT

Sexual misconduct includes a range of behaviors used to obtain sexual contact against a person's will. Sexual misconduct is defined as sexual contact without consent by someone you know or a stranger and includes: intentional touching without consent, either of the victim or when the victim is forced to touch, directly or through clothing, another person's genitals, breast, groin, thighs or buttocks; rape (sexual intercourse without consent whether by someone you know or stranger; attempted rape; sodomy (oral or anal intercourse) without consent; or sexual penetration with an object without consent.

The University uses an "affirmative consent" standard, whereas:

1. Consent is informed and an affirmative, unambiguous, and conscious decision by each participant to engage in mutually agreed-upon sexual activity.
2. Consent is voluntary. It must be given without coercion, force, threats, or intimidation. Consent is an expression of free will.

3. Consent is revocable. Consent in some form of sexual activity does not imply consent to other forms of sexual activity. Consent to sexual activity on one occasion is not consent to engage in sexual activity on another occasion. A current or previous dating or sexual relationship, by itself, is not sufficient to constitute consent. Even in the context of a relationship, there must be mutual consent to engage in sexual activity. Consent must be ongoing throughout a sexual encounter and can be revoked at any time. Once consent is withdrawn, the sexual activity must stop immediately.
4. Consent cannot be given when a person is incapacitated. A person cannot consent if she/he/ze is under the influence of drugs, alcohol, or medication, unconscious or coming in and out of consciousness. A person cannot consent if she/he/ze is under the threat of violence, bodily injury or other forms of coercion. A person cannot consent if his/her/hir understanding of the act is affected by a physical or mental impairment.

DEFINITION OF SEXUAL HARASSMENT

1. The prohibition applies to all employees/faculty/students, and in particular to supervisors (including direct supervisory and other management staff). A sexual advance violates this policy regardless of whether the advance is expressly related to the affected employee's/student's employment/academic status. It is improper to make sexual advances, ask for, demand or seek by subtle pressure sexual favors or activity from an employee/student, or to subject another employee/student to verbal or physical conduct of a sexual nature where:
 - a. The submission to such behavior is a condition of any employment/academic opportunity, benefit, job retention, grade; or
 - b. The submission to or rejection of such conduct is used as a basis for employment/academic decisions; or
 - c. Such conduct has the purpose or the effect of unreasonably interfering with the individual's work/academic performance; or
 - d. Such conduct creates an intimidating, hostile, or offensive work/academic environment.
2. It is improper for an employee/student to make sexual advances or to offer or suggest sexual favors or activity in exchange or in consideration for any personnel/academic action.
3. It is improper to retaliate against an employee/student for refusing a sexual advance or for refusing a request, demand or pressure for sexual favors or activity or to retaliate against an employee/student who has reported an incident of possible sexual harassment to the University or to any government agency.
4. It is not possible to identify each and every act which constitutes or may constitute sexual harassment. However, certain conduct is clearly improper and is strictly prohibited. Persons engaging in this conduct, or other similar acts, will be subject to discipline up to and including dismissal from the University. Such acts might include:
 - a. Any unwanted, intentional touching of an employee/student by another may be sexual harassment and is prohibited. Due to the possibility of misinterpretation of acts by other employees/students, the University discourages all roughhousing or physical contact, except that contact necessary and incidental to an employee's job/student's academic status. Further, certain kinds of physical conduct in the work/academic environment are particularly inappropriate and may be grounds for immediate discipline, including dismissal from the University. That conduct includes, but is not limited to:
 - (i) Kissing or attempting to kiss an employee/student;
 - (ii) Touching or attempting to touch or pretending to touch the breasts, buttocks or genitals of an employee/student;
 - (iii) Physically restraining by force or blocking the path of an employee/student when accompanied by other conduct of a sexual nature;
 - (iv) Any other touching or attempted touching reasonably interpreted to be of a sexual nature.
 - b. Sexual advances, unwelcome requests, demands, or subtle pressure for sexual favors or activity, lewd comments and sexual innuendoes are also prohibited. This conduct includes, but is not limited to:
 - (i) Comments to an employee/student or others about the body of an employee/student which are intended to draw attention to the sex of the employee/student or can reasonably be interpreted to draw attention to the sex of the employee/student;
 - (ii) Comments to the employee/student or others about the sexual conduct, capability, or desirability of an employee/student;
 - (iii) Cat calls, whistles, or other conduct reasonably interpreted to be of a sexual nature.
 - c. Sexually suggestive gestures are also prohibited.
 - d. It is improper to subject employees/students to photographs, cartoons, articles, or other written or pictorial materials of a sexual nature after the employee/student has expressed his/her/hir displeasure with such activity. These materials may be offensive to the public as well and should not be on display in offices or public areas in any event.
 - e. This policy is not intended to prohibit employees/students from asking other employees/students for social engagements. However, repeated requests where prior social invitations have been refused can

be interpreted as sexual harassment. Employees/students should refrain from persistent invitations after an employee/student has indicated that such invitations are unwelcome.

DEFINITION OF DATING VIOLENCE

The term “dating violence” means violence committed by a person:

- a) Who is or has been in a social relationship of a romantic or intimate nature with the victim; and
- b) Where the existence of such a relationship shall be determined based on a consideration of the following factors:
 - a. The length of the relationship
 - b. The type of relationship
 - c. The frequency of the interaction between the persons involved in the relationship

DEFINITION OF DOMESTIC VIOLENCE

The term “domestic violence” includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with or has cohabitated with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person’s acts under the domestic or family violence laws of the jurisdiction.

DEFINITION OF STALKING

The term “stalking” means engaging in a course of conduct, regardless of medium used, that is directed at a specific person that would cause a reasonable person to—(A) fear for his/her/hir safety or the safety of others; or (B) suffer substantial emotional distress.

DEFINITION OF SEXUAL ASSAULT

An offense classified as a forcible or nonforcible sex offense under the uniform crime reporting system of the Federal Bureau of Investigation.

The conduct described in this policy is strictly prohibited.

If anyone, including non-employees/non-students, engages in such conduct, it is important that the conduct be reported to the Executive Director of Human Resources. It is not possible for the University to enforce this policy if incidents of harassment are not reported. The procedure to follow if the student feels that he/she/ze has been subjected to sexual harassment/sexual misconduct is set forth in this *Catalog/Handbook*.

COMPLAINT PROCEDURE

The University has a compelling obligation to address allegations and suspected instances of discrimination, harassment,

and misconduct, including sexual violence. The following procedures are designed to allow for prompt and equitable resolution of sexual violence complaints. The Title IX Coordinator (Executive Director of Human Resources) is responsible for investigating all complaints of sexual violence. The University will take steps to prevent reoccurrence of any sexual violence and to correct its discriminatory effects on the complainant and others, if appropriate.

1. The person should let the offending person know immediately and firmly that he/she/ze is rejecting the advance or invitation and/or finds the conduct offensive.
2. The person should report the matter to the Title IX Coordinator (Executive Director of Human Resources) or to the Title IX Investigator (Assistant Vice President, Enrollment and Student Services). The Title IX Coordinator will assign a Title IX Investigator to conduct a complete investigation. It is important that the person report everything to the investigator so a thorough investigation can be made, including providing witnesses and/or documentation from individuals who have first-hand knowledge of the situation.
3. Those who participate in the investigation of sexual assault, domestic violence, dating violence, and stalking, either as a complainant or a third-party witness, will not be subject to disciplinary sanctions for violations of the University’s code of conduct at or near the time of the incident if the violations did not place the health or safety of any other person at risk.
4. The person has the right to file a criminal complaint with the appropriate local police department. The University can assist the person with this process.
5. To the extent possible, the complaint and investigation will remain confidential. If a complainant insists that his/her name or other identifiable information not be disclosed to the accused, the University’s ability to respond to the complaint may be limited.
6. Retaliation is prohibited. The University will take steps to prevent retaliation and also strong responsive action if it occurs. If the person feels that a retaliatory action has been taken because he/she/ze has filed a complaint, that action should be reported as well.
7. The Title IX Investigator will investigate the matter promptly, thoroughly, and impartially. The University will not delay conducting its own investigation because of a pending criminal complaint as the University has a responsibility to protect the person in its educational setting.
8. During the investigation, both parties will have an opportunity to present witnesses and other evidence.
9. Both the accused and the complainant may have an advisor/advocate of his/her/hir choice present for their portion of the procedures. The complainant and/or the accused student is responsible for presenting his/her/hir own information, and therefore, advisors are not

permitted to speak or to participate directly in any meeting or complaint procedure. The standard of proof to be used shall be the preponderance of evidence standard (“more likely than not”).

10. Appropriate sanctions/discipline up to and including termination or dismissal from the University will be imposed if warranted. Any incidents of further harassment or retaliation should be reported immediately to the Title IX Coordinator (Executive Director of Human Resources).
11. Both parties will be informed of the outcome of the complaint in writing. Both parties can grieve the final decision of the Title IX Investigator by requesting a review in writing to the Title IX Coordinator (Executive Director of Human Resources) within five (5) working days of the decision.
12. The decision of the Title IX Coordinator (Executive Director of Human Resources) is final.

SAMUEL MERRITT UNIVERSITY TITLE IX COORDINATOR

Elaine Lemay, Executive Director of Human Resources
Samuel Merritt University
3100 Telegraph Avenue
Oakland, CA 94609
510.869.6739
elemay@samuelmerritt.edu

CAMPUS SEX OFFENSES

Students, faculty, and staff are required to report sex offenses to the Assistant Vice President of Enrollment and Student Services. As required by the Higher Education Amendments of 1992, the University provides an annual report of campus crime statistics, including all sex offenses. See Campus Security Act of 1990 in the Federal and State Regulatory Policies section.

POLICY ON SEX OFFENSES, VIOLENCE AND OFFENDERS

The University will annually provide educational programming to promote the awareness of sexual misconduct, which may include rape, acquaintance rape and other forcible and non-forcible sex offenses, domestic violence, dating violence, sexual assault. Such educational programs may be done at the request of students, by security in an ad hoc program, or because of a campus concern. In addition, the University strongly encourages all new students and new employees to complete its online primary prevention and awareness program.

If you are a victim of sexual violence, your first priority should be to get to a place of safety. You should then obtain necessary medical treatment. The University strongly advocates that a victim of sexual assault/violence report the incident in a timely manner to the Assistant Vice President of Enrollment and Student Services or Executive Director of Human Resources.

The report to a University official does not obligate the victim to prosecute nor will it subject the victim to scrutiny or judgmental opinions from employees and officers; but it ensures the victim can receive services offered by the University. The Assistant Vice President of Enrollment and Student Services and others will assist the student in notifying these authorities if the student requests.

A report to police will ensure the victim receives the necessary medical treatment and tests, at no expense to the victim; provide the opportunity for the collection of evidence which will be helpful in prosecution which cannot be obtained later; and assure the victim has access to free confidential counseling from counselors specifically trained in the area of sexual assault crisis intervention.

The University offers counseling services through the Student Health and Counseling (SHAC) center and through a contracted arrangement with Sutter EAP. Counseling and support services outside the University system are available through Bay Area Crisis Centers.

University disciplinary proceedings, as well as special guidelines for handling cases of sexual misconduct, are detailed in the Catalog and Student Handbook. The handbook provides, in part, that the accused and the victim will each be allowed to choose one person who can serve as an advisor/advocate throughout the complaint procedures. Both the victim and the accused will be informed of the outcome of the hearing. A student found guilty of violating the University's sexual violence policy could be criminally prosecuted and/or may be suspended or expelled from the University for the first offense. Students have the option to change their academic situations after an alleged sexual assault if such changes are reasonably available.

CAMPUS POLICIES

ALCOHOLIC BEVERAGE POLICY

Student groups may include alcoholic beverages at official functions of the University provided the following guidelines are explicitly followed:

1. The Assistant Vice President of Enrollment and Student Services must approve the “Request to Serve Alcoholic Beverage” form, which is submitted no later than three working days prior to any event where serving of alcoholic beverage is planned.
2. All existing state laws are followed, including the authorized drinking age.
3. Each event must have a faculty or professional staff person responsible for and in attendance at the event. If event is a student run event, a student coordinator must also be responsible for and in attendance at the event.
4. Alcohol cannot be consumed or distributed after midnight (12 AM).
5. Persons wishing to drink alcohol must show ID.
6. Samuel Merritt University will set the number of drinks that participants will be able to consume based upon the timeframe for the event (generally no more than one drink per hour, up to a maximum of three drinks for the event). Once determined, the student coordinator and faculty/staff member are responsible for communicating the limit to servers and enforcing the limit.
7. Only wine and beer may be served at functions. Food and non-alcoholic drinks, appealing and in amounts equal to alcohol, must be provided. No alcohol may be sold without a license to sell alcohol.
8. The University’s guidelines for serving alcohol are as follows:
 - a. For catered events, the caterer must serve the beer and wine and must show proof of liability coverage.
 - b. For non-catered events, a contracted bartending service must serve the beer and wine (please contact the Assistant Vice President of Enrollment and Student Services for current names of contracted services).
9. Security may be required (about one guard per 100 participants), depending on the nature of the event. The group is responsible for paying for the guard. The Assistant Vice President of Enrollment and Student Services will determine if security is needed.
10. Samuel Merritt University and/or the person serving alcoholic beverages reserve the right to refuse to serve alcoholic beverages to anyone during a student-sponsored event.

Student-Organized Event

All student-organized events must be approved in advance by Craig Elliott, Assistant Vice President of Enrollment and Student Services. In order to obtain Craig’s approval, please complete the request form that can be found at the following link: [Request to Serve Alcohol Form](#). Please submit the completed form to Craig in the Peralta Medical Office Building, 3100 Telegraph Avenue, Room 140. If you have any questions, you can reach Craig by phone at 510.869.6627 (extension 6627 from a University phone) or by e-mail at CElliott@samuelmerritt.edu.

Employee-Organized Event

Please contact Ronda Garrett, Contract Specialist. Ronda will assist in determining what is needed for all employee-organized event(s) where alcoholic beverages will be served. Ronda’s contact information is as follows:

Office: Peralta Pavilion, Suite 2802

Phone: 510.869.1589 (x 1589 from a University phone)

E-Mail: rgarrett@samuelmerritt.edu

POLICY ADDRESSING ALCOHOLIC BEVERAGES AND DRUGS

The possession, sale, or the furnishing of alcohol on the University campus is governed by California state law. Samuel Merritt University has been designated as “drug and alcohol free” and only under certain circumstances is the consumption of alcohol permitted. The possession, sale, manufacture or distribution of any controlled substance is illegal both under state and federal laws. Violators are subject to university disciplinary action, criminal prosecution, fine and imprisonment. It is unlawful to sell, furnish or provide alcohol to a person under the age of 21. The possession of alcohol by anyone under the age of 21 in public place or place open to public is illegal. It is also a violation of Samuel Merritt University policy for anyone to consume or possess alcohol in any public or private area of campus without prior University approval.

AUTHORITY TO OBLIGATE THE UNIVERSITY

Authorization to purchase within established signature authority is limited to administrative officers of the University, the chief administrative officer of each academic program, and designated program and administrative directors.

Designated members of the Student Body Association (SBA), such as class representatives, presidents of recognized clubs and organizations, and executive board members may represent the SBA; however, cannot represent or obligate Samuel Merritt University.

BULLETIN BOARDS

Numerous bulletin boards are located in each University building. Students will be notified of policy changes and updates via email. These updates will also be posted on the website. Students are responsible for reading their SMU email for information regarding courses and registration. Bulletin boards are designated for specific purposes, i.e., Student Government activities, CNSA, and Financial Aid/Job Opportunities notices. Bulletin boards in the stairways and in the Peralta Pavilion Student Lounge are for students' use to post any notices. Notices posted on walls, doors or other than on bulletin boards will be removed and discarded. The University's electronic bulletin boards also serve these purposes.

COPYRIGHT

It is the intent of Samuel Merritt University to comply with the U. S. Copyright Law (Title 17, U.S. Code, Sect. 101, et seq.). The University directs faculty, staff, and students to refrain from copying copyrighted works unless the action is authorized by: (a) specific exemptions in the copyright law, (b) the principle of Fair Use, or (c) licenses or written permission from the copyright owner.

The Director of the John A. Graziano Memorial Library shall provide guidelines to ensure compliance with the law.

SMU EMAIL REQUIREMENT

Email is the official form of communication at the University, and students are required to access and manage their SMU email on a frequent and regular basis. Students are encouraged to communicate to SMU faculty and staff from their SMU email account. For help accessing email, students should contact the ITS Helpdesk at helpdesk@samuelmerritt.edu.

EMERGENCY AND DISASTER PLAN

See Crisis Response section of this *Catalog/Student Handbook*.

EXTERNAL IMAGE OF THE UNIVERSITY

The Office of the President is responsible for monitoring and maintaining the external image of the University as it is portrayed in the media — print, television, radio, on-line — and as it is presented in publications and other printed materials produced by the University. In this role, the Office of the President will:

1. Be informed about and appropriately involved from the outset in the production of any University publication being planned by University departments and being distributed to external audiences of 100 or more.
2. Approve the general tone, concept and appearance of any University publication designed for external distribution at a point in the production process where modifications are possible and with a reasonable timeframe for response by the Office of the President.
3. Assure that the image portrayed of the University in the media and among external audiences is consistent and in keeping with the decisions of University administration.

4. Be informed about and appropriately involved from the outset in the development of any external marketing and/or advertising campaigns being planned by University departments.
5. Serve as the central clearinghouse for all press releases produced by the University or other information provided to the media (see policy on Press Releases).
6. Be informed about any official gathering where the external image of the University is under discussion, and be involved in any decision making on the image of the University.
7. Be informed about and, where possible, involved in any University-related interactions with the media by individual members of the University administration, faculty, staff, or student body.
8. Maintain a full roster of all materials and publications produced by the University for record keeping and general distribution as appropriate.
9. Maintain all information related to the proper use of the University logo and colors. Maintain the University logo on disk for use by others in the University.
10. Manage and approve any changes in University stationery, business cards, or other generic University printed materials.

FREE ASSEMBLY

The University encourages intellectual and personal development through student inquiry and continuing communication. Students are encouraged to engage in informal and formal dialogue, committees and meetings. All public assemblies must be peaceful and orderly, allow for freedom of expression, and not interfere with the continued performance of the functions of others. Students wishing to organize political or other meetings that directly or indirectly solicit students must consult with the Assistant Vice President of Enrollment and Student Services.

FUNDRAISING

Support from a wide variety of sources allows Samuel Merritt University to continue to operate as a private institution free from the constraints of tax-supported schools and colleges. Gifts and grants come from many sources, including individuals, government, corporations, foundations, and myriad small businesses in our area. Voluntary support is critical to the operation of the University, particularly so in the areas of student scholarships, new equipment, facilities needs, and program development.

Individuals who provide support to the University include alumni, faculty, staff, and friends of the University, as well as the Board of Regents, the parents of students and alumni, members of the medical community, and those interested in private higher education for health professionals. The corporate community includes local as well as national corporations, some of which are in the health care field and others of which recognize the significant role skilled, well-educated professionals play in the health care of their employees. Similarly, many local and national foundations

understand the need for skilled health professionals and have set aside funds for competitive grant applications from institutions such as Samuel Merritt University.

Policy

1. Fundraising events by students for student-centered projects such as ceremonies, conferences, and external non-profit organizations must be approved by the advisor to the student group, the Assistant Vice President of Enrollment and Student Services, and the Director of Alumni Affairs prior to the event.
2. Faculty or staff advisors are responsible for providing the pertinent forms (available from the Office of Development and Alumni Affairs).
3. All fundraising events to be held off campus must have special approval by the Vice President of Enrollment Services and the Executive Director of Development and Alumni Affairs.
4. Additional approvals may be required and if so, students will be informed by their event advisor.
5. Contributions made directly to student groups are not tax deductible and students must so advise contributors.
6. If a student group wants contributions to be tax deductible
 - 1.1 Contributions must come directly to the Office of Development and Alumni Affairs. Such checks need to be payable to Samuel Merritt University and have clear notation as to which student organization is the intended recipient.
 - 1.2 No goods or services are to be offered in exchange for or in recognition of contributions.
 - 1.3 The event/project must meet a charitable standard as defined by the Internal Revenue Service. Written IRS guidelines are available in the Office of Development and Alumni Affairs.
2. Donors will receive a gift acknowledgement letter on behalf of the University. In addition, the student group is responsible for sending a thank you letter to the donor.

All gifts and grants should be routed through the Department of Development and Alumni Affairs. The Department of Development and Alumni Affairs may consult with the legal counsel and/or the governing board if the acceptance of a particular gift or grant could possibly jeopardize the institution, the reputation of the institution, or the donor.

Fundraising at the University is a cooperative effort of many persons, including but not limited to members of the governing board, special fundraising committees, the President, vice presidents, deans, directors, faculty, staff, students, alumni, parents, and friends.

The fundraising priorities for Samuel Merritt University are established by the Board of Regents in cooperation with the Department of Development and Alumni Affairs

and President's Council. Please refer to the Solicitation policy regarding sales and fundraising activities for additional information.

IDENTIFICATION BADGES

POLICY ON CAMPUS ACCESS

Access to the University facilities is limited to current faculty, staff and students, and is maintained through swipe card access via campus identification badges. Faculty, staff and students must wear their University ID (and campus identification badges if separate) while on campus and have it visible, above the waist, at all times. During business hours, faculty, staff and students have access to University facilities via their swipe card. During holidays, after business hours and weekends, access is limited or not permitted. The Director of Facilities will provide updates prior to holidays on what access is available. The University is closed the week between Christmas and New Year's Eve and special permission is required to be on campus during that time.

Please note that emergencies or extenuating circumstances may necessitate changes to any posted schedules.

Also please note that because the University shares facilities with various medical centers, some overlap of access by the public and medical center staff will happen. In these areas, the public can use the space as a part of visiting the medical center, and the security team will take responsibility for security and access.

It is a violation to give an ID badge to another person for any reason. Report lost badges immediately to Media Services. The lost card will be deleted from the system and a new card will be issued. There is a \$5 charge for a new badge. Please complete a New ID Request Form, which is available on the website, www.samuelmerritt.edu or in the badging office, 3012 Summit Street, 1st Floor.

INSTITUTIONAL REVIEW BOARD

Samuel Merritt University operates under the U. S. Department of Health and Human Services (USDHHS) and Food and Drug Administration (FDA) regulations for the Protection of Human Research Subjects (Title 45 of the code of Federal Regulations, Part 46). The Samuel Merritt University Institutional Review Board (SMUIRB) assumes full responsibility for review of research proposals involving human subjects and generated by Samuel Merritt University faculty, staff, and students. The SMUIRB facilitates ethical research and ensures that research at SMU is conducted in full compliance with both the letter and the spirit of regulations designed to protect the rights and welfare of human subjects recruited to participate in research conducted under the auspices of SMU. Operating Policies and Procedures for the Samuel Merritt University Institutional Review Board are available from the Institutional Review Board Administrator.

SMOKING POLICY

In consideration of the philosophical obligations inherent in being a University dedicated to the preparation of health care professionals and with concern for the effects of second-hand smoke, Samuel Merritt University is a non-smoking facility in all of its buildings and grounds.

SOLICITATION

SALES

Students, alumni, and other members of the Samuel Merritt University community may make arrangements with the Office of the President to provide goods and services to the Samuel Merritt University community (e. g. symphony ticket sales). All solicitation and sales by non-campus individuals and groups must be registered and approved by the Office of the President.

FUNDRAISING ACTIVITIES

Student organizations may engage in activities to raise funds for such things as class social events, ceremonies, conference fees, and scholarships. Approval for these activities is required by the organization's faculty advisor, the Assistant Vice President of Enrollment and Student Services, and the Executive Director of Development and Alumni Affairs. Other members of the Samuel Merritt University community, and off-campus groups may make arrangements with the Office of Development and Alumni Affairs to conduct charitable fundraising activities.

STUDENT TRAVEL POLICY

INTERNATIONAL TRAVEL

Travel experiences are best undertaken by well-informed travelers. The University strongly encourages all students and faculty who are planning travel for educational or other purposes to review thoroughly the political, health, crime, and other safety-related conditions prevailing in any country or domestic locale to which travel is contemplated.

Faculty participation is not required for student travel unless university credit is being awarded. Since travel can present formidable logistical challenges, especially for the first time traveler to a remote destination, the University requires that students undertake travel as part of a recognized and experienced medical mission agency with well defined safety policies and procedures as well as relationships with local medical, social, housing authorities. Agencies of this type include Global Medical Brigades, and the Center for Health Leadership and Practice. If other similar groups are being considered, the University can assist in evaluating their services for approval. If students choose to travel on their own, they cannot use the University's name on materials, websites, fundraising posters, etc.

All University students are responsible for their own safety when traveling. SMU will not fund, award credit for, or otherwise sponsor or support travel to any country where the U.S. State Department has issued a warning that recommends U.S. citizens depart the country; advises U.S. citizens against all travel to the country; or recommends that U.S. citizens defer non-essential travel to the country, or (very high) level threat. This restriction will apply through the date of departure.

When applicable, all students must sign a Travel Abroad Release acknowledging their understanding of the risks of such travel, affirming that they have reviewed and understand relevant safety-related materials, and assume the risks related to their travel. It is the responsibility of the student to submit the signed waiver to the program director/chair or dean who will, in turn submit the waiver to the Office of Academic Affairs.

WHAT TO DO IN AN EMERGENCY

If you encounter an emergency while traveling where serious injury or illness has occurred, immediately seek medical treatment at the closest medical facility. If medical service is not available, contact the nearest U.S. Consular service or Embassy.

STUDENT FUNDRAISING ASSOCIATED WITH YOUR TRIP

The University will not participate in any student travel fund-raising activity that is not sponsored by an approved group who provides students access to a modicum of safety related services such as health care and access to evacuation services. Student fundraising, either through the University or approved sponsoring agency is managed by the Office of Development at the University. Please refer to the Student Fundraising Policy.

WEAPONS

In the interest of the safety and security of all faculty, staff, students, guests and visitors to the University, and in maintaining compliance with applicable Penal and Education Codes, the possession of:

1. firearms
2. weapons
3. any device, instrument, or item deemed to be a firearm or weapon or used in a threatening manner
4. fireworks and other devices of an explosive nature

is strictly prohibited on the Samuel Merritt University and Alta Bates Summit Medical Center properties. Exceptions to this policy are members of federal, state, county, and local agencies authorized by specific law to possess firearms/weapons in the performance of their duties. Persons found guilty of violating this policy are subject to suspension or dismissal from the University.

STUDENT LIFE AND STUDENT SERVICES

ACADEMIC AND DISABILITY SUPPORT SERVICES

DISABILITY SERVICES

The Samuel Merritt University Affirmation of Non-discrimination policy states: “Samuel Merritt University does not discriminate on the basis of sex, age, race, color, ethnic or national origin, disability or handicap, religion, marital status, sexual orientation, or status as a veteran in the administration of employment, admission, financial aid, or educational programs. Nondiscrimination is consonant with the principles and practices of the University and is required by Section 504 of the Rehabilitation Act of 1973, Titles I and III of the Americans with Disabilities Act (ADA) of 1990 as amended by the ADA Amendments Act (ADAAA) of 2008, Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, the Age Discrimination Act of 1974, and by various other federal, state and local statutes and regulations.”

Facilities at the University have been modified to assist students with disabilities to progress toward their educational goals. Arrangements may be made to help students with learning, medical, physical, or emotional disabilities pursue a successful program of study. The Director of Academic and Disability Support Services oversees the accommodations for students with disabilities. The Director, in collaboration with the Vice President of Enrollment and Student Services, is responsible for investigation and handling student complaints of discrimination, and overseeing compliance with various laws and policies in cooperation with Samuel Merritt University’s Human Resource Office.

If there is an unresolved disagreement over the appropriateness of a particular academic accommodation or complaints of discrimination, the Vice President of Enrollment and Student Services makes a final determination in the matter following grievance procedures outlined in the University *Catalog/Student Handbook*.

TECHNICAL STANDARDS

The University maintains a list of the cognitive, affective, and psychomotor skills deemed essential to the completion of each entry-level professional program and to perform as a competent generalist practitioner. These guidelines are available from the Office of the Director of Academic and Disability Support Services (phone: 510.869.6616) and on the Samuel Merritt University web site at www.samuelmerritt.edu/disability_services.

The University will provide reasonable accommodation as long as it does not fundamentally alter the nature of the program offered and does not impose an undue hardship such as those that cause a significant expense, difficulty, or are unduly disruptive to the educational process.

SERVICE ANIMALS

In compliance with applicable law, Samuel Merritt permits service animals in its buildings, classrooms, activities, and events when the animal is accompanied by an individual with a disability who indicates the service animal is trained to provide, and does provide, a specific service to them that is directly related to their disability.

LEARNING ASSISTANCE

Tutorial Services offers subject-specific peer tutoring to both undergraduate and graduate students. Enrolled students may request a peer tutor and all efforts are made to accommodate as many requests as possible. The University believes that tutoring is a shared process of teaching-learning, where the learner is free to question, participate in his/her own academic growth, and experience an encouraging learning environment. The program’s focus is to provide all students with a supportive environment where they can improve their study skills, develop their professional practice skills, and master course content.

Student tutors are provided with an hourly stipend. Faculty may refer a student for tutoring or a student can seek the service on their own. Requests for tutorial service can be completed and submitted online through the University's website at http://www.samuelmerritt.edu/academic_support/request_tutorial. For more information, contact the Academic Support Coordinator at 510.869.6511, x5612. In Sacramento, contact Liza Osoteo, Student Services Coordinator, at 916.646.2784; at the San Francisco Peninsula Learning Center, contact the Student Services Counselor, at 650.292.5564.

ACADEMIC AND WRITING ASSISTANCE

Learning strategies, improved test-taking techniques, and assistance with University writing are available on an appointment basis for any student seeking personal analysis of their learning methods and guidance in developing effective collegiate learning and writing strategies. Small group workshops can also be arranged on strategies to improve classroom learning. Contact the Director of Academic and Disability Support Services (510.869.6616) or the Academic Support Coordinator (510.869.5411, x5612) for more information.

The Community Learning Series, offered each semester, are one-hour seminars usually held at lunchtime. They cover a wide variety of topics, suggested by the community, and usually focus on some aspect of learning or on personal/professional development. The seminars are free and open to all members of the University community.

BOOKSTORE

Located on the Oakland campus in Peralta Pavilion, Room 2710, the Samuel Merritt University Bookstore is open Monday to Thursday, 9:00am until 5:00pm, and Friday, 9:00am until 3:00pm, and is operated by The Follett Higher Education Group.

A full range of services are available, including textbooks, special book orders, school supplies, Samuel Merritt University gear and clothing, drinks and snacks, as well as other healthcare student needs.

Contact the bookstore via telephone at 510.869.1504; visit the bookstore through the University website, or at www.foflett.com and select "school."

CEREMONIES AND EVENTS

The University and its departments sponsor annual ceremonies and events to recognize achievement, celebrate progress, communicate information, and to build a stronger sense of community among the University's varied constituencies. Commencement is coordinated in the Office of Academic Affairs. Department-sponsored ceremonies and events are coordinated by the department's faculty and staff. Significant events include:

> Closure Ceremonies

Special "end of program" activities for each program which are sponsored by an academic department. These may include graduation dinners, award ceremonies, professional honor society events, and professional "pinning" or white coat ceremonies

> Nursing Program Pinning

Held during the academic year by the School of Nursing for undergraduate nursing and entry-level master of science in nursing students who complete pre-licensure or undergraduate degree requirements. Pinning is a ceremony of special historic and symbolic significance in which students receive the insignia of the nursing program in the form of a pin to be worn with their professional attire.

> Commencement Ceremonies

Commencement events include ceremonies for the undergraduate, graduate, and doctoral programs. Commencement is held in May.

> Convocation

An academic ceremony held in September which marks the beginning of the academic year.

HEALTH & COUNSELING SERVICES

The newly integrated Samuel Merritt University Student Health and Counseling Center (SHAC) provides top quality physical and mental health care to all currently enrolled students. We strive to enhance student wellness by promoting healthy lifestyle choices, encouraging a holistic philosophy and balance to life, and combining a pro-active, positive approach to healthy living and academic success. As health professionals we recognize that good health is more than the absence of illness, but rather a robust state of well-being that acknowledges the importance and inseparability of the mind-body relationship.

Location

Peralta Medical Office Building
3100 Telegraph Avenue, 3rd Floor, Suite 3105
Oakland, CA 94609

Hours

8:00am-5:00pm, Monday through Friday.

Phone

510.869.6629; all medical and counseling appointments can be made by calling this number

www.samuelmerritt.edu/shac

HEALTH SERVICES

Maintaining good physical health is an essential part of education and the SMU Health Center staff is committed to partnering with students to make informed choices and provide a holistic approach to student health, education, wellness and outreach services in a confidential, inclusive, and respectful environment.

Health Services available on the Oakland campus include:

- > Acute outpatient health care
- > Continuity of care for chronic illness
- > Women's health care/Family planning
- > Health care screening/assessment
- > PPD skin tests for tuberculosis screening
- > Immunizations
- > Specialty referrals
- > Wellness consultation

Students at the **SACRAMENTO** learning center can access Health Services through the **Sutter @ Work program**. Samuel Merritt University is contracted with clinics in the Sacramento area for free annual PPD updates. Physical exams & vaccinations are charged a fee and the student is responsible for those fees. A list of Sutter @ work clinics in the Sacramento area can be found here: http://www.samuelmerritt.edu/files/sutter_occupational_health_services_location.Pdf

*Note: You must have a treatment authorization form signed by the site manager at the SRC before you go to an appointment.

AFTER HOURS MEDICAL CARE

The Health & Counseling Center office is open Monday through Friday between the hours of 8:00am-5:00pm. After hours, on weekends, or during academic holidays, students should seek medical services off campus through their insurance carrier

COUNSELING SERVICES

The staff at Samuel Merritt University knows that student life can be a difficult transitional period with increased pressure and stress. We try to help students understand this period, find ways of coping with crises and function more effectively in the college environment by assisting them in defining and accomplishing their personal and academic goals. To meet this goal we offer free, confidential counseling and wellness services to all registered students to help with personal, emotional, psychological, relationship, and family concerns.

Services offered through Counseling and Wellness Services include:

- > Short term Individual Counseling (up to 10 sessions per student, per calendar year)
- > Group Counseling
- > Mental Health & Wellness Consultation
- > Outreach & Presentations
- > Health & Wellness Workshops
- > On and Off-Campus Referrals
- > Crisis Intervention, during business hours
- > All services are free of charge for enrolled students.

Students at the **OAKLAND** campus can make initial counseling appointments by contacting 510.869.6629. The Oakland Counseling Center Office is open Monday-Friday between 9:00am-5:00pm.

Students at the **SACRAMENTO** and **SAN FRANCISCO PENINSULA** learning centers can contact the Sutter Employee Assistance Program (EAP) Resources at 800.477.2258 for counseling services and are eligible for up to 10 counseling sessions per year, free of charge.

AFTER HOURS & CRISIS

Counselors are available on campus Monday through Friday between 9:00-5:00pm. After business hours, on weekends or during holiday breaks, students seeking counseling services should utilize a provider through their health insurance. Students experiencing a psychiatric emergency should contact the following Crisis Lines or go to your nearest emergency room:

- > Alameda County Crisis Contact Line 800.309.2131
- > National Crisis Hotline 800.273.TALK
- > In ANY life threatening emergency, Call 9-1-1

WELLNESS PROGRAMMING

Wellness consultation and outreach services are provided to the Samuel Merritt University community throughout the academic year. These services include a variety of programs aimed at enhancing the learning environment of the institution and can range from individual workshops and outreach to faculty, students, and staff, to larger group programs including orientation, conferences and presentations. Wellness services are designed to proactively help students become more aware of healthy choices before problems have a chance to start.

STUDENT HEALTH REQUIREMENTS

Before registration, all entering students must provide the following to the Student Health Center, located at the Peralta Medical Office Building, 3100 Telegraph Avenue, Suite #3105, Oakland, CA 94609:

1. **Physical Exam:** The University medical history and physical examination form (examination conducted within 12 months preceding the University entrance date), which includes a physical exam, vision exam, urinalysis, and complete blood count. Forms are enclosed with the Admission package and should be returned directly to Student Health Services by mail, fax, or in person or by uploading to the MySMU account.
2. **Tuberculosis Screening (PPD):** 2-Step PPD must be completed within 6 months prior to the University entrance date, and will need to be updated annually. Tuberculin (PPD) conversions will be evaluated and referred for follow-up care by the appropriate agency. Students who are exposed to a patient with tuberculosis will be screened according to Employee Health Services

tuberculosis exposure policy. If there is a history of a positive PPD, students will need proof of a negative chest x-ray within 12 months prior to University entrance, date of positive PPD test, and an annual TB survey.

3. **Measles (Rubeola), Mumps, and Rubella:** Students born in 1957 or later: documentation of receipt of two doses of MMR or positive titres for rubeola, rubella, and mumps. Students born before 1957: documentation of receipt of one dose of MMR or positive titres for rubeola, rubella, and mumps.
4. **Varicella:** Documentation of positive varicella titre or of two varicella vaccines received regardless of prior history of chicken pox.
5. **Hepatitis B:** Documented proof of the Hepatitis B vaccination series (3 doses over a period of 6 months) or positive titre.
6. **Tetanus:** Verification of a tetanus booster within the last 10 years.
7. **Flu Vaccine:** Documented proof of the annual influenza vaccination or signed declination (mask required).
8. **Medical Insurance**

The above health documents should be submitted to Student Health and Counseling Center as soon as you have confirmed your acceptance to the University, but no later than **thirty days** before your program start date.

Each department may have additional requirements. Any student who does not comply with the above examination and immunization policy will be prohibited from class attendance and clinical experience until she or he is in compliance. Registration for succeeding terms may be held until students provide the above documentation.

PROCEDURES FOR REPORTING ILLNESSES AND ACCIDENTS

1. At the beginning of each course, students are given procedures for requesting excused absences from clinical, course activities, and examinations for reasons which include, but are not limited to, illnesses and accidents.
2. Students notify or leave messages for their instructors at least one hour before the beginning of the clinical experience.
3. Students notify the appropriate agency supervisor as established by protocol in each agency, or by the clinical coordinator, at least one hour before the beginning of the clinical experience.

Faculty members have the right to deny students access to the clinical area if, in their opinion, the student is too ill or unsafe to care for patients. In instances where the faculty member is unable to make this decision, the student will be referred to Health Services for clearance. The Student Health Services nurse practitioner is available as a resource person to the faculty, as needed. If a student is hospitalized,

the student and/or family will notify the Assistant Vice President of Enrollment and Student Services and the Student Health Services Department at the earliest possible time. If the Student Health Services Department is closed at the time of the student's illness or accident (see Clinical Injury for injuries occurring on clinical rotation), the department supervisor at Alta Bates Summit Medical Center will notify Health Services and the Assistant Vice President of Enrollment and Student Services.

Referrals

Faculty may refer students with suspected functional, organic, or emotional problems to the Assistant Vice President of Enrollment and Student Services, or in his/her absence the Vice President of Enrollment & Student Services, for evaluation. The Assistant Vice President of Enrollment and Student Services will evaluate and refer to specialists when necessary (at student's own expense).

STUDENT HEALTH POLICIES

BLOODBORNE DISEASES

All students and faculty will, as appropriate, receive instruction in the utilization of standard precautions and infection control procedures for the prevention of the transmission of blood-borne diseases.

FLU VACCINATION POLICY

All Samuel Merritt University students must have an annual flu vaccine prior to entering a clinical setting. Students who decline a flu vaccine must wear a N95 mask when they are in clinicals. Students are informed that if they refuse to get their annual flu vaccine, it may affect their ability to practice in a clinical location and prevent a student from progressing in her/his academic program.

CLINICAL INJURY POLICY

Due to both the variations in clinical sites and agency personnel and departmental faculty roles, each University department will publish a specific procedure for handling student injuries and exposures to potentially hazardous materials. Students will be provided with thorough orientation to that procedure with their first clinical assignment. Students and faculty will clarify the protocol for handling clinical injuries and exposures with each subsequent clinical rotation.

Clinical injuries are covered under the University's worker's compensation insurance. Treatment will be available from a Sutter Health @ Work facility, during regular business hours, and from the Emergency Department during non-business hours (see procedures for specific hours). These sites should also be used for students injured during work/study employment, as well as students injured during clinical assignments. In addition to receiving evaluation and treatment, students will, as soon after the injury or exposure as possible, notify the appropriate University representative designated within

their department (i.e. clinical faculty member for nursing, clinical coordinator for PT and OT), and within 24 hours notify the Samuel Merritt University Office of Human Resources (510.869.6511, x5351) of any injury or occupational hazard exposure and be assured of support in decision making regarding correct procedure for treatment and follow-up.

In order to avoid incurring financial and legal liability, it is critical for injured or exposed students and their clinical faculty to follow the procedure provided by their department.

Students are required to carry the University's health insurance (or have an approved plan that meets University requirements) to cover treatment of illnesses not directly related to classroom and clinical work. For more information about the Clinical Injury Procedure, please contact your department representative.

INFECTIOUS DISEASES

Samuel Merritt University provides an educational environment which seeks to foster respect for human dignity and to promote professional responsibility. Students and faculty follow the standards of professionalism and ethical practice in accordance with the respective professional codes of ethics when dealing with issues of infectious illness. The University is committed to supporting the rights of all people to receive high quality healthcare, regardless of social and economic status, personal attributes, or the nature of their health problems.

ASSIGNMENT OF STUDENTS TO CARE FOR CLIENTS WITH AN INFECTIOUS ILLNESS

Because it is the policy of most healthcare agencies that employees will treat clients without discrimination, and since students are being educated to work in a variety of health-care delivery settings, it is essential that they learn to care for a variety of clients with infectious illnesses. When proper precautions are practiced, the chances of a healthcare worker becoming infected are minimized. The student will be assigned to a client with an infectious illness only after being educated on the epidemiology, precautions and practices to be taken to prevent transmission of these illnesses. Prior to such assignments, the student will also have satisfactorily demonstrated skill in application of infection precautions.

EXEMPTION OF STUDENTS UNDER SPECIAL CIRCUMSTANCES

> **Immunocompromised students:** Students with diagnosed immunological deficiencies are at an increased risk for developing opportunistic infections. The decision to exempt such a student from caring for a client with an infectious illness will be made on a case-by-case basis by the faculty responsible for the clinical course in consultation with the student's physician and appropriate University faculty/administrators. Current CDC guidelines recommend that asymptomatic healthcare workers with HIV infection not be restricted from employment. Based on this information, students who are positive for HIV and

who are asymptomatic need not be restricted from clinical agencies or from attending class. Students should be advised that HIV infection may cause immunosuppression, and therefore increase the student's susceptibility to infections acquired from client-student interaction.

- > **Pregnant students:** Any limitations regarding clinical experience should be outlined in writing by the student's physician. The student is responsible for contacting the Student Health Services family nurse practitioner for counseling regarding safety in the clinical setting. A pregnant student should also consult with her academic advisor regarding her schedule and possible adjustments to her degree plan. When assigning a student with confirmed pregnancy, faculty will follow the established policy of the institution where the clinical experience is based.
- > **Students with infectious illness:** Any students exhibiting signs and symptoms of an infectious illness that places at risk the health of those with whom they have contact will not attend class or clinical.
- > **Student refusal of clinical assignment:** Any student who refuses a clinical assignment because of the nature of the client's illness may be subject to disciplinary action.

EXPOSURE OF STUDENTS TO AN INFECTIOUS ILLNESS

Prevention: There is an immunization prerequisite for clinical courses. Infectious illness history and an immunization record are obtained at the time of admission into the University and are updated periodically to conform with the required practices of Student Health Services. Students who have not filed the University medical history and physical examination form or who are not current with immunizations will be prohibited from clinical experience until they are in compliance.

Suspected or confirmed exposure of a student to an infectious illness: The suspected or confirmed exposure of a student while in a clinical agency is treated in a manner similar to any exposure occurring within the agency. The student is expected to immediately notify the clinical faculty, who will then notify the supervisor of the healthcare facility where the exposure occurred. A formal report of such exposure should be filed at the agency as directed by agency policy before the end of the clinical day. The forms designated in the SMU Clinical Injury/Exposure Procedure must be submitted to Samuel Merritt University Human Resources as soon as possible after injury or exposure. Subsequently, agency and University policies should be followed for reporting and follow-up surveillance and/or treatment. Any exposure to an infection during clinical rotation at Alta Bates Summit Medical Center must be evaluated by Employee Health and Infection Control. If necessary, medical referral will be provided. Exposures at other agencies should be followed up with the appropriate departments where the exposure occurred. Follow-up for

exposures to infectious disease from other clinical settings will be provided if the healthcare agency where exposure occurred refuses to follow up (and documentation of the exposure is given to Sutter @ Work). Any exposure to an infectious disease outside of clinical rotation may be evaluated by Student Health Services for follow-up treatment as needed and according to policy. The clinical faculty is expected to notify the program or department Clinical Coordinator and department chair or program director of student exposure to an infectious illness.

Contact Samuel Merritt University Human Resources as soon as possible after injury or exposure. Subsequently, agency and University policies should be followed for reporting and follow-up surveillance and/or treatment. Any exposure to an infection during clinical rotation at Alta Bates Summit Medical Center must be evaluated by Employee Health and Infection Control. If necessary, medical referral will be provided. Exposures at other agencies should be followed up with the appropriate departments where the exposure occurred. Follow-up for exposures to infectious disease from other clinical settings will be provided if the healthcare agency where exposure occurred refuses to follow up (and documentation of the exposure is given to Sutter@ Work). Any exposure to an infectious disease outside of clinical rotation may be evaluated by Student Health Services for follow-up treatment as needed and according to policy. The clinical faculty is expected to notify the program or department Clinical Coordinator and department chair or program director of student exposure to an infectious illness.

SERVICE FEES*

(IMMUNIZATION FEES ARE PER DOSE)

PPD	No Cost
Varicella	\$85.00
Hepatitis B	\$125.00
MMR	\$60.00
Tetanus (Tdap)	\$50.00
Flu Vaccine	No Cost
Physical Exam (includes physical, vision, and urinalysis)	No Cost

*Fees are subject to change without notice

OTHER HEALTH SERVICES

Nutritional counseling, wellness classes, and a chemical dependency prevention and treatment program are among the services offered at reduced rates by Alta Bates Summit Medical Center.

PRIMARY SERVICES NOT PROVIDED BY HEALTH SERVICES

a) Illness or injury requiring hospitalization

- b) Specialty services or referrals, e. g. , gynecological, dental, dermatological, ophthalmologic, optometric, psychiatric, etc.
- c) Special appliances such as braces, glasses, splints, etc.
- d) Health care after termination of regular enrollment or when on leave of absence
- e) Cost of prescribed medication
- f) Visits to the emergency department or the occupational health physician (unless covered by Worker's Compensation)
- g) Lab, x-ray, and other diagnostic tests

DISCOUNTED MEDICAL BENEFITS

Students employed by Alta Bates Summit Medical Center are eligible for discounted medical services. For further information, call the Alta Bates Summit Medical Center Cashier's Office, 510.655.4000, ext. 4500.

STUDENT HEALTH INSURANCE

In order to comply with clinical requirements and accrediting obligations, SMU requires all students to maintain a high-level of medical insurance. Students who have their own qualified plan must submit an online waiver form; students who need coverage must enroll in the University plan(s) by submitting an online enrollment form. Any questions regarding the University's responsibility for medical care should be referred to the Coordinator of Student Health and Counseling Center. Information on student insurance plans can be found at <https://app.hsac.com/smu>.

1. New students, at least thirty days prior to their program start date, are required to submit an online Student Health Insurance Form indicating that:
 - a) you would like to enroll in the SMU health insurance plan, or
 - b) you would like to waive the SMU health insurance plan and will provide proof of an approved group health insurance plan by submitting the policy information as requested by the Student Health Insurance Form.

See website: <https://app.hsac.com/smu>
2. Fees for students who wish to enroll in the University's Anthem Blue Cross Health Insurance plan:

August 1, 2014–July 31, 2015

Students who fail to submit an online enrollment form by the start of their first term in their program will be automatically enrolled and charged for the full term.
3. Students enrolled in the University's plan will be re-billed each term while they are enrolled at SMU, unless and until a new online enrollment form is completed and submitted in advance of the next term's billing cycle to the Office of Health & Counseling Services.

All students are required to notify the Servicing Administrator for SMU—HSA Consulting, Inc. (HSAC)—of any change in their health insurance status while enrolled at SMU via submitting a new online Student Health Insurance Enrollment Form.

All charges for the University’s Health Insurance will be billed to your University student account.

- Students who take an official leave of absence or suspended, are eligible to keep their insurance for the duration of their leave, provided that they make a payment in advance for every six months of coverage.

There are no adjustments or refunds available for payments made for health insurance continuation during a leave of absence or suspension.

- Students who withdraw from Samuel Merritt University will have their SMU health insurance terminated as of their withdrawal date, unless they elect to keep their insurance through the end of the period for which they last paid.

Students **must** complete the withdraw process, as outlined in the Academic Policies section, prior to having their insurance charges adjusted. Students must provide the Office of Health & Counseling Services with a copy of the completed withdrawal form.

In addition, students can enroll their family in the insurance plan:

	Enhanced Plan	Basic Plan
Student	\$4,692.00	\$3,528.00
Student & Partner/ Spouse	\$10,260.00	\$7,716.00
Student & Children	\$10,248.00	\$7,704.00
Family	\$14,448.00	\$10,920.00

EMPLOYMENT (STUDENT)

Student employment offers students the opportunity to help meet University expenses and gain valuable job experience. A list of current student employment opportunities is posted at the Samuel Merritt University Employment webpage. A variety of student positions are available at the University. There are a limited number of off-campus community service positions that are work study eligible. Students must speak with the Assistant Vice President of Enrollment and Student Services for requirements, eligibility, and openings prior to considering any off campus work-study job. Most student positions pay \$12.00/hour (some specialized positions pay \$14/hour). Students may work a maximum of 20 hours/week and 8 hours/day while attending classes. If a student is not enrolled in classes for a semester as part of the normal progression (summer vacation), additional hours may be worked, up to a maximum of 40 hours/week and 8 hours/

day. All students must complete paperwork with the Campus Service Center annually and secure proper approvals before beginning any student employment. Please contact the Campus Service Center at 510.869.1550 for more information.

SECURITY/ESCORT SERVICE

It is advisable for students leaving the campus after dark to call for a guard to escort them to their cars. Arrangements for escort service can be made through the Summit operator (or security office at the Learning Centers).

Any threats to safety should be immediately reported to Security as well as University officials.

JOHN A. GRAZIANO MEMORIAL LIBRARY

The John A. Graziano Memorial Library houses the largest and most complete collection of nursing journals, monographs, and audiovisual materials in the East Bay, and one of the best collections in this specialty area in California. The Library also has holdings in physical therapy, occupational therapy, physical assisting, and podiatric medicine resources. In addition, the Library supports a core medical collection of textbooks and reference materials, and subscribes to more than 11,000 print and electronic journals. The Library currently contains a collection of 46,000 volumes. The Library maintains online access to 36 databases and a web-based catalog. In addition, there are laptop computers with network access available for in-library use. The Library is the information center for Samuel Merritt University. As such, it serves the students, faculty, and staff with a full range of reference and circulation services and full access to electronic information technology. Members of the University community may be asked to present their photo identification card to assure access to library collections and services.

Hours of Operation: September–May

DAY	TIME
Monday–Thursday	7:30AM–10:00PM
Friday	7:30AM–5:00PM
Saturday	11:00AM–4:00PM
Sunday	Noon–10:00PM

The Library observes expanded hours during final examinations and shortened hours during holiday breaks and summer. Current operating hours may be verified by calling 510.869.8900 or by visiting the Library website. Changes in Library hours are communicated to students’ SMU e-mail addresses.

LIBRARY FACILITIES AND SERVICES AT THE LEARNING CENTERS

Students and faculty at the Learning Centers have the services of a librarian who is based on site. The librarian

provides orientations to library services and teaches students how to locate, evaluate, and effectively use needed information. The librarian also works with faculty in order to build core text collections that support the curriculum. Students may set up appointments to work with the librarian one on one or in small groups.

All Library licensed databases, including more than 11,000 full text electronic journals and 200 e-books are available at the Learning Centers. Proxy mediated access to databases is also available from off-campus internet stations.

Students and faculty may search the John A. Graziano Memorial Library's web-based catalog and order books from the regular circulating collection in Oakland directly from the catalog. Items are delivered to the remote campuses on a daily basis Monday-Friday.

Students based at all sites may use the John A. Graziano Library's collection and facilities when they are on the Oakland campus.

Students based at the Sacramento Regional Learning Center may opt to receive a borrower card for California State University, Sacramento or the University of California, Davis, Carlson Health Sciences Library.

MEDIA SERVICES

The Samuel Merritt University Media Services Department provides audio-visual (A/V) support to Samuel Merritt University and its Health Education Center, and Alta Bates Summit Medical Center. Media Services provides on-site support of A/V technology installed in all SMU campus classrooms, conference rooms, video conferencing facilities, health science simulation suites, and other A/V equipped rooms.

Video recording services are available for academic events during normal business hours. Requests by faculty, staff, and students for recording of on-campus events will be honored based on the availability of a Media Services technician. Faculty, staff, and students may request duplication of audio or video media for academic use. All media duplication activities are completed in accordance to federal copyright and intellectual property governance laws.

Media Services provides portable A/V equipment for academic use in locations where integrated systems are not available. To reserve A/V equipment, or to inquire about services and availability, please contact the Media Services Department at 510.869.6575.

COMPUTER SERVICES

Desktop computers are available for student use in designated computer labs located within the library at each SMU campus and learning center. All lab computers have Internet access, Microsoft Office Enterprise Edition, and a variety of

computer-assisted instructional programs. The Oakland campus has one additional computer lab located in Peralta Pavilion Level-L, which is frequently used for computer training or online testing activities. Wireless network access is available to students in all classroom, library, and group study areas.

PRINTING AND COPYING SERVICES

Each computer lab offers students access to laser printing and self-service photocopy machines. Students are allocated a quota of complementary printing and copying each academic term. Individuals whose printing and copying exceeds quota will be charged at the end of the term. Please see the website for more details, including pricing. The University observes copyright regulations.

FOOD SERVICES

The primary location for food service on campus is the Alta Bates Summit Medical Center Merritt Pavilion, which offers food service approximately 12 hours per day, including breakfast, lunch, and dinner. Catering for special events and meetings is available through the Medical Center's food service or other approved caterers. Vending machines are located in Providence Pavilion, the Peralta Medical Office Building (MOB) 4th floor, and in the Peralta Pavilion Lower Level. Numerous small restaurants and delicatessens are located within walking distance of the campus on Telegraph Avenue, 30th Street, Broadway, and Piedmont Avenue.

MAIL SERVICE

The mailing address for the University is 3100 Telegraph Avenue, Oakland, California 94609-3108. Students may leave written messages or documents for faculty or staff at the Campus Service Center or at their respective offices.

PARKING AND PUBLIC TRANSPORTATION

Students are responsible for providing their own transportation to and from classes and clinical experiences. Nearby garages offer parking, patrolled by security officers, on a daily or semester fee basis. Students are encouraged to travel in carpools whenever possible and a commute board is posted in the Student Lounge for listing ride shares.

The University is served by public bus lines run by Alameda County Transit. There are several stops near the University. Schedules and route information are available by calling AC Transit at 800.559.4636.

The closest Bay Area Rapid Transit (BART) stops are located between 40th and MacArthur Streets and in downtown Oakland. Alta Bates Summit Medical Center runs a shuttle service between MacArthur BART Station on the 40th Street side and the campus on a daily regular schedule,

Monday through Friday. For additional information on the shuttle service, call the Summit Security Office, ext. 7847 or 510.763.4001.

PARKING & TRANSPORTATION INFORMATION AT ALTA BATES SUMMIT MEDICAL CENTER

The Parking Services Department is committed to providing safe, reliable, convenient, and low-cost parking for faculty, staff, day, and evening students.

Semester Rates

- > Spaces are available in the Peralta Garage (access to both the Merritt and Providence Garages after 6:00pm will be included to accommodate late afternoon and evening classes).

Fall Semester (September through December)	\$125.00
Spring Semester (January through May)	\$125.00
Summer Semester (June through August)	\$75.00*

*Graduate students beginning in the summer semester must pay an additional \$25 for the summer semester in order to cover the month of May.

Debit Cards

Students can elect to purchase a parking debit card, where the parking fee is deducted from a previously paid amount (similar to a bank debit card).

Discount Rates

- > Peralta Garage: \$2.25 per exit with discount validation—all day, Monday through Friday.
- > Providence Garages: \$3.75 per exit with discount validation—**after 6PM only**.

Parking At No Cost

- > **Motorcycles** may park free in the Merritt Garage (in designated areas) on levels B and G.
- > **BART** shuttle service is available every 15 minutes from 5:30am–9:00pm.

Standard Daily Rates for Visitors

- > Providence & Peralta Garages—\$18.00 per day or \$1.75 every 20 minutes.

Parking Information and Applications

Can be obtained through the Campus Support Center Office located in the Providence Pavilion, Ground Level, Room G615. Office hours are Monday through Friday, 8:30am to 4:30pm (closed for lunch from 12:30 to 1:00pm).

- > All garage access is provided via parking card.
- > BART schedules and parking maps are available at the Campus Support Center.

Payment Methods

- > Cash—All cash payments must be made in person, for the entire semester fee.
- > Check—All checks must be drawn from a California bank, for the entire semester fee and should be made payable to ABSMC Parking Department.
- > **All parking fees are non-refundable and are due upon submission of the completed Parking Application Form.**

General Parking Regulations

- > Parking is permitted only in areas designated for parking use. Parking in roadways, loading zones, fire lanes, or at building exits is prohibited whether or not so posted.
- > Parking privileges are NON-TRANSFERABLE and will be revoked in the event of any application, permit or vehicle misrepresentation.

STUDENT ORGANIZATIONS

STUDENT BODY ASSOCIATION (SBA)

The Student Body Association (SBA) is involved in bringing students together from across the programs and locations via events, sponsorships, academic and social activities. The SBA also acts as the voice of the students, bridging communication between students and administration and providing the student view to the University during planning and committee assemblies. Students can express their concerns, questions, and ideas through the SBA. Students can also come to the SBA to join or form clubs and groups. Overall, the SBA is here for the students to make our community a better place to learn and enjoy everything Samuel Merritt University has to offer.

PROCESS OF OBTAINING AN ORGANIZATION/ CLUB CHARTER

1. Any group of students wishing to start an organization/club may do so. There must be an initial start of 10 students petitioning interest for the proposed organization/club.
2. The organization/club charter and list of students must be completed and given to SBA two weeks prior to first proposal of organization/club to SBA.
3. It shall take a 2/3 majority vote of the SBA leadership to approve an organization/club.
4. Membership shall be open to all SBA members (SMU students) who express a desire to be part of the organization/club.
5. The organization/club shall elect an advisor to attend events and activities when available to do so.
6. After the organization/club charter has been approved, the organization/club is granted \$500 seed money from SBA funds. This money is allotted one time only. There is no replenishing of organization/club funds by SBA means.

No funds shall be approved for any organization/club that does not conform to the bylaws.

7. An organization shall be a group which functions to enhance the professional attitudes, skills, and knowledge of students.
8. A club shall be a group organized to carry out specialized extracurricular activities.
9. Any club or organization that does not perform according to the standards and expectations set forth by University, SBA and/or the approved charter may have its charter, approval, and access to any funding revoked.
10. The President of the organization/club shall attend or send an alternate to all Student Body Association meetings or communicate with SBA via email to sba@samuelmerritt.edu

Each academic program has class representatives. A class representative serves as the voice of his or her specific program at Samuel Merritt University. They assist students in voicing their opinions to the SBA and the entire community. The SBA aspires to unify students from each program to invoke a sense of school pride.

AMERICAN ASSOCIATION OF NURSE ANESTHETISTS (AANA)

The American Association of Nurse Anesthetists is the sole organization that represents more than 44,000 nurse anesthetists nationwide. Its state affiliate organization is the California Association of Nurse Anesthetists (CANA). Nurse anesthesia students are required to attend meetings in Northern California and are strongly encouraged to attend the annual meeting of the AANA, which rotates to major metropolitan areas throughout the country. Educational time off in excess of excused days is afforded students for these meetings.

CALIFORNIA NURSING STUDENTS ASSOCIATION (CNSA)

CNSA is the California branch of the National Student Nurses Association. The professional organization for nursing students, its main objectives are to promote nursing education and act as a community service organization. The CNSA is politically involved with legislation affecting health care. Participation in the association increases students' awareness of the trends and changes occurring in the nursing field. CNSA also offers various scholarships to its members.

UNIVERSITY DIVERSITY ACTION COUNCIL & THE DIVERSITY ASSEMBLY

The University Diversity Action Council (UDAC) provides leadership for our ongoing efforts to institutionalize a diverse, equitable and inclusive culture at Samuel Merritt University (SMU). Each Council member champions inclusive practices within the division or department they represent. Student representatives are elected by the Student Body Association. The Diversity Assembly is an open forum where students, faculty and staff view films, hear from speakers and

engage in dialogues that contribute to inclusion, innovation and excellence by exploring the intersection of perspectives.

GREEN TEAM

The SMU Green Team is a collaboration of students, faculty and staff of Samuel Merritt University and Alta Bates Summit Medical Center that are interested in making our campus and facility more sustainable. The SMU Green Team is focused on identifying and implementing short-term, mid-term, and long-term sustainable goals and interventions. Examples of short-term goals: turning the lights off, water-saving measures, paper-saving measures, etc. Examples of mid-term goals: relationships with distributors, suppliers and other organizations who can provide more sustainable options, i.e. corn-based utensils vs. plastic, eliminating the use of styrofoam, implementing a recycling program, etc. Examples of long-term goals: building the new campus LEED certified, and geared towards health education (integrating all that we know about health)—i.e. an exercise facility, providing healthy food alternatives, and a student center. Helping the college focus on integrated health, "Healthy Habits, Healthy People, Healthy Planet." So many of us have ideas or see things around campus that we wish someone would address. The SMU Green Team is intended to be a forum, a collaboration and a means for us to share these ideas and work together to make a difference.

INTERNATIONAL STUDENT HEALTHCARE CLUB

According to the group's mission statement, the club was formed "to support all individuals, locally and globally, to achieve, maintain, and sustain optimum health principles and practices." The club will focus on raising funds for sustainable health clinics abroad, organizing mission trips, and acting as a forum for discussions on the topic of international healthcare. The group meets regularly to participate in health fairs, learn about global and national health care issues and works toward creating solutions.

STUDENT OCCUPATIONAL THERAPY ASSOCIATION

Membership in the Student Occupational Therapy Association is required of occupational therapy students at Samuel Merritt University. After certification as occupational therapists, graduates are eligible for membership in the American Occupational Therapy Association (AOTA).

MEN ALLIED FOR NURSING AND EDUCATION (M.A.N.E.)

We are dedicated to supporting male nursing students in their roles as both students and providers of care. We will increase acceptance of men as caregivers by engaging faculty, hospital staff, our peers, and the community in an open and nonjudgmental dialogue about men's issues in nursing and nursing education. Membership in MANE is open to all Samuel Merritt University students, alumni, faculty and

staff of any nursing-related department. Membership is unrestricted by consideration of age, sex, color, creed, handicap, sexual orientation, lifestyle, nationality, race, religion, or gender.

SCHOLARS IN SERVICE PROGRAM

Samuel Merritt University, in partnership with the San Francisco Foundation, established the Scholars in Service Program (SISP) in 1996 to attract and retain underrepresented students of color who may not otherwise be able to attend the University. Eligible students are academically qualified African-American and Hispanic/Latino students who are committed to working in medically underserved communities in the East Bay while in school and after graduation.

The Scholars in Service Program has since been expanded to offer support programs to all African-American and Hispanic/Latino students enrolled in, or considering Samuel Merritt University. The Program provides students with valuable guidance and assistance as they pursue their education at Samuel Merritt University. The Enrollment and Student Services staff play a crucial role in helping students adjust to the rigors of nursing school, serving as academic advisors, personal advocates, and reference for a variety of campus matters.

Further information may be obtained from:

Craig Elliott, PhD
Samuel Merritt University
3100 Telegraph Avenue, Suite 1000
Oakland, California 94609
510.869.6627

COMMUNITY SERVICE HONOR SOCIETY

The purpose of the Samuel Merritt University (SMU) Community Service Honor Society is to recognize SMU students who have demonstrated excellence in volunteer service and leadership to the community. The award is granted annually to Samuel Merritt University students who best exemplify both leadership in community service endeavors and the values of the University. Interested in learning more about the Community Service Honor Society? Contact Assistant VP of Enrollment and Student Services Craig Elliott at 510.869.6627 or celliott@samuelmerritt.edu or Associate Professor Barbara Puder at bpuder@samuelmerritt.edu.

PRIDE COMMITTEE

The purpose of the Pride Committee is to identify and address issues pertaining to LGBTQ2IA (Lesbian, Gay, Bi, Trans, Queer, Questioning, Intersex, and Ally) students, staff and faculty at Samuel Merritt University. By addressing these issues, Samuel Merritt University will provide a more productive learning environment and graduate health care professionals who are more aware and sensitive to LGBTQ2IA needs and issues in their field. Allies are especially welcomed and encouraged to join!

INSTITUTE FOR HEALTHCARE IMPROVEMENT OPEN SCHOOL CHAPTER

The Institute for Healthcare Improvement (IHI) Open School Chapter at Samuel Merritt University is a face-to-face, interprofessional group that brings students from all of the University's programs together through a shared interest in learning about quality improvement and improving care for patients. The Chapter offers a forum for like-minded students to interact and help each other gain skills to improve care. The IHI Open School Chapter provides opportunities for students to learn, network with peers, connect with faculty who have similar interests, get involved with community service, and accomplish scholarly activities such as publishing and presenting work. <http://www.ihl.org/education/ihlopen-school/Chapters/Pages/default.aspx>

Contact Dr. Craig Elliott (celliott@samuelmerritt.edu) for more information.

CSPM STUDENT ORGANIZATIONS

CSPM Alumni and Associates, Student Chapter

Alpha Gamma Kappa (AGK)

American Academy of Podiatric Practice Management (AAPPM)

American Academy of Podiatric Sports Medicine (AAPSM)

American Association for Women Podiatrists (AAWP)

American College of Foot and Ankle Surgeons (ACFAS)

American Professional Wound Care Association (APWCA)

Alpha Gamma Kappa (AGK)

American Podiatric Medical Students Association (APMSA)

Biomechanics Club

Calcaneus (CSPM Yearbook)

California Podiatric Medical Association, Student Chapter (CPMA)

Dermatology Club

Journal Club

National Foot & Ankle Journal

Pi Delta National Podiatric Medicine Honor Society

Podiatric Homeless Health Project — Pes Clinicus

Student National Podiatric Medical Association (SNPMA)

STUDENT POLICY DEVELOPMENT PROCESS

Any student or group of students may submit for approval a proposed policy to the appropriate student government committee.

The committee may:

1. Recommend approval of the policy and forward it to the Assistant Vice President of Enrollment and Student Services.
2. Return it to the originator for revisions and modifications.
3. Reject the proposed policy outright. If the policy is rejected, an explanation must be provided to the originator.

The Assistant Vice President of Enrollment and Student Services may:

1. Approve the policy outright or send it forward to the appropriate University committee or administrator.
2. Return it to originator for revisions and modifications.
3. Reject the proposed policy outright. If the policy is rejected, an explanation must be provided to the originator and to the approving student body committee(s).

ALUMNI SOCIETY

The Alumni Society exists to strengthen ties between its members and the University, to aid in the University's future goals, and to promote the University in desirable and practical ways. From an earlier organization, the Samuel Merritt Nurses Alumni Association, the Alumni Society was formed in 1996 to include graduates of all Samuel Merritt University programs. All graduates of Samuel Merritt University, Providence College of Nursing, as well as graduates of the California College of Podiatric Medicine, are members of the Alumni Society. Members receive invitations to regular social, educational, and professional development activities, a subscription to the alumni newsletter, the *Reporter*, and borrower privileges at the John A. Graziano Memorial Library. Members are encouraged to keep in regular contact with the University, and to assist the University in its fundraising and recruitment goals.

STUDENT ACTIVITIES

Social, athletic, and recreational activities are an integral part of student life. Advised by the Assistant Vice President of Enrollment and Student Services, the student body association and various class groups plan activities including seminars, socials, educational programs, dinners, barbecues, films, and softball games throughout the year. Recreational facilities are provided for the enjoyment of students, faculty, and staff.

STUDENT AWARDS AND RECOGNITION

ARMED SERVICES AWARDS

The branches of the armed services sponsor awards for students who have demonstrated excellence in scholarship, leadership, service, and clinical practice.

DEAN'S LIST (BSN)

To recognize academic excellence, the Academic Vice President publishes the names of undergraduate students who achieve a current grade point average of 3.5 or higher in a minimum enrollment of ten semester units at the conclusion of each full semester.

STUDENT, STAFF, AND FACULTY OF THE YEAR

The student body can nominate an exceptional student, staff, and faculty of the year in recognition of exceptional work both in and out of the classroom. Nominations are sought in April of every year.

WHO'S WHO AMONG STUDENTS IN AMERICAN UNIVERSITIES AND COLLEGES

Students are nominated by any member of the University community and considered by their academic department for this award. Inclusion in this publication is reserved for seniors and graduate students in their final year who have excelled in scholarship, leadership, and service. Eligibility requirements include:

1. Senior or final-year graduate standing
2. Academic excellence
3. Exceptional class and clinical performance
4. Demonstrated leadership qualities
5. Demonstrated service to profession, University and/or community

OCCUPATIONAL THERAPY AWARDS AND RECOGNITION

Outstanding Graduating Occupational Therapy Student Award

Each year one OT student is selected for recognition in the area of academic excellence. The selection of this recipient is based on grade point average in academic coursework and evidence of ambition to further education toward a doctoral degree or an expressed interest in teaching.

Community Service Award in Occupational Therapy

This award is presented to an OT student in recognition of outstanding leadership skills both among fellow students and in service to the profession.

Pi Theta Epsilon Outstanding Service Award

Pi Theta Epsilon (PTE) is the honor society for occupational therapy students, faculty, and alumni. This society recognizes and encourages superior scholarship among students enrolled in professional entry-level programs at accredited colleges and universities throughout the United States. The mission of Pi Theta Epsilon is to promote research and scholarship among occupational therapy students.

PHYSICAL THERAPY AWARDS AND RECOGNITION

Dr. Martha Jewell Award for Academic Excellence in Physical Therapy

Dr. Jewell was the founding Chair of the Department of Physical Therapy. This award is given in her name to recognize a graduating physical therapy student for outstanding academic achievement during their professional education.

Distinguished Service Award in Physical Therapy

The physical therapy faculty may select a graduating physical therapy student each year who has displayed outstanding service to the University, program, and community.

Outstanding Graduating PT Student Award

Awarded to a graduating PT student who has demonstrated outstanding achievement in at least two of the three following areas: scholarship, clinical practice and service leadership. This award is meant to exemplify the highest level of achievement and/or potential in relation to the mission and values of the Physical Therapy Department.

Peter Edgelow Award for Outstanding Clinical Performance by a Physical Therapy Student

The physical therapy faculty may select a graduating physical therapy student who has displayed outstanding clinical performance for this award.

SCHOOL OF NURSING AWARDS AND RECOGNITION

Ella Sweep Award

The nursing faculty annually awards the Ella Sweep Award to graduating seniors who have demonstrated excellence in clinical practice. The award is presented at a special ceremony.

Faculty Award for the Most Promising Entry-Level MSN Student

Awarded each year to an eligible ELMSN student who has demonstrated significant achievement in scholarship, clinical practice, client advocacy/community service, and communication skills/leadership. Eligibility criteria are satisfactory completion of all pre-licensure requirements for the ELMSN program, and a minimum GPA of 3.3 for the first three semesters of ELMSN coursework.

Outstanding ABSN Student Award

Awarded each year to an eligible ABSN student from each site who has demonstrated significant achievement in scholarship, clinical practice, client advocacy, community service, and leadership. Awards are determined by full-time program faculty at each site.

Outstanding Graduating MS Nursing Student Awards in Case Management, FNP, and CRNA

Awarded each year to a graduate nursing student in each specialty track who has demonstrated significant achievement in scholarship, community service, clinical practice, research, and leadership. Specifically, these awards acknowledge students whose performance exemplifies the highest level of achievement and/or potential in relation to the goals of the Master of Science in Nursing Program.

Dr. Charles J. Rovinski Award

Samuel Merritt University established the Rovinski Memorial Fund in 1996 as an endowed fund in memory of Charles J. Rovinski, CRNA, EdD. Dr. Rovinski, a vital force in the development of the Program of Nurse Anesthesia, was its

first Associate Director from 1993–1996. Each year, a member of the Program graduating class receives the Dr. Charles J. Rovinski Award in recognition of scholarship, clinical excellence, and professionalism.

Yuri Nishimura Scholarship and Outstanding Clinical Faculty Award

The Yuri Nishimura Scholarship Fund was established in 1994 in tribute to Yuri Nishimura, CRNA, MPA, one of a core group of Kaiser Permanente nurse anesthetists and anesthesiologists with who lay the origins of the Samuel Merritt University Program of Nurse Anesthesia. Yuri's commitment to education was evident through her personal accomplishments, and the indefatigable energy with which she encouraged the pursuit of advanced education in the students and colleagues that she mentored throughout her career. Each year, there are two individuals recognized with honors bearing Yuri Nishimura's name. Recipients of the Yuri Nishimura Outstanding Clinical Faculty Award and the Yuri Nishimura Scholarship are chosen because they exemplify some of Yuri's qualities: commitment to excellence in education and professional development.

Sigma Theta Tau International Nursing Honor Society

The nursing departments of Samuel Merritt University, California State University, East Bay, and Holy Names University jointly sponsor the Nu Xi At-Large Chapter of Sigma Theta Tau. The society exists to recognize superior achievements in nursing; encourage leadership development; foster high nursing standards; and strengthen the commitment to the ideals of the profession. Membership is conferred only upon nursing students in baccalaureate or graduate programs who achieve high scholastic averages or upon qualified bachelor's, master's, and doctoral graduates who have demonstrated exceptional scholastic, leadership, and research achievements in the nursing profession. Eligibility requirements are available from the Faculty Counselor for Nu Xi Chapter. Contact the School of Nursing for the name of the current Faculty Counselor.

Sutter Scholarship

Sutter Health Sacramento Sierra Region has gifted Samuel Merritt University funds to establish the Sutter Scholarship Program. Four awards of \$5,000 each are made.

Scholarship Requirements

- > A minimum G.P.A. of 3.5
- > Full-time enrollment at Samuel Merritt University
- > Scholarship recipient must reside in one of the six county regions that comprise the greater Sacramento Metropolitan Area.

Additional criteria to be used for scholarship consideration includes

- > Special honors, recognition, or accomplishments in the areas of scholarship, leadership, or community service.
- > Paid and unpaid work experience related to career goal.

- > Career plans after graduation.
- > Personal circumstances: i.e., financial need, disadvantaged status.
- > Statement of values indicating commitment to caring, service, learning and leadership.

Sutter Health Nursing Student Excellence Award

Awarded each year at pinning to a student enrolled in the Sacramento Regional Learning Center campus nursing program who has demonstrated significant achievement in scholarship, clinical practice, client advocacy/community service, and communication skills/leadership. Eligibility criteria are satisfactory completion of all pre-licensure requirements for the ELMSN program, and a minimum GPA of 3.3 for the first three semesters of ELMSN coursework.

CALIFORNIA SCHOOL OF PODIATRIC MEDICINE AWARDS AND RECOGNITION

The following awards are presented to graduating students in recognition of their academic excellence and service to CSPM:

Pi Delta National Podiatric Medicine Honor Society

Election into Pi Delta recognizes high standards of intellectual and scholarly activity. Students inducted into the Pi Delta Society must be in the top 20% of their class after the second academic year and must maintain at least a 90% grade point average thereafter.

Scepter Award

The Scepter Award was established by the former California College of Podiatric Medicine Board of Trustees and the CSPM Alumni and Associates to symbolize their commitment to academic excellence. Each year the graduating students and the faculty have an opportunity to recognize a member

of the senior class who exemplifies a union of the scholarly and humanitarian qualities of podiatric medicine. The Scepter is the visible symbol of the attributes of mind and heart that characterize the true podiatric physician.

Timothy Holbrook Memorial Award

The American College of Foot and Ankle Orthopedics and Medicine has honored outstanding students for a number of years. At their annual meeting in August 1995, just a few days after Timothy Holbrook's untimely death, the Board of Directors rededicated their awards in his memory. The Timothy Holbrook Memorial Awards of Excellence are given to students who have demonstrated excellence in primary podiatric medicine at each college of podiatric medicine.

Philip Gardner Award for Outstanding Student in Podiatric Medicine

Dr. Philip Gardner was a long-term faculty member who was beloved by students as well as his colleagues. Because of his dedication and service to the University and his commitment to the well being and education of the enrolled students, this award has been established in his honor.

Annually, a graduating student is selected by the CSPM Podiatric Medicine faculty to receive the Philip Gardner Award for Outstanding Student in Podiatric Medicine. The award is presented during the Graduation Ball—Award Ceremony.

Other Awards Presented to Graduating Students

Award for Excellence in Basic Science

Outstanding Student Service and Leadership Award

Award for Clinical Excellence in General Medicine



UNIVERSITY FACILITIES

SAMUEL MERRITT UNIVERSITY CAMPUS

The primary campus of the University is located in the Alta Bates Summit Medical Center campus in Oakland. The University's administrative offices are located at 450 30th Street, Peralta Pavilion, on the second floor, including offices of the President and Academic Vice President and Provost, Vice President for Finance and Administration, Development and Alumni Affairs, the California School of Podiatric Medicine, Human Resources, Finance, and the Bookstore. The Departments of Physical Therapy, Nurse Anesthesia, Occupational Therapy, and Physician Assistant are located on the third and fourth floors of 450 30th Street.

The School of Nursing offices are located at 3100 Summit Street on the third floor of the Providence Pavilion.

The Business Services offices are located at 3012 Summit Street. These offices include Facilities.

The Offices of Admission, Student Services, Academic Support and Disability Services, Health & Counseling, Financial Aid, Registrar, Campus Service Center, Student Accounts, Vice President of Enrollment and Student Services, Information Technology, and Media Services are located at 3100 Telegraph Avenue.

HEALTH EDUCATION CENTER

The Health Education Center (HEC), is a 44,000-square-foot building housing:

- Four classrooms and conference rooms with closed-circuit color television and audiovisual equipment; three large wireless classrooms, one Tandberg classroom.
- The Bechtel Room, is a 350-seat large multipurpose room;
- A fully-equipped kitchen for catered luncheons and banquets

- The 250-seat Fontaine Auditorium, with audiovisual capability from television to multimedia presentations;

For more information about the Health Education Center and reservations for the conference rooms call 510.869.6161.

JOHN A. GRAZIANO MEMORIAL LIBRARY

The John A. Graziano Memorial Library contains one of the largest collections of health sciences materials among private holdings in the East Bay. Located in the Health Education Center, the library extends borrowing privileges to students, faculty and staff of Samuel Merritt University and the employees and medical staff of the Oakland campus of Alta Bates Summit Medical Center. Weekday and weekend hours are ample to accommodate the needs of a diverse undergraduate and graduate population. The collection includes a variety of journals, indexes, electronic full text books and journals, and health sciences texts. Library staff provides information, assistance, and instruction in the use of materials for research projects and class assignments. Remote access to library licensed databases is available by proxy server. Students may also make arrangements through interlibrary loan and document delivery services to borrow books and request copies of articles from other local, regional and national collections.

The Library provides computerized search facilities, an online library catalog, two photocopy machines, video viewing rooms equipped with audiovisual equipment, individual study carrels, computer room and printers. Access to the full suite of Microsoft Office software is also available. Contact 510. 869. 8900 for more information.

PERALTA PAVILION

Most of the University's administrative and faculty offices are at 450 30th Street on the second, third and fourth floor.

Peralta Pavilion building also includes the following classroom and laboratory facilities to support academic programs:

- > Biomechanics Laboratory is equipped with materials and devices for orthotic procedures.
- > Gait Laboratory, equipped for motor control studies and other research activities;
- > Gross Anatomy Laboratory, with 3800 square feet fully equipped for anatomical dissection;
- > Health Assessment Laboratory;
- > Health Sciences Simulation Center;
- > Human Occupation Laboratory, a multipurpose laboratory designed for small crafts and special adaptive equipment, and contains an observation booth;
- > Living Skills Laboratory, which is a simulated environment equipped with supportive, adaptive, and assistive devices for purposeful activities in the home, workplace, and for leisure pursuits;
- > Splinting and Orthotics Laboratory, with the equipment and materials needed to teach specialized splinting skills, burn management, hand therapy, and biomechanical techniques that promote independence in self care, grooming, and other activities of daily living. This room is equipped with heating devices for thermoplastics and various foam materials and orthotic materials for special purposes.
- > Therapeutic Exercise Laboratory, with 2000 square feet equipped for instruction in physical therapy modalities and therapeutic interventions;
- > Computer lab—34-seat multi-purpose usage i.e., testing, research, study
- > Multipurpose classroom
- > Student Lounge which includes microwave, refrigerator, vending machines and four computers for research and study use

LABORATORIES

The University provides the following laboratory facilities to support academic programs:

MOTION ANALYSIS RESEARCH CENTER (MARC)

The Motion Analysis Research Center, or MARC, at Samuel Merritt University is a state of the art laboratory designed to advance the study of human movement in education, research, and patient care. Opened in late 2013, the 2,000-square-foot facility is the only motion laboratory in the Bay Area shared by healthcare experts from a variety of disciplines to study human movement and performance. SMU faculty and students use the MARC to develop evidence-based strategies to treat patients, alleviate pain, and improve the human condition.

The MARC is equipped with equipment for measuring three-dimensional motion, forces, pressures, balance, and

muscle function. It supports the University's teaching programs along with faculty and student research.

The MARC will serve as a teaching center on motion analysis for faculty and students from the University's California School of Podiatric Medicine (CSPM), Department of Occupational Therapy, Department of Physical Therapy, and School of Nursing.

Healthcare practitioners across several fields will also use the center to study biomechanics, gait, upper and lower body movements, and the effect of treatment modalities, and then apply what they learn in clinical practice for the benefit of patients. Furthermore, the MARC will be the venue for clinical trials of new products and interventions designed to treat movement disorders.

The following are located in the Peralta Pavilion:

DPT/DPM RESEARCH LABORATORY

The DPT/DPM Research Laboratory contains treadmills, an EKG unit, a Kinesiology EMG unit, bicycle ergometers, a metabolic cart, and potential facilities for motor control studies and other research activities.

GROSS ANATOMY LABORATORY

The Gross Anatomy Laboratory is approximately 3800 square feet. It contains stainless steel anatomical dissection cadaver tables, metal stools, sinks for handwashing, and cabinets for storage of dissection equipment and specimens. Equipment in the lab includes hanging skeletons, disarticulated skeletons (bone boxes), spine models, and various joint models.

HEALTH AND PHYSICAL ASSESSMENT LABORATORIES

The University maintains health and physical assessment laboratories for both the Nursing and Physician Assistant programs. Ten stations are available for practicing physical examination skills.

HEALTH SCIENCES SIMULATION CENTER

The Health Sciences Simulation Center (HSSC) is 10,000 square feet state-of-the-art environment where students can immerse themselves in learning. The activities you will be engaged in at the HSSC are an integral part of your nursing education at SMU. You will use the Center to learn and practice new clinical skills, work with actual hospital equipment and supplies, and demonstrate your newly acquired abilities with task trainers, manikins and through simulation-based teaching methods.

The HSSC is equipped with a full inventory of medical supplies and equipment, as well as the most current simulators: Vital Sim™ manikins, and high-fidelity manikins including SimMan®, SimBaby®, SimNewB™, produced by Laerdal®. In addition, the HSSC has a birthing simulator Noelle™ and her baby Hal produced by Gaumard.

The simulation-based learning that occurs in the HSSC provides many opportunities to promote a culture of safety among students of the healthcare professions. In this

dynamic environment, where a robust audio-video system allows for the use of video playback from recorded simulation activities, students are frequently engaged in open, reflective discussions of human error management and other safety concerns, and those lessons learned can be applied to clinical practices that contribute to improved patient safety.

A unique feature of the Center is its digital audio-video system and performance assessment software provided by Education Management Solutions, Inc. (EMS) that is integrated with the human patient simulators. The technologies and software applications work in tandem to record the student/patient simulation sessions, enabling University faculty to evaluate the performance of the students. It is the EMS software that enables the immediate review of patient care scenarios during debriefing sessions, a critical component of simulation training.

The Health Sciences Simulation Center (HSSC) is comprised of two locations: HSSC North and HSSC South. Both locations are on the ground floor of the Peralta Pavilion:

HSSC South is located in G730. This area includes 2 large training rooms with gurney and beds to practice health assessment and clinical skills. In addition, this lab has 9 standardized patient rooms and 2 simulation suites.

HSSC North is located in G860. This area includes 2 large training rooms with exam tables and beds to practice health assessment and clinical skills. In addition, this lab contains 2 large simulation suites. This area also has state-of-the-art audio-video capabilities.

HUMAN OCCUPATION LABORATORY

The Human Occupation Laboratory supports a range of activities, from splinting to facilitating small crafts for use as hand tools and applying adaptive equipment. This is a multipurpose laboratory where various projects and group activities can be conducted. This room has an observation booth and can serve as a pediatrics laboratory for children with special needs.

SPLINTING AND ORTHOTICS LABORATORY

This room is equipped with thermoplastics materials, casting-bracing products, heating pans, and splinting tools for the fabrication of splints and appliances for the management of scar tissue and edema.

PHYSICAL THERAPY LABORATORY

The Physical Therapy Laboratory is approximately 2000 square feet in size. It is equipped with high-low therapy tables, rolling treatment stools, metal foot stools, mat tables, parallel bars, physical agent and electrotherapeutic machines and other therapeutic exercise equipment. Storage units contain crutches, walkers, wheelchairs, floor mats and free weights. The room also contains traction tables. This lab is designed for instruction in physical therapy patient evaluation and management.

USE OF COMMON AREA FACILITIES

There are several common areas within the University which are available to all currently enrolled students who agree when using these areas to keep them clean and to report damages or safety hazards to the Facilities Department (510.869.1505). Any person or group planning to use any common area for a party or other event should check first with the HEC Scheduling Coordinator to avoid conflicts and to make reservations (ext. 6161). The exception to this rule is the Student Lounge for which reservations should be made through the Student Body officers or the Assistant Vice President of Enrollment and Student Services. Appliances and furniture are for the enjoyment of all users and must not be removed from the designated areas.

FITNESS ROOM

The fitness room in the Peralta Upper Lot is available 24 hours a day. This area is unsupervised; students are invited to use the equipment at their own risk. The University cannot assume liability for injuries incurred from use of the equipment.

LOCKERS

Lockers are available for commuting students at no cost. Lockers are located in the bathrooms in the basement level of Peralta Pavilion adjacent to the Anatomy Lab and in on the 4th floor of the Peralta Medical Office Building (MOB). Students must provide their own locks.

LOST AND FOUND

Lost and found services are available from the Campus Service Center (Peralta Medical Office Building, Room 110).

PERALTA PAVILION STUDENT LOUNGES

Student lounges may be used by students and their guests. All students must clean up after themselves when using these areas. A student lounge may be reserved for parties or meetings by contacting the Assistant Vice President of Enrollment and Student Services.

LEARNING CENTERS

Sacramento Regional Learning Center (SRLC)

Located at 2710 N. Gateway Oaks Drive, Suite 360, this location has staff and faculty offices, a 12-bed skills lab, a simulation lab, and a Tandberg classroom. There are also traveling space offices for Student Services, two large wireless classrooms, student computer lab, lounge, and small library with part-time librarian.

San Francisco Peninsula Learning Center

Located at 1720 South Amphlett Boulevard, this location includes faculty/staff offices, two large wireless classrooms; one includes Tandberg capability, a 12-bed skills lab, a student computer lab, along with small library and part-time librarian, break room, conference room and traveling offices space for student services.

CRISIS RESPONSE PLAN

POLICY ON EMERGENCY NOTIFICATION, RESPONSE, EVACUATION, AND TIMELY WARNINGS

In the event a situation arises that constitutes an ongoing or continuing threat, a University— or Campus— wide “timely warning” will be issued via the SMU ALERT system.

The University will:

without delay, take into account the safety of the community, determine the content of the notification and initiate the notification system, unless the notification will, in the professional judgment of responsible authorities, compromise efforts to assist victims or to contain, respond to, or otherwise mitigate the emergency. (Department of Education, July 2010)

As part of Samuel Merritt University’s (SMU) plan to effectively respond to an emergency event on any of the campuses, an SMU ALERT communication system has been established. The SMU ALERT system delivers critical information to the SMU community members on any communication device you chose (phone, email, SMS text, pager, or fax) and it may be the most effective way to share updates and information with you in the event of an emergency. In certain emergencies where the SMU ALERT system would not be as effective or access to internet or telecommunications are severely limited, the University may use University email, University phones, the University webpage, fire alerting systems, and/or teams of runners.

All students, faculty and staff are automatically enrolled in the SMU ALERT system that has been initially populated with your phone number and/or SMU email address. You may store additional numbers for voice messages, text messages, email addresses for alerts, or change your phone number or email address.

You are strongly encouraged to go to http://www.samuelmerritt.edu/smu_alert and click the button to “Update My Contact Information,” log in with your SMU name and password, and enter your additional methods for contact.

It is the responsibility of all students, faculty and staff to update personal information on a regular basis. There is also an opt-out button if you do not wish receive any emergency communications from the University, although this is not the recommend choice.

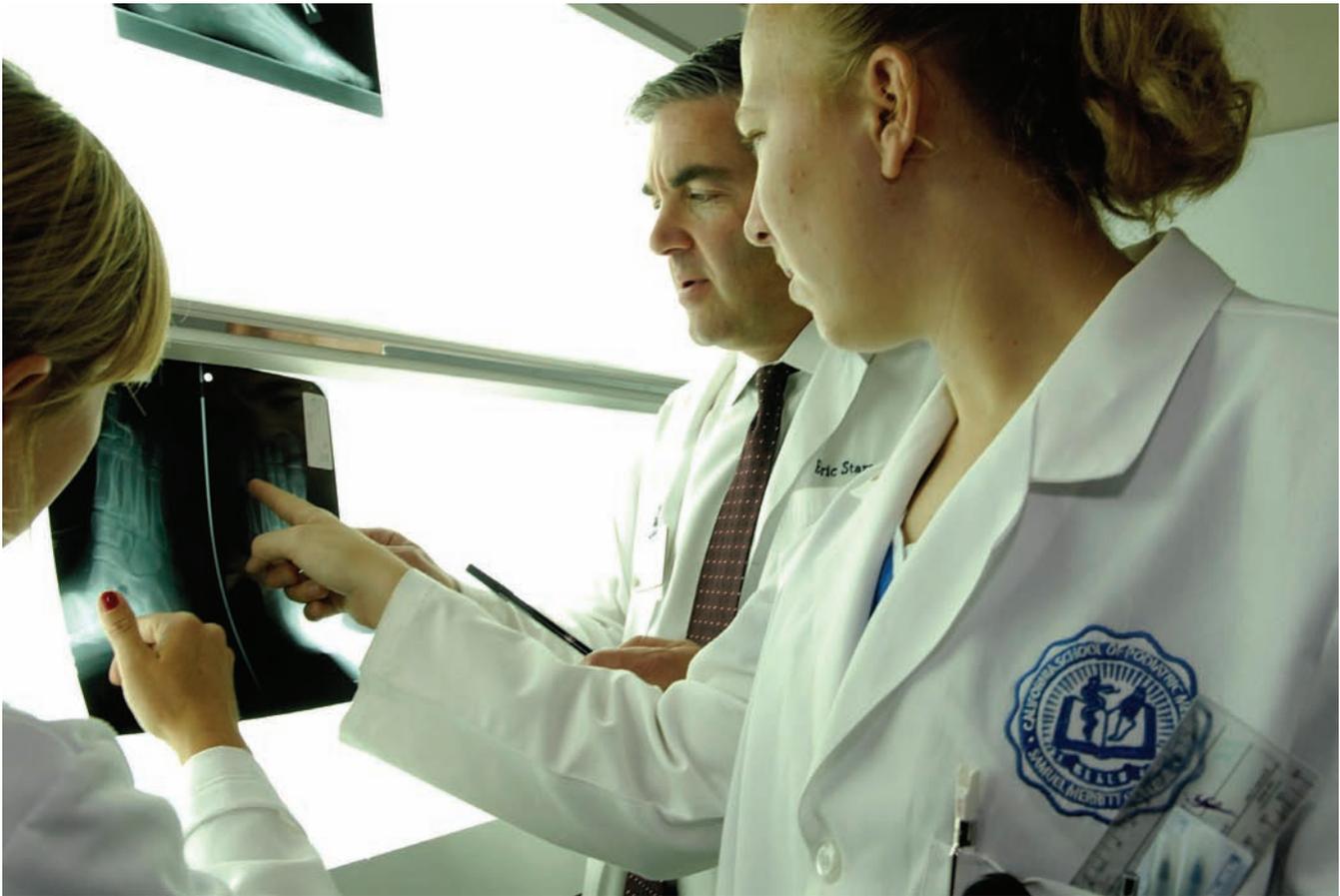
Please know that your personal information and contact information is securely stored. The system is designed for use only when an incident disrupts normal campus operations or threatens the immediate health and safety of the campus community.

Anyone with information warranting a timely warning should report the circumstances to the Assistant Vice President of Enrollment and Student Services at 510.869.6627, in person at 3100 Telegraph Avenue, Oakland, or celliott@samuelmerritt.edu.

The Crisis Response Plan may be activated during a community or regional crisis that may impact University personnel or business operations. For example, a utility outage in nearby areas, a serious toxic spill on a major highway, or a brushfire in a local area may necessitate a Plan activation to coordinate safety precautions or emergency information and support services for personnel.

Samuel Merritt University maintains that a major emergency in the community that affects or potentially threatens our students, faculty, and staff is a University emergency.

The University’s Crisis Response Manual includes information about the structure of the crisis response and who will be involved in assessing and responding to a crisis. In addition, departments are expected to develop contingency plans and evacuation procedures, and individuals are expected to have their own safety kits and procedures in place as well as to



know the plan. The University conducts one training activity per year, participates in the crisis planning procedures of the medical center (our parent organization), and tests the emergency notification system on an annual basis.

All members of the SMU community are notified on an annual basis that they are required to notify the University (through the individuals identified below) of any situation or incident on campus that involved a significant emergency or dangerous situation that may involve immediate or ongoing threats to the health and safety of students and/or employees on campus. The University will determine if the situation does in fact pose a threat to the community. If it is the case, Federal Law requires the institution to immediately notify the campus community or appropriate segments of the community that may be affected by the situation.

The Assistant Vice President of Enrollment and Student Services and the Director of Facilities have been designated

as people responsible for issuing these emergency notifications. Their designees may also initiate emergency notifications if these two are unable. If these two confirm there is an emergency or dangerous situation that poses an immediate threat to the health and safety of some or all of the members of the SMU community, these two will collaborate with the President (or designee in her absence) and the Director of IT to determine the content of the message and will use some or all of the systems described above to communicate the threat to the University community or to the appropriate segment of the community, if the threat is limited to a particular building or segment of the population.

The University will test the emergency response system once per year and to evaluate the emergency evacuation plans and capabilities. SMU will publish a summary of its test.

ADMINISTRATIVE OFFICES AND SERVICES

OFFICE/APPOINTMENT HOURS FOR FACULTY AND STAFF

Faculty office hours are posted each term. In addition, individual appointments may be made. Staff and administrative offices are generally open from 8 a.m. to 5 p.m., Monday through Friday. An appointment may be made by contacting the appropriate office. All University offices and facilities are closed the day after Thanksgiving, and December 25 through January 1 each year.

CAMPUS SERVICE CENTER (CSC)

Located at 3100 Telegraph Avenue, the CSC is the first contact for assistance in the Offices of Financial Aid, the Registrar, Admission, work study, Student Services and the Business Office. Services provided by the Campus Service Center include: pick up refund checks, pick up alternative loan checks, questions about your student tuition statement, transcript requests, enrollment/degree verifications, form and petition pick up and drop off; address changes, registration, scholarship applications, verification documents, basic financial aid overview, and schedule counseling appointments.

OFFICE OF ADMISSION

Staff in the Office of Admission conduct outreach activities to potential undergraduate and graduate students and counsel applicants in the process of completing prerequisites and application procedures. Faculty, staff and students play an active part in the admission effort at Samuel Merritt by helping to identify the most academically able and talented students who will benefit from our programs of instruction.

OFFICE OF FINANCIAL AID

Financial aid staff are available to counsel students regarding their financial situations and to assist them in finding the best ways to finance their education. The department maintains information about loans and scholarship resources

and provides any needed individual assistance in making application for them. Various programs exist to assist students in meeting their educational expenses.

OFFICE OF HUMAN RESOURCES

The Human Resources Office coordinates student employment; the department also assists students who have been injured during the course of their clinical assignment or student employment. Listings of on-campus and off-campus work/study positions and student employment opportunities are available in Human Resources and on the University website. Students must complete employment paperwork prior to beginning work; their student timecards are available in the Campus Service Center and must be turned in each pay period.

OFFICE OF INSTITUTIONAL RESEARCH

The Office of Institutional Research and Evaluation collects and analyzes data about the University and its programs, students, and alumni for reporting to various governmental and accrediting agencies. The University obtains data at entry and exit on its students and conducts regular surveys. The results of this research are used in curriculum planning, program evaluation, and to help faculty and staff better understand students' needs, opinions, and achievements.

OFFICE OF THE PRESIDENT

The Office of the President (OP) serves the entire University community: students, faculty, staff, alumni, donors, its parent organization Sutter Health and co-affiliate Alta Bates Summit Medical Center (ABSMC), governing bodies, the public, and other external institutions or organizations. The OP functions to enhance the values of the University and its mission, serving all divisions to demonstrate outstanding commitment to the education of our students, quality service, and institutional effectiveness.

The OP supports the executive activities of the President, the SMU Board of Regents, and planning and policy bodies of the University. The OP is the “official first stop” point of service and reference for the University, directing individuals or groups to the appropriate office for information and further assistance.

The Executive Director, Office of the President, (EDOP) is the senior communications officer of the University, and serves as the liaison with Sutter Health and ABMSC. The EDOP also coordinates policy development and review.

The Office of Development and Alumni Affairs (DAA), located in the Office of the President, is responsible for raising funds from a variety of sources, including alumni, to support University programs and capital needs.

OFFICE OF THE REGISTRAR

The registrar and staff are responsible for all aspects of student registration and records, as well as the interpretation and application of academic rules and regulations. Additional services include the preparation and distribution of enrollment, scholastic, and census reports; provision of transcripts for students and alumni; certification of degrees; compliance with veterans’ affairs regulations and policies applicable to students; and administration of the institutional policy concerning confidentiality of and access to student records.

BUSINESS OFFICE

The Business Office, located in the Peralta Medical Office Building (MOB), is responsible for billing all tuition, health insurance, and various fees. Payment plans or other financial arrangements may be made through the Business Office, but must be completed within specific time frames as outlined in the student’s registration information mailed each semester. Payments may be dropped off at the Peralta MOB office. The Business Office interacts closely with students and the Financial Aid Office in an effort to facilitate payment of student University expenses.

OFFICE OF STUDENT SERVICES

The Office of Student Services is located at 3100 Telegraph Avenue and provides leadership for the following areas: Student Activities, Community Outreach, Student Council, Career Services, New Student Orientation, Counseling Services, Student Health Insurance, Non-Academic Judicial/Discipline Hearings, Veteran Support Services, equity, inclusion and diversity training and programming, and various committees. Student Housing Services provides assistance to all students in finding suitable off-campus housing. The Office of Student Services can also provide advocacy, support, and guidance to students while they are at Samuel Merritt University.

ACADEMIC AND INSTRUCTIONAL INNOVATION

The Department of Academic and Instructional Innovation (A&I) partners with Information Technology Services, the Office of Academic Affairs, and the various Academic Departments to provide faculty, staff, and students access to the pertinent tools needed to successfully integrate technology and innovation into education. A&I is responsible for evaluation, design, development, implementation, and training of instructional, innovative, and academic focused technology, tools, and practices. We are responsible for assisting the University faculty/programs in leveraging resources for teaching and learning online and in the classroom, and measuring the effectiveness of these resources. We are available for teaching, learning, guidance, advising, and research.

DIVISION OF FINANCE AND ADMINISTRATION

The Division of Finance and Administration oversees and manages the facilities, financial services, information technology services, and the business office of the University. The Division of Finance and Administration assists students, faculty, and staff in making informed business and strategic financial decisions by providing timely, reliable, and accurate financial information in compliance with standard accounting principles, and state and federal regulations.

The Division of Finance and Administration facilitates the work of the University, and coordinates with Alta Bates Summit Medical Center (ABSMC) and external constituents to provide an appropriate educational and work environment, including services for students, staff, and faculty of Samuel Merritt University. The Office of Finance and Administration supports the Vice President of Finance and Administration, CFO, including staff positions that are responsible for the development and implementation of budgeting and financial planning processes, and in the development and monitoring of contract management systems.

DIVISION OF ENROLLMENT AND STUDENT SERVICES

The Division of Enrollment and Student Services (ESS) is responsible for guiding students through their University experience. From inquiry to application to graduation, staff are committed to assisting students. We strive to support all student co-curricular needs, answer questions that arise about Samuel Merritt University, and support students to realize their careers as healthcare providers. The Division is comprised to the Office of Admission, Office of Financial Aid, Office of the Registrar, Office of Student Services, Office of Academic and Disability Support Services, Campus Service Center, and Student Health and Counseling Center.

FEDERAL AND STATE REGULATORY POLICIES

AFFIRMATION OF NONDISCRIMINATION

Samuel Merritt University does not discriminate on the basis of sex, age, race, color, ethnic or national origin, disability or handicap, religion, marital status, sexual orientation, or status as a veteran in the administration of employment, admission, financial aid, or educational programs. Nondiscrimination is consonant with the principles and practices of the University and is required by Section 504 of the Rehabilitation Act of 1973; Titles I and III of the Civil Rights Act of 1964; Title IX of the Education Amendments of 1972; the Equal Pay Act of 1963, as amended by the Education Amendments of 1972; the Age Discrimination in Employment Act of 1967; the Age Discrimination Act of 1974; and various other federal, state and local statutes and regulations.

AMERICANS WITH DISABILITIES ACT

The University conforms to all requirements under Title III-Public Accommodations Owned by Private Entities of the Americans with Disabilities Act (ADA) of 1990 as amended by the ADA Amendments Act (ADAAA) of 2008. No individual shall be discriminated against on the basis of disabilities in the full and equal enjoyment of goods, services, facilities, privileges, advantages or accommodations. Persons wishing to make suggestions or inquiries are to be directed to the Director of Academic and Disability Support Services. The Director organizes services to disabled students to help them pursue a successful program of study.

The Director, in collaboration with the Assistant Vice President of Enrollment and Student Services, is responsible for investigating and handling student complaints of discrimination and overseeing compliance with various laws and policies in cooperation with Samuel Merritt University's Office of Human Resources. If there is an unresolved disagreement over the appropriateness of a particular academic accommodation or complaints of discrimination, the Vice President of Enrollment & Student Services makes a

final determination in the matter following grievance procedures outlined in the Academic, Personal, and Professional Integrity section.

The University maintains a list of the cognitive, affective, and psychomotor skills deemed essential to the completion of each entry-level professional program and to perform as a competent generalist practitioner. These guidelines are available from the Office of Academic and Disability Support Services (510.869.6616) and on the Samuel Merritt University website www.samuelmerritt.edu under Disability Services. It is the responsibility of the student to request any accommodation for essential functions. The University will provide reasonable accommodation as long as it does not fundamentally alter the nature of the program offered and does not impose an undue hardship such as those that cause a significant expense, or difficulty, or are unduly disruptive to the educational process.

The University operates in compliance with the Civil Rights Statutes which prohibit exclusion of qualified handicapped individuals from employment or enrollment/participation in programs receiving federal financial aid. Both the handicapped individual and the institution share responsibility for meeting any needed accommodations.

ESSENTIAL SKILLS/FUNCTIONS FOR PROFESSIONAL PROGRAMS

Title III of the Americans with Disabilities Act provides comprehensive civil rights protections for "qualified individuals with disabilities." An "individual with a disability" is a person who:

- > has a physical or mental impairment that substantially limits a "major life activity," or
- > has a record of such an impairment, or
- > is regarded as having such an impairment.

The *ADA Handbook* published by the Equal Employment Opportunity Commission and the Department of Justice states: "examples of physical or mental impairments include,

but are not limited to, such contagious and noncontagious diseases and conditions as orthopedic, visual, speech, and hearing impairments; cerebral palsy, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, mental retardation, emotional illness, specific learning disabilities, HIV disease (whether symptomatic or asymptomatic), tuberculosis, drug addiction, and alcoholism.”

“Major life activities” include functions such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working. Individuals who currently engage in the illegal use of drugs are not protected by the ADA when an action is taken on the basis of the recurrent illegal use of drugs.

“Qualified” individuals are defined as follows:

A “qualified” individual with a disability is one who meets the essential eligibility requirements for the program or activity.

THE JEANNE CLERY DISCLOSURE OF CAMPUS SECURITY POLICY AND HIGHER EDUCATION OPPORTUNITIES ACT (HEOA)

POLICY ON EMERGENCY NOTIFICATION, RESPONSE, EVACUATION, AND TIMELY WARNINGS

In the event a situation arises that constitutes an ongoing or continuing threat, a University- or Campus- wide “timely warning” will be issued via the SMU ALERT system.

The University will:

without delay, take into account the safety of the community, determine the content of the notification and initiate the notification system, unless the notification will, in the professional judgment of responsible authorities, compromise efforts to assist victims or to contain, respond to, or otherwise mitigate the emergency. (Department of Education, July 2010)

As part of Samuel Merritt University’s (SMU) plan to effectively respond to an emergency event on any of the campuses, an SMU ALERT communication system has been established. The SMU ALERT system delivers critical information to the SMU community members on any communication device you chose (phone, email, SMS text, pager, or fax) and it is the most effective way to share updates and information with you in the event of an emergency. In certain emergencies where the SMU ALERT system would not be as effective or access to internet or telecommunications are severely limited, the University may use University email, University phones, the University webpage, fire alerting systems, and/or teams of runners.

All students, faculty and staff are automatically enrolled in the SMU ALERT system that has been initially populated with your phone number and/or SMU email address. You may store additional numbers for voice messages, text

messages, email addresses for alerts, or change your phone number or email address.

You are strongly encouraged to go to http://www.samuelmerritt.edu/smu_alert, click the button to “Update My Contact Information,” log in with your SMU name and password, and enter your additional methods for contact or change them.

It is the responsibility of all students, faculty and staff to update personal information on a regular basis. There is also an opt-out button if you do not wish receive any emergency communications from the University, although this is not the recommended choice.

Please know that your personal information and contact information is securely stored. The system is designed for use only when an incident disrupts normal campus operations or threatens the immediate health and safety of the campus community.

Anyone with information warranting a timely warning should report the circumstances to the Assistant Vice President of Enrollment and Student Services at 510.869.6627, in person at Peralta MOB or celliot@samuelmerritt.edu or to the Director of Construction and Campus Development, Lillian Harvin, at 510.869.8785 or lharvin@samuelmerritt.edu.

The Crisis Response Plan may be activated during a community or regional crisis that may impact University personnel or business operations. For example, a utility outage in nearby areas, a serious toxic spill on a major highway, or a brushfire in a local area may necessitate a Plan activation to coordinate safety precautions or emergency information and support services for personnel.

Samuel Merritt University maintains that a major emergency in the community that affects or potentially threatens our students, faculty, and/or staff is a University emergency.

The University’s Crisis Response Manual includes information about the structure of the crisis response and who will be involved in assessing and responding to a crisis. In addition, departments are expected to develop contingency plans and evacuation procedures, and individuals are expected to have their own safety kits and procedures in place as well as to know the plan. The University conducts one training activity per year, participates in the crisis planning procedures of the medical center (our parent organization), and tests the emergency notification system on an annual basis. SMU will publish a summary of its test.

All members of the SMU community are notified on an annual basis that they are required to notify the University (through the individuals identified below) of any situation or incident on campus that involved a significant emergency or dangerous situation that may involve immediate or ongoing threats to the health and safety of students and/or employees on campus. The University administration will determine if the situation does in fact pose a threat to the community. If it is the case, Federal Law requires the institution to immediately notify the campus community or appropriate segments of the community that may be affected by the situation.

The Director of Information Technology Services (ITS) has been designated as responsible for issuing these emergency notifications. The AVP Enrollment and Student Services or the Director of Construction and Campus Development may also initiate emergency notifications if the Director of ITS is unable. The AVP for Enrollment and Student Services and/or the Director of Construction and Campus Development will confirm there is an emergency or dangerous situation that poses an immediate threat to the health and safety of some or all of the members of the SMU community and will collaborate with the President (or designee in her absence) and the Director of ITS to determine the content of the message. They will use some or all of the systems described above to communicate the threat to the University community or to the appropriate segment of the community, if the threat is limited to a particular building or segment of the population.

POLICY ON THE PREPARATION OF DISCLOSURE OF CRIME STATISTICS

The Assistant Vice President of Enrollment and Student Services prepares this report to comply with the Jeanne Clery Disclosure of Campus Security Policy and Crime Statistics Act. The full text of the report and the annual statistics can be found on the University website at <http://www.samuelmerritt.edu/campus-safety-security>. The report is prepared in coordination with contracted security teams at each campus (if applicable), key faculty and staff, and the Office of Student Services.

Campus crime, arrest and referral statistics include those reported to the Assistant Vice President of Enrollment and Student Services, designated campus officials, security teams, and outside law enforcement agencies. These statistics may also include crimes that have occurred in nearby private residences and businesses and is not required by law.

Each year, on or before October 1, an email notification is made to all enrolled students and current faculty and staff regarding the updated report and how to access the information. A direct link to the report is included in the email and on the website. Notification to prospective students and prospective employees is made on the respective Admission and Employment webpages. Requests for the report in alternative formats may be made to the Assistant Vice President of Enrollment and Student Services by email (cellriott@samuelmerritt.edu) or by phone at 510-869-6627.

POLICY ON THE REPORTING OF CRIMINAL OFFENSES AND ENCOURAGING PROMPT AND ACCURATE CRIME REPORTING

Community members, students, faculty, staff and guests are encouraged to report all crimes and public safety related incidents to 1) the security team noted below and to 2) the Assistant Vice President of Enrollment and Student Services and 3) the Director of Construction and Campus Development in a timely manner. Information on student behavioral violations are reported to the Assistant Vice

President of Enrollment and Student Services per University policy for follow up. The University does not have a campus police department and thus we encourage you to contact both the University (via the individuals below) and the appropriate security team.

For crimes in progress or emergencies, contact the security team at your campus or call 911.

Campus	Security Number
Oakland	510.763.4001 or x5555
Sacramento	916.486.5800
San Francisco Peninsula	none on site; call 9-1-1

In addition, you should report a crime to the following areas:

Assistant Vice President of Enrollment and Student Services
510.869.6627
3100 Telegraph Ave, Suite 1000

Director of Construction and Campus Development
510.869.8785
450 30th Street

CONFIDENTIAL REPORTING

If you are the victim of a crime and do not wish to pursue action with the University's judicial process or the criminal justice system, we strongly encourage you making a confidential report. With your permission, the people noted above can file a report on the details of the incident without revealing your identity. The purpose of a confidential report is to comply with your wish to keep the matter confidential while taking steps to insure the institution's compliance with this federal law and insure the future safety of yourself and others. With such information, the University can keep accurate records of the number of incidents involving students and alert the campus community to potential danger. Reports filed in this manner are counted and disclosed in the annual crime statistics for the University.

POLICY ADDRESSING COUNSELORS AND CONFIDENTIAL CRIME REPORTING

Please note that persons employed by the University or contracted by the University to serve as professional counselors, when acting as such, are not considered to be a campus security authority and are not required to report crimes for inclusion into the annual disclosure of crime statistics. They are encouraged, if and when they deem appropriate, to inform persons being counseled of the procedures to report crimes on a voluntary basis for inclusion into the annual crime statistics.

POLICY ON CAMPUS ACCESS

The University shares facilities with various medical centers, and some overlap of access by the public and medical center staff will happen. In these areas, the public can use the space

as a part of visiting the medical center, and the respective security team will take responsibility for security and access.

In other areas, access to the University facilities is limited to current faculty, staff and students, approved contractors, medical center facilities staff, and medical center security staff, and is maintained through swipe card access via campus identification badges. Faculty, staff and students must wear their University ID (and campus identification badges if separate) while on campus and have it visible, above the waist, at all times.

During business hours, faculty, staff and students have access to University facilities via their swipe card. During holidays, after business hours and weekends, access is limited or not permitted. The Facilities Manager will provide updates prior to holidays on what access is available. The University is closed the week between Christmas and New Year's Eve and special permission is required to be on campus during that time.

Please note that emergencies or extenuating circumstances may necessitate changes to any posted schedules.

POLICY ON CAMPUS LAW ENFORCEMENT

Samuel Merritt University does not have its own police force, public safety, or security team and it utilizes services with the security team or building management at each of its campuses. The security team has the authority to ask persons for identification and determine whether individuals have lawful business with Samuel Merritt University. This security team also has the ability to collect reports of incidents. They do not have arrest power. Criminal incidents are referred to the local police who have jurisdiction at the campus. All crime victims and witnesses are strongly encouraged to immediately report the crime to the security team at that campus as well as one of the University officials listed above. Prompt reporting will assure timely warning notices and disclosure of statistics.

Security Officers are licensed Private Security through the state of California, with the authority to detain, protect, and preserve life, property, and assets in accordance with their training and equipped status. The business park in which we lease the space for the San Francisco Peninsula Campus does not have a security service.

The security teams on each campus have a long-standing relationship with local, county, state, and federal law enforcement agencies in the ongoing application of security practices. There are no formal MOU's or SLA's with agencies, but it is the practice of each security department to cooperate with all police activity, and to work with law enforcement on all levels.

Police are involved in addressing all criminal activity that occurs on Alta Bates Summit Medical Center and Learning Centers. This is stated in multiple policy documents, and a police report number is required on all criminal event incident reports.

POLICY ADDRESSING DISCLOSURES TO ALLEGED VICTIMS OF CRIMES OF VIOLENCE OR NON-FORCIBLE SEX OFFENCES

Samuel Merritt University will disclose to the alleged victim of a crime of violence, sexual misconduct/harassment or a non-forcible sex offense, the results of any disciplinary hearing conducted by the University against the member of the University community who is the alleged perpetrator of the crime or offense. If the alleged victim is deceased as a result of the crime or offense, Samuel Merritt University will provide the results of the disciplinary hearing to the victim's next of kin, if so requested.

POLICY REGARDING CRIMINAL ACTIVITY OFF CAMPUS

The University does not have any off-campus student organizations nor does it monitor off-campus activities of students, faculty and staff.

POLICY ON SECURITY AWARENESS AND CRIME PREVENTION PROGRAMS

The University makes available the programs and resources offered by the security teams on safety and security, including safety information and campus escort services. At student orientation, the security team is invited to share services offered at that campus. The University puts on additional educational programs on various safety topics annually. Such educational programs may be done at the request of students, by security in an ad hoc program, or because of a campus concern. In addition, the University strongly encourages all new students and new employees to complete its online primary prevention and awareness program.

POLICY ADDRESSING ALCOHOLIC BEVERAGES AND DRUGS

The possession, sale, or the furnishing of alcohol on the University campus is governed by California state law. Samuel Merritt University has been designated as "drug and alcohol free" and only under certain circumstances is the consumption of alcohol permitted. The possession, sale, manufacture or distribution of any controlled substance is illegal both under state and federal laws. Violators are subject to University disciplinary action, criminal prosecution, fine and imprisonment. It is unlawful to sell, furnish or provide alcohol to a person under the age of 21. The possession of alcohol by anyone under the age of 21 in a public place or place open to public is illegal. It is also a violation of Samuel Merritt University policy for anyone to consume or possess alcohol in any public or private area of campus without prior University approval.

POLICY ADDRESSING SUBSTANCE ABUSE EDUCATION

The University offers substance abuse programs including informational materials, counseling services (through Student

Health and Counseling for students and Sutter Employee Assistance Program (EAP) for employees), referrals to diversion programs or long-term treatment, and University disciplinary actions.

POLICY ON SEX OFFENSES, VIOLENCE, AND OFFENDERS

The University will annually provide educational programming to promote the awareness of sexual misconduct, which may include rape, acquaintance rape and other forcible and non-forcible sex offenses, domestic violence, dating violence, sexual assault. Such educational programs may be done at the request of students, by security in an ad hoc program, or because of a campus concern. In addition, the University strongly encourages all new students and new employees to complete its online primary prevention and awareness program.

If you are a victim of sexual violence, your first priority should be to get to a place of safety. You should then obtain necessary medical treatment. The University strongly advocates that a victim of sexual assault/violence report the incident in a timely manner to the Assistant Vice President of Enrollment and Student Services or Executive Director of Human Resources.

The report to a University official does not obligate the victim to prosecute nor will it subject the victim to scrutiny or judgmental opinions from employees and officers; but it ensures the victim can receive services offered by the University. The Assistant Vice President of Enrollment and Student Services and others will assist the student in notifying these authorities if the student requests.

A report to police will ensure the victim receives the necessary medical treatment and tests, at no expense to the victim; provide the opportunity for the collection of evidence which will be helpful in prosecution which cannot be obtained later; and assure the victim has access to free confidential counseling from counselors specifically trained in the area of sexual assault crisis intervention.

The University offers counseling services through the Student Health and Counseling (SHAC) center and through a contracted arrangement with Sutter EAP. Counseling and support services outside the University system are available through Bay Area Crisis Centers.

University disciplinary proceedings, as well as special guidelines for handling cases of sexual misconduct, are detailed in the Catalog and Student Handbook. The handbook provides, in part, that the accused and the victim will each be allowed to choose one person who can serve as an advisor/advocate throughout the complaint procedures. Both the victim and the accused will be informed of the outcome of the hearing. A student found guilty of violating the University's sexual violence policy could be criminally prosecuted and/or may be suspended or expelled from the University for the first offense. Students have the option to change their academic situations after an alleged sexual assault if such changes are reasonably available.

SEXUAL OFFENDER REGISTRATION

In accordance with the Campus Sex Crimes Prevention Act of 2000, The Jeanne Clery Act and FERPA, Samuel Merritt University is providing a link to the California State Sex Offender Registry. The University is required to inform the campus community that a list of all registered sex offenders is available from the State of California Office of Attorney General at <http://www.meganslaw.ca.gov/>.

DRUG FREE SCHOOLS AND COMMUNITIES ACT OF 1989

The Drug Free Schools and Communities Act Amendment of 1989 requires all colleges and universities to distribute information about alcohol and substance abuse to their students.

Any Samuel Merritt University student who violates University alcohol and substance abuse policies is subject to disciplinary action up to and including suspension or expulsion from the University. Nursing students convicted of the possession or sale of illegal drugs may be denied licensure by the Board of Registered Nursing and physical therapy students by the Board of Medical Quality Assurance. The California Board of Registered Nursing defines use of illegal substances as "...unfitness to perform nursing functions in a manner consistent with the public health, safety, or welfare" (California Administrative Code, Section 1444). Physical therapy licenses may be suspended or revoked for "habitual intemperance" and "addiction to the excessive use of any habit-forming drug" (Board of Medical Quality Assurance). Occupational therapists are registered at the national level by the National Board for Certification in Occupational Therapy and licensed within the state of California. Occupational therapy students who are convicted of the possession or sale of illegal drugs may be denied the opportunity to sit for the national certification examination, which means they would not become registered occupational therapists. Occupational therapy licenses may be denied, suspended or revoked for these offenses.

If you have personal concerns about the abuse of tobacco, alcohol, and drugs, we encourage you to make a confidential appointment to see our counselor 510.869.6629. There is no charge for these services. The Assistant Vice President of Enrollment and Student Services 510.869.6627 is available to talk confidentially with any student about concerns and to make referrals as appropriate. Under the comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 and Drug Abuse Office and Treatment Act of 1979, patient confidentiality is protected.

POLICY ADDRESSING SUBSTANCE ABUSE EDUCATION

The University offers a limited number of substance abuse programs including informational materials, counseling services (through Counseling and Wellness Services for students and Sutter Employee Assistance Program (EAP) for employees), referrals to diversion programs or long-term treatment, and university disciplinary actions.

RESOURCES AND REFERRALS ON CAMPUS

Counseling and support groups

- > Samuel Merritt University Counseling Services
510.869.6629
- > Assistant Vice President of Enrollment and Student Services 510.869.6627

RESOURCES AND REFERRALS IN THE COMMUNITY

Twelve-Step Programs

- > Alcoholics Anonymous 510.839.8900
- > Cocaine Anonymous, Marijuana Anonymous, Narcotics Anonymous, Al-Anon (for friends and family members)—510.276.2270
- > Alameda County Alcohol and Drug Abuse Services 510.268.2525
- > Alcoholism and Drug Abuse Council of Contra Costa County 510.932.8100
- > National Council on Alcoholism 415.296.9900

DRUG FREE WORKPLACE POLICY

In compliance with federal regulations, Samuel Merritt University reaffirms its policy that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited on the University campus and its learning environments, including clinical agencies and in any of its activities. An employee or student found to be engaged in any of the foregoing activities may be required to participate in a drug-abuse assistance or rehabilitation program and is subject to disciplinary action, up to and including notification of any appropriate licensing agency and employee termination or student dismissal.

Drug abuse has no place in the learning environment or in client-care settings. Drug counseling, rehabilitation, and assistance are available to employees and students through Alta Bates Summit Medical Center's MPI behavioral services. The University encourages students and employees to seek counseling privately or through MPI. Except as required by the regulation, strictest confidence will be observed.

FEDERAL, STATE AND LOCAL SANCTIONS ABOUT ALCOHOL AND OTHER DRUGS

The following information about alcohol and other drugs, sanctions, and their effects is provided by the United States Department of Education and the Western Center for Drug-Free Schools and Communities/Northwest Regional Educational Laboratory.

TOBACCO

Every person, firm, or corporation which knowingly sells or gives or in any way furnishes to another person who is under the age of 18 years any tobacco, cigarette, or

cigarette papers, or any other preparation of tobacco, or any other instrument or paraphernalia that is designed for the smoking or ingesting of tobacco, products prepared from tobacco, or any controlled substance, is guilty of a misdemeanor. (Penal Code 308)

ALCOHOL

Every person who sells, furnishes, gives, or causes to be sold, furnished, or given away, any alcoholic beverage to any person under the age of 21 is guilty of a misdemeanor. (Business and Professional Code 25658[a])

Any person under the age of 21 who purchases any alcoholic beverage, or any person under the age of 21 years who consumes any alcoholic beverages in any on-sale premises, is guilty of a misdemeanor. (Business and Professional Code 25658 [b])

Any person under the age of 21 years who has any alcoholic beverage in his possession on any street or highway or in any public place or in any place open to the public is guilty of a misdemeanor. This section does not apply to possession by a person under the age of 21 years making a delivery of an alcoholic beverage in pursuance of the order of his parent or in pursuance of his employment. (Business and Professional Code 25662)

It is unlawful for a person under the age of 18 years who has 0.05 percent or more, by weight, of alcohol in his or her blood to drive a vehicle. (California Vehicle Code 23140[a])

It is unlawful for any person, while under the influence of an alcoholic beverage or any drug, or under the combined influence of an alcoholic beverage and any drug, to drive a vehicle and, when so driving, do any act forbidden by law or neglect any duty imposed by law in the driving of the vehicle, which act or neglect proximately causes death or bodily injury to any person other than the driver. (California Vehicle Code 28258[a])

It is unlawful for any person, while having 0.08 percent or more, by weight, of alcohol in his or her blood to drive a vehicle and, when so driving, do any act forbidden by law or neglect any duty imposed by law in the driving of the vehicle, which act or neglect proximately causes death or bodily injury to any person other than the driver. (California Vehicle Code 25158[b])

No person shall drink any alcoholic beverage while driving a vehicle upon any highway. Every person who possesses, while driving a motor vehicle upon a highway, not more than one avoirdupois ounce of marijuana other than concentrated cannabis, is guilty of a misdemeanor and shall be punished by a fine of not more than one hundred dollars (\$100). (California Vehicle Code 23220 and 23222[b])

It is unlawful for the registered owner of any motor vehicle, or the driver if the registered owner is not then present in the vehicle, to keep in a motor vehicle, when the vehicle is upon any highway, any bottle, can or other receptacle containing any alcoholic beverage which has been opened, or a seal broken, or the content of which have been partially removed, unless the container is kept in the trunk of the

vehicle, or kept in some other area of the vehicle not normally occupied by the driver or passengers, if the vehicle is not equipped with a trunk. A utility compartment or glove compartment shall be deemed to be within the area occupied by the driver and passengers. (California Vehicle Code 23225)

No person under the age of 21 shall knowingly drive any motor vehicle carrying any alcoholic beverage, unless the person is accompanied by a parent or legal guardian or is employed by a licensee under the Alcoholic Beverage Control Act, and is driving the motor vehicle during regular hours and in the course of the person's employment. (California Vehicle Code 232246)

No passenger in any motor vehicle who is under the age of 21 years shall knowingly possess or have under that person's control any alcoholic beverage, unless the passenger is accompanied by a parent or legal guardian or is employed by a licensee under the Alcoholic Beverage Control Act, and the possession or control is during regular hours and in the course of the passenger's employment. (California Vehicle Code 23224[b])

If the vehicle used in any violation of the two preceding subdivisions is registered to an offender who is under the age of 21 years, the vehicle may be impounded at the owner's expense for not less than one day nor more than 30 days for each violation. (California Vehicle Code 23224[c])

The driver's license of any person under 21 years of age convicted of a violation of this sanction shall also be suspended for not less than 15 days nor more than 30 days. (California Vehicle Code 23224[d])

Liability

A cause of action may be brought by or on behalf of any person who has suffered injury or death against any person licensed or required to be licensed, or any person authorized by the federal government to sell alcoholic beverages on a military base or other federal enclave, who sells, furnishes, gives or causes to be sold, furnished or given away any alcoholic beverage to any obviously intoxicated minor where the furnishing, sale or giving of that beverage to the minor is the proximate cause of the personal injury or death sustained by that person. (Business and Professional Code 25602.1)

False Identification

Any person under the age of 21 years who presents or offers to any licensee, his agent or employee, any written, printed or photostatic evidence of age and identity which is false, fraudulent or not actually his own for the purpose of ordering, purchasing, attempting to purchase or otherwise procuring or attempting to procure, the serving of any alcoholic beverage, or who has in his possession any false or fraudulent written, printed, or photostatic evidence of age and identity, is guilty of a misdemeanor and shall be punished by a fine of at least two hundred dollars (\$200), no part of which shall be suspended. (Business and Professional Code 25661)

Any person who sells, gives, or furnishes to any person under the age of 21 years any false or fraudulent written, printed, or

photostatic evidence of the majority and identity of such person or who sells, gives, or furnishes to any person under the age of 21 years evidence of majority and identification of any other person is guilty of a misdemeanor. (Business and Professional Code 25660.5)

Alcohol and Drug Education for Offenders

Any person found to have committed a violation of driving under the influence shall be required to participate in the alcohol education program. The court shall require the minor to participate in an alcohol education program or a community service program which provides an alcohol education component unless the court finds that the minor, or the minor's parent or parents, is unable to pay required fees for the program, there is no appropriate program located in the county, or other specific circumstances justify failure to impose this requirement. (California Vehicle Code 23141)

If the court finds it just and reasonable, the court may order the parent or parents of a minor who is ordered to participate in an alcohol education program or a community service program which provides an alcohol education component pursuant to this article, to pay the required fees for the program. (California Vehicle Code 23143)

MARIJUANA

Possession

Every person who possesses any concentrated cannabis shall be punished by imprisonment in the county jail for a period of not more than one year or by a fine of not more than five hundred dollars (\$500), or by both such fine and imprisonment, or shall be punished by imprisonment in the state prison. (Health and Safety Code 11357[a])

Every person who possesses not more than 28.5 grams of marijuana, other than concentrated cannabis, is guilty of a misdemeanor and shall be punished by a fine of not more than one hundred dollars (\$100). (Health and Safety Code 11357[a])

Every person who possess more than 28.5 grams of marijuana, other than concentrated cannabis, shall be punished by imprisonment in the county jail for a period of not more than six months or by a fine of not more than five hundred dollars (\$500), or by both such fine and imprisonment. (Health and Safety Code 11357[c])

Every person who possess for sale any marijuana except as otherwise provided by law, shall be punished by imprisonment in the state prison. (Health and Safety Code 11359)

Transportation

Every person who transports, imports into this state, sells, furnishes, administers, or gives away, or offers to transport, import into this state, sell, furnish, administer, or give away, or attempts to import into this state or transport any marijuana shall be punished by imprisonment in the state prison for a period for two, three, or four years. (Health and Safety Code 11360[a])

Every person who gives away, offers to give away, transports, offers to transport, or attempts to transport not more than

28.5 grams of marijuana, other than concentrated cannabis, is guilty of a misdemeanor and shall be punished by a fine of not more than one hundred dollars (\$100). (Health and Safety Code 11360[b])

PEYOTE

Every person who plants, cultivates, harvests, dries, or plants the genus *Lophophora*, also known as peyote, or any part thereof shall be punished by imprisonment in the county jail for a period of not more than one year in the state prison. (Health and Safety Code 11363)

INHALANTS

Sale

Every person who sells, dispenses or distributes toluene, or substance or material containing toluene, to any person who is less than 18 years of age shall be guilty of a misdemeanor, and upon conviction shall be fined a sum of not less than one thousand dollars (\$1,000), nor more than two thousand five hundred (\$2,500), or by imprisonment for not less than six months nor more than one year. (Penal Code 380[a])

The provisions of this section (inhalants) shall apply to, but are not limited to, the sale or distribution of glue, cement, dope, paint thinners, paint, and any combination of hydrocarbons either alone or in combination with any substance or material including, but not limited to paint, paint thinners, shellac thinners, and solvents, which when inhaled, ingested or breathed, can cause a person to be under the influence of, or intoxicated from, any such combination of hydrocarbons.

This section (inhalants) shall not apply to any glue or cement which has been certified by the State Department of Health Services as containing a substance which makes such glue or cement malodorous or causes such glue or cement to induce sneezing, nor shall this section apply where the glue or cement is sold, delivered, or given away simultaneously with or as a part of a kit used for the construction of model airplanes, model boats, model automobiles, model trains, or other similar models used for the assembly or creation of hobby craft items, using such components as beads, tiles, Tiffany glass, ceramics, clay, or other craft-related components. (Penal Code 380[d])

Inhaling

Any person who possesses toluene or any substance or material containing toluene, including, but not limited to, glue, cement, dope, paint thinner, paint and any combination of hydrocarbons, either alone or in combination with any substance or material including but not limited to paint, paint thinner, shellac thinner and solvents, with the intent to breathe, inhale or ingest for the purpose of causing a condition of intoxication, elation, euphoria, dizziness, stupefaction, or dulling of the senses or for the purpose of, in any manner, changing, distorting or disturbing the audio, visual or mental processes, or who knowingly and with the intent to do so is under the influence of toluene or any material containing toluene, or any combination of hydrocarbons is guilty of a misdemeanor. (Penal Code 381[a])

Nitrous Oxide

Any person who possesses nitrous oxide or any substance containing nitrous oxide, with the intent to breathe, inhale, or ingest for the purpose of causing a condition of intoxication, elation, euphoria, dizziness, stupefaction, or dulling of the senses or for the purpose of, in any manner, changing, distorting, or disturbing the audio, visual, or mental processes, or who knowingly and with the intent to do so is under the influence of nitrous oxide or any material containing nitrous oxide is guilty of a misdemeanor. This section shall not apply to any person who is under the influence of nitrous oxide or any material containing nitrous oxide pursuant to an administration for the purpose of medical, surgical, or dental care by a person duly licensed to administer such an agent. (Penal Code 381[b])

NARCOTICS AND DANGEROUS DRUGS

Possession

Every person who possesses any controlled substance, unless upon the written prescription of a physician, dentist, podiatrist, or veterinarian licensed to practice in this state, shall be punished by imprisonment in the state prison. (Health and Safety Code 11350[a])

Every person who possesses for sale any controlled substance shall be punished by imprisonment in the state prison for two, three, or four years. (Health and Safety Code 11351)

Providing

Every person who transports, imports into this state, sells, furnishes, administers, or gives away, or offers to transport, import into this state, sell, furnish, administer, or give away, or attempts to import into this state or transport any controlled substance, unless upon the written prescription of a physician, dentist, podiatrist, or veterinarian licensed to practice in the state, shall be punished by imprisonment in the state prison for three, four, or five years. (Health and Safety Code 11352)

Every person who agrees, consents, or in any manner offers to unlawfully sell, furnish, transport, administer, or give any controlled substance, or who offers, arranges, or negotiates to have any such controlled substance unlawfully sold, delivered, transported, furnished, administered, or given to any person and who then sells, delivers, furnishes, transports, administers, or gives, offers, arranges, or negotiates to have sold, delivered, transported, furnished, administered, or given to any person any other liquid substance, or materials in lieu of any such controlled substance shall be punished by imprisonment in the county jail for not more than one year, or in the state prison. (Health and Safety Code 11355)

Driving

It is unlawful for any person who is addicted to the use of any drug to drive a vehicle. The section (driving) shall not apply to a person who is participating in a methadone maintenance treatment program. (California Vehicle Code 23152[c])

DRUG PARAPHERNALIA

It is unlawful to possess an opium pipe or any device, contrivance, instrument, or paraphernalia used for unlawfully

injecting or smoking a controlled substance. (Health and Safety Code 11364)

It is a misdemeanor for any person to deliver, furnish, or transfer, or to possess with intent to deliver, furnish, or transfer, or to manufacture with intent to deliver, furnish, or transfer, drug paraphernalia, knowing, or under circumstances where one reasonably should know, that it will be used to plant, propagate, cultivate, grow, harvest, manufacture, compound, convert, produce, process, prepare, test, analyze, repack, store, contain, conceal, inject, ingest, inhale, or otherwise introduce into the human body a controlled substance in violation of this division. (Health and Safety Code 11364.7[a])

Any person 18 years of age or over who violates the foregoing subdivision by delivering, furnishing, or transferring drug paraphernalia to a person under 18 years of age who is at least three years his or her junior is guilty of a misdemeanor and upon conviction may be imprisoned for not more than one year, fined not more than one thousand dollars (\$1,000) or by both. (Health and Safety Code 11364.7[b])

PRESENCE WHERE DRUGS ARE BEING USED

It is unlawful to visit or to be in any room or place where any controlled substances, or which narcotic drugs, are being unlawfully smoked or used with knowledge that such activity is occurring. (Health and Safety Code 11365)

DISORDERLY CONDUCT

Every person who commits the following act is guilty of disorderly conduct, a misdemeanor:

Who is found in any public place under the influence of intoxicating liquor, any drug, controlled substance, toluene, or any combination of any intoxicating liquor, drug, controlled substance, or toluene, in such a condition that he or she is unable to exercise care for his or her own safety or the safety of others, or by reason of his or her being under the influence of intoxicating liquor, any drug, controlled substance, toluene, or any combination of any intoxicating liquor, drug, or toluene, interferes with or obstructs or prevents the free use of any street, sidewalk, or other public way. (Penal Code 647[f])

IMITATIONS

Any person who knowingly manufactures, distributes, or Any person who knowingly manufactures, distributes, or possesses with intent to distribute, an imitation controlled substance is guilty of a misdemeanor and shall, if convicted, be subject to imprisonment for not more than six months in the county jail or a fine of not more than one thousand dollars (\$1,000), or both such imprisonment and fine. (Health and Safety Code 11680)

POSSESSION OF DRUGS WITHOUT A PRESCRIPTION

No person shall have in possession any controlled substance, except that furnished to such person upon the prescription

of a physician, dentist, podiatrist, or veterinarian. (Business and Professional Code 4230)

PROVIDING TO ATHLETES

Any coach, trainer, or other person acting in an official or nonofficial capacity as an adult supervisor for an athletic team consisting of minors under the age of 18 who sells, gives, or otherwise furnishes to any member of that team a diuretic, diet pill, or laxative with the intent that it be consumed, injected, or administered for any nonmedical purpose such as loss of weight or altering the body in any way related to participation on the team or league, is guilty of a misdemeanor. (Penal Code 310.2[a])

LOCAL SANCTIONS (OAKLAND)

Two Oakland Code provisions relate to drugs and alcohol. First, the Oakland Traffic Code provides:

It shall be unlawful for any person who is under the influence of intoxicating liquor or narcotic drugs to be in or about any vehicle to which he has right of access or control while such vehicle is in or upon any street or any other public place in the City of Oakland, unless the same is under the immediate control or operation of a person not under the influence of intoxicating liquor or narcotic drugs. (Oakland Traffic Code Section 109)

A first conviction for an infraction of Section 109 results in a fine not exceeding \$50.00. A second conviction within one year results in a fine not exceeding \$100.00, and a third or subsequent conviction within one year results in a fine not exceeding \$250.00.

- 1) on any public street, sidewalk, or other public way;
- 2) within fifty (50) feet of any public way while on private property open to public view without the express permission of the owner, or his agent, or the person in lawful possession thereof. (Oakland Municipal Code Section 3-4.21)

The penalty for violating this section is imprisonment in the county jail for not more than six months, a fine not more than \$500.00, or both.

SPECIFIC DRUGS AND THEIR EFFECTS

TOBACCO

The smoking of tobacco products is the chief avoidable cause of death in our society. Smokers are more likely than nonsmokers to contract heart disease—some 170,000 die each year from smoking-related coronary heart disease. Lung, larynx, esophageal, bladder, pancreatic, and kidney cancers also strike smokers at increased rates. Some 20 percent of cancer deaths (130,000 per year) are linked to smoking. Chronic obstructive lung diseases such as emphysema and chronic bronchitis are ten times more likely to occur among smokers than among nonsmokers.

Smoking during pregnancy also poses serious risks. Spontaneous abortion, preterm birth, low birth weights, and fetal and infant death are all more likely to occur when the pregnant woman/mother is a smoker.

Cigarette smoke contains some 4,000 chemicals, several of which are known carcinogens. Other toxins and irritants found in smoke can produce eye, nose, and throat irritations. Carbon monoxide, another component of cigarette smoke, combines with hemoglobin in the blood stream to form carboxyhemoglobin, a substance that interferes with the body's ability to obtain and use oxygen.

Perhaps the most dangerous substance in tobacco smoke is nicotine. Although it is implicated in the onset of heart attacks and cancer, its most dangerous role is reinforcing and strengthening the desire to smoke. Because nicotine is highly addictive, addicts find it very difficult to stop smoking. Of 1,000 typical smokers, fewer than 20 percent succeed in stopping on the first try.

Although the harmful effects of smoking cannot be questioned, people who quit can make significant strides in repairing damage done by smoking. For pack-a-day smokers, the risk of heart attack dissipates after ten years. The likelihood of contracting lung cancer as a result of smoking can also be greatly reduced by quitting.

ALCOHOL

Alcohol consumption causes a number of marked changes in behavior. Even low doses significantly impair the judgment and coordination required to drive a car safely, increasing the likelihood that the driver will be involved in an accident. Low to moderate doses of alcohol also increase the incidence of a variety of aggressive acts, including spouse and child abuse. Moderate to high doses of alcohol cause marked impairments in higher mental functions, severely altering a person's ability to learn and remember information. Very high doses cause respiratory depression and death. If combined with other depressants of the central nervous system, much lower doses of alcohol will produce the effects just described.

Repeated use of alcohol can lead to dependence. Sudden cessation of alcohol intake is likely to produce withdrawal symptoms, including severe anxiety, tremors, hallucinations, and convulsions. Alcohol withdrawal can be life-threatening. Long-term consumption of large quantities of alcohol, particularly when combined with poor nutrition can also lead to permanent damage to vital organs such as the brain and the liver.

Mothers who drink alcohol during pregnancy may give birth to infants with fetal alcohol syndrome. These infants have irreversible physical abnormalities and mental retardation. In addition, research indicates that children of alcoholic parents are at a greater risk than other youngsters of becoming alcoholics.

CANNABIS

All forms of cannabis have negative physical and mental effects. Several regularly observed physical effects of cannabis are a substantial increase in the heart rate, blood-shot eyes, a dry mouth and throat, and increased appetite.

Use of cannabis may impair or reduce short-term memory and comprehension, alter sense of time, and reduce ability to perform tasks requiring concentration and coordination, such as driving a car. Research also shows that students do not retain knowledge when they are "high." Motivation and cognition may be altered, making the acquisition of new information difficult. Marijuana can also produce paranoia and psychosis.

Because users often inhale the unfiltered smoke deeply and then hold it in their lungs as long as possible, marijuana is damaging to the lungs and pulmonary system. Marijuana smoke contains more cancer-causing agents than tobacco smoke.

COCAINE

Cocaine stimulates the nervous system. Its immediate effects include dilated pupils and elevated blood pressure, heart rate, respiratory rate and body temperature. Occasional use can cause a stuffy or runny nose, while chronic use can ulcerate the mucous membrane of the nose. Injecting cocaine with contaminated equipment can cause AIDS, hepatitis, and other diseases. Preparation of freebase, which involves the use of volatile solvents, can result in death or injury from fire or explosion. Cocaine can produce psychological and physical dependency, a feeling that the user cannot function without the drug. In addition, tolerance develops rapidly.

Crack or freebase rock is extremely addictive, and its effects are felt within ten seconds. The physical effects include dilated pupils, increased pulse rate, elevated blood pressure, insomnia, loss of appetite, tactile hallucinations, paranoia, and seizures.

The use of cocaine can cause death by cardiac arrest or respiratory failure.

OTHER STIMULANTS

Stimulants can cause increased heart and respiratory rates, elevated blood pressure, dilated pupils, and decreased appetite. In addition, users may experience sweating, headache, blurred vision, dizziness, sleeplessness, and anxiety. Extremely high doses can cause a rapid or irregular heartbeat, tremors, loss of coordination and even physical collapse. An amphetamine injection creates a sudden increase in blood pressure that can result in stroke, very high fever, or heart failure.

In addition to the physical effects, users report feeling restless, anxious, and moody. Higher doses intensify the effects. Persons who use large amounts of amphetamines over a long period of time can develop an amphetamine psychosis that includes hallucinations, delusions, and paranoia. These symptoms usually disappear when drug use ceases.

DEPRESSANTS

The effects of depressants are in many ways similar to the effects of alcohol. Small amounts can produce calmness and relaxed muscles, but somewhat larger doses can cause slurred speech, staggering gait, and altered perceptions. Very large doses can cause respiratory depression, coma, and death. The combination of depressants and alcohol can multiply the effects of the drugs, thereby multiplying the risks.

The use of depressants can cause both physical and psychological dependence. Regular use over time may result in a tolerance to the drugs, leading the user to increase the quantity consumed. When regular users suddenly stop taking large doses, they may develop withdrawal symptoms ranging from restlessness, insomnia, and anxiety to convulsions and death.

Babies born to mothers who abuse depressants during pregnancy may be physically dependent on the drugs and show withdrawal symptoms shortly after they are born. Birth defects and behavioral problems also may result.

HALLUCINOGENS

Phencyclidine (PCP) interrupts the functions of the neocortex, the section of the brain that controls the intellect and keeps instincts in check. Because the drug blocks pain receptors, violent PCP episodes may result in self-inflicted injuries.

The effects of PCP vary, but users frequently report a sense of distance and estrangement. Time and body movement are slowed down. Muscular coordination worsens and senses are dulled. Speech is blocked and incoherent. Chronic users of PCP report persistent memory problems and speech difficulties. Some of these effects may last six months to a year following prolonged daily use. Mood disorders—depression, anxiety, and violent behavior—also occur. In later stages of chronic use, users often exhibit paranoid and violent behavior and experience hallucinations. Large doses may produce convulsions and coma, as well as heart and lung failure.

Lysergic acid (LSD), mescaline, and psilocybin cause illusions and hallucinations. The physical effects may include dilated pupils, elevated body temperature, increased heart rate and blood pressure, loss of appetite, sleeplessness, and tremors.

Sensations and feelings may change rapidly. It is common to have a bad psychological reaction to LSD, mescaline, and psilocybin. The user may experience panic, confusion, suspicion, anxiety and loss of control. Delayed effects, or flashbacks, may occur even after use has ceased.

NARCOTICS

Narcotics initially produce a feeling of euphoria that often is followed by drowsiness, nausea, and vomiting. Users also may experience constricted pupils, watery eyes, and itching. An overdose may produce slow and shallow breathing, clammy skin, convulsions, coma, and possible death.

Tolerance to narcotics develops rapidly and dependence is likely. The use of contaminated syringes may result in disease

such as AIDS, endocarditis, and hepatitis. Addiction in pregnant women can lead to premature, stillborn, or addicted infants who experience severe withdrawal symptoms.

DESIGNER DRUGS

Illegal drugs are defined in terms of their chemical formulas. To circumvent these legal restrictions, underground chemists modify the molecular structure of certain illegal drugs to produce analogs known as designer drugs. These drugs can be several hundred times stronger than the drugs they are designed to imitate.

Many of the so-called designer drugs are related to amphetamines and have mild stimulant properties but are mostly euphoricants. They can produce severe neurochemical damage to the brain.

The narcotic analogs can cause symptoms such as those seen in Parkinson's disease: uncontrollable tremors, drooling, impaired speech, paralysis, and irreversible brain damage. Analogs of amphetamines and methamphetamines cause nausea, blurred vision, chills or sweating, and faintness. Psychological effects include anxiety, depression, and paranoia. As little as one dose can cause brain damage. The analogs of phencyclidine cause illusions, hallucinations, and impaired perception.

ANABOLIC STEROIDS

Anabolic steroids are a group of powerful compounds closely related to the male sex hormone testosterone. Developed in the 1930s, steroids are seldom prescribed by physicians today. Current legitimate medical uses are limited to certain kinds of anemia, severe burns, and some types of breast cancer.

Taken in combination with a program of muscle-building exercise and diet, steroids may contribute to increases in body weight and muscular strength. Because of these properties, athletes in a variety of sports have used steroids since the 1950s, hoping to enhance performance. Today, they are being joined by increasing numbers of young people seeking to accelerate their physical development.

Steroid users subject themselves to more than 70 side effects, ranging in severity from liver cancer to acne and including psychological as well as physical reactions. The liver and the cardiovascular and reproductive systems are most seriously affected by steroid use. In males, use can cause withered testicles, sterility, and impotence. In females, irreversible masculine traits can develop along with breast reduction and sterility. Psychological effects in both sexes include very aggressive behavior known as "roid rage" and depression. While some side effects appear quickly, others such as heart attacks and strokes, may not show up for years.

Signs of steroid use include quick weight and muscle gains (if steroids are being used in conjunction with a weight-training program); behavior changes, particularly increased aggressiveness and combativeness; jaundice; purple or red spots on the body; swelling of feet or lower legs; trembling;

unexplained darkening of the skin; and persistent unpleasant breath odor. Steroids are produced in tablet or capsule form for oral ingestion, or as a liquid for intramuscular injection.

FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT OF 1974 (FERPA)

WHAT IS FERPA?

The *Family Educational Rights and Privacy Act of 1974* helps protect the privacy of student education records. The Act provides eligible students the right to inspect and review education records, the right to seek to amend those records and to limit disclosure of information from the records. The intent of the legislation is to protect the rights of students and to ensure the privacy and accuracy of education records. The Act applies to all institutions that are the recipients of federal aid administered by the Secretary of Education.

WHAT RIGHTS DOES FERPA AFFORD STUDENTS WITH RESPECT TO THEIR EDUCATION RECORDS?

- > The right to inspect and review their education records within 45 days of the day the University receives a request for access.
- > Students should submit written requests to the Office of the Registrar and identify the record(s) they wish to inspect. The staff of the office will make arrangements for access and notify the student of the time and place where the records may be inspected. If the requested records are not maintained in the Office of the Registrar, the student will be notified of the correct official to whom the request should be addressed.
- > The right to request an amendment to the student's education records that the student believes are inaccurate or misleading.
- > Students may ask the University to amend a record that they believe is inaccurate or misleading. They should write the Office of the Registrar or the specific office involved with the record in question (e. g. a department office regarding a grade), clearly identify the part of the record they want changed, and specify why it is inaccurate or misleading.
- > If the University decides not to amend the record as requested by the student, the University will notify the student of the decision and advise the student of his or her right to a hearing regarding the request for amendment. Additional information regarding the hearing will be provided to the student when notified of the hearing.
- > The right to consent to disclosures of personally identifiable information contained in the student's education records, except to the extent that FERPA authorizes disclosure without consent.
- > One exception which permits disclosure without consent is disclosure to school officials with legitimate educational

interests. A school official is: a person employed by the University in an administrative, supervisory, academic or research, or support staff position (including law enforcement unit personnel and health staff); a person or company with whom the University has contracted (such as an attorney, auditor, or collection agent); or a student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks.

A school official has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her professional responsibilities.

- > The right to file a complaint with the U. S. Department of Education concerning alleged failures by the University to comply with the requirements of FERPA. The name and address of the Office that administers FERPA is:

Family Policy Compliance Office

U. S. Department of Education

400 Maryland Ave., SW

Washington DC 20202-5901

WHO IS PROTECTED UNDER FERPA?

FERPA protects the education records of students who are currently enrolled or formerly enrolled regardless of their age or status with regard to parental dependency. The education records of students who have applied to but have not attended an institution are not subject to FERPA guidelines, nor are deceased students.

WHAT ARE EDUCATION RECORDS?

With certain exceptions (noted below), an education record is any record (1) which contains information that is personally identifiable to a student, and (2) is maintained by the University. With the exception of information about other students, financial records of parents and confidential letters of reference to which the student has waived access, a student has the right of access to his or her education records.

Education records include any records in whatever medium (handwritten, print, email, magnetic tape, film, diskette, etc.) that are in the possession of any school official. This includes transcripts or other records obtained from a school in which a student was previously enrolled.

WHAT INFORMATION IS NOT CONSIDERED PART OF AN EDUCATION RECORD?

- > Sole possession records or private notes held by school officials that are not accessible or released to other personnel.
- > Law enforcement or campus security records that are solely for law enforcement purposes and maintained solely by the law enforcement unit.

- > Records relating to individuals who are employed by the institution (unless contingent upon attendance).
- > Records relating to treatment provided by a physician, psychiatrist, psychologist or other recognized professional or paraprofessional and disclosed only to individuals providing treatment.
- > Records of an institution that contain only information about an individual obtained after that person is no longer a student at that institution, i.e., alumni records.

WHAT IS DIRECTORY INFORMATION?

Institutions may disclose information about a student without violating FERPA if it has designated that information as "directory information." At Samuel Merritt University this includes a student's:

- > Name
- > Field of study
- > Dates of attendance
- > Current enrollment status (full-time/part-time)
- > Receipt or non-receipt of a degree

WHO MAY HAVE ACCESS TO STUDENT INFORMATION?

- > The student and any outside party who has the student's written request.
- > School officials (as defined by the University) who have "legitimate educational interests."
- > A person in response to a lawfully issued subpoena or court order, as long as the University makes a reasonable attempt to notify the student first.

WHEN IS THE STUDENT'S CONSENT NOT REQUIRED TO DISCLOSE INFORMATION?

When the disclosure is (one or more of the following):

- > To school officials (defined in policy) who have a legitimate educational interest.
- > To federal, state and local authorities involving an audit or evaluation of compliance with educational programs.
- > In connection with financial aid; this includes Veterans' benefits.
- > To organizations conducting studies for or on behalf of educational institutions.
- > To accrediting organizations.
- > To comply with a judicial order or subpoena.
- > In a health or safety emergency.
- > Releasing directory information.
- > Releasing the results of a disciplinary hearing to an alleged victim of a crime of violence.

STUDENT'S RIGHT TO KNOW ACT OF 1990

Undergraduate student retention to graduation in the BSN program is as follows:

STUDENT RIGHT TO KNOW ACT OF 1990 FOUR-, FIVE-, AND SIX-YEAR RATES BY YEAR OF ENTRY

UNDERGRADUATE COHORT GRADUATION RATES

These data are for: **Entering cohorts in an academic year**

Year of Entry	Class Size Cohort	Percent Graduating Within		
		4 years or less	5 years	6 years
1981-1982	150	71%	71%	78%
1982-1983	99	58%	58%	68%
1983-1984	112	51%	51%	59%
1984-1985	90	67%	67%	76%
1985-1986	89	51%	51%	61%
1986-1987	44	57%	57%	59%
1987-1988	44	68%	68%	75%
1988-1989	71	63%	63%	72%
1989-1990	89	78%	78%	80%
1990-1991	123	87%	87%	87%
1991-1992	126	85%	85%	85%
1992-1993	135	87%	87%	89%
1993-1994	130	89%	89%	90%
1994-1995	133	86%	86%	86%
1995-1996	125	78%	78%	81%
1996-1997	105	85%	85%	90%
1997-1998	95	72%	72%	80%
1998-1999	87	89%	89%	89%
1999-2000	81	84%	84%	85%
2000-2001	80	88%	89%	89%
2001-2002	75	76%	76%	77%
2002-2003	123	80%	80%	80%
2003-2004	126	77%	77%	N/A
2004-2005	179	87%	N/A	N/A

FACULTY AND ADMINISTRATION

BOARD OF REGENTS

Thomas G. Drese, MA, Chair

Former Chair, Alta Bates Summit
Medical Center Board of Trustees

Member and Vice Chair, Sutter Health
East Bay Region Board of Trustees

Lifetime Trustee, Alta Bates Summit
Medical Center Foundation

Board Member, Sutter VNA and Hospice

Marilyn M. Snider, MSN, Vice Chair

President, Snider and Associates

David Bradley (ex-officio)

President, Sutter Health East Bay Region

Mary Brown

Member, Sutter Health Board of Directors

Former Chair, Alta Bates Summit Medical
Center Board of Trustees

Member, Holy Names University
Board of Trustees

Former Co-owner, Hills Newspapers

Sharon C. Diaz, PhD (hc), (ex-officio),

Secretary

President and CEO,
Samuel Merritt University

Former Chair, Head-Royce School
Board of Trustees

Former President, Ladies' Home
Society Board of Directors

Former Member, George Mark Children's
House Board of Directors

David Frey, JD

Chair, Board of Trustees of the Sutter
East Bay Medical Foundation

Member, Sutter Health East Bay
Region Board of Trustees

Partner, Foley McIntosh Frey & Claytor

Former Managing Partner,
San Jose SaberCats

Owen Garrick, MD

Chief Operating Officer and Director,
HOV Clinical Research

Member, Sutter Health East Bay Region
Board of Trustees

Cornelius L. Hopper, MD

Former Member, Alta Bates Summit
Medical Center Board of Trustees

Member, Sutter Health East Bay Region
Board of Trustees

Vice President for Health Affairs, Emeritus,
University of California

Teh-Wei Hu, PhD

Professor Emeritus of Health Economics,
University of California, Berkeley

Alvin McLean, Jr., PhD

CEO and Chairman, Comprehensive
Home and Companion Services (CHCS)

Gary Morrison, Esq.

Deputy General Counsel, Emeritus,
University of California

Albert E. Peters, CPA

Former Mayor, City of Piedmont

Charles Prosper, MSPT, MBA

President and CEO, Alta Bates Summit
Medical Center

John Swartzberg, MD, FACP

Clinical Professor, University of California,
Berkeley, School of Public Health

Chair, Editorial Board, UC Berkeley
Wellness Letter

OFFICE OF THE PRESIDENT

Sharon C. Diaz, PhD (hc)

President and Chief Executive Officer

BS, San Jose State University; MS, University
of California, San Francisco; PhD, (Honorary),
Saint Mary's College of California

Stephanie R. Bangert, MLS

Executive Director of Communications
and External Relations

BA, MLS, University of California, Berkeley

Elaine M. Lemay, MHROD

Executive Director of Human Resources

BA, MHROD, University of
San Francisco, California

Shirley Strong, MEd

Chief Diversity Officer

BA, University of Nebraska, Lincoln; MEd,
University of Illinois, Urbana-Champaign

Cynthia Ulman, MBA

Executive Director of Planning
and Business Development

BA, Wesleyan University; MBA,
Stanford University

Susan A. Valencia, CFRE

Executive Director of Development
and Chief Development Officer

BA, California State University, Hayward

Lillian Harvin

Director of Construction and
Campus Development

Carla R. Ross

Director of Alumni Affairs and
Associate Director of Development

Judi Baker, BA

Associate Director of Web
Communications and Social Media

BA, University of New Mexico

Justin Berton, BA

Associate Director of Media Relations
and News

BA, San Francisco State University

Rye Huber, PhD, RN

Associate Director of Alumni Affairs and
Development for the School of Nursing
and Assistant Professor, Nursing

Margrette Peterson

Assistant to the President

Alejandro Rodriguez, BA

Assistant to the Executive Director,
Office of the President

BA, Saint Mary's College of California

Pamela Carrasco

Administrative Assistant,
Diversity and Inclusion

Gena Caya

Administrative Assistant,
Development and Alumni Affairs

Maria Salas

Human Resources Generalist

ACADEMIC ADMINISTRATION**Scot D. Foster, PhD**

Academic Vice President & Provost

Penny Bamford, PhD, RN

Assistant Academic Vice President

Terrence Nordstrom, EdD, PT, FNAP

Assistant Academic Vice President

Valerie Landau, MA

Assessment Director and Assistant Professor
BA, University of California, Santa Cruz; MA,
San Francisco State University

Jamie Sue Hirota, MPA

Assistant to the Academic Vice President

BA, Barnard College of Columbia University,
New York; MPA Golden Gate University,
San Francisco, California

Veronica Paniagua, BS

Executive Administrative Assistant

BS, California State University, Hayward

Amy Anderson, BA

Special Projects Coordinator

BA, Mills College, Oakland, California

**HEALTH SCIENCES
SIMULATION CENTER****Celeste Villanueva, MS, CRNA**

Director, Health Sciences Simulation Center
and Assistant Professor

Kevin Archibald

Administrative Assistant

Josh Campbell, BA

Lab Coordinator

AA, Diablo Valley College; BA,
San Francisco State University

Adelina Gage-Kelly, MS, RN, NP

Simulation Coordinator, Health Sciences
Simulation Center

Assistant Professor, Nursing

Kevin Reilly, MSN, RN

Simulation Technologist

BSN, University of San Francisco,
California; MSN, Holy Names University,
Oakland, California

William Stiers, MD

Simulation Specialist and Assistant Professor

Jeanette Wong, MPA, RN

Operations Manager, Health Sciences
Simulation Center

Assistant Professor, Nursing

**INSTITUTIONAL RESEARCH
AND EVALUATION****Nandini Dasgupta, MA**

Director of Institutional Research
and Evaluation

BS, Fergusson College; MA,
Madras University

**JOHN A. GRAZIANO MEMORIAL
LIBRARY AND ACADEMIC AND
INSTRUCTIONAL INNOVATION****Hai-Thom Sota, MLIS**

Director

BA, Mills College; MLIS,
San Jose State University

Geri Bodeker, MS

Librarian, San Francisco Peninsula
Learning Center

BA, Saint Mary's College of California; MS,
San Francisco State University; MLIS,
San Jose State University

Joana Fuentes-Garcia, BA

Library Technician

BA, Mills College

Daniel Grobani, BS

Library Technology Specialist

BS, University of Maryland, College Park

Huyen Ho, BS, RN

Serials and Access Services Manager

BSN, Samuel Merritt College

Monique Pinkney, MEd

Senior Instructional Designer

BS, California State University, Hayward;
MEd, California State University, East Bay

Barbara Ryken, MLS

Marketing and Outreach Librarian

BA, State University of New York,
Binghamton

MLS, San Jose State University

Jennifer Scolari, MLIS

Librarian, Sacramento Regional
Learning Center

BA, San Francisco State University

MLIS, San Jose State University

Debbie Sommer, MLS

Librarian

BA, University of California, Berkeley

MLS, San Jose State University

SCHOOL OF NURSING**Audrey Berman, PhD, RN**

Dean and Professor

Arlene Sargent, EdD, RN

Associate Dean for Graduate Nursing
Programs and Professor

Nancy Smith Haugen, PhD, RN

Associate Dean for Prelicensure Nursing
Programs and Associate Professor

Kenneth Boxton, MS

Assistant Dean of Operations

BS, San Jose State University; MS,
University of San Francisco, California

Aara Amidi-Nouri, PhD, RN

Chair, BSN and Associate Professor

Fusae Kondo Abbott, DNSc, RN

Director, Case Management
and Professor

Marc Code, DNP, CRNA

Director, Program of Nurse Anesthesia
and Assistant Professor

Michelle DeCoux Hampton, PhD, RN

Director, Doctor of Nursing Practice
Program and Associate Professor

Teresa Gwin, EdD, RN, GNP-C

Director, ELMSN Prelicensure Program
and Assistant Professor

Rhonda Ramirez, EdD, FNP-BC

Director, Family Nurse Practitioner
Program and Associate Professor

Kristine Blanco

Recruitment Assistant

Sabine Branscum

Administrative Assistant, Sacramento
Regional Learning Center

Alexandra Crowder, BA

Project Coordinator

BA, University of Oregon

Karin Fomsgaard

Bay Area Clinical Coordinator

Christina Gray, BA

Administrative Assistant, Oakland Campus

BA, San Francisco State University

Alicia Herrera

Administrative Assistant, Oakland Campus

Karin Kasper

Administrative Assistant, San Francisco
Peninsula Learning Center

Adriane Kiefling, MAEd

Instructional Online Teaching Specialist
Oakland Campus

Karen Lane, BA

Program Manager,
Program of Nurse Anesthesia

BA, California State University, Hayward

Kasie Lemmer

Administrative Assistant for
Clinical Coordination

Gladys Mecum, MPA

Assistant to the Dean

BS, California State University, Hayward;
MPA, California State University, East Bay

Joyce Salinger

Advanced Nursing Clinical
Practice Coordinator

Surinderjit Singh

Administrative Assistant, Oakland Campus

Nancy Stollon

Administrative Assistant, San Francisco Peninsula Learning Center

Marjorie Villanueva

Administrative Assistant, San Francisco Peninsula Learning Center

Veronica Wallace

Coordinator of Faculty Recruitment

OCCUPATIONAL THERAPY DEPARTMENT

Kate Hayner, EdD, OTR/L

Chair and Associate Professor

Drew Ward

Administrative Assistant

Occupational Therapy

PHYSICAL THERAPY DEPARTMENT

Nicole Christensen, PhD, PT, MAppSc

Co-Chair & Associate Professor

Rolando T. Lazaro, PhD, DPT, PT, GCS

Co-Chair & Associate Professor

Claudia Duenas

Administrative Assistant, Physical Therapy

PHYSICIAN ASSISTANT DEPARTMENT

Michael DeRosa, PhD, PA-C

Chair & Assistant Professor

Dawn Eaglin

Administrative Assistant, Physician Assistant

CALIFORNIA SCHOOL OF PODIATRIC MEDICINE

John Venson, DPM

Dean and Professor, Podiatric Surgery

Irma Walker-Adamé, MS

Associate Dean for Administrative Affairs
BM, DePaul University, Chicago, Illinois;
MS, California College of Podiatric Medicine,
San Francisco

Eric Stamps, DPM

Associate Dean for Clinical Affairs
Assistant Professor, Medicine

Bruce Richardson, PhD

Associate Dean for Preclinical Affairs
Professor, Preclinical Sciences

Cherri Choate, DPM

Director of Curriculum Development
Assistant Professor, Applied Biomechanics

Elena Sanchez, MS

CSPM Administrative Assistant
Adjunct Instructor, Medicine

Kathleen Edmunds, BS, PT

CSPM Clinical Research Assistant
BS, Cleveland State University, Ohio

Erica Lewis

Clinical Affairs Administrative Assistant

FINANCE AND ADMINISTRATION

Gregory Gingras, MSB, CMA, CFM

Vice President for Finance and Administration and CFO

DEC (Diplome des Études Collégiales), Vanier College, Montreal, Canada; BAdmin, Concordia University, Montreal, Canada; MSB, Husson College, Bangor, Maine

Joy Smith

Assistant to the Vice President for Finance and Administration and CFO

Ronda Garrett, AS

Contract Specialist

AS, Southwestern Michigan College, Dowagiac

Peggy Griffith, BS

Budget Director

BS, University of Richmond, Virginia

FINANCIAL SERVICES

Jill Emerson, MBA

Finance Director

BA, College of St. Catherine, St. Paul, Minnesota; MBA, St. Thomas University, St. Paul, Minnesota

Corine Harris, BS

Accounting Manager

BS, California State University, Fresno

Jennifer Nguyen, BS

General Fund Accountant

BS, California State University, East Bay

Loida Stewart, BS

Audit and Reporting Specialist

BS, University of Negros Occidental—Recoletos, Bacolod City, Philippines

Markcus Thomas, BS

General Fund Accountant

BS, California State University, Hayward

Shun Y. Wu, BA

General Accountant

BA, San Francisco State University

Tami Bechtle

Bursar

Sheryl DeGuzman

Student Accounts Coordinator

Andrea Medakovic

Business Office Specialist

Terrisia Robinson

Student Loan Coordinator

Rodney Tse

Business Accounting Specialist

Asha Williams, BS

Business Office Technician
BS, California State University, Hayward

FACILITIES

Maurice Borden

Facilities Manager

Cassandra Atkins

Access Coordinator

Annie Fowler

Administrative Assistant

Julie Poteet

HEC Coordinator

Byron Weston

Facilities Coordinator

Dora Derma

Housekeeping Aid

INFORMATION TECHNOLOGY SERVICES

Blair Simmons, MS

Director of Information Technology Services

BA, University of California, Santa Barbara;
MS, University of San Francisco, California

Sean Crooks, AA

Desktop Support Technician

AA, Cuesta College

Mary Grefal, BS

IT Program Coordinator

BS, University of the East, Manila, Philippines

Marvin Lee, BS

Web Application Developer

BS, San Francisco State University

Paul Monegas, BS

Desktop and Technical Support Technician

BS, San Jose State University

Jacqueline Peter, BA

Senior Applications Systems Analyst

BA, State University of New York, Oswego

Tal Schrey, AS

Desktop and Technical Support Technician

AS, San Francisco State University

Michael Tam, BS

Web Designer

AS, City College of San Francisco; BS,
San Francisco State University

Marcus Walton, MSITM

Manager of Information Technology Services

BS, University of Phoenix; MSITM, Golden Gate University, San Francisco, California

Thatcher Wright, BA

Systems Network Administrator

BA, North Carolina School of the Arts

MEDIA SERVICES

Joseph Bay, BA

Technical Services Specialist
BA, San Francisco State University

Marcus Bruno, BA

Media Services Technician
BA, Academy of Art University,
San Francisco, California

Kristen “Kam” McCowan, BS

Simulation & Technology
Services Technician
BS, Harvey Mudd College,
Claremont, California

ENROLLMENT & STUDENT SERVICES

John Garten-Shuman, MA

Vice President of Enrollment &
Student Services

BS, California Baptist College, Riverside,
California; MA, Saint Mary's College of
California, Moraga

Craig M Elliott II, PhD

Assistant Vice President—
Enrollment and Student Services

BA, Saint Mary's College of California,
Moraga; MA, University of the Pacific,
Stockton, California; PhD, California Institute
for Integral Studies, San Francisco

Kathie McWilliams, BA

Assistant to the Vice President—
Enrollment & Student Services

BA, University of Washington

ACADEMIC AND DISABILITY SUPPORT SERVICES

Diane Hansen, MS

Director of Academic and Disability
Support Services

BA, Lone Mountain College, San Francisco;
MS, California State University, Hayward

Mark Abelson, MS

Academic Support Coordinator

BA, Vassar College, Poughkeepsie, NY; MS,
Queens College

ADMISSION

Timothy Cranford, MS

Dean of Admission

BS, MS, State University of New York
College at Buffalo

Ché Abram, MBA

Assistant Director of Admission and
Diversity Recruitment

BS, MBA, Holy Names University,
Oakland, California

Rosa Alvarado, MS

Admission Counselor

BA, San Francisco State University; MS,
Drexel University

Eugenia Berdali, MA

Admission Counselor

AA, Vakalo School of Graphic Design,
Athens, Greece; Teaching Credential, Hellenic
Ministry of Culture, Athens, Greece; BA, MA,
California State University, Hayward

Pam Harrison, BS, PT

Associate Director of Admission

BS, Ithaca College, New York

Lizzie Mayo, BA

Assistant Director of Admission and Student
Information System Manager

BA, California State University, Hayward

Anne Seed, MA

Associate Director of Admission

BA, MA, University of the Pacific,
Stockton, California

André Singleton, MS

Assistant Director of Admission, CSPM

BS, Western Michigan University, Kalamazoo,
Michigan; MS, Drexel University

David Tran, DPM, MS

Associate Director of Admission and
Assistant Professor, CSPM

BS, BA, San Francisco State University; DPM,
MS, California College of Podiatric Medicine,
San Francisco

CAMPUS SERVICE CENTER

Jenine Bagley

Student Services Assistant

LaTorri Johnson

Campus Service Center Assistant

Yurismary Llerena, AA

Campus Service Center Assistant

AA, College of Alameda

STUDENT HEALTH AND COUNSELING CENTER

Angelina Chau, DNP, FNP-C

Director of Student Health and Counseling

BS, California State University, Hayward;
MSN, Samuel Merritt College; DNP,
Duke University

Jeanne Zeamba, PsyD

Associate Director of Student Health
and Counseling

BA, University of California, Santa Barbara;
MA, PsyD, California School of Professional
Psychology/Alliant University

Anglyn Sasser, PsyD

Staff Psychologist

PsyD, California School of Professional
Psychology, San Diego, California

Latricia Maddox

Student Health and Counseling Coordinator

FINANCIAL AID

Tanya Grigg, AA

Director of Financial Aid

AA, Heald Colleges

Tari Witherspoon, BA

Associate Director of Financial Aid

BA, University of Michigan, Ann Arbor

Kristi Kindberg

Financial Aid Counselor

Adel Mareghni, MA

Financial Aid Counselor

BS, University of Tunis, Tunisia; MA,
San Francisco State University

Lily Ana Marquez, MPA

Financial Aid Counselor

BA, Holy Names University, Oakland,
California; MPA, California State University,
East Bay

Saeng Saepanh

Financial Aid Technician

Mary Hoang

Financial Aid Counselor

Ron Salazar, BA

Financial Aid Assistant

BA, University of California, Berkeley

REGISTRAR

Anne Scher, BA

Registrar

BA, California State University, Sacramento

Marie Ma, MA

Associate Registrar

BA, University of California, Berkeley;
MA, Golden Gate University,
San Francisco, California

Kimya Williams

Academic Records Coordinator

STUDENT SERVICES

Kathryn Ward, MFA

Assistant Director of Student Services

BA, University of California, Santa Barbara;
MFA, California College of the Arts

Dennis McReynolds, MA, RAS, CRPS

Coordinator of Student Services
and Veteran's Resources

Adjunct Assistant Professor, Nursing

BA, MA, Central Michigan University

Rachel Luna, MA

Student Services Coordinator—San
Francisco Peninsula Learning Center

BA, University of California, Berkeley; MA,
Bowling Green State University

Liza Osoteo, MA

Student Services Coordinator—Sacramento

BA, University of California, Berkeley; MA,
John F. Kennedy University

FACULTY

Fusae Kondo Abbott, DNSc, RN

Professor, Nursing & Program Director—
Case Management

MSN, University of Minnesota, Minneapolis;
DNSc, University of California, San Francisco

Deborah Africa, MPA, MA, RN

Instructor, Nursing

BA, State University of New York,
Binghamton; BSN, MPA,
University of San Francisco, California; MA,
Stanford University;

Patrick Aguiar, DPT, PT

Adjunct Instructor, Physical Therapy

BA, Dominican University of California,
San Rafael; DPT, Samuel Merritt University,
Oakland, California

Kamia Ahluwalia, PhD

Assistant Professor, Basic Sciences

BA, University of Toronto; MA, PhD, State
University of New York, Stony Brook

Diane Allen, PhD, PT

Adjunct Associate Professor,
Physical Therapy

BS, Certificate, University of California,
San Francisco; MS, University of North
Carolina, Chapel Hill, PhD, University of
California, Berkeley

Oscar Roberto Alvarez, BA

Adjunct Instructor

BA, University of Guadalajara

Aara Amidi-Nouri, PhD, RN

Associate Professor, Nursing and Chair, BSN

BA, Occidental College, Los Angeles,
California; BSN, Samuel Merritt College/Saint
Mary's College of California; MSN, Samuel
Merritt College, Oakland, California; PhD,
University of California, San Francisco

Chelsea Anjeski, DPT, PT

Adjunct Instructor, Physical Therapy

BS, University of Wisconsin, La Crosse; DPT,
Samuel Merritt University

Catherine Arima, MSN, FNP

Adjunct Instructor, Nursing

BSN, California State University, Long Beach;
MSN, University of California, San Francisco

Suzanne August, DNP, FNP

Adjunct Assistant Professor, Nursing

BSN, University of San Francisco; MSN,
University of California, San Francisco, DNP,
Rush University

Kelly Baird, DPT, PT

Adjunct Instructor, Physical Therapy

BS, California Polytechnic State University,
San Luis Obispo; DPT, Samuel Merritt
University, Oakland, CA

Penny Bamford, PhD, RN

Associate Professor, Nursing and Assistant
Academic Vice President

BSN, University of Virginia, Charlottesville;
MSN, Texas Women's University, Dallas; PhD,
Adelphi University, Garden City, New York

Joan Bard, DEd, RN

Associate Professor, Nursing

BS, University of Pennsylvania, Philadelphia;
MSN, DEd, Pennsylvania State University,
University Park

Brandy Beazley, MSN, RN

Instructor, Nursing

BA, San Francisco State University; MSN,
University of California, San Francisco

Audrey Berman, PhD, RN, AOCN

Professor and Dean, Nursing

BS, MS, PhD, University of California,
San Francisco

Roberta Block, MS, RN, CS

Assistant Professor, Nursing

AA, Pace University, New York City; BA, City
University of New York; BS, MS, University of
California, San Francisco; CS, University of
California, San Diego

Ora Bollinger, MSN, CRNA

Instructor, Nursing

BSN, California State University, Chico; MSN,
Samuel Merritt College, Oakland, California

John C. Bolton, MD

Adjunct Assistant Professor, Department of
Medicine, CSPM

BA, University of Virginia; MD, Duke
University School of Medicine

Elmare Botha, MSN, RN

Assistant Professor, Nursing

B.Soc.Sc, BA, University of the Free State,
South Africa; MSN, University of California,
San Francisco

Collin Bowman-Woodall, MS, RN

Assistant Professor, Nursing

BSN, Florida State University, Tallahassee;
MS, University of California, San Francisco

Benjamin Boyd, DPTSc, PT, OCS

Associate Professor, Physical Therapy

BA, University of California, Santa Cruz;
MS, DPTSc, University of California,
San Francisco

Donna Breger Stanton, OTD, OTR/L, CHT, FAOTA

Professor and Academic Fieldwork
Coordinator, Occupational Therapy

BS, San Jose State University; MA, University
of Southern California, Los Angeles; OTD,
Thomas Jefferson University

Patricia Brennan, PhD, RN

Associate Professor, Nursing

Paul C. Samson Clinical Nursing
Professorial Chair

BA, BSN, Emory University, Atlanta,
Georgia; MSN, PhD, University of
California, San Francisco

Joseph F. Burkard, DNSc, CRNA

Adjunct Associate Professor, Nursing

BSN, George Mason University, Fairfax,
Virginia; MS, George Washington University,
Washington, DC; DNSc, University of
Tennessee, Knoxville

Loretta Camarano, PhD, RN

Assistant Professor, Nursing

BSN, Medical University of South Carolina,
Charleston; MA, Santa Clara University; PhD,
University of California, San Francisco

Susan Cantrell, MS, RN

Assistant Professor, Nursing

BSN, Indiana University of Pennsylvania,
Indiana, PA; MSN, University of San
Francisco, California

Maureen Cawley, PharmD

Adjunct Assistant Professor,
Physician Assistant

BS, San Francisco State University; PharmD,
University of the Pacific, Stockton, California

Douglas Chin, PA-C, FNP

Adjunct Instructor, Physician Assistant

AS, Merritt College, Oakland, California;
AS, Stanford University/Foothill College

Marion Chin, BA, PA-C

Adjunct Instructor, Physician Assistant

BA, University of California, Berkeley; PA
Certificate, Foothill College/
Stanford University Medical Center

Elizabeth Ching, MEd, OTR/L

Assistant Professor and Academic Fieldwork
Coordinator, Level I, Occupational Therapy

AA, Solano Community College, Suisun City,
California; BS, San Jose State University
MEd, San Francisco State University

Nicole Christensen, PhD, PT, MAppSc

Associate Professor, and Co-Chair,
Physical Therapy

BA, San Jose State University; BS, Certificate
—Physical Therapy, University of California,
San Francisco; MAppSc, PhD, University of
South Australia, Adelaide

Cherri Choate, DPM

Assistant Professor, Department of Applied
Biomechanics and Director of Curriculum
Development, CSPM

BS, Northwest Nazarene College; DPM, MS,
California College of Podiatric Medicine,
San Francisco

Joel R. Clark, DPM, MS

Professor, Department of Podiatric
Surgery, CSPM

BA, Chapman University, Orange, California;
BS, MS, DPM, California College of Podiatric
Medicine, San Francisco

Marc E. Code, DNP, CRNA

Assistant Professor, Nursing and Director,
Program of Nurse Anesthesia

Diploma, LAC-USC Medical Center; BS,
California State University, Fresno; Certificate
in Anesthesia, Southwest Missouri State
University, Springfield; MSN, Samuel Merritt
College; DNP, Samuel Merritt University

Catherine Coffey, MSN, RN

Instructor, Nursing

BA, Saint Mary's College of California,
Moraga, Diploma, MSN,
Samuel Merritt College

Mary Conaghan, MSN, FNP

Adjunct Instructor, Nursing

BSN, California State University, Fresno;
MSN, University of California, San Francisco

Elizabeth “Lili” Cook, MS, RN, PNPC

Assistant Professor, Nursing

Diploma, Samuel Merritt College, Oakland,
California; BA, University of California, Davis;
MS, University of California, San Francisco

Graciela Lopez Cox, MSN, RN

Assistant Professor, Nursing

BSN, Central State University, Wilberforce,
Ohio; MSN, University of the Incarnate Word,
San Antonio, Texas

Lynda Creighton, MS, CNS, RN

Instructor, Nursing

BSN, Rhode Island College, Providence; MS,
University of Rhode Island, Kingston

Terry Deane Dauwalder, DNP, FNP-BC

Assistant Professor, Nursing and Assistant
Director, FNP Program

BSN, MBA, MSN, University of Phoenix; DNP,
George Washington University

Christine deBelen-Wilson, MSN, FNP

Adjunct Instructor, Nursing

BSN, University of San Francisco; MSN,
University of California, San Francisco

Gail DeBoer, MS, RN

Adjunct Assistant Professor, Nursing

BSN, Alverno College, Milwaukee, Wisconsin;
MS, University of Minnesota, Minneapolis

Laura Dere, DPT, PT

Adjunct Assistant Professor,
Physical Therapy

BS, California Polytechnic State University,
San Luis Obispo; MSPT, DPT, University of
the Pacific, Stockton, California

Michael DeRosa, PhD, PA-C

Assistant Professor and Chair,
Physician Assistant

BA, Occidental College, Los Angeles,
California; PhD, University of California,
Los Angeles; MPH, MPA, Touro University

Cheri Dillon, PharmD

Adjunct Assistant Professor,
Physician Assistant

PharmD, University of the Pacific,
Stockton, California

Kevin Dolan, MSN, CRNA

Adjunct Instructor, Nursing

Diploma, Germantown Hospital and Medical
Center, School of Nursing; BSN, LaSalle
University, Philadelphia, Pennsylvania; MSN,
Samuel Merritt University

Timothy Dutra, DPM, MS

Assistant Professor, Department of
Applied Biomechanics, CSPM

BS, University of California, Davis; MS,
California State University, East Bay;
DPM, California College of Podiatric
Medicine, San Francisco

Valerie Dzubur, EdD, FNP

Associate Professor, Nursing

BSN, University of California, San Francisco;
MS/FNP, Sonoma State University, Rohnert
Park, California; EdD, University of San
Francisco, California

Margaret Rivero Early, PhD, RN

Associate Professor, Nursing

BSN, College of Notre Dame of Maryland,
Baltimore; MSN, PhD, University of Michigan,
Ann Arbor

Miriam Eisenhardt, MPH, RN

Assistant Professor, Nursing

BA, University of Pennsylvania, Philadelphia;
BSN, University of California, San Francisco;
MPH, University of California, Berkeley

Denten Eldredge, DPM

Assistant Professor, Department
of Medicine, CSPM

BS, Brigham Young University; DPM,
California School of Podiatric Medicine,
San Francisco

Craig M Elliott II, PhD

Assistant Professor and Assistant Vice
President—Enrollment and Student Services

BA, Saint Mary's College of California,
Moraga; MA, University of the Pacific,
Stockton, California; PhD, California Institute
for Integral Studies, San Francisco

Renè Engelhart, MS, RN

Assistant Professor, Nursing and
Managing Director, Sacramento Regional
Learning Center

BSN, University of Portland, Oregon; MS,
California State University, Sacramento

Alyssa Erikson, PhD, RN

Assistant Professor and Associate Managing
Director, San Francisco Peninsula Learning
Center, Nursing

BSN, California State University, Chico; MSN,
PhD, University of California, San Francisco

Joani Essenmacher, DPT, PT, OCS

Adjunct Assistant Professor,
Physical Therapy

BA, Albion College, Albion, Michigan; BS,
Northwestern University, Chicago, Illinois;
MS, Purdue University, West Lafayette,
Indiana; DPT, University of Southern
California, Los Angeles

Judith Fairchild, DPT, PT

Adjunct Assistant Professor,
Physical Therapy

MPT, Hahnemann University, Philadelphia,
Pennsylvania; DPT, University of Southern
California, Los Angeles

Michele Fixel, EdD, RN

Assistant Professor, Nursing

BS, University of Illinois, Chicago; MS,
University of Colorado, Denver; EdD,
University of San Francisco, California

Fredrick Feuchter, PhD

Professor and Chair, Basic Sciences

BS, MS, PhD, University of Iowa, Iowa City

Lynn Fisher, MSN, RN

Instructor, Nursing

AS, Santa Rosa Junior College; BSN,
California State University, East Bay; MSN,
Holy Names University, Oakland, California

Leslie Flynn, DNP, RN

Assistant Professor, Nursing

BSN, MSN, University of Phoenix, Arizona;
DNP, University of San Francisco, California

Amanda Forster, DPT, PT, NCS

Adjunct Instructor, Physical Therapy

BS, Gonzaga University, Spokane,
Washington; DPT, Samuel Merritt College,
Oakland, California

Scot D. Foster, PhD, CRNA, FAAN

Professor, Nursing & Academic Vice
President and Provost

BA, University of Kansas, Lawrence;
BSN, University of Kansas Medical Center,
Kansas City; MA, University of Missouri,
Kansas City; MS, Case Western Reserve
University, Cleveland, Ohio; PhD, University
of Kansas, Lawrence

Sylvia Fox, PhD, RN

Associate Professor, Nursing

BS, MS, California State University,
Los Angeles; PhD, University of California,
San Francisco

Adelina Gage-Kelly, MS, RN, NP

Assistant Professor, Nursing

Simulation Coordinator, Health Sciences
Simulation Center

BSN, University of Maryland School of
Nursing, Baltimore; MS, University of
California, San Francisco

Jocelyn Garrick, MD, MSc

Adjunct Assistant Professor,
Physician Assistant

BA, University of California, Berkeley;
MD, University of Southern California,
Los Angeles, MSc, Cornell University

Randall Gee, PT

Adjunct Instructor, Physical Therapy

BA, University of California, Berkeley;
PT certification, Children's Hospital of
Los Angeles

Ginny Gibson, OTD, OTR/L, CHT

Assistant Professor, Occupational Therapy

AA, Ohlone College, Fremont, California; BS,
MS, San Jose State University; OTD, Rocky
Mountain University of Health Professions

Gordon Muir Giles, PhD, OTR/L, FAOTA

Professor, Occupational Therapy

BA, Warwick University, Great Britain;
Diploma, College of Occupational Therapists,
St. Andrew's University, Scotland; MA, PhD,
California School of Professional Psychology,
Berkeley/Alameda, California

Timothy Gilleran, DPTSc, PT, ATC

Adjunct Assistant Professor,
Physical Therapy

BA, California State University, Chico;
MPT, Mount St. Mary's College,
Los Angeles, California; DPTSc,
University of California, San Francisco

Carol Gilson, PhD

Associate Professor, Department of
Preclinical Sciences, CSPM

BA, PhD, University of California, Berkeley

Carol Gingery, MSN, RN

Assistant Professor, Nursing

Diploma, Samuel Merritt Hospital School
of Nursing; BS, MS, Holy Names College,
Oakland, California

Bernard Go, MSPT, PT, OCS

Adjunct Instructor, Physical Therapy

BS, San Francisco State University; MSPT,
San Francisco State University, University
of California, San Francisco

Jill Goldstein, MS, PA-C

Adjunct Assistant Professor,
Physician Assistant

BS University of California, San Diego; MS,
George Washington University

Sharon Gorman, DPTSc, PT, GCS, FNAP

Associate Professor, Physical Therapy

BS, Mount Saint Mary's College, Los
Angeles, California; MS, San Francisco
State University; DPTSc, University
of California, San Francisco

C. Keith Greer, JD

Adjunct Professor, Department
of Medicine, CSPM

BA, University of Washington; JD,
California Western School of Law

Susan Grieve, DPT, PT, OCS

Assistant Professor, Physical Therapy

BA, University of California, Davis; MS,
University of Oregon; MPT, Samuel Merritt
College, Oakland, California, DPT, Temple
University, Philadelphia, Pennsylvania

Teresa Gwin, EdD, RN, GNP-C

Assistant Professor, Nursing and Director,
ELMSN Prelicensure Program

AA, Napa Community College, Napa,
California; BSN, California State University,
Dominguez Hills; MSN, GNP-C, University
of California, San Francisco; EdD,
Walden University

Kevin Hamby, MSN, CRNA

Instructor, Nursing

BS, University of Utah, Salt Lake City; MSN,
Samuel Merritt College, Oakland, California

Marjorie Hammer, MSN, FNP

Assistant Professor, Nursing

BA, State University of New York, Buffalo;
ASN, Merritt College; MSN, FNP, Sonoma
State University

Sarah Hampson, MS, RN

Assistant Professor, Nursing

BS, University of Portland, Oregon; MS,
University of California, San Francisco

Michelle DeCoux Hampton, PhD, RN

Associate Professor, Nursing and Director,
Doctor of Nursing Practice Program

BA, University of Southern California, Los
Angeles; MSN, PhD, University of California,
San Francisco

Jason Hardage, DScPT, DPT, PT, GCS, NCS

Adjunct Assistant Professor,
Physical Therapy

BA, University of Mississippi; MS, DScPT,
University of Alabama, Birmingham; DPT,
University of Montana

Carisa Harris-Adamson, PhD, PT, CIE

Assistant Professor, Physical Therapy

BS, Tufts University; MS, University of
California, San Francisco/San Francisco
State University; MA, San Francisco
State University; MS, PhD, University
of California, Berkeley

Nancy Smith Haugen, PhD, RN

Associate Professor, Nursing and Associate
Dean for Prelicensure Nursing Programs

AS, BS, Southern Adventist University,
Collegedale, Tennessee; MN, Louisiana
State University, New Orleans; PhD,
University of Florida, Gainesville

Reena Haymond, DNP, FNP

Assistant Professor, Nursing

BS, University of California, Davis; MSN,
Samuel Merritt College, Oakland, California;
DNP, Samuel Merritt University

Kate Hayner, EdD, OTR/L

Associate Professor and Chairperson,
Occupational Therapy

BA, BS, Western Michigan University,
Kalamazoo, Michigan; MA, Eastern Illinois
University, Charleston, Illinois; EdD,
University of San Francisco, California

Kelly Health, MPA, PA-C

Adjunct Assistant Professor,
Physician Assistant

BA, University of Hawaii, Honolulu; MPA,
Samuel Merritt College, Oakland, California

Joseph W. Hewitson, DPM

Assistant Professor, Department of
Applied Biomechanics, CSPM

BA, MA, San Francisco State University;
DPM, California College of Podiatric
Medicine, San Francisco

Charles I. Hoover, PhD

Adjunct Associate Professor, Department
of Preclinical Sciences, CSPM

BA, MA, San Francisco State University; PhD,
University of California, San Francisco

Rye Huber, PhD, RN

Assistant Professor, Nursing and Associate
Director of Alumni Affairs and Development,
School of Nursing

Diploma, Samuel Merritt College, Oakland,
California; BSN, MSN, University of California,
San Francisco; BA, University of California,
Berkeley; MA, PhD, California Institute of
Integral Studies, San Francisco

Michael Huie, MD, PhD

Adjunct Assistant Professor, Department
of Medicine, CSPM

BA, Columbia University, New York; MD, PhD,
University of Florida, Gainesville

William J. Isenberg, MD, PhD

Adjunct Assistant Professor,
Physician Assistant

BS, University of Michigan, Ann Arbor; PhD,
MD, University of California, San Francisco

Joseph Janakes, MSN, CRNA

Instructor, Nursing and Associate Director,
Program of Nurse Anesthesia

BA, University of California, Davis; MSN,
Samuel Merritt College, Oakland, California

William M. Jenkin, DPM

Professor, Department of Podiatric
Surgery, CSPM

BS, DPM, California College of Podiatric
Medicine, San Francisco

Diana Jennings, PhD, RN

Assistant Professor, Nursing and Associate
Managing Director, San Francisco Peninsula
Learning Center

Diploma, Samuel Merritt Hospital School
of Nursing; BS, California State University,
Dominguez Hills; MS, PhD, University of
California, San Francisco

Garry Johnson, MSN, RN

Adjunct Assistant Professor, Nursing

BSN, University of British Columbia,
Vancouver; MSN, University of Phoenix

Leonard Kaku, DNP, RN, CFNP

Assistant Professor, Nursing

BA, San Francisco State University; BS, MS,
University of California, San Francisco; FNP
Certificate, San Francisco State University;
DNP, Samuel Merritt University

Deborah Kalish, MPH, RN

Assistant Professor, Nursing

BSN, Mount Saint Mary's College, Los
Angeles, California; MPH, University of
California, Los Angeles

Karen Kelly, MPH, RN

Adjunct Assistant Professor, Nursing

BSN, Creighton University, Omaha,
Nebraska; MPH, Johns Hopkins University,
Baltimore, Maryland

Bret Kennedy, DPT, PT

Adjunct Assistant Professor,
Physical Therapy

BS, California State University, Hayward;
MPT, Chapman University, Orange,
California, DPT, A.T. Still University

Margaret Kirkham, MSN, FNP-C

Adjunct Instructor, Nursing and Clinical Coordinator, FNP Program

BA, University of California, Berkeley; MSN, Samuel Merritt College, Oakland, California

Chatra Klaisri, DPM

Adjunct Instructor, Department of Medicine, CSPM

BS, University of California, San Diego; DPM, California School of Podiatric Medicine at Samuel Merritt University

Patricia Kuster, PhD, RN

Instructor, Nursing

BSN, Boston University; MSN, Seton Hall University, South Orange, New Jersey; PhD, University of California, Los Angeles

Valerie Landau, MA

Assistant Professor and Assessment Director

BA, University of California, Santa Cruz; MA, San Francisco State University

Rolando T. Lazaro, PhD, DPT, PT, GCS

Associate Professor and Co-Chair, Physical Therapy

BSPT, University of the Philippines; MSPT, University of the Pacific, Stockton, California; DPT, Creighton University, Omaha, Nebraska; PhD, Touro University

Michael Leaver, MSN, RN

Assistant Professor, Nursing

AD, Merritt College, Oakland, California; BA, New College of California; MSN, University of California, San Francisco

Christina Lewis, PhD

Assistant Professor, Basic Sciences

BS, MS, PhD, Colorado State University, Ft. Collins

Julio Lopez, PharmD

Adjunct Assistant Professor, Nursing

BA, University of California, Los Angeles; PharmD, University of California, San Francisco

Richard MacIntyre, PhD, RN, FAAN

Professor, Nursing

BS, California State University, Sacramento; MS, PhD, University of California, San Francisco

S. Elena MacLachlan, MSN, RN

Instructor, Nursing

AS/Diploma, Camden Community College; BSN, Loyola University, New Orleans; MSN, University of California, San Francisco

Zarir Marawala, DPM

Adjunct Assistant Professor, Basic Sciences

BA, University of California, Berkeley; MA, University of San Francisco, California; DPM, California College of Podiatric Medicine, San Francisco

Joy L. Meier, PharmD, PA-C

Adjunct Assistant Professor, Physician Assistant

BSPA, University of Wisconsin; BS, PharmD, Philadelphia College of Pharmacy and Science

Jennifer McAdam, PhD, RN

Associate Professor, Nursing

BS, Minnesota State University, Mankato; MS, PhD, University of California, San Francisco

Deborah McBride, MSN, RN

Assistant Professor, Nursing

BA, MA, Ohio State University, Columbus; MS, University of California, Berkeley; MSN, Samuel Merritt College, Oakland, California

Guy L. McCormack, PhD, OTR/L, FAOTA

Professor, Occupational Therapy

BS, University of Puget Sound, Tacoma, Washington; MS, Ohio State University, Columbus; PhD, Saybrook University Graduate School, San Francisco, California

Janet Mekonnen, MSN, RN

Instructor, Nursing

BSN, BS, Bob Jones University, Greenville, South Carolina; MHA, Saint Mary's College of California, Moraga; MSN, Dominican University, San Rafael, California

Raji Menon, DNP, CRNA

Adjunct Assistant Professor, Health Sciences Simulation Center

BSN, Wayne State University, Detroit, Michigan; MSN, Samuel Merritt College, Oakland, California; DNP, Samuel Merritt University

Kevin Miller, DPM

Assistant Professor, Department of Podiatric Surgery, CSPM

BS, California State University, Dominguez Hills; DPM, California School of Podiatric Medicine at Samuel Merritt University

Pamela Minarik, PhD, RN, CNS, FAAN

Professor, Nursing

BSN, University of California, Los Angeles; MS, PhD, University of California, San Francisco

Predrag Miskin, DHSc, RN

Adjunct Assistant Professor, Nursing

BA, University of Sarajevo, Bosnia-Herzegovina; BSN, University of British Columbia, Vancouver; MSN, University of Phoenix; DHSc, A.T. Still University

Ajitha Nair, DPM

Assistant Professor, Department of Podiatric Surgery, CSPM

BS, University of Florida, Gainesville; MPH, Tufts University, Boston, Massachusetts; DPM, California School of Podiatric Medicine at Samuel Merritt University

Lori Naylor, MSN, RN

Instructor, Nursing

BSN, University of Phoenix, Sacramento, California; MSN, University of Phoenix

Michael Negrete, PharmD

Assistant Professor and Assistant Dean for Clinical Affairs, Pharmacy

BS, Massachusetts Institute of Technology; PharmD, University of California, San Francisco

Robert Noakes, DPT, PT

Adjunct Instructor, Physical Therapy

BS, California State University, Chico; DPT, Samuel Merritt University

Terrence Nordstrom, EdD, PT, FNAP

Associate Professor, Physical Therapy and Assistant Academic Vice President

BA, University of California, Santa Cruz; MA, Stanford University; EdD, University of San Francisco, California

Alyssa O'Brien, MS, RN

Instructor, Nursing

BS, MS, University of New Hampshire, Durham

Lauri Paolinetti, MPAS, PA-C

Assistant Professor, Physician Assistant

BA, University of the Redlands; PA certificate, Foothill College/Stanford University Medical Center; MPAS, University of Nebraska Medical Center, Omaha

Hanna Pepper, MS, GNP

Adjunct Assistant Professor, Nursing

BA, University of California, Berkeley; MA, John F. Kennedy University, Orinda, California; MS, University of California, San Francisco; GNP certificate, Oregon Health Sciences University, Portland

Jane Perlas, DNP, NP-C

Assistant Professor, Nursing

BSN, DNP, University of San Francisco, California; MSN, Samuel Merritt College, Oakland, California

Lorraine Petti, MPAS, PA-C

Assistant Professor, Physician Assistant

BS, Cornell University, Ithaca, New York; PA Certificate, Albany Medical College of New York, Albany; MPAS, University of Nebraska Medical Center, Omaha

Roger Phelps, MD

Adjunct Assistant Professor, Physician Assistant

BA, Carlton College, Minnesota; MD, Johns Hopkins University, Baltimore, Maryland

Erick Pierce, MSN, CRNA, PNP-AC

Instructor, Nursing

BS, Pennsylvania State University, University Park; MSN, University of California, San Francisco; Post-Master's certificate, Samuel Merritt University

Mary Premenko-Lanier, PhD

Assistant Professor, Basic Sciences

BS, California State University, Sacramento; PhD, University of California, Davis

Mindy Prestia, MS, RN, PHN

Adjunct Assistant Professor, Nursing

BSN, Samuel Merritt College, Oakland, California; MS, San Jose State University

Barbara Puder, PhD

Associate Professor, Basic Sciences

BS, University of Akron; PhD, Kent State University and Northeastern Ohio Universities College of Medicine

Shawn Purcell, MA

Adjunct Instructor, Physical Therapy and Occupational Therapy

BS, University of California, Davis; MA, Saint Mary's College of California, Moraga

Myika Ramirez, MSN, RN

Instructor, Nursing

BSN, Seton Hall University, South Orange, New Jersey; MSN, University of Pennsylvania

Rhonda Ramirez, EdD, FNP-BC

Associate Professor, Nursing and Director, FNP Program

BSN, San Francisco State University; MSN, Samuel Merritt College, Oakland, California; EdD, University of San Francisco, California

Gaye Raymond, DPT, PT

Assistant Professor and Director of Clinical Education, Physical Therapy

BS, MS, Sargent College, Boston, Massachusetts; DPT, Temple University, Philadelphia, Pennsylvania

Christine Reardon, MSN, RN

Adjunct Assistant Professor, Nursing

BA, University of the Pacific, Stockton, California; BSN, Oregon Health Sciences University; MSN, Dominican University

Cecily Reeves, PhD, FNP, PA-C, DFAAPA

Professor, Nursing

AS, Foothill College; PA Certificate, Foothill College/Stanford University Medical Center; BSN, California State University, Long Beach; FNP Certificate, University of California, Davis; MSN, PhD, University of California, San Francisco

Alexander Reyzelman, DPM

Associate Professor, Department of Medicine, CSPM

BS, University of San Francisco; DPM, California College of Podiatric Medicine, San Francisco

Roberta Richards, MA, RN

Instructor, Nursing

Diploma, St. Joseph's College of Nursing, San Francisco, California; BS, St. Joseph's College, North Windham, Maine; MA, John F. Kennedy University, Orinda, California

Bruce Richardson, PhD

Professor and Associate Dean, Preclinical Sciences, CSPM

BS, MS, San Diego State University, California; PhD, University of Arizona, Tucson

Johanna Richey, DPM

Adjunct Instructor, Department of Podiatric Surgery, CSPM

BS, Midwestern University; DPM, Midwestern University, Arizona School of Podiatric Medicine, Glendale

Richard Rocco, PhD

Associate Professor, Pharmacy

BA, University of Rhode Island, Kingston; MA, Bridgewater College, Bridgewater, Massachusetts; PhD, Northeastern University, Boston, Massachusetts

Maria Ronquillo, MS, RNC-OB

Instructor, Nursing

BS, University of the Philippines, Quezon City; MS, San Jose State University

Laurie Rosa, MS, RN

Assistant Professor, Nursing

BSN, MS, San Jose State University

David Rose, PhD, CRNA

Adjunct Assistant Professor, Nursing

AA, San Joaquin Delta Junior College; BSN, California State University, Fresno; MAEd, Gonzaga University/Sacred Heart Medical Center, Spokane, Washington; PhD, University of California, San Francisco

Monica Rosenthal, MD

Assistant Professor & Medical Director, Physician Assistant

BS, University of Chicago; MD, University of Illinois, Chicago

Reed Rowan, PhD

Adjunct Assistant Professor, Department of Preclinical Sciences, CSPM

BA, San Jose State University; PhD, University of California, Los Angeles

Janet Rowland, EdD, RN

Assistant Professor, Nursing

BSN, University of the State of New York, Albany; MSN, Samuel Merritt College, Oakland, California; EdD, Saint Mary's College of California

Angela Rusher, DPT, PT

Adjunct Assistant Professor, Physical Therapy

BS, University of California, Santa Barbara; DPT, Samuel Merritt University

Barbara Ryken, MLS

Assistant Professor and Reference Librarian

BA, State University of New York, Binghamton; MLS, San Jose State University

Elena Sanchez, MS

Adjunct Instructor, Department of Medicine, CSPM

BA, California State University, East Bay; MS, Saint Mary's College of California, Moraga

Arlene Sargent, EdD, RN

Professor, Nursing and Associate Dean for Graduate Nursing Programs

BA, College of St. Catherine, St. Paul, Minnesota; MSN, University of Minnesota, Minneapolis; EdD, Northern Illinois University, DeKalb

Kathryn Shade, PhD, RN

Assistant Professor, Nursing

BSN, San Francisco State University; MSN, Sacramento State University; PhD, University of California, San Francisco

Allyson Shapiro, DPT, PT

Adjunct Instructor, Physical Therapy

BS, University of Oregon, Eugene; DPT, Samuel Merritt University

Chi-Kwan Shea, PhD, OTR/L

Associate Professor, Occupational Therapy

BS, University of Texas Medical Branch, Galveston; MS, California State University, Los Angeles, PhD, University of California, Berkeley

Elizabeth Sibson-Tuan, MS, RN

Instructor, Nursing and Bay Area Clinical Coordinator-Prelicensure Programs

BS, University of Massachusetts; MS, University of California, San Francisco

Pam Silverman, OTR/L, CHT

Adjunct Assistant Professor, Occupational Therapy

BS, Mount Mary College, Milwaukee, Wisconsin

Nancy Smee, PhD, RN

Assistant Professor, Nursing

BS, San Jose State University; MS, PhD, University of California, San Francisco; MPH, University of California, Berkeley

Andrew (Drew) Smith, PhD

Professor and Director, Motion Analysis Research Center (MARC)

PhD, University of Waterloo, Canada

H. Paul Smith, PhD, RN

Assistant Professor, Nursing

Diploma, St. Vincent Charity Hospital and Health Center, Cleveland, Ohio; BS, University of Phoenix, San Francisco; MS, PhD, University of California, San Francisco

Renée Smith, MPH, CNM

Assistant Professor, Nursing

BSN, CNM, University of California, San Francisco; MPH, University of California, Berkeley

Donald Sokolski, MS, PT

Adjunct Instructor, Physical Therapy

BA, Occidental College, Los Angeles, California; MS, University of Southern California, Los Angeles

Eric Stamps, DPM

Assistant Professor, Department of Medicine and Associate Dean for Clinical Affairs, CSPM

BA, University of California, San Diego; DPM, California College of Podiatric Medicine, San Francisco

Cynthia Stange, BSN, RN, AHNP-C

Adjunct Assistant Instructor, CSPM

BSN, University of California, San Francisco

Canyon Steinzig, PhD, RN

Assistant Professor, Nursing

BSN, Samuel Merritt College, Oakland, California; PhD, University of California, San Francisco

Barbara Steuble, MS, RN, CPHQ

Adjunct Assistant Professor, Nursing

AS, College of San Mateo, California; BS, Sonoma State University, Rohnert Park, California; MS, University of California, San Francisco

Dana Stieglitz, MSN, FNP

Adjunct Instructor, Nursing
BSN, Biola University, La Mirada, California; MSN, California State University, Dominguez Hills

William Stiers, MD

Assistant Professor and Simulation Specialist, Health Sciences Simulation Center
BA, Illinois Wesleyan University, Bloomington; MD, Northwestern University

Katherine Sullivan, MSN, RN

Adjunct Instructor, Nursing
BSN, Samuel Merritt College, Oakland, California; MSN, University of California, San Francisco

Susan Sullivan, MSPT, PT

Adjunct Instructor, Physical Therapy
BS, University of Notre Dame, South Bend, Indiana; MSPT, University of California, San Francisco/San Francisco State University

Tana Summers, MS, PA-C

Assistant Professor, Physician Assistant
BS, Santa Clara University; MS, Baylor College of Medicine, Houston, Texas

Monico Tangaan, Jr., DPT, PT

Adjunct Assistant Professor, Physical Therapy
BS, California State University, Long Beach; MS, San Francisco State University and University of California, San Francisco; DPT, Regis University

Catherine Tanner, MSN, FNP-C

Adjunct Instructor, Nursing
BS, San Jose State University; MSN, Samuel Merritt College, Oakland, California

Gerald Thompson, MSN, RN

Assistant Professor, Nursing
BSN, Regents College, Albany, New York; MSN, San Jose State University

Stacie Thum, MSN, FNP

Adjunct Instructor, Nursing
BS, University of California, Davis; MSN, Samuel Merritt College, Oakland, California

David Tran DPM, MS

Assistant Professor, Department of Medicine, CSPM and Associate Director, Admission
BS, BA, San Francisco State University; MS, DPM, California College of Podiatric Medicine, San Francisco

Colin Traynor, DPM

Instructor, Department of Podiatric Surgery, CSPM
BS, Pennsylvania State University, University Park, Pennsylvania; DPM, California School of Podiatric Medicine at Samuel Merritt University

Tamera Valenta, MSN, FNP

Assistant Professor, Nursing
BSN, Statewide Nursing Program, Dominguez Hills, California; MSN, Samuel Merritt College, Oakland, California

Britt Van Hees, DPT, PT

Adjunct Instructor, Physical Therapy
BA, Point Loma Nazarene University; DPT, Samuel Merritt University

Christina Van Onselen, PhD, RN

Assistant Professor, Nursing
BSN, San Francisco State University; MS, PhD, University of California, San Francisco

John Venson, DPM

Professor, Podiatric Surgery and Dean, CSPM
DPM, Illinois College of Podiatric Medicine

Philip Villa, DPT, PT

Adjunct Instructor, Physical Therapy
BA, University of California, Berkeley; DPT, Samuel Merritt University

Celeste G. Villanueva, MS, CRNA

Assistant Professor, Nursing and Director, Health Sciences Simulation Center
BS, University of California, Irvine; BSN, University of California, San Francisco; MS, Columbia University, New York

Stacey Welcome, MPAS, PA-C

Adjunct Assistant Professor, Physician Assistant
BS, California Polytechnic State University, San Luis Obispo; MPAS, University of Iowa, Iowa City

Gail Widener, PhD, PT

Professor, Physical Therapy
BS, Texas Women's University, Denton; PhD, University of Kansas, Kansas City

Joni Williams, MSN, RN

Assistant Professor, Nursing
BSN, MSN, California State University, Sacramento

Jennifer Winters, MSN, RN, GNP-C

Adjunct Assistant Professor, Nursing
AA, Contra Costa Community College, San Pablo, California; BA, University of California, Irvine; MSN, GNP, University of California, San Francisco

Jeanette Wong, MPA, RN

Assistant Professor, Nursing and Operations Manager, Health Sciences Simulation Center
BS, University of San Francisco; MPA, University of Southern California, Los Angeles

William Wood, MPA, PA-C

Adjunct Assistant Professor, Physician Assistant
BS, University of California, Irvine; MPA, Samuel Merritt College, Oakland, California

James M. Yee, MD

Adjunct Assistant Professor, Physician Assistant
AB, Stanford University; MD, Stanford University School of Medicine

Rebecca Zachau, DPT, PT, OCS

Adjunct Instructor, Physical Therapy
BS, Sonoma State University; DPT, University of the Pacific, Stockton, California

Bennett G. Zier, MD

Professor, Department of Medicine, CSPM
BA, Hofstra University, New York; MD, State University of New York at Buffalo

Cheryl Zlotnick, DrPH, RN

Adjunct Associate Professor, Physician Assistant
BSN, University of Delaware; MS, Rush University, Chicago; MPH, DrPH, Johns Hopkins University, Baltimore, Maryland

Patricia Zrelak, PhD, RN

Adjunct Assistant Professor, Nursing
BSN, California State University, Sacramento; MS, San Francisco State University; PhD, University of California, Davis

CLINICAL FACULTY**Sireesha Battula, DPM**

Clinical Assistant Professor, CSPM

Richard Bouche, DPM

Clinical Assistant Professor, CSPM

Marcel Brysk, MD

Clinical Assistant Professor, Physician Assistant

Michael W. Cohen, MD, MPH

Clinical Affiliate Faculty, Physician Assistant

Nicholas Daly, DPM

Clinical Assistant Professor, CSPM

Howard Dananberg, DPM

Clinical Associate Professor, CPM

Bruce Dobbs, DPM

Clinical Professor, CSPM

Mark Drucker, DPM

Clinical Assistant Professor, CSPM

Annemarie Edwards, DPM

Clinical Assistant Professor, CSPM

Carrie Ewing, RN

Clinical Instructor, CSPM

Stephen Geller, DPM

Clinical Associate Professor, CSPM

Cynthia Gibson-Horn, PT

Clinical Instructor, Physical Therapy

Donald Golden, MD

Clinical Assistant Professor, Physician Assistant

Russ D. Granich, MD

Clinical Assistant Professor, Physician Assistant

Donald Green, DPM

Clinical Professor, CSPM

Douglas A. Hague, DPM

Clinical Instructor, CSPM

Michael Hattan, DPM

Clinical Assistant Professor, CSPM

John Hembree, DPM
Clinical Associate Professor, CSPM

Nan Hodge, DPM
Clinical Assistant Professor, CSPM

Scott Hoffinger, MD
Clinical Associate Professor,
Physician Assistant

Anthony Hoffman, DPM
Clinical Assistant Professor, CSPM

Arlen Hoh, MD, MPH
Clinical Assistant Professor,
Physician Assistant

Larry Huppín, DPM
Clinical Assistant Professor, CSPM

Najwa Javed, DPM
Clinical Instructor, CSPM

Richard Jones, DPM
Clinical Assistant Professor, CSPM

Molly S. Judge, DPM
Clinical Associate Professor, CSPM

Jeffrey Karlin, DPM
Clinical Assistant Professor, CSPM

Alona Kashanian, DPM
Clinical Instructor, CSPM

Jamie Kim, DPM
Clinical Instructor, CSPM

Kevin Kirby, DPM
Clinical Associate Professor, CSPM

Esther Kwon, DPM
Clinical Affiliate Faculty, CSPM

Javier LaFontaine, DPM
Clinical Assistant Professor, CSPM

Marie Lewandowski, MD
Clinical Assistant Professor,
Physician Assistant

Mark C. Margiotta, DPM
Clinical Assistant Professor, CSPM

Carolyn McAloon, DPM
Clinical Assistant Professor, CSPM

Lauri McDaniel, DPM
Clinical Assistant Professor, CPM

Edalyn Mendoza Ko, DPM
Clinical Assistant Professor, CSPM

Pronoti Nigam, MD, FAAP
Clinical Assistant Professor,
Physician Assistant

James Patrizi, PT, CWS, FACCWS
Clinical Instructor, Physical Therapy

Philip Radovic, DPM
Clinical Assistant Professor, CSPM

Mark Reeves, DPM
Clinical Instructor, CSPM

Douglas Ritchie, DPM
Clinical Associate Professor, CSPM

Bryan Roth, DPM
Clinical Assistant Professor, CSPM

Thomas Roukis, DPM
Clinical Assistant Professor, CSPM

Henry Sanchez, MD
Clinical Professor, CSPM

Jennifer Sanders, DPM
Clinical Instructor, CSPM

Vada K. Satterfield, DPM
Clinical Assistant Professor, CSPM

Valerie L. Schade, DPM
Clinical Instructor, CSPM

Paul R. Scherer, MS, DPM
Clinical Professor, Department of Applied
Biomechanics, CSPM

David Seegmiller, DPM
Clinical Assistant Professor, CSPM

Ekta Shah, DPM
Clinical Assistant Professor, CSPM

Giang Son, DPM
Clinical Assistant Professor, CSPM

Amy Splitter, DPM
Clinical Assistant Professor, CSPM

Elaine Stanifer, DPM
Clinical Instructor, CSPM

John S. Steinberg, DPM
Clinical Assistant Professor, CSPM

Scott A. Tafuri, DPM
Clinical Assistant Professor, CSPM

Ross Talarico, DPM
Clinical Assistant Professor, CSPM

Douglas Taylor, DPM
Clinical Assistant Professor, CSPM

Bruce Thompson, MD
Clinical Assistant Professor,
Physician Assistant

Gregory Tovmassian, DPM
Clinical Instructor, CSPM

Mher Vartivarian, DPM
Clinical Instructor, CSPM

Gregory Victorino, MD
Clinical Assistant Professor,
Physician Assistant

Russell G. Volpe, DPM
Clinical Associate Professor, CSPM

Abdul Wali, MD
Clinical Assistant Professor,
Physician Assistant

Josh White, DPM
Clinical Assistant Professor, CSPM

Barney Yankowitz, DPM
Clinical Assistant Professor, CSPM

Gregg Young, DPM
Clinical Assistant Professor, CSPM

MEDICAL DIRECTORS

Kenneth Kampman, MD
Medical Director, Nurse Anesthesia Program
BS, University of Notre Dame; MD,
University of Chicago

Monica Rosenthal, MD
Medical Director, Physician
Assistant Program
BA, University of Chicago; MD,
University of Illinois, Chicago

EMERITI & HONORARY FACULTY – SAMUEL MERRITT UNIVERSITY

Albert E. Burns, DPM, MS
Professor Emeritus of Podiatric
Surgery, CSPM
BS, Tulane University; BA, University of
California, Santa Barbara; MS, DPM California
College of Podiatric Medicine, San Francisco

Linda Chapman, PhD, RN
Professor Emeritus
Diploma, Samuel Merritt College, Oakland,
California; BS, University of Utah, Salt Lake
City; MS, PhD, University of California,
San Francisco

Roberta Durham, PhD, RN
Professor Alumnus
BS, University of Rhode Island; MS, PhD,
University of California, San Francisco

Joshua Gerbert, DPM, MS
Professor Emeritus of Podiatric
Surgery, CSPM
BS, Texas A&M University; MS, DPM,
California College of Podiatric Medicine,
San Francisco

Abby M. Heydman, PhD, RN
Professor Emeritus & Former Academic
Vice President & Provost
Diploma, Mercy Hospital School of Nursing,
Cedar Rapids, Iowa; BS, Duchesne College
of the Sacred Heart, Omaha, Nebraska; MN,
University of Washington, Seattle; PhD,
University of California, Berkeley

Evelyn G. Jaffe, MPH, OTR/L, FAOTA
Professor Alumnus, Occupational Therapy
BS, Wayne State University, Detroit,
Michigan; MPH, University of Michigan,
Ann Arbor

Martha J. Jewell, PhD, PT
Professor Emeritus
BS, University of Colorado, Boulder; PhD,
University of South Dakota, Vermillion

Sarah Keating, EdD, RN, CPNP, FAAN

Professor Emeritus & Former Dean, Nursing
BSN, University of Maryland; MPH, University
of North Carolina; PNP, University of
Rochester, New York; EdD, State University
of New York, Albany

Mileva Saulo Lewis, EdD, RN

Professor Emeritus
Diploma, St. Luke's Hospital, New York,
New York; BS, Fairleigh Dickinson
University, Rutherford, New Jersey;
MA, New York University; EdD, University
of San Francisco, California

Christopher E. Smith, DPM

Professor Emeritus of Podiatric
Biomechanics, CSPM
BA, University of British Columbia; DPM,
California College of Podiatric Medicine,
San Francisco

Leon P. Smith, MD

Professor Emeritus of Podiatric Medicine
and Biomechanics, CSPM
AA, Boise Junior University; MD,
University of California, San Francisco

Shirlee J. Snyder, EdD, RN

Associate Professor Alumnus
Diploma, Columbia Hospital School
of Nursing, Milwaukee, Wisconsin; BS,
University of Wisconsin, Milwaukee; MSN,
University of Alabama, Birmingham; EdD,
University of San Francisco, California

Christine Vourakis, PhD, RN, CARN, FAAN

Professor Emeritus
Diploma, Vassar Brothers Hospital School of
Nursing, Poughkeepsie, New York; BS, Texas
Christian University, Fort Worth; MN, Emory
University, Atlanta, Georgia; PhD, University
of California, San Francisco

FREQUENTLY CALLED NUMBERS

Department	Phone Number*
Academic Affairs	869.6744
Academic Support	869.6616
Administrative Support Unit	869.6511, x4664
Admission	869.6576
Business Office	869.1550
Campus Service Center	869.1550
Development and Alumni Affairs	869.8628
Disability Services	869.6616
Facilities	869.8785
Finance & Administration	869.6511, x5245
Financial Aid	869.1550
Health Education Center	869.6161
Help Desk (IT)	869.6836
Human Resources	869.6511, x5351
Institutional Research	869.6597
Library	869.8900
Media Services	869.6575
Nursing	869.6511, x3765
Occupational Therapy	869.8925
Office of the President	869.6512
Physical Therapy	869.6241
Physician Assistant	869.6623
Podiatric Medicine	869.8727
Registrar	869.1550
Security	869.7847
Sacramento RLC	916.646.2770
San Francisco Peninsula LC	650.292.5565
Student Accounts	869.1550
Student Health Services	869.6629
Student Services	869.1572

* Area code is 510 unless otherwise indicated.

INDEX

A

Academic Advisement.....	125
Academic Calendar	
Undergraduate	2
Graduate	9
Academic Division	15
Academic Integrity.....	141
Academic Policies.....	125
Academic Support.....	152
Accelerated Bachelor of Science in Nursing	23
Accelerated Bachelor of Science in Nursing Admission.....	96
Access to Records	125
Accreditation	1
Administration.....	186
Administrative Offices and Services.....	171
Admission Policies.....	91
Advanced Standing Credit for Post-professional Programs.....	125
Advanced Placement	
Undergraduate	95
MS Nursing Post-Professional	99
Affirmation of Nondiscrimination	173
Alcoholic Beverage Policy	148
Alumni Society	163
Americans with Disabilities Act (ADA)	152, 173

Application Deadlines	91
Attendance	125
Audiovisual Services	159
Audit	127
Authority to Obligate the University.....	148
Award of Academic Credit.....	125

B

Bachelor of Science in Nursing.....	21
Bachelor of Science in Nursing Admission.....	94
Background Checks	92
Board of Regents	186
Bookstore.....	153
Bulletin Boards.....	149

C

Calendars	2-10
California Board of Registered Nursing	1, 20
California School of Podiatric Medicine	78
Campus.....	166
Campus Policies	148
Campus Sex Offenses.....	147
Ceremonies and Events	153
Challenge Credit.....	126
Class Lists.....	129

Class Scheduling	129
Clery Act.....	174
Client/Patient Participation in Course-Related Activities	139
Code of Conduct.....	141
Code of Ethics.....	141
Commencement (see graduation policies and procedures).....	133-139
Computer Requirements.....	92
Computer Services.....	159
Continued Enrollment	135
Copying Services.....	159
Copyright	149
Counseling	154
Course Credits/Course Numbering.....	18
Criminal Background Check	92
Crisis Response Plan	169

Curriculum Overview

ABSN.....	23
BSN Program.....	22
DNP.....	35
DPM	81
DPT	62
FNP/NDP	30
MOT	54
MPA.....	73
MSN.....	25

D

Dates of Degree Conferral.....	135, 139
Dean's List—Undergraduates.....	134
Department of Occupational Therapy.....	51
Department of Physical Therapy.....	58
Department of Physician Assistant.....	69
Directory Information.....	185
Disability Support Services.....	152
Disclosures and Truth in Information.....	130
Dismissal.....	134, 136, 139
Doctor of Nursing Practice.....	34
Doctor of Nursing Practice Admission.....	100
Doctor of Physical Therapy.....	60
Doctor of Physical Therapy Admission Requirements.....	102
Doctor of Podiatric Medicine.....	78
Doctor of Podiatric Medicine Admission Requirements.....	104
Double Credit.....	135
Dress Code.....	140
Drop and Add.....	130
Drug Free School and Communities Act of 1989.....	177
Drug Free Workplace Policy.....	178
Drugs and their Effects.....	181

E

Employment.....	158
English as a Second Language Requirement.....	93
Enrollment Eligibility.....	95-105
Entry-Level Master's Degree in Nursing (ELMSN).....	24
Escort Service.....	158
Evaluations/Outcome/Clinical.....	130
External Image of the University.....	149

F

Facilities.....	166
Faculty.....	190
Family Educational Rights and Privacy Act (FERPA).....	184

Family Nurse Practitioner (FNP) Program.....	28
FNP/NDP Program.....	30
Federal and State Regulatory Policies.....	173
Federal, State, and Local Sanctions About Alcohol and Other Drugs.....	178
Fees.....	120
Filing for Graduation and Diplomas.....	134, 139
Finals Week.....	131
Financial Aid.....	122
Financial Information.....	106
Food Services.....	159
Forms and Petitions.....	131
Free Assembly.....	149
Freshman Admission.....	94
Fundraising.....	149

G

Grade Changes.....	127
Grades, Grade Reports, Grading.....	126
Graduate Probation and Dismissal (MSN).....	136
Graduate Progression and Graduation.....	135
Graduate Suspension and Dismissal.....	136
Graduation and Credentialing Requirements (MOT).....	53
Graduation Policies and Procedures.....	134, 139
Grievance.....	142

H

Health Insurance.....	157
Health Services.....	153
History of the University.....	11

I

Identification Badges.....	150
In Progress Grading.....	128
Incomplete Grades.....	127
Independent Study.....	127
Index.....	198
Institutional Learning Outcomes (ILOs).....	15

Institutional Review Board (IRB).....	150
International Students.....	92
Interprofessional Education.....	88

L

Leave of Absence.....	131
Length of Study.....	135
Liability and Malpractice.....	131
Library—John A. Graziano Memorial.....	158, 166
Licensed Vocational Nurses (LVN).....	95
Licensed Vocational Nurses (LVN)—30-Unit Option.....	95
Licensure Requirement/Denial of Licensure.....	130

M

Mail Service.....	159
Motion Analysis Research Center (MARC).....	167
Master of Occupational Therapy (MOT) Admission.....	101
Master of Occupational Therapy (MOT) Degree.....	53
Master of Science—Family Nurse Practitioner.....	28
Master of Science—Nurse Anesthesia.....	31
Master of Science in Nursing.....	24
Master Physician Assistant (MPA).....	71
Master Physician Assistant (MPA) Admission Requirements.....	103
Media Services.....	159
MSN Advanced Practice Admission Requirements.....	99

N

Nurse Anesthesia Program.....	31
-------------------------------	----

O

Occupational Therapy.....	51
---------------------------	----

P

Parking.....	159
Participation in Course Activities.....	139
Pass/Fail Grading.....	128
Payment of Tuition and Fees.....	120
Petitions and Forms.....	131
Physical Therapy.....	58

Physician Assistant.....	69	Sexual Violence Policy	144	T	Technical Standards	17, 152
Podiatric Medicine	78	Smoking.....	151		Test of Essential	
Post MSN FNP Certificate Program	28	Solicitation.....	151		Academic Skills (TEAS).....	92
Post-Professional Case Management		Special Status Admission.....	92		Transcripts	133
MSN Track.....	27	Student Activities	163		Transfer Between Graduate	
Probation.....	134, 136	Student Awards and Recognition.....	163		Nursing Programs	135
Program Learning Outcomes		Student Classification.....	132		Transfer Credit.....	126
Nursing (BS).....	21	Student Employment	158		Transfer Entry (BSN).....	21, 94
Nursing (MS)	24	Student Government			Transportation and Parking.....	159
Nursing (DNP)	34	and Organizations.....	160		Truth in Information	130
Occupational Therapy (MOT)	53	Student Health Insurance.....	157		Tuition.....	107
Physical Therapy (DPT).....	61	Student Health Requirements			Tutorial Services	152
Physician Assistant (MPA)	71	and Health Policies	154-157			
Podiatric Medicine (DPM)	80	Student Health Services	153			
Public Transportation	159	Student Life and Student Services.....	152	U	Undergraduate Progression	
		Student Policy			and Graduation	133
		Development Process.....	162		Use of Common Area Facilities	168
R		Student Research				
Readmission.....	132	Degree Requirements.....	132		V	Veterans' Education Benefits
Refund Policy.....	122	Student Services	152		and Policy Statement	124
Registration.....	129	Student's Right to Know				
Repetition of a Course	127	Act of 1990	185		W	Weapons on Campus.....
		Study Load and Residency				Wellness.....
		Requirements (MSN)	136			Withdrawal from a Course.....
		Synthesis Experience.....	133			123, 129
						Withdrawal from the University
						129
S						
Safe and Professional Practices in						
Clinical Settings.....	140					
Samuel Merritt						
University Campus.....	166					
Satisfactory Academic Status.....	122					
Scholars In Service Program.....	162					
School of Nursing	19					
Sexual Harassment	145					



**SAMUEL
MERRITT
UNIVERSITY**

Samuel Merritt University
3100 Telegraph Avenue
Oakland, CA 94609-3108
PHONE 510.869.6511
FAX 510.869.6525
www.samuelmerritt.edu