**Quick Reference Guide for Nurse Anesthesia Clinical Coordinators**

**Clinical Assignments**

* The clinical schedule is made by the Program Director and is **not** to be altered in any way without permission from the Program Director.
* A typical clinical day is 0600 until 1600. Students are expected to arrive in the clinical area in sufficient time to prepare all necessary drugs and equipment for the assigned clinical experiences.
* It is **NOT** appropriate for an SRNA to ask clinical preceptors/coordinators to leave the clinical area early. Students may be dismissed early from the clinical area at the discretion of the clinical preceptor/coordinator.
* Students are **required** to notify the charge CRNA or clinical coordinator prior to leaving for the day.
* Students should obtain their next day’s assignments and make pre- and post-operative rounds before leaving for the day.
* If possible, clinical assignments should be obtained the day before the scheduled clinical experience or the day of the clinical experience depending on the affiliates clinical policy and procedure.

**Call ins**

* The student is responsible for notifying the clinical coordinator at the assigned clinical site prior to the start of the scheduled time if the student is unable to attend clinical due to an illness.
* If a student calls in sick - **the clinical coordinator should notify the program via email**:

Laura Bonanno [lbonan@lsuhsc.edu](mailto:lbonan@lsuhsc.edu) Program Director

Ms. Arielle Buxton abuxto@lsuhsc.edu Administrative Coordinator

**Clinical Evaluations**

* Clinical evaluations are used to help students identify needed areas of personal development and/or improvement and to calculate the clinical portion of the practicum course grade.
* The student should give the evaluation tool to the preceptor at the beginningof the clinical day unless the preceptor chooses to use electronic evaluations available on Typhon. Completing the evaluation electronically is **preferred.**
* The preceptor rates the student’s performance in the various categories using the semester level categories. Written comments provide constructive suggestions, are an **integral part** of the evaluation process and will help the student, improve his/her performance.
* The preceptor **must complete and sign the clinical evaluation** for the student to receive credit. **Students are not to fill out any part of their clinical evaluation or have the preceptor sign a blank clinical evaluation.**
* Students are required to have a clinical evaluation for every day that they are in clinical.

**Care Plans**

* The anesthesia care plan is a tool required for the student to plan for clinical experiences. After performing a preoperative patient assessment, the student completes a care plan, incorporating patient specific implications based on information obtained from the history, physical exam, chart review, diagnostic studies and other pertinent sources. The anesthesia care plan must also include implications for the surgical procedure.
* Anesthesia care plans are required for each assigned patient either in written or verbal form depending on the student’s level in the program.

**Site Visits**

* On-Site visits are conducted annually. In addition, clinical coordinators will be contacted quarterly to maintain program communication, update clinical site policies, and discuss any student concerns.
* If at any time, the clinical coordinator has an issue with a student or should needs to speak with the program director please call or email Laura Bonanno 504-568-4144, [lbonan@lsuhsc.edu](mailto:lbonan@lsuhsc.edu).