

M.S.N. Advanced Practice: Adult-Gerontology Clinical Nurse Specialist (41 S.H. required to complete the degree)



Name: _____ Phone: _____ Date: _____

Address: _____ E-mail: _____

FOUNDATIONAL CORE (11 S.H.)

NUR 501 Theoretical Basis of Nursing Practice	3	
NUR 502 Contemporary Issues in Health Care Delivery	2	
NUR 504 Evidence Based Nursing Research	3	
NUR 511 Foundations of Clinical Nursing Practice	3	

ROLE (23 S.H.)

NUR 515 Advanced Pathophysiology	3	
NUR 570 Advanced Clinical Pharmacology	3	
NUR 575 Advanced Health Assessment	3	
NUR 580 The Advanced Nursing Management of the Acutely Ill Adult-Gerontology Populations	2	
NUR 583 The Adult-Gerontology Clinical Nurse Specialist Management of the Acutely Ill Adult Populations (180 C.H.)	5	
NUR 585 The Advanced Nursing Management of the Chronically Ill Adult-Gerontology Populations	2	
NUR 587 The Adult-Gerontology Clinical Nurse Specialist Management of the Chronically Ill Adult Populations (180 C.H.)	5	

ROLE SUPPORT (7 S.H.)

NUR 590 Professional Roles of the Advanced Practice Nurse (180 C.H.)	7	
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THESIS REQUIRED (0 S.H.)

Completion Date:		
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TRANSFER CREDITS

WCSU Course: Course/School:		
WCSU Course: Course/School:		
WCSU Course: Course/School:		

NOTES:

Changes in this schedule can only be made with the Graduate Program Coordinator's approval. The admission requirements have been explained to me and I understand my obligations to read the graduate catalog..

Student Signature

Date

Coordinator Signature

Date