UNIVERSITY OF HAWAI`I HILO
SCHOOL OF NURSING
DOCTOR OF NURSING PRACTICE PROGRAM

BSN to DNP Program Plan

<table>
<thead>
<tr>
<th>Student:</th>
<th>Year Admitted:</th>
<th>Expected Date of Graduation</th>
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**Year 1 - Fall 20**
- 618 EPI/ Environmental Health (3)
- 601 Social Aspects of Health (3)
- 602 Information Systems/ Technology (3)
- 612 Evidence Based Practice (3)

**Year 2 - Fall 20**
- 607 Primary Care of Adults (3)
- 607L Primary Care of Adults Lab (3)
- 608 Primary Care of Older Adults (3)

**Year 3 - Fall**
- Elective (1-3)*
- 614 System-Based Leadership (3)
- 615 Health Policy: Local to Global (4)

**Spring 1**
- 603 Advanced Clinical Pharmacology (3)
- 604 Advanced Clinical Pathophysiology (3)
- 605 Advanced Health Assessment (4)

**Spring 2**
- 609 Primary Care of Women (2)
- 609L Primary Care of Women Lab (2)
- 610 Primary Care of Children (2)
- 610L Primary Care of Children Lab (2)
- 611 Advanced Research Methods (3)

**Spring 3**
- 616 Health Economics (3)
- 617 Practice Inquiry/Project (6)

**Summer 1**
- 606 Rural Health Promotion (3)
- 606L Rural Health Promotion Lab (3)

**Summer 2**
- 608L Primary Care of Older Adults Lab (3)
- 613 Program Development/Evaluation (3)

Total Credits 28
Total Credits 26
Total Credits 17-19

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<tr>
<th>Student Signature</th>
<th>Program Coordinator Signature</th>
<th>Date</th>
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**MANDATORY Orientation and Institutes**
1. Summer Institute (Fall semester, before courses begin)
2. Spring Institute (end of Spring semester, year 1)
3. PIP Presentation (presentation of PIP)

**Elective Courses**
Must be discussed and approved by DNP Coordinator

Revised: 2.3.15/jw
Projected Clinical Practice Plan

Student Name: ________________________________

Year Graduating: ________________________________

<table>
<thead>
<tr>
<th>Course Name</th>
<th>Course Number</th>
<th>Semester &amp; Year</th>
<th>Preceptor(s)</th>
<th>Site</th>
<th>Date Completed</th>
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