



**SCHOOL OF NURSING**  
**Graduate Nursing Program**  
250 Forest Drive, Box 8158  
Georgia Southern University  
Statesboro, Georgia 30460-8158  
(912) 478-0017  
(912) 478-1679 (Fax)

Dear Preceptor,

The graduate nursing faculty extends a sincere "Thank You" for agreeing to precept a student in the Master's in Science in Nursing Family Nurse Practitioner Track at Georgia Southern University. The student is enrolled in NURS 5210 Health Assessment Across the Lifespan. This is a foundational course for the graduate student. This course offers the graduate nursing student the opportunity to function under the direction of a preceptor for a minimum of 90 clinical hours gaining competency in obtaining an thorough health history, completing a full physical examination, and documenting the findings for patients of all ages.

The students have been directed to select a preceptor who is willing to facilitate their learning and who will allow direct care that will assist them to gain confidence and competence. The clinical site must be focused on patient care. The preceptor can be a physician, a certified nurse practitioner, an expanded role nurse, or a physician assistant. The time is to be spent gathering health histories, performing physical exams to include pelvics, prostate examinations and gathering diagnostic specimens (PAP, GC, Wet prep, etc).. The student is encouraged to spend time with fundoscopic examination. In order to facilitate student learning experiences the course objectives are attached on the Preceptor Information Sheet.

As preceptor you will need to evaluate the appropriateness of the assessment technique and the data gathered. Please provide feedback to the student regarding assessment technique or additional data needed from the history in order to accurately diagnosis and manage problems. Please let the student know when they are doing well and where improvement is needed.

Please sign the **Clinical Preceptor Agreement Form (CPAF)** and return it to the student. The student is to return this form to faculty by the specified date. The faculty must then ascertain that Georgia Southern has a current Memorandum of Understanding with the practice site and must verify your professional license per Board of Nursing regulations before approving the student to begin clinical hours. Please provide your license number so that we may verify it on the Secretary of State's Web Site. The completed CPA form will be kept on file in the Graduate Office at the School of Nursing.

Your input as a preceptor is highly valued and evaluation of student learning is essential, therefore, we request that you complete an evaluation form. Please use the **Preceptor Evaluation Form (PEF)** to evaluate and communicate the student's progress while s/he was with you. Please return the completed PEF to the student who will hand deliver it to the faculty by the specified date. We encourage you to share your evaluation with the student to promote successful growth and progress.

It is essential for student success that preceptors provide and share their expertise. We commend you for your willingness to offer this collaboration. A thank you letter at the end of the course will provide verification of your participation as a clinical preceptor for use toward certification requirements. If you have any questions regarding your participation as a preceptor please call the Graduate Program Office at 912-478-0017. Specific faculty contact information will be provided by the student to you once the course has begun. You are encouraged to contact the course faculty at any time.

With Much Appreciation,

The Graduate Nursing Program Faculty