

MSN-DNP – PEDIATRIC PRIMARY CARE NURSE PRACTITIONER

PROPOSED PROGRAM OF STUDY

(TTU Home Campus Student- Effective Aug 2018)

Name:		'		_		
				INSTITUTION C	PEDIT	
COURSE				INSTITUTION C		Date
OCONOL	0			TTU or ETSU or	1	Completed
Title	Course Number	Credit	Grade	Other (Specify)**	Equiv. TTU Course No.	or To Be Completed
Background Courses (if applicable)	Number	Credit	Grade		Course No.	Completed
background courses (ii applicable)						
					+	
MSN to DNP Core Courses						
Scholarly Writing	NRSE 5030	1		ETSU		
Principles of Population Health & Data Analysis	NRSE 5100	4		ETSU		
Knowledge Translation & Process Improvement	NRSE 6050	3		ETSU		
Systems Management	NRSE 6713	3		ETSU		
DNP Project Identification	NRSE 6801	3		TTU		
DNP Project Development	NRSE 6802	3		ITTU		
DNP Project Implementation	NRSE 6803	3		TTU		
DNP Project Evaluation & Dissemination	NRSE 6804	3		TTU		
DNP Concentration Courses						
		0		TT::		
Pediatric Health Care Delivery System	NRSE 6310	3		<u>ITTU</u>		
Advanced Family System and Evaluation	NRSE 6311			ITTU TTU		
Epidemiology of At Risk Families: Urban, Rural, Underserved Populations Leadership and Collaborative Approaches Improving Peds Hith Outcomes	NRSE 6312 NRSE 6313	3		TTU TTU		
Leadership and Collaborative Approaches improving Feds Filth Odicomes	THICE GOTO	3			+	
Do you anticipate using Human Subjects ir	n vour resear	ch? ✓YES	NO		Final GP	١.
If yes, IRB approval is required for progres	sion with pro	oiect. Conta	ct vour a	advisor for more in	formation.	٠
TOTAL Semester Hours Credit To Be Counted Toward Degree		35		* Enter courses in following		
Other Requirements: Per SACSCOC – 1/3 coursework is	with partner insti	tution =	ı	Background courses		
24 Credit Hours from TTU and 11 Credit Hours from ETS	•	tation =		courses taken at the	Masters or Docto	ral
24 Great Flours from FFO and FF Great Flours from EFG				level	Courage	
				MSN to DNP Core C DNP Concentration		
				**Enter name of university		re taken
				Enter name of aniversity	mioro ocurcoo me	io taitori
Total Hours: 5000 level 6000 level		7 years expire	s end of			
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		erm) (year)		
ADDDOVED DDG IFOT COMMITTEE						
APPROVED PROJECT COMMITTEE:	lata	Choime are a			مغمام	
	late				date	
	late	_Member	Concent	ration Coordinator		
_	late	_Member				
	late	_	0 : :	(Alberta - D. 1	date	
	date	_ Member	School o	of Nursing Designee		
	late	_ Member				
	late	_Member			date	

College of Graduate Studies Designee

Appointment of Project Committee

I hereby request that the following members of the Graduate Faculty be appointed to serve on my Graduate Project Committee:

Name (please type in committee names)

Chairperson				
Member				
Student's Signa	ture	D	ate	
Student T No.				
Approved				
	Concentration Coordinator			date
Approved				
	School of Nursing Designee			date
Approved				
	College of Graduate Studies Designee			date