## Moorpark College Advanced Placement Associate Degree Nursing (RN) Program Application

	lacement but may apply as an	LVN or through military cha	allenge. If you are not	our semesters will not be considered an LVN, have never passed an RN pr nning Program Application instead.	rogram course,	
			utomatically be also co	onsidered for admission to the begin		
1.	Last Name:	First N	ame:	Middle Name:		
	Previous Name(s) if any					
				nit an application to the college to old before applying to the nursin		
	MC Student ID#:	**	Date of Birth	**For Statistical Purpos	**For Statistical Purposes Only	
	I have a Social Security Nur	nber or Individual Taxpaye	er Identification Numb	er: 🗆 Yes SSN 🛛 Yes ITIN		
	VCCCD Email address:			@my.vcccd.edu	@my.vcccd.edu	
	Address					
				County		
	Daytime Telephone Numbe	er	Evening/Mobile N	umber		
	**Race/Ethnicity: Please ch			**For statistical purpose	es only	
	<ul> <li>Asian, non-Filipino</li> <li>South Asian (e.g. Indian,</li> </ul>	<ul><li>□ Native Hawaiian Fili</li><li>Pakistani, etc) □ Ot</li></ul>	pino 🛛 Other N her Asian 🗆 Other _	erican Indian or Alaska Native Ion-Filipino, non-Native Hawaiian I	Pacific Islander	
	**Primary Language Spoke	n at Home				
	**Gender: 🗌 Female 🗌 N					
	Veterans and spouses mus Veterans Eligibility: activ Includes full-time Nation Spouse Eligibility: (widow	e military or discharged ur nal Guard.	nder conditions other	than dishonorable.		
2.	Advanced Placement Reque	st:  Second Semester Non-Degree-LVN 30		Fourth semester (specific restricti	ions)	
3.		copy of current license) dent from another RN prog	-	AC Nursing student requesting rea		
4.	List any RN program enrollı Include semester, year(s), a					
5.	Highest Degree held:		If no college de	egree, did you earn a GED H	S Diploma	
6.	Do you have a current CNA	Certificate? No Yes	(If yes please attach a	сору)		
7.	<ul> <li>No, I am a returning Moorp Yes, approximate date take</li> <li>If Yes, results must be shas been taken more th</li> <li>If No, qualified applicate the application period.</li> </ul>	n appointment to take the A bark nursing student and an en: sent via ATI to Moorpark Co han once in the past 12-mo nts may randomly receive a	ATI TEAS elsewhere on n not required to have llege by the deadline in nth period, only the fir n invitation to take the r dates, and what to do	(specify date) TEAS results from within the past 12 ndicated on the nursing website. If st exam result will be accepted. e ATI TEAS at Moorpark College on a o if not invited. It is strongly suggeste at Moorpark.	the ATI TEAS date following	

8. List ALL colleges, universities, and vocational schools (regionally or institutionally accredited) with **any** coursework attempted, completed, or in progress, regardless if they apply to the program. Include the approximate dates of attendance. Include any dual-enrollment/special admit (college courses completed during elementary school, middle school, or high school), or distance learning. If you attempted courses at a multi-college district, list each college separately. For example: list Moorpark, Ventura, and/or Oxnard College on separate lines if you attempted courses with any of them.

College or University Attended (Attach a separate sheet if more lines are needed)	Approximate Dates of Attendance (which years or semesters)

**9.** List **COMPLETED** prerequisite coursework required for application. All must be completed with a letter grade of "C" or better with a regionally or institutionally accredited college, university, or vocational school. Core sciences must have been completed within the past 7 years. The 7-year recency requirement is waived for previous MC nursing students applying within 4 semesters of exit from the nursing program.

Prerequisite Course	Units	Where Taken	When Taken	Grade
College Human Anatomy W/lab, 4 units				
College Human Physiology W/Lab, 4 units				
College General Micro. W/lab, 5 units				
ENGL C1000, previously ENG M01A English Composition, 4 units				
Math M03 Intermediate Algebra or higher, 5 units <u>Or</u> 2 years of High School Algebra with a grade of B or higher in each semester				

**10.** OPTIONAL Elective Courses: List if you COMPLETED any of the elective courses below with a letter grade of "C" or better with a regionally or institutionally accredited college or university, or vocational school. These are optional courses, among many that promote success in nursing coursework. If you have not taken the course, leave the row blank.

Optional Elective Course	Units	Where Taken	When Taken	Grade
Medical Terminology				
Pharmacology				
Basic Pathophysiology or Pathophysiology (expected to pertain to humans)				

- 11. Required Documentation to have at Admissions and Records: Must be on file with Moorpark College Admissions and Records PRIOR to submitting this application. Official electronic or official hard-copy (original, unopened envelope) method is acceptable.
  - Official transcripts for ALL college courses (regionally or institutionally accredited) attempted outside of VCCCD (Moorpark, Ventura, Oxnard Colleges), including all courses taken for credit or no credit even if not a part of the major or the prerequisites. Failure to have transcripts <u>on file</u> with all courses attempted and grades posted will result in disqualification.
  - If you attempted courses with Los Angeles Community College District colleges, official hard copy transcripts are preferred instead of official electronic transcripts.
  - All official high school or GED transcripts if no college degree
  - Official International transcript evaluation, if applicable
  - Official Advanced Placement (AP) scores from College Board, if being used for satisfying a prerequisite course
  - Official LVN Transcripts, if applicable

## 12. Required Documentation to include with application

- An opened official VCCCD transcript, if courses were attempted at Moorpark, Ventura, or Oxnard College. Refer to the <u>Admissions and Records Official Transcript Request webpage</u> for directions on ordering a transcript for delivery to yourself. It is understood that this official VCCCD transcript is opened for submission with the application. Failure to include the transcript with all courses attempted within VCCCD and grades posted will result in disqualification.
- All course descriptions from the <u>college catalog</u> for the semester and year of the above **prerequisite courses** if attempted outside of VCCCD. Include a PDF of the catalog page with the course description. Do not copy-paste the description into a word processing document, do not use the description from the Schedule of Classes, do not use the Syllabus course description, do not screen-snip a portion of the page. Include the entire page. If a webpage-only catalog and a PDF or hard-copy catalog is not available, make a PDF print that includes the headers and footers of the webpage. The header or footer often indicates the webpage is from the catalog, and includes the name of the school.
- Personal letter from applicant requesting admission: Indicate which semester level is being requested; explain current situation and future goals; and outline any activities, remediation or work experiences completed to prepare for admission eligibility. Letter should be typed, double spaced.
- Letters of recommendation, resume, documentation of work experience and or remediation as applicable. Refer to the Moorpark College website for complete information: http://www.moorparkcollege.edu/departments/academic/nursing/advanced\_placement.shtml
- Copy of current LVN license from <a href="https://www.bvnpt.ca.gov/consumers/license\_verification.shtml">https://www.bvnpt.ca.gov/consumers/license\_verification.shtml</a> if applicable.
- **13. Optional Supporting Documentation for Multicriteria Selection Process:** <u>Include with</u> application, if applicable. See the "Admission Criteria" at <u>www.moorparkcollege.edu/nursing</u> for details.

## **Skills Attestation:**

If admitted as an advanced placement student new to the Moorpark College nursing program, you are expected to be familiar with the psychomotor skills from the earlier semester(s) of the nursing program (NS M01L if requesting second semester, NS M01L and NS M02L if requesting third semester). Signing and submitting this application attests that you are competent with the skills of the course you are requesting to be placed ahead of.

A competent student performs well in simulation or the clinical setting with supervision that is appropriate to the complexity of the skill. A list of the skills from NS M01L are below. For a list of the skills from NS M02L, please contact the Health Sciences Department to request a copy.

UNIVERSAL REQUISITES	SK	ILLS			
INFECTION CONTROL					
Asepsis	Hand hygiene				
Isolation	Maintain standard precautions	Maintain isolation precautions (contact, droplet,			
		enteric)			
SAFETY					
	Identify code status, advance directive, allergies	Assess environment for hazards			
	Injury and fall precautions	Ensure privacy & confidentiality			
	Seizure precautions	Document care of the client			
	Decubitus ulcer prevention	Collaborate with client, peers, staff effectively			
	Emergency preparedness: Emergency codes	Mandated reporting: Elder abuse			
	Fire safety	Use of bed alarms			
SELF-CARE/ADL SKILLS					
Hygiene	Bath: complete & partial				
Oral Care	Dependent client	Denture care			
Hair Care	Shampoo (bed)				
Skin Care	Application of lotion	Incontinence care			
Bed Making	Unoccupied	Occupied			
Elimination	Assist with bedpan	Assist with urinal			
	Assist with toileting	Measure and record intake and output			
	Assist with bladder/bowel training				

Table: Clinical Skills Checklist, NS M01L section

UNIVERSAL REQUISITES	SK	ILLS
Mobility	Turn/position	Use of walker
	Range of motion (passive and active)	Use of crutches
	Use of gait belt	Assist with ambulation
	Use of cane	
Transfers	One person transfer (bed to chair/commode & back)	Sling-type scale/Hoyer lift
	Two person transfer (bed to chair/commode & back)	
Body Mechanics	Work at waist level	Techniques of body mechanics/back precautions
	Use of draw sheet for positioning patient	
PATIENT EDUCATION	· • • •	I
	Use of hospital on-line patient education tool	
ASSESSMENT		
Vital Signs	Temperature (oral, axillary, tympanic, temporal)	Respiratory rate
	Pulse (apical, radial, pedal, carotid)	Blood pressure (manual, machine)
COMPLETE HEAD TO TOE A		
Neuro/Sensory	Level of consciousness/orientation	Muscle strength and movement
	Pupil size, shape, equality, reaction to light	Speech pattern/content
	Pain (0-10 scale, FACES)	Cranial nerve assessment (I-XII)
Cardiac/Circulatory	Heart sounds: S1, S2; abnormal	Capillary refill time
	Rhythm/regularity of heart sounds	Extremity color and temperature
	Presence/absence of chest pain	Presence of dialysis graft/AV fistula
	Pulses: apical, radial, post tibial, pedal	S/S of deep vein thrombosis (pain, redness, swelling)
ASSOCIATED SKILLS	Use of sequential compression device	Orthostatic blood pressure
	Application of anti-embolism stockings (TED hose)	
Respiratory	Respiratory effort, pattern & rate	Presence/absence of cough, sputum
	Auscultate breath sounds (anterior & posterior)	Supplemental oxygen use/setting/delivery
ASSOCIATED SKILLS	Use of pulse oximeter	Teach use of Incentive Spirometer
	Application of nasal cannula	Teach purse lip, abdominal breathing, and TCDB
	Oral Suctioning with Yankauer	
GI/Nutrition	Abdominal appearance; distention	Body Mass Index (BMI)
	Bowel sounds (4 quadrants)	Bowel pattern/assessment of stool
	Swallowing ability	Presence of ostomy
	Assess appetite, diet, food preference, cultural needs	Abdominal pain
ASSOCIATED SKILLS	Set up/feeding: non-dysphagic	NG Insertion, placement check, discontinuing
		No insertion, placement check, discontinuing
•	Set up/feeding: dysphagic	Residual check with NG tube/PEG tube
GU		
GU ASSOCIATED SKILLS	Set up/feeding: dysphagic Weight: bed scale, standing scale	Residual check with NG tube/PEG tube
	Set up/feeding: dysphagic Weight: bed scale, standing scale Assess for bladder distention	Residual check with NG tube/PEG tube Color/clarity of urine, pain with urination
	Set up/feeding: dysphagic Weight: bed scale, standing scale Assess for bladder distention Perineal and indwelling catheter care	Residual check with NG tube/PEG tube Color/clarity of urine, pain with urination Straight catheter insertion
	Set up/feeding: dysphagic Weight: bed scale, standing scale Assess for bladder distention Perineal and indwelling catheter care Foley catheter insertion: male/female	Residual check with NG tube/PEG tube Color/clarity of urine, pain with urination Straight catheter insertion Use/application of condom (Texas) catheter
ASSOCIATED SKILLS	Set up/feeding: dysphagic Weight: bed scale, standing scale Assess for bladder distention Perineal and indwelling catheter care Foley catheter insertion: male/female Foley catheter discontinuation: male/ female	Residual check with NG tube/PEG tube Color/clarity of urine, pain with urination Straight catheter insertion Use/application of condom (Texas) catheter Use of bladder scanner
ASSOCIATED SKILLS	Set up/feeding: dysphagic Weight: bed scale, standing scale Assess for bladder distention Perineal and indwelling catheter care Foley catheter insertion: male/female Foley catheter discontinuation: male/ female Gait evaluation	Residual check with NG tube/PEG tube Color/clarity of urine, pain with urination Straight catheter insertion Use/application of condom (Texas) catheter Use of bladder scanner ROM (full, limited)
ASSOCIATED SKILLS	Set up/feeding: dysphagic Weight: bed scale, standing scale Assess for bladder distention Perineal and indwelling catheter care Foley catheter insertion: male/female Foley catheter discontinuation: male/ female Gait evaluation Use of assistive devices (walker, cane, prosthetic)	Residual check with NG tube/PEG tube Color/clarity of urine, pain with urination Straight catheter insertion Use/application of condom (Texas) catheter Use of bladder scanner ROM (full, limited) Unilateral loss of strength
ASSOCIATED SKILLS	Set up/feeding: dysphagic Weight: bed scale, standing scale Assess for bladder distention Perineal and indwelling catheter care Foley catheter insertion: male/female Foley catheter discontinuation: male/ female Gait evaluation Use of assistive devices (walker, cane, prosthetic) Strength of extremities (push/pull/grips) Presence of breaks or fractures (sling, cast)	Residual check with NG tube/PEG tube Color/clarity of urine, pain with urination Straight catheter insertion Use/application of condom (Texas) catheter Use of bladder scanner ROM (full, limited) Unilateral loss of strength Contractures
ASSOCIATED SKILLS Musculoskeletal MEDICATION ADMINISTRA	Set up/feeding: dysphagic Weight: bed scale, standing scale Assess for bladder distention Perineal and indwelling catheter care Foley catheter insertion: male/female Foley catheter discontinuation: male/ female Gait evaluation Use of assistive devices (walker, cane, prosthetic) Strength of extremities (push/pull/grips) Presence of breaks or fractures (sling, cast)	Residual check with NG tube/PEG tube Color/clarity of urine, pain with urination Straight catheter insertion Use/application of condom (Texas) catheter Use of bladder scanner ROM (full, limited) Unilateral loss of strength Contractures
ASSOCIATED SKILLS Musculoskeletal MEDICATION ADMINISTRA	Set up/feeding: dysphagic Weight: bed scale, standing scale Assess for bladder distention Perineal and indwelling catheter care Foley catheter insertion: male/female Foley catheter discontinuation: male/ female Gait evaluation Use of assistive devices (walker, cane, prosthetic) Strength of extremities (push/pull/grips) Presence of breaks or fractures (sling, cast) ATION	Residual check with NG tube/PEG tube Color/clarity of urine, pain with urination Straight catheter insertion Use/application of condom (Texas) catheter Use of bladder scanner ROM (full, limited) Unilateral loss of strength Contractures
ASSOCIATED SKILLS Musculoskeletal MEDICATION ADMINISTRA	Set up/feeding: dysphagic Weight: bed scale, standing scale Assess for bladder distention Perineal and indwelling catheter care Foley catheter insertion: male/female Foley catheter discontinuation: male/ female Gait evaluation Use of assistive devices (walker, cane, prosthetic) Strength of extremities (push/pull/grips) Presence of breaks or fractures (sling, cast) ATION Iocument medications following 6 rights.	Residual check with NG tube/PEG tube Color/clarity of urine, pain with urination Straight catheter insertion Use/application of condom (Texas) catheter Use of bladder scanner ROM (full, limited) Unilateral loss of strength Contractures Amputations
ASSOCIATED SKILLS Musculoskeletal MEDICATION ADMINISTRA	Set up/feeding: dysphagic Weight: bed scale, standing scale Assess for bladder distention Perineal and indwelling catheter care Foley catheter insertion: male/female Foley catheter discontinuation: male/ female Gait evaluation Use of assistive devices (walker, cane, prosthetic) Strength of extremities (push/pull/grips) Presence of breaks or fractures (sling, cast) ATION Iocument medications following 6 rights. Oral	Residual check with NG tube/PEG tube Color/clarity of urine, pain with urination Straight catheter insertion Use/application of condom (Texas) catheter Use of bladder scanner ROM (full, limited) Unilateral loss of strength Contractures Amputations Withdrawing medication from ampule and vial
ASSOCIATED SKILLS Musculoskeletal MEDICATION ADMINISTRA	Set up/feeding: dysphagic Weight: bed scale, standing scale Assess for bladder distention Perineal and indwelling catheter care Foley catheter insertion: male/female Foley catheter discontinuation: male/ female Gait evaluation Use of assistive devices (walker, cane, prosthetic) Strength of extremities (push/pull/grips) Presence of breaks or fractures (sling, cast) ATION Iocument medications following 6 rights. Oral NG/GT	Residual check with NG tube/PEG tube         Color/clarity of urine, pain with urination         Straight catheter insertion         Use/application of condom (Texas) catheter         Use of bladder scanner         ROM (full, limited)         Unilateral loss of strength         Contractures         Amputations

UNIVERSAL REQUISITES	SKILLS			
	Metered Dose Inhalers (MDI)	Intradermal injection		
	Suppository (vaginal/rectal)			
Glucose Testing	Perform capillary blood glucose testing	Perform quality control on glucometers		
IV Therapy	Assess IV site for infiltration, infection	Manage primary IV fluid using IV pump		
	Maintain IV fluid infusion	Calculate IV rate in ml/hr, gtts/min		
	Prime and change IV tubing, label correctly	Administer saline flush via existing saline lock		
Nursing Care of the Surgic	al Client			
	Informed consent check-off	Dressings: Wound irrigation/packing		
	Collection of wound culture	Care of Jackson Pratt drain, Hemovac, Penrose, t-		
		tube		
	Dressings: Gauze dressing change, clean technique	Suture, staple removal		
	Dressings: Monitoring Wound Vac system	Postoperative monitoring for complications		
Beginning Cardiac	Telemetry: Apply and maintain	Calculate rate, determine regularity		
Monitoring				
	Basic EKG interpretation			

\*\*Admission is dependent on clearance of clinical requirements including: Health Appraisal, Background Check, and Drug Screen\*\*

I understand all official transcripts must be <u>on file with</u> (not just sent to) MC Admissions and Records <u>prior</u> to submitting this application. I authorize the use of this information to evaluate my qualifications. By signing this application, I certify under penalty of perjury that the information on this **application is complete and correct**. I understand that falsification or failure to report may result in my dismissal. **Incomplete application materials will result in your application not being considered and all materials will be discarded.** 

## <u>APPLICATION WILL NOT BE ACCEPTED IF NAME NOT PRINTED, NOT SIGNED, OR NOT DATED BY APPLICANT.</u> <u>Signature must be handwritten, typed signatures will not be accepted.</u>

Print Name:		Student Signature:				Date:		
	To be completed by Counselor after submission							
Overall GPA:	Core Bio GPA:	Core Bio Repeats:	English GPA:	English Repeats:	Math GPA:	Math Repeats:		
Success Score	If LVN, L\	/N transcripts on file? _	Counselor Si	gnature:		Date:	_	