



EAST CENTRAL

COMMUNITY COLLEGE

P. O. Box 129
Decatur, Mississippi 39327

DIVISION OF HEALTHCARE EDUCATION

Tel. No. 601-635-6293

Fax No. 601-635-5472

Email address: ccooley@eccc.edu

To: Prospective Student

From: Donna Everett, PhD, MSN, RN
Dean of Healthcare Education

Thank you for your interest in a Healthcare Education program at ECCC. You have taken an important step toward a career opportunity in a healthcare field.

The information in this application packet allows the prospective student to apply to the **Licensed Practical Nurse (LPN) to Associate Degree Nursing (ADN) Transition program.**

The following documents are included in this application packet:

1. Admission requirements and steps
2. Acceptance Criteria
3. Applicant checklist (complete before turning in)
4. Application
5. Entrance exam form with instructions.
6. Employment History Form
7. Program policies acknowledgement agreement
8. Dosage Calculation Practice Problems

If you have questions about any of the healthcare programs at ECCC, please call the Office of Healthcare Education at 601-635-6293 or one of the faculty located on the website at https://www.eccc.edu/sites/default/files/adn_faculty_contact_information_1.pdf

* Please contact the financial aid office to apply for financial aid during the application process. Delay in financial aid request can delay receipt of benefits.

FAFSA Application Open

FAFSA (Free Application for Federal Student Aid) opened October 1. Apply online at studentaid.gov for the 2022-23 school year. Find more information online at www.eccc.edu/its-fafsa-time.

** Scholarship application packets will be located at www.eccc.edu in under the “Scholarship” tab. If you have further questions about scholarships, please contact the ECCC Student Services office.

The College reserves the right to change any requirements and policies announced herein when deemed necessary. Proper notification will be provided, if applicable.

EAST CENTRAL COMMUNITY COLLEGE
ADMISSION OF ASSOCIATE DEGREE NURSING STUDENTS

Licensed Practical Nurses (LPN) are provided an opportunity to seek advanced placement into the Associate Degree Nursing (ADN) program. The program of instruction is consistent with the institutional commitment of teaching and learning, which is designed to incorporate the highest instructional and nursing standards. The program includes a balance of general education, nursing theory, laboratory, simulation, and clinical experiences to incorporate knowledge, attitudes, and skills applicable to life in a complex society.

The ADN is prepared to provide and manage care for individuals and groups in a variety of health care settings. Clear, concise, and timely communication with internal and external constituencies is a critical success factor for an effective nursing program. We believe the nurse of the future must encompass the core concepts of patient-centered care, professionalism, leadership, systems-based practice, informatics, communication, collaboration, safety, quality improvement and evidenced based practice, in order to provide safe and effective care.

Graduates of the program receive an Associate of Applied Science Degree (AAS) and those who meet the State Board of Nursing requirements are eligible to write the National Council Licensure Examination for Registered Nurses (NCLEX-RN®). The State Board of Nursing may, in its discretion, refuse to accept any application of any person who has been convicted of a criminal offense under any provision of the Title 97 of the Mississippi Code of 1972, as now or hereafter, amended. East Central Community College's (ECCC) ADN program has received continuing accreditation by the Board of Trustees of the State Institutions of Higher Learning of Mississippi (MS IHL) and the Accreditation Commission for Education in Nursing (ACEN).

Admission Requirements and Steps:

1. The applicant **must apply** for regular admission **and be accepted by the College** before applying to the program.
2. The applicant must submit a LPN to ADN Transition Application and submit to Office of Healthcare Education.
3. Applicants must submit **ALL** official college transcripts to the (1) Office of Admissions **AND** to (2) the Office of Healthcare. **BOTH offices must have official transcripts on file before October 1st.**
4. The applicant must have a high school diploma, high school equivalency certificate, or equivalent.
5. The applicant **MUST** have a minimum ACT composite score of 18 (must be on file in the Office of Admissions).
6. The applicant must have a cumulative Grade Point Average (GPA) of 2.00 or better.
7. All applicants are required to have completed all pre-requisite courses with a grade of C or Higher.

Pre-requisites courses listed below:

1. Anatomy & Physiology I with lab or upper-level equivalent
2. Anatomy & Physiology II with lab, or upper-level equivalent
3. Microbiology with lab or upper-level equivalent
4. English Comp I and II
5. Human Growth and Development
8. All applicants will be required, at the student's expense, to take an entrance examination test as specified by the Office of Healthcare Education. The cost of this exam is **\$60.00**. Admission Exam scheduled by the Office of Healthcare at the student's expense
9. Submit a copy of current, unencumbered license to practice as an LPN in the State of Mississippi.
10. Submit Employment History Form signed by your employer demonstrating proof of minimum of 1 year of clinical work experience within the last 5 years.
11. Score 100% on dosage calculation test given prior to admission (see practice problems in packet).
12. Must be 18 years of age or older.

Applicants **selected for admission into the LPN to ADN program** must submit proof of all items listed below by the Deadline given by the Office of Healthcare.

- a. Physical examination by a physician or nurse practitioner obtained in November or December prior to admission. This form and due date will be emailed with acceptance notification.
- b. Proof of Measles, Mumps, Rubella (MMR) 2 series, or positive Rubella titer
- c. Proof of Varicella (2 Series) or positive titer.
- d. Hepatitis B (3 Series) vaccine or positive titer or signed declination statement.
- e. Satisfactory criminal history background check as scheduled by the Office of Healthcare Education. Must provide a copy of your Driver's License and Social Security Card. The **Background fee of \$50.00** will be due once Mrs. Cooley sends out the Online Payment Instructions.

All applicants that are accepted into the program will be required to pay a **Pre-Qualification Fee of \$60.00**. A due date for this will be determined at a later time.

***All submissions are due in the Office of Healthcare Education on or before **October 1st**.

Any student accepted into the LPN to ADN Transition program must agree to be randomly tested for drugs and/or alcohol at any point and time while enrolled in the program. The student is responsible for all expenses associated with testing. (Initial drug testing fees are included in the student's course fees assessed by the college). The number of students admitted into the program will vary according to resources available. Qualified applicants will be given priority based on academic records. Students admitted to any nursing courses must adhere to the policies in the current Catalog and the Nursing Student Handbook.

Acceptance Criteria

To be considered for acceptance into the LPN to ADN Transition Program, the applicant's file in the Office of Admissions & Records and the Office of Healthcare Education must be complete by **October 1st** deadline. The student is responsible for ensuring data in the file is correct and submitted to the Healthcare Division office by the application deadline. The nursing admissions committee will review qualified applicants for the program using criteria outlined below and ranked by overall score. All candidates selected or not selected for admission into the Nursing program will be notified via email (Specific date to be determined). Please check your email address on the application for accuracy. Selection for admission into the program is not a guarantee of admission. Applicants must refer to the ECCC College Catalog for post-acceptance requirements.

All Healthcare Education Division students must submit fingerprints, which will be transmitted to the Mississippi Department of Health and run through the Mississippi Criminal Information and Federal Bureau of Investigation databases. **Nursing student candidates must satisfactorily meet requirements for a criminal history background check.** Admission to the program may be rescinded and reversed based on review of the students' criminal history record check. The criminal background check will be conducted prior to admission into the nursing program.

All healthcare education students are required to submit to a criminal background check according to Mississippi law prior to any clinical experience. If the person has ever been convicted of a felony, or pleaded guilty to, or pleaded no contest to a felony of possession or sale of drugs, murder, manslaughter, armed robbery, rape, sexual battery, sex offence listed in Section 45-33-23 (f), child abuse, grand larceny, burglary, gratification of lust or aggravated assault, felonious abuse and/or battery of a vulnerable adult they may not be eligible to attend clinical experience, thus forfeiting their slot in the program. The list is not all inclusive and is subject to criterion set forth by the Mississippi Attorney General's office, laws of the state of Mississippi, and misdemeanors by clinical agencies' judgment for participation in patient or resident care.

Students who refuse to submit to a criminal history background check or fail to submit a satisfactory criminal background check review will be refused entry into the program. If a student has a disqualifying event that he/she believes to be in error, it is the responsibility of the student to clear the record prior to admission into a healthcare program. Students who are dismissed from a Healthcare Education Division program may seek admission into another educational program.

If a student is enrolled in a healthcare education program and is charged with a misdemeanor or felony, the student is responsible for notifying the Dean of Healthcare immediately. Failure to notify the Dean will qualify as grounds for dismissal.

Points Categories

<p>1. Lives within the ECCC district or previously enrolled at ECCC (1 Point) _____</p> <p>2. College GPA on ADN Curriculum Courses or High School GPA with no college courses taken.</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>GPA</u></th> <th style="text-align: left;"><u>Points</u></th> </tr> </thead> <tbody> <tr> <td>3.5-4.0</td> <td>4</td> </tr> <tr> <td>3.0-3.49</td> <td>3</td> </tr> <tr> <td>2.5-2.99</td> <td>2</td> </tr> <tr> <td>2.0-2.49</td> <td>1</td> </tr> </tbody> </table>	<u>GPA</u>	<u>Points</u>	3.5-4.0	4	3.0-3.49	3	2.5-2.99	2	2.0-2.49	1	<p>7. Cumulative Admission Exam Score</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Score</u></th> <th style="text-align: left;"><u>Points</u></th> </tr> </thead> <tbody> <tr> <td>85% or Above</td> <td>5</td> </tr> <tr> <td>80%-84%</td> <td>4</td> </tr> <tr> <td>75%-79%</td> <td>3</td> </tr> <tr> <td>70%-74%</td> <td>2</td> </tr> <tr> <td>65%-69%</td> <td>1</td> </tr> <tr> <td>Below 65%</td> <td>0</td> </tr> </tbody> </table>	<u>Score</u>	<u>Points</u>	85% or Above	5	80%-84%	4	75%-79%	3	70%-74%	2	65%-69%	1	Below 65%	0																										
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<p>4. Students who receive a grade of “D” or “F” in more than 6 semester credit hours in the ADN curriculum will receive a 10-point deduction.</p>																																																			
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<p>6. *Completed Required Science Courses (Quality Points).</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-bottom: 10px;"> <thead> <tr> <th style="text-align: left;">Sciences completed.</th> <th colspan="3" style="text-align: center;">Points:</th> </tr> <tr> <td></td> <th style="text-align: center;">A=3</th> <th style="text-align: center;">B=2</th> <th style="text-align: center;">C=1</th> </tr> </thead> <tbody> <tr> <td>A & P I with lab</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> <tr> <td>A & P II with lab</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Microbiology with lab</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Total</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>Quality Points are averaged and not rounded when theory and lab are taken separately.</p>	Sciences completed.	Points:				A=3	B=2	C=1	A & P I with lab				A & P II with lab				Microbiology with lab				Total																														
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**EAST CENTRAL COMMUNITY COLLEGE
HEALTHCARE EDUCATION
LPN to ADN NURSING PROGRAM**

Instructions/Checklist for Application

In order to be considered for admission into the LPN to ADN Program, all requirements must be completed and submitted by October 1st. Only completed applications will be reviewed. **It is the applicant's responsibility to ensure that all documents are on file. Incomplete applications will not be considered.**

- __1 Applicants who have not attended East Central Community College are to complete the **APPLICATION for ADMISSION** to the college and be accepted.
- __2. Applicants who have had a semester break in attendance at East Central Community College are to complete the **READMISSION APPLICATION** to the college and be accepted.
- __3. **ALL** applicants must complete the **LPN to ADN Transition Admission Application**. You can **Hand Deliver** or **Mail** (ECCC Attn: Mrs. Cooley PO Box 129 Decatur, MS 39327)
- __4. Apply for **Financial Aid** (if applicable).
- __5. **ALL** applicants **MUST** submit **official transcripts** from **EVERY** college attended other than East Central Community College to: **BOTH OFFICES (A and B) NEED YOUR TRANSCRIPTS**
 - (A) the Office of Healthcare Education (address listed in #3) or escript to ccooley@eccc.edu.
 - (B) the College Admissions office.
- __6. Validated results of ACT scores must be submitted to Office of Admissions & Records at East Central Community College before **October 1st**. The minimum ACT score accepted for the LPN to ADN Program is a **composite score of 18**. A composite score less than 18 will not be considered.
- __7. Complete all pre-requisites (Listed in the Admission Requirement section) with a C or higher.
- __8. **ALL** applicants must take an entrance exam. (See attached instructions). **Receipt of \$60 must be included with your application before an exam date can be confirmed.**
- __9. Deadline for the completed application is **October 1st** for Spring admission.
- __10. **ALL** applicants will be notified via email of acceptance or non-acceptance to the LPN to ADN program. (Specific date to be determined) Please make sure the email address on the application is LEGIBLE and active. **All communication and notifications from the Office of Healthcare Education will be by EMAIL.**
- __11. Submit a copy of your LPN Licenses verifying 1 year of unencumbered license.
- __12. Submit your Employment History Form that is included in the application packet.
- __13. Applicants must refer to the college catalog for additional post-acceptance requirements.
- __14. Mrs. Cooley will send out a due date for ALL vaccines/shot records upon acceptance into the program. Please check you Immunization record for *MMR (2 series), Varicella (2 series), Hep B (3 series) and Tdap (every 10 years)*. **If these are not complete, you need to start the process, some Vaccines require 30 days in between and cannot be given with other Vaccines.**

Covid Vaccine may be required by some clinical agencies unless you have an approved Exemption (see Mrs. Cooley for more information). You will need to submit a copy of your Vaccine Card if you have completed the series.

Please return to:
 Office of Healthcare Education
 East Central Community College
 P.O. Box 129
 Decatur, MS 39327



**LPN to ADN Transition
 ADMISSION APPLICATION**

_____ ECCC Student ID Number

APPLICANT INFORMATION

Name _____ /_____/_____
 Last First Middle/Maidan SS# DOB AGE

Address _____
 Street/ Apartment Number or PO BOX City State Zip County

Telephone (____) _____ (____) _____
 Cell Home E-mail (**PLEASE PRINT CLEARLY**)

ACADEMIC INFORMATION

High School Attended _____ Graduation Date _____

City _____ State _____ GED or High School Equivalency Exam ___ YES ___ NO

GED Graduation or Exam Completion Date and State where it was taken: _____
 Date State

ACT: Score: _____ Validated results on file in Office of Admissions and Records? ___ yes ___ no

List **all** colleges/universities currently or previously attended, **including ECCC and ANY DUAL CREDIT course**:

Name and Location of Institution	Dates of Attendance	Degree Awarded (if applicable)

*An official transcript from each institution attended (excluding ECCC), and/or GED results must be submitted to ECCC Admissions, P.O. Box 129, Decatur, MS 39327 **AND** to the Office of Healthcare Education, P.O. Box 129 Decatur, MS 39327 before action can be taken on your application.

East Central Community College does not discriminate on the basis of race, color, religion, national origin, sex, age, or qualified disability in its educational programs and activities, employment practices, or admissions processes. The following offices have been designated to handle inquiries regarding the non-discrimination policies of East Central Community College:
 Inquiries regarding compliance with Title VI and ADEA are coordinated by the Executive Vice President, Walter Arno Vincent Administration Building, Room 171, Post Office Box 129, Decatur, MS 39327, Phone: 601-635-6202, Fax: 601-635-4011, Email: compliance@ecc.edu.
 Inquiries regarding compliance with Title IX and Section 504 are coordinated by the Dean of Student Services, Campus Police Building, Post Office Box 129, Decatur, MS 39327, Phone: 601-635-6267, Fax: 601-635-4067, Email: compliance@ecc.edu.
 Inquiries regarding compliance with ADA are coordinated by the Director of Student Success, Mammie Ethel Burton Memorial Library, Post Office Box 129, Decatur, MS 39327, Phone: 601-635-6228, Fax: 601-635-2150, Email: compliance@ecc.edu.

FELONY/MISDEMEANOR DECLARATION

Have you ever been convicted of or have charges pending against you for a felony or misdemeanor in any state/jurisdiction? ___ Yes ___ No **If yes, please attach explanation.**

*If you have been convicted, pleaded guilty or pleaded no contest to certain felony crimes, you may be unable to obtain licensure/certification or attend clinical or obtain employment in a licensed health care facility in Mississippi. For more information, refer to the college website or contact the Dean of Healthcare at deverett@eccc.edu.

PREVIOUS HEALTHCARE PROGRAM ENROLLMENT

Have you ever been enrolled in a school of nursing or other health related program? ___ Yes ___ No
If yes, please answer the following for each program:

Type of Program	School	City	State	Dates Attended	Did you graduate? Yes or No

*If you did not complete a nursing program, you will need a letter from that **program director** stating your last semester completed and/or eligibility for readmission emailed to deverett@eccc.edu.

If you successfully completed the program, please provide the following information:

Date of Licensure/Certification/Registration _____

Licensure/Certification/Registry Number _____

Are charges pending against you concerning licensure or practice in any state jurisdiction?

___ Yes ___ No **If yes, please attach explanation**

LPN to ADN Transition ENTRANCE EXAM: HESI A2 with Critical Thinking

As part of your admission process into the LPN to ADN Transition program, you will be required to take the HESI Admission Assessment Exam. HESI Admission Assessment Exams from other nursing programs are non-transferrable to ECCC. Please allow a maximum of 4 hours for this exam.

Payment is due in the Business Office before you can submit your application. **Attach receipt to your Application Packet and submit to the Office of Healthcare Education.** You will receive an email with a location and date once your completed application is processed.

Have you ever taken the HESI A2 with Critical Thinking at East Central Community College?

___ YES ___ NO **If yes, when (month and year)?** _____

Free HESI A2 practice questions are available at <http://www.hesia2test.com/>
Chemistry and Biology sections are not tested.

**EAST CENTRAL COMMUNITY COLLEGE
NURSING PROGRAM POLICIES**

EMPLOYMENT HISTORY FORM

(To be completed by direct nursing supervisor)

APPLICANT NAME: _____
Last First Middle Maiden

HOME ADDRESS: _____
Street or P. O. Box

City State Zip

PHONE NUMBER: _____
Home Cell Work

Employment History: (One year of clinical experience as an LPN within the past five (5) years).

Facility Address Date of Employment

Job Title

I do hereby attest that the above referenced individual has worked under my supervision during the above stated dates of employment.

Signature of direct nursing supervisor Date

Contact number _____

**EAST CENTRAL COMMUNITY COLLEGE
HEALTHCARE PROGRAM
CERTIFICATION and POLICIES ACKNOWLEDGE**

I certify that the information I have provided on this application is accurate and that I have not intentionally withheld information requested. I understand that any falsification of information may subject me to dismissal from any program.

Signature

Date

I understand that it is my responsibility to use the checklist to make sure my application is complete when turned in to the Office of Healthcare. It is not the responsibility of Mrs. Cooley or any Faculty to tell what is missing. If any of the required documents from the check list are missing, my application will be considered INCOMPLETE if the items are not received before October 1st deadline.

Signature

Date

I have read and understand the policies outlined in the ECCC LPN to ADN Transition Nursing program required for admission. If I am approved for admission into the program, I concur that I meet the standards required within the policies.

Signature

Date

Practice Problems for Dosage Calculation

1. Prescription: NIFEdipine ER 60 mg tablet PO daily.

Available: NIFEdipine 30 MG tabs

How many tablet or tablets would you administer?
(Round your answer to the nearest whole number).

$$\text{Answer: } \underline{?} \text{ tab} = \frac{1 \text{ tab}}{30\text{mg}} \times \frac{60 \text{ mg}}{1} = \mathbf{2 \text{ tabs}}$$

2. Prescription: azithromycin 400 mg PO every day.

Available: azithromycin Oral Suspension 200 mg/5ml

How many teaspoons would you administer?
(Round your answer to the nearest whole number).

$$\text{Answer: } \underline{?} \text{ tsp} = \frac{1 \text{ tsp}}{5 \text{ mL}} \times \frac{5 \text{ mL}}{200 \text{ mg}} \times \frac{400\text{mg}}{1} = \mathbf{2 \text{ tsp}}$$

3. Prescription: digoxin 0.125 mg PO every day.

Available: digoxin 250 mcg tabs

How many tablets would you give?
(Round your answer to one decimal place).

$$\text{Answer: } \underline{?} \text{ tabs} = \frac{1 \text{ tab}}{250\text{mcg}} \times \frac{1000\text{mcg}}{1\text{mg}} \times \frac{0.125 \text{ mg}}{1} = \mathbf{0.5 \text{ tab}}$$

4. Order: cephalixin 0.5 G PO q6 hours.

Available: cephalixin Oral Suspension 125mg/5ml

How many mL would you give per dose?
(Round your answer to the nearest whole number).

$$\text{Answer: } \underline{?} \text{ mL} = \frac{5 \text{ mL}}{125 \text{ mg}} \times \frac{1000 \text{ mg}}{1 \text{ gram}} \times \frac{0.5 \text{ grams}}{1} = \mathbf{20 \text{ mL}}$$

5. Prescription: rosuvastatin calcium 10 mg PO daily at HS.

Available: rosuvastatin calcium 20 mg tabs

How many tablets do you give?
(Round your answer to one decimal place).

$$\text{Answer: } \underline{?} \text{ tab} = \frac{1 \text{ tab}}{20 \text{ mg}} \times \frac{10 \text{ mg}}{1} = \mathbf{0.5 \text{ tab}}$$

6. Prescription: doxycycline 50 mg PO every 12 hours.

Available: doxycycline 100mg tab

How many tablets do you give?
(Round your answer to one decimal place).

$$\text{Answer: } \underline{?} \text{ tab} = \frac{1 \text{ tab}}{100\text{mg}} \times \frac{50 \text{ mg}}{1} = \mathbf{0.5 \text{ tab}}$$

7. Prescription: cefuroxime 250 mg PO every 12 hours.

Available: cefuroxime 250 mg tab

How many tablets do you give?
(Round your answer to the nearest whole number).

$$\underline{?} \text{ tabs} = \frac{1 \text{ tab}}{250\text{mg}} \times \frac{250 \text{ mg}}{1} = \mathbf{1 \text{ tab}}$$

8. Prescription: amoxicillin 0.4 grams PO every 6 hours.

Available: amoxicillin Oral Suspension 250 mg/5ml

How many mL do you administer?
(Round your answer to the nearest whole number).

$$\text{Answer: } \underline{?} \text{ mL} = \frac{5 \text{ mL}}{250 \text{ mg}} \times \frac{1000 \text{ mg}}{1 \text{ gram}} \times \frac{0.4 \text{ grams}}{1} = \mathbf{8 \text{ mL}}$$

9. Order: diphenhydramine liquid 50 mg PO now.

Available: diphenhydramine liquid 25mg /10 ml

How much will you administer?
(Round your answer to the nearest whole number).

$$\text{Answer: } \underline{?} \text{ mL} = \frac{10 \text{ mL}}{25\text{mg}} \times \frac{50 \text{ mg}}{1} = 20 \text{ mL}$$

10. Prescription: amoxicillin 0.5 grams PO q8 hours.

Available: amoxicillin Oral Suspension 250 mg/5 ml

How many mL do you give?
(Round your answer to the nearest whole number).

$$\text{Answer: } \underline{?} \text{ mL} = \frac{5 \text{ mL}}{250\text{mg}} \times \frac{1000 \text{ mg}}{1 \text{ gram}} \times \frac{0.5 \text{ grams}}{1} = \mathbf{10 \text{ mL}}$$

11. Order: levothyroxine 0.025 mg PO every day.

Available: levothyroxine 50 mcg tabs.

How many tablets would you give?
(Round your answer to one decimal place).

$$\text{Answer: } \underline{?} \text{ tab} = \frac{1 \text{ tab}}{50\text{mcg}} \times \frac{1000 \text{ mcg}}{1 \text{ mg}} \times \frac{0.025 \text{ mg}}{1} = \mathbf{0.5 \text{ tab}}$$

12. Order: ampicillin 1 gram PO every 6 hours.

Available: ampicillin 500 mg capsules.

How many capsules would you give?
(Round your answer to the nearest whole number).

$$\text{Answer: } \underline{?} \text{ cap} = \frac{1 \text{ cap}}{500 \text{ mg}} \times \frac{1000 \text{ mg}}{1 \text{ gram}} \times \frac{1 \text{ gram}}{1} = \mathbf{2 \text{ caps}}$$

13. Order: Phenobarbital elixir 60 mg PO HS

Available: Phenobarbital elixir 20 mg / 5 ml

How many mL would you give per dose?
(Round your answer to the nearest whole number).

$$\text{Answer: } \underline{?} \text{ mL} = \frac{5 \text{ mL}}{20 \text{ mg}} \times \frac{60 \text{ mg}}{1} = \mathbf{15 \text{ mL}}$$

14. Order: hydroxyzine 25 mg IM.

Available: hydroxyzine 50 mg / 1 ml

How many mL do you give?
(Round your answer to one decimal place).

$$\text{Answer: } \underline{?} \text{ mL} = \frac{1 \text{ mL}}{50 \text{ mg}} \times \frac{25 \text{ mg}}{1} = \mathbf{0.5 \text{ mL}}$$

15. Order: methylprednisolone 60 mg IM twice daily.

Available: methylprednisolone injection 125 mg / 2 mL

How many mL will you administer in a single dose?
(Round to the nearest whole number).

$$\text{Answer: } \underline{?} \text{ mL} = \frac{2 \text{ mL}}{125 \text{ mg}} \times \frac{60 \text{ mg}}{1} = \frac{120 \text{ mL}}{125} = 0.96 \text{ mL} = \mathbf{1 \text{ mL}}$$

16. Order: Ceftriaxone 400 mg IM now.

Available: Ceftriaxone 1gm vial with directions to add 3.5 mL sterile water to yield an approximate concentration of 250 mg Ceftriaxone per mL.

How many mL would you give? (Round your answer to one decimal place).

$$\text{Answer: } \underline{?} \text{ mL} = \frac{1 \text{ mL}}{250 \text{ mg}} \times \frac{400 \text{ mg}}{1} = \mathbf{1.6 \text{ mL}}$$

17. Order: ceftazidime 1gram IM at 0900.

Available: ceftazidime 1gram vial with directions to add 3 mL sterile water to yield an approximate concentration of 280 per mL.

How many mL will the nurse administer?
(Round your answer to one decimal place).

$$\text{Answer: } \underline{?} \text{ mL} = \frac{1 \text{ mL}}{280 \text{ mg}} \times \frac{1000 \text{ mg}}{1 \text{ gram}} \times \frac{1 \text{ gram}}{1} = \mathbf{3.6 \text{ mL}}$$

18. Order: naloxone 0.5mg IM stat.

Available naloxone 400 mcg / 1 ml

How many mL would you give?
(Round your answer to one decimal place).

$$\text{Answer: } ? \text{ mL} = \frac{1 \text{ mL}}{400 \text{ mcg}} \times \frac{1000 \text{ mcg}}{1 \text{ mg}} \times \frac{0.5 \text{ mg}}{1} = \mathbf{1.3 \text{ mL}}$$

19. Order: furosemide 60 mg PO every day.

Available furosemide 40 mg tabs

How many tablets do you give?
(Round your answer to one decimal place).

$$\text{Answer: } ? \text{ tab} = \frac{1 \text{ tab}}{40 \text{ mg}} \times \frac{60 \text{ mg}}{1} = \mathbf{1.5 \text{ tab}}$$

20. Order: enoxaparin 30 mg subcutaneous 0900.

Available enoxaparin 40 mg / 0.4 mL

How much will the nurse administer
(Round to one decimal place).

$$\text{Answer: } ? = \frac{0.4 \text{ mL}}{40 \text{ mg}} \times \frac{30 \text{ mg}}{1} = \mathbf{0.3 \text{ mL}}$$

Remember to look over your conversions.