EAST CENTRAL
COMMUNITY COLLEGE

P. O. Box 129
Decatur, Mississippi 39327

Tel. No. 601-635-6293	DIVISION OF HEALTHCARE EDUCATION	Fax No. 601-635-5472

Email address: lwall@eccc.edu

To: Prospective Student

From: Sheryl Allen, PhD, MSN, RN
            Dean, Division of Healthcare Education

Thank you for your interest in the Licensed Practical Nurse (LPN) to Associate Degree Nursing (ADN) Transition program option. This course focuses on concepts related to the care of adult and pediatric patients with commonly occurring health alterations in the medical-surgical practice environment. We place emphasis on using the nursing process to develop competence in emerging therapeutic relationships, providing and coordinating legal and ethical nursing care. Our program offers diverse learning opportunities in the classroom, skills lab, and simulation lab to build intellectual knowledge, promote critical thinking, and develop clinical judgment for the lifelong learner.

The course design uses a fast track approach to assist the LPN with transition into the ADN Nursing program. The spring semester of coursework includes a six credit hour nursing course, which includes four hours of theory and two hours of lab. Students who successfully complete the course matriculate into the third semester of the traditional ADN program with six semester credit hours. Course credit by validation is awarded for the LPN certificate from accredited/approved program, unencumbered MS license, and documentation of one-year clinical experience as a LPN. Nineteen semester validation credit hours is awarded upon successful completion of the course.

This packet contains information required for applying to the **LPN to ADN Transition** program option.

Packet documents include:
1. Welcome letter to prospective student
2. Admission requirements and acceptance criteria
3. Application instructions
4. LPN to ADN Transition application
5. Entrance testing instructions
6. Dosage Calculation Practice Problems
7. Employment History form

If you have questions about the LPN to ADN Transition program option or any ECCC healthcare programs, please call the Office of Healthcare Education at 601-635-6293.

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

**Contact the Workforce Innovation and Opportunity Act (WIOA) coordinator for financial assistance funds availability at 601-635-6404 or ECCC website at https://www.eccc.edu/wioadislocated-worker-program.

***Contact Student Services for scholarship application packets.

LPN TO ADN TRANSITION PROGRAM OPTION

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 of instruction includes a balance of general education, nursing theory, and laboratory and clinical experiences to incorporate knowledge, attitudes, and skills applicable to life in a complex society.

The associate degree nurse 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). Graduates who meet the Mississippi State Board of Nursing (MBON) requirements are eligible to write the National Council Licensure Examination for Registered Nurses (NCLEX-RN®). The MBON may deny application for licensure due to, but not limited to, conviction of a felony; commission of fraud or deceit in the application process; or addiction to alcohol or other drugs. East Central Community College's ADN program is accredited by the Board of Trustees of State Institutions of Higher Learning of Mississippi (MS IHL) and the Accreditation Commission for Education in Nursing (ACEN).

ADMISSION REQUIREMENTS

1. Applicant must apply to East Central Community College for regular admission and be accepted by the College before applying to the LPN to ADN Transition program option.
2. All applicants must have a minimum ACT composite score of 18 or higher.
3. All applicants must have a cumulative GPA of 2.00 or higher.
4. All applicants are required to complete prerequisite courses with a letter grade of "C" or higher. An applicant may be accepted into the LPN to ADN Transition program option prior to completing prerequisite courses but all prerequisite courses must be completed with a letter grade of "C" or higher prior to the first day of spring semester nursing class. Prerequisites courses include:
   - Anatomy & Physiology I with lab or upper level equivalent
   - Anatomy & Physiology II with lab or upper level equivalent
   - Microbiology with lab or upper level equivalent
   - English Composition I
   - English Composition II
   - Human Growth & Development
5. All applicants are required, at the student's expense, to take a admission examination scheduled by the Office of Healthcare Education. Access to **HESI A2 Practice Tests** are available at http://www.hesia2practicetest.com/ ECCC does not test to Biology and Chemistry.
6. All applicants are required to take a scheduled dosage calculation test and score 100% prior to being accepted into the program.
7. All applicants must have a current unencumbered LPN license to practice in Mississippi.
8. All applicants must have one-year clinical work experience, within the last five years, and submit documentation from employer/s using the Employment History Form included in the application packet.
9. All candidates selected for admission into the program must submit to fingerprinting and a criminal history background check scheduled by the Office of Healthcare Education and have a satisfactory result from the check.
10. All applicants selected for admission into the LPN to ADN Transition program option must submit proof of the following items:
    - Satisfactory physical examination including abilities to perform essential functions related to Americans with Disabilities Act (ADA) core standards
    - Evidence of current immunizations against measles, mumps, rubella (MMR), or rubella titer
    - Hepatitis B vaccine, or signed declination statement
    - Current American Heart Association® Healthcare Provider Course

11. No visible tattoos are allowed on the hands. Makeup, bandages, dressings, and artificial substances increase the risk for patient infections and are not allowed on the hands. Other areas must covered at all times in the clinical setting.
12. Students selected for admission must agree to be randomly tested for illegal substances at any time while enrolled in the ECCC ADN program. An annual substance screening cost is included in student course fees. Students may be subject to additional substance screening at the student's expense.
13. Agree to annual influenza vaccination and tuberculosis skin testing during fall semesters. The cost for tuberculosis skin testing is included in student course fees.

The number of students admitted into the program will vary according to resources available, which may include faculty availability and classroom space. Priority is given to qualified applicants who meet all admission criteria, academic records, and Acceptance Criteria ranking score placement on the admission scale. Students admitted to any nursing courses must adhere to the *ECCC College Catalog*, *ECCC Student Handbook*, ECCC *Policies and Procedures*, and *Nursing Student Handbook*.

ADMISSION INSTRUCTIONS

All requirements for ECCC and the ADN program must be completed and submitted prior to the start of the semester. Applicants are responsible for submitting completed applications and required documentation. Incomplete applications or documentation are not submitted to the Policy, Admission, and Progression Committee for review.

1. Review ECCC College admission requirements on the website at https://www.eccc.edu/admissions and complete the online Admissions Application at https://my.eccc.edu/ICS/FutureStudents/Default_Page.jnz?portlet=Apply_Online&screen=Display+Form&screenType=next
2. Applicants must be accepted by the College before applying to the nursing program. Proof of admission is a copy of the email or a copy of the official letter from the Office of Admissions that states you have been accepted to the College. Current students taking classes at ECCC may submit a copy of an unofficial transcript, which is located on myEC.
3. Review all requirements for admission to the LPN to ADN Transition program option. Complete the **Healthcare Education LPN to ADN Transition Admission Application**. Mail or deliver the completed application to:
   Healthcare Education Division
   East Central Community College
   P. O. Box 129
   Decatur, MS 39327
4. Applicants must submit one official transcript from every college(s) attended to the ECCC Office of Admission **and** one official transcript from every college(s) attended to the Healthcare Education Division Office.
5. All applicants must submit official ACT score results to the ECCC Office of Admissions. The ADN nursing program cannot accept Accuplacer or other measurement tools for admission to the program.
6. Applicant must submit a copy of LPN license printed from the Mississippi Board of Nursing website under license verification. The Healthcare Education Division will verify unencumbered licensure status with Nursys®.
7. Submit the completed Employee History Form.
8. All candidates that are selected for admission to the program must pay a $70 criminal history background check fee to the business office and bring a copy of the receipt to the Office of Healthcare Education. Candidates will be notified of the deadline for this payment upon acceptance.
9. Applicants must pay $45 for admission examination to the business office and bring a copy of the receipt to the Office of Healthcare Education by **October 1, 2019**.
10. Applicant Email addresses must be accurate and active. Acceptance or non-acceptance into the program notifications are sent via Email.
11. Applicants must refer to the ECCC College Catalog for post-acceptance requirements.
12. Deadlines for completed program applications are **October 1, 2019**.

Admission into the LPN to ADN Transition program option is not guaranteed.

ACCEPTANCE CRITERIA

Applicants are considered for acceptance into the LPN to ADN Transition program option when an applicant's files are complete in both the Office of Admissions and the Office of Healthcare Education. **Students are responsible for clarifying that data in the files are correct and received by the application deadline of October 1st.** Late applications and documentation will not be accepted after the deadline.

The Policies, Admission, and Progression committee calculates points using the rubric below and ranks qualified applicants according the total points awarded.

Points Categories

Category	Points	Category	Points
1. Lives within the ECCC district or previously enrolled at ECCC. (1 Point)	_____	**4. Students who received a grade of "D" or "F" in more than 6 semester credit hours in the ADN curriculum will receive a 10-point deduction.**	_____
2. College GPA on ADN Curriculum Courses or High School GPA with no college courses taken.	_____	**5. Completed required science courses:** (Quality Points) **A&P I, A&P II, Microbiology**	_____

GPA:	Points
3.5 - 4.0	4
3.0 - 3.49	3
2.5 - 2.99	2
2.0 - 2.49	1

Sciences & labs completed with a grade of "C" or higher.

	Points
Three science courses	3
Two science courses	2
One science course	1

*No points are awarded when science courses are not complete with a grade of "C" or higher.

3. ACT composite score   _____

6. Preadmission examination results: _____

ACT composite score:	Points
Above 27	6
24-26	5
21-23	4
18-20	3

Pre-entrance exam cumulative

score:	Points
85% or Above	5
80% - 84%	4
75% - 79%	3
70% - 74%	2
65% - 69%	1
Below 65%	0

TOTAL POINTS   _____

All Healthcare Education Division applicants must submit to and satisfactorily complete a criminal history background check. Admission to the program may be rescinded and reversed based on review of an individual's criminal background check results.

All applicants will be notified by Email of acceptance or non-acceptance in the LPN to ADN Transition program option by **November 1, 2019**. Please verify your Email address on the application. All communication and notification from the Office of Healthcare Education will be by Email.

Criminal History Background Checks

All Healthcare Education Division students must submit to and satisfactorily complete a criminal background check. Candidacy for admission may be rescinded and reversed based on review of the students' criminal background check. Students and applicants who refuse to submit to a criminal background check will be disqualified as an applicant if seeking admission or readmission to the program. Students and applicants who are disqualified from a Healthcare Education Division program may seek admission into another educational program.

Criminal history record checks will be performed through the legal process of collecting data and fingerprints on all healthcare applicants and students by designated ECCC personnel. Fingerprints and data will be transmitted to the Mississippi Department of Public Safety and run through the Mississippi Criminal Information and Federal Bureau of Investigation databases to complete state and national criminal history background checks.

ECCC performs criminal history record checks pursuant to, but not inclusive to, Section 37-29-232 of the Mississippi Code of 1972, Annotated, Section 43-11-13 of the Mississippi Code of 1972.

A comprehensive criminal history search will be conducted through all state and federal databases. All convictions, deferred adjudications or judgments, expunged criminal records, and pending criminal charges will be noted. The student and/or applicant will be responsible for expenses to provide any necessary documentation showing disposition of charges.

Students and/or applicants have the right to review information reported by the Mississippi Department of Health for accuracy and completeness. (See Noncriminal Justice Applicant's Privacy Rights.) Prior to making a final determination that will adversely affect the student, the student will have the opportunity to provide any supporting documentation in disposition of the charge(s). The process to review, challenge, correct, or update erroneous information can be obtained at http://www.fbi.gov/about-us/cjis/background- checks.

Although it is the students and/or applicants' right to withhold the evidence of the criminal background check, the college has to adhere to standards set forth by its clinical laboratory affiliates. Therefore, results must be disclosed to the Dean of Healthcare Education to seek eligibility for any healthcare education program at ECCC. Failure to notify the Dean within seven (7) business days of receiving the report will result in an automatic ineligible status for admission or progression into the healthcare programs of ECCC. Employability is not guaranteed in the chosen health education program.

All healthcare education students are required to submit to a criminal background check according to Mississippi law prior to any clinical experience. If a 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 the person may not be eligible to attend clinical experience, thus forfeiting the slot in the program.

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Licensed Practical Nursing to Associate Degree Nursing Transition Program of Study

Academic Calendar	Course	Credit Hours
Pre-requisites	BIO 2511 & BIO 2513 or BIO 2514: Anatomy & Physiology I with Lab or upper level equivalent	4.00
	BIO 2521 & BIO 2523 or BIO 2524: Anatomy & Physiology II with Lab or upper level equivalent	4.00
	BIO 2921 & BIO 2923 or BIO 2924: Microbiology with Lab or upper level equivalent	4.00
	ENG 1113: English Composition I	3.00
	ENG 1123: English Composition II	3.00
	EPY 2533: Human Growth & Development	3.00
		Total: 21.00
Year One Spring	NUR 1116: LPN to ADN Transition	6.00
	Upon successful completion of the LPN to ADN Transition course, credit by validation is awarded for the LPN certificate from an accredited/approved program; unencumbered MS license, and documentation of one-year experience as a LPN.	(13.00)
	*Fine Arts or Humanities Elective	3.00
		Total: 22.00
Year 2 Fall	NUR 2319: Adult Health Nursing II	8.00
	NUR 2120: Nurse Seminar	0.00
	PSY 1513: General Psychology	3.00
	*SPT 1113: Public Speaking I	3.00
		Total: 16.00
Year 2 Spring	NUR 2410: Advanced Concepts of Nursing Practice	10.00
	NUR 2941: NCLEX Review	1.00
	NUR 2121: Nurse Seminar	1.00
		Total: 12.00

* Courses may be taken in any sequence.

Enrollment in NUR courses is limited to students who have been admitted to the ADN program and these courses must be taken in the sequence specified. All nursing courses must be completed within four years to graduate from the ADN program.

Progression/Graduation Requirements: Semester grade average of 80 or above in NUR courses, grade of "C" or above in all required courses, mastery of selected nursing skills, and completion of required assessment examination.

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

EAST CENTRAL
COMMUNITY COLLEGE

_____
(Date Office Received)

LPN to ADN Transition Program Option   **Student ID# _____**

APPLICANT INFORMATION

Name_____ _____ _____
          Last   First   Middle/Maiden   SS#   Date of Birth

Addresss_____
          Street/Apartment Number/P.O. Box   City   State   Zip   County

Telephone (____) _____ (____) _____ _____
                      Home   Cell or Work   E-mail (PRINT)

ACADEMIC INFORMATION

_____ _____ _____/_____
High School Attend   Graduation Date   ACT Score   Date Taken

City _____ State_____ Zip _____

GED ☐ Yes ☐ No GED Graduation Date _____ State Where GED Was Taken_____

Other High School Equivalency Exam Name _____ Date Taken _____

*Validated results of ACT must be submitted with application or on file in the Office of Admissions.

List <u>all</u> colleges/universities currently or previously attended, **including ECCC**.

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

An Official Transcript from each institution attended (excluding ECCC), and/or GED or other high school equivalency exam results must be submitted to the 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.

FELONY/MISDEMEANOR DECLARATION

Please select "Yes" if you believe previous charges or convictions were removed. Charges and/or convictions may remain on your historical background.

Have you ever been convicted of, charged with, 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 or misdemeanor crimes, you may be unable to obtain licensure/certification, participate in clinical, or obtain employment in a licensed health care facility in Mississippi.

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 ☐ No
					☐ Yes ☐ No
					☐ Yes ☐ No

If you did not complete a nursing program, you will need to submit a letter of "Good Standing" from the dean or program director with your application.

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

Date of Licensure/Certification/Registration _____

Licensure/Certification/Registry Number _____

Are charges pending against your license or practice in any jurisdiction?   ☐ Yes   ☐ No
If yes, please attach an explanation.

CERTIFICATION

I hereby certify that the information I have provided on this application is accurate and that I have not intentionally mislead or withheld any information requested. I understand that any falsification of information may subject me to refusal for admission into, or dismissal from, any East Central Community College healthcare education program.

_____   _____

Applicant Signature   Date

LPN TRANSITION TO ADN NURSING ENTRANCE EXAM (HESI)

As part of your admission process into the LPN to ADN Transition program option, all applicants are required to complete the HESI Admission Assessment for Associate Degree Nursing (HESI A2 with Critical Thinking). Please allow a maximum of four (4) hours to complete the exam. Select a date listed on this form. Forward a copy of this form and payment of $45.00 by the deadline of October 1, 2019 to the address below.

> East Central Community College
> Attention: Business Office
> P. O. Box 129
> Decatur, MS 39327

Applicants are responsible for submitting copies of the form and payment receipt to the Healthcare Education Office if payment is made in person to ECCC's Business Office. Payments mailed to the Business Office are forwarded to the Office of Healthcare Education.

The required dosage calculation examination will be administered at **8:30 a.m**. in the Computer Lab in the Phil A. Sutphin Hall prior to the HESI Admission Assessment Exam. ***Check in time for testing is 8:15am.** The HESI Admission Assessment Exam will be given in the **Computer Lab (Room 115) in the Phil A. Sutphin Hall** on the ECCC Campus at __9:00 a.m.__ on the following dates:

PLACE A (√) BY THE DATE OF YOUR SELECTION	TEST DATE	Test Time	LAST DAY TO PAY THE BUSINESS OFFICE
☐	Tuesday, October 8, 2019	8:15am – 1:00pm	**October 1, 2019**
☐	Wednesday, October 9, 2019	8:15am – 1:00pm	**October 1, 2019**

Each exam date is limited to 30 participants. If a chosen exam date is closed, a new date will be assigned.

A confirmation ticket will be Emailed to each applicant. The confirmation ticket must be presented in the Phil A. Sutphin Hall Computer Lab (Room 115) prior to taking the exam. Applicants **must** present one form of photo ID at this time.

Free HESI A2 practice questions: http://www.hesia2practicetest.com/

NOTE: TESTING FEES, ONCE PAID, ARE NON-REFUNDABLE.

Please fully complete the following information:

PLEASE PRINT

Name _____   *Telephone* _____

Address _____   *Email* _____

City, State _____

Zip _____

Selected Date for HESI Testing: _____

Practice Problems for Dosage Calculation

1. Order: Thyroxin 0.5 mg PO every day. Available 1 mg scored tablets. How many tablets would you give? (Round your answer to the nearest tenth.)

   ? tab = 1 tab X 0.5 mg = **0.5 tab**
          1mg   1

2. Order: Zithromax 400 mg PO every day. Available: Zithromax 200 mg per 5 mL. How many teaspoons would you give? (Round your answer to the nearest whole number.)

   ? tsp = 1 tsp X 5 mL X 400mg = **2 tsp**
         5 mL   200 mg   1

3. Order: Lanoxin 0.125 mg PO every day. Available: Lanoxin 250 mcg per scored tablet. How many tablets would you give? (Round your answer to the nearest tenth.)

   ? tabs = 1 tab X   1000mcg X 0.125 mg = **0.5 tab**
          250mcg   1mg   1

4. Order: Cephalexin 0.5 g po q 6 hours Available: Cephalexin oral suspension 125 mg/5 mL. How many mL would you give per dose? (Round your answer to the nearest whole number.)

   ? mL = 5 mL X 1000 mg X 0.5 g = **20 mL**
        125 mg   1 g   1

5. Order: Zantac 35mg IM every 8 hours. Available: Zantac 25mg per 1mL. How many mL do you give? (Round your answer to the nearest tenth.)

   ? mL =   1mL X   35mg = 35 = **1.4 mL**
          25mg   1   25

6. Order: Doxycycline 50 mg po every 12 hours. Available: Doxycycline 100 mg per scored tablet. How many tablets do you give? (Round your answer to the nearest tenth.)

   ? tab = 1 tab X 50 mg = **0.5 tab**
         100mg   1

7. Order: Ceftin 250 mg po every 12 hours. Available: Ceftin 125 mg per tablet. How many tablets do you give? (Round your answer to the nearest whole number.)

   ? tabs = 1 tab X 250 mg = **2 tabs**
         125   mg   1

8. Order: Amoxil 0.4 g po every 6 hours. Available: Amoxil 250 mg per 5 mL. How many mL do you give? (Round your answer to the nearest whole number.)

   ? mL = 5 mL X 1000 mg X   0.4 g = **8 mL**
        250 mg   1 g   1

9. Order: Lasix 60 mg po every day. Available: Lasix 40 mg tablets. How many tablets do you give? (Round your answer to the nearest tenth.)

? tab = <u>1 tab</u>   X   <u>60 mg</u>   = **1.5 tab**
         40 mg   1

10. Order: Augmentin 0.5 g po q 8 hours. Available: Augmentin 250 mg/5 mL. How many mL do you give? (Round your answer to the nearest whole number.)

? mL = <u>5 mL</u>   X   <u>1000 mg</u> X <u>0.5 g</u> = **10 mL**
        250 mg   1 g   1

11. Order: Synthroid 0.025 mg PO every day. Available 50 mcg scored tablets. How many tablets would you give? (Round your answer to the nearest tenth.)

? tab = <u>1 tab</u> X <u>1000 mcg</u> X <u>0.025 mg</u> = **0.5 tab**
         50 mcg   1 mg   1

12. Order: Benadryl elixir 6.25 mg po every 4 to 6 hours. Available: Benadryl elixir 12.5mg/5mL. How many milliliters would you give? (Round your answer to the nearest tenth.)

? mL = <u>5 mL</u> X <u>6.25mg</u> = **2.5 mL**
        12.5mg   1

13. Order: Ampicillin 1 gram po every 6 hours. Available: Capsules labeled 500 mg. How many capsules would you give? (Round your answer to the nearest whole number.)

? cap = <u>1 cap</u> X <u>1000 mg</u> X <u>1 g</u> = **2 caps**
         500 mg   1 g   1

14. Order: Penicillin G 400,000 units IM q 4 hours. Available: Penicillin G 5,000,000 units. Directions state: Add 8 mL sterile water for reconstitution to yield 500,000 units/mL. How many mL will you give? (Round your answer to the nearest tenth.)

? mL = <u>1 mL</u>   X   <u>400,000 units</u>   = **0.8 mL**
        500,000 units   1

15. Order: Phenobarbital 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.)

? mL = <u>5 mL</u>   X   <u>60 mg</u>   = **15 mL**
        20 mg   1

16. Order: Vistaril 25 mg IM.   Available: Vistaril 50 mg/mL. How many mL do you give? (Round your answer to the nearest tenth.)

? mL = <u>1 mL</u>   X   <u>25 mg</u> = **0.5 mL**
        50 mg   1

17. Order: Demerol 75 mg IM. Available: Demerol 50 mg per mL. How many mL do you give? (Round your answer to the nearest tenth.)

? mL = $\underline{1\ mL}$ X $\underline{75\ mg}$ = **1.5 mL**
       50 mg   1

18. Order: Ceftriaxone 400 mg IM. 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 the nearest tenth.)

? mL = $\underline{1\ mL}$ X $\underline{400\ mg}$ = **1.6 mL**
       250 mg   1

19. Order: Fortaz 1 g IM Available: Fortaz 1 g vial with directions to add 3.5 mL sterile water to yield an approximate concentration of 400 mg Fortaz per mL. How many mL would you give? (Round your answer to the nearest tenth.)

? mL = $\underline{1\ mL}$ X $\underline{1000\ mg}$ X 1 g = **2.5 mL**
       400 mg   1g   1

20. Order: Narcan 0.5mg IM stat.   Available: Narcan 400mcg per mL. How many mL would you give? (Round your answer to the nearest tenth.)

? mL = $\underline{1\ mL}$ X $\underline{1000\ mcg}$ X $\underline{0.5mg}$ = **1.3mL**
       400 mcg   1mg   1

Remember to look over your conversions.

If the answer is less than one, round to the nearest hundredth. Ex. 0.833 = 0.83

If the answer is greater than one, round to the nearest tenth. Ex. 1.45 = 1.5

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_____