

# Optimizing Evaluation of Clinical Documentation Assignments in Acute and Primary Care Nurse Practitioner Programs

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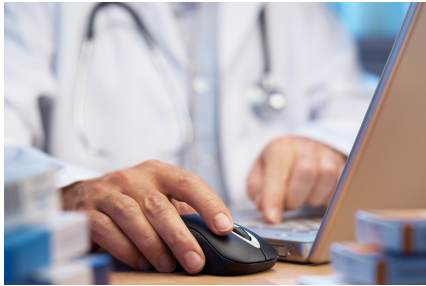
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# Disclosures

- Drs. Blackwell, Guido-Sanz, Eckhoff, and D'Amato-Kubiet have no conflicts of interests or financial relationships to disclose.

# Introduction

- Competence in clinical documentation is a *MUST*
  - Essential for all NP clinical practice settings
  - Component of the standards of NP education:
    - NONPF Core Competencies (2017):
      - Technology and Information Literacy Competencies:
        - **Use of electronic communication methods**, including social media, with healthcare professionals, patients, families, and caregivers

# Introduction

- Competence in clinical documentation is a *MUST*
  - Component of the standards of NP education:
    - Common Advanced Practice Registered Nurse Doctoral-Level Competencies (2017):
      - Domain 4: Interpersonal and Communication Skills
        - **Demonstrates interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, the public, and health professionals; and promote therapeutic relationships with patients** across a broad range of cultural and socioeconomic backgrounds

# Population-Specific Competency

- Family/Across the Lifespan (NONPF, 2013):
  - Independent Practice Competencies:
    - Performs and **accurately documents** appropriate comprehensive or symptom-focused physical examinations on patients of all ages (including developmental and behavioral screening, physical exam and mental health evaluations).

# Population-Specific Competency

- Adult-Gerontology Primary Care (NONPF & AACN, 2016):
  - Technology & Information Literacy:
    - Templates for documentation in nursing care
    - Electronic communication with other professionals and patients
    - Applies advanced communication skills and processes to collaborate with caregivers and professionals to optimize health care outcomes for adults with acute, critical or complex chronic illness.

# Population-Specific Competency

- Adult-Gerontology Acute Care  
(NONPF & AACN, 2016):
  - Health Delivery Systems:
    - Applies advanced communication skills and processes to collaborate with caregivers and professionals to optimize health care outcomes for adults with acute, critical or complex chronic illness.

# Population-Specific Competency

- Take Away Points:
  - Building competency in clinical documentation is *essential*
  - All the major NONPF and AACN guidelines regarding NP competency mastery includes language related to documentation as a competency
  - Access to learning electronic medical record (EMR) systems to complete documentation is vital



# Documentation Competency Exemplar: AGACNP

- Two AGACNP Programs at UCF:
  - BSN-DNP
  - Professional Graduate Certificate (for board-certified and state-licensed APRNs)
- 1 Critical Care Skills Course with Documentation:
  - NGR 6230L: Diagnostics and Skills for the Critically Ill
- 3 Major Clinical Immersion Courses w/ Documentation:
  - NGR 6211L: AGACNP II Clinical
  - NGR 6212L: AGACNP III Clinical
  - NGR 6215L: AGACNP Practicum

# Documentation Competency Exemplar: AGACNP

- NGR 6230L: Diagnostics and Skills for the Critically Ill:
  - Introduces graduate nursing students to the skills and procedures used in the management of critically ill patients.
  - Taken concurrently (corequisite) with NGR 6210: AGACNP I.
  - This course provides the psychomotor skills necessary to provide advanced practice nursing care to critically ill adults in acute care settings.

# Documentation Competency Exemplar: AGACNP

- NGR 6230L: Diagnostics and Skills for the Critically Ill:
  - Focus is on the provision of safe and effective advanced practice nursing care to diverse adult-gerontology patient populations.
  - Laboratory focuses on completion of 120 hours in the Simulation Lab.
  - One 10-hour simulation day (i.e., Advanced Practice Nursing Skills Integration Challenge), focusing on Diagnostic & Psychomotor Skills.

# Documentation Competency Exemplar: AGACNP


- I. Basic Wound Management:
  - 1. Assessment, suturing, and general management
- II. Airway Management:
  - 1. Basic principles of airway management
  - 2. Emergent airway management
  - 3. Indications for endotracheal intubation
  - 4. Insertion and management of endotracheal tubes
  - 5. Complications associated with intubation
  - 6. Bronchoscopy-diagnostic
- III. Non-Invasive and Invasive Mechanical Ventilation:
  - 1. Modes of mechanical ventilation
  - 2. Ventilation settings and clinical application
  - 3. Adjusting ventilator settings and interpreting monitor data
  - 4. Identification of issues related to patient safety
- IV. Management of Pleural Effusion, Pneumothorax, and Hemothorax:
  - 1. Principles of emergent thoracentesis
  - 2. Insertion and management of chest thoracostomy tubes and chest evacuation systems
  - 3. Identification of issues related to patient safety
- V. Hemodynamic Monitoring:
  - 1. Technologies used in monitoring hemodynamic status
  - 2. Insertion and management of arterial lines and pulmonary artery catheters in hemodynamic monitoring
  - 3. Insertion of central venous catheters and other invasive vascular lines
  - 4. Identification of issues related to patient safety
- VI. Bone Marrow Biopsy:
  - 1. Assessment and selection of bone marrow biopsy sites
  - 2. Indications and contraindications of bone marrow biopsy
  - 3. Insertion of bone marrow biopsy needles and obtaining core samples
  - 4. Identification of issues related to patient safety
- VII. Emergent Lumbar Puncture (LP):
  - 1. Assessment of surface anatomy and landmarks in LP
  - 2. Indications for lumbar puncture
  - 3. Contraindications for lumbar puncture
  - 4. Performing LP to obtain cerebrospinal fluid
  - 5. Identification of issues related to patient safety

- NGR 6230L:  
Diagnostics and Skills  
for the Critically Ill:
  - Units of Instruction

# Documentation Competency Exemplar: AGACNP

- NGR 6230L:  
Diagnostics and Skills  
for the Critically Ill:
  - *Competence Verification Book*
    - Documents all procedures done in and provides supporting evidence on the level of proficiency/competency of the student in performing those procedures.

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University of Central Florida  
Academic Health Sciences Center  
College of Nursing  
Department of Nursing Practice

**Adult Gerontology Acute Care Nurse  
Practitioner (AGACNP)  
Diagnostics & Psychomotor Skills Competence  
Verification Book**

**NGR 6230L**

**Checklist of Competencies**

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Semester: Spring 2020

Instructor: \_\_\_\_\_ Course Section: \_\_\_\_\_

Instructor Signature: \_\_\_\_\_

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# Documentation Competency Exemplar: AGACNP

- NGR 6230L: Diagnostics and Skills for the Critically Ill:
  - Course Objectives
    - Integrate specific advanced practice nursing skills in the treatment of complex illnesses in the critically ill

# Documentation Competency Exemplar: AGACNP

- NGR 6230L: Diagnostics and Skills for the Critically Ill:
  - Course Objectives
    - Demonstrate safe techniques in the following skills:
      - a. Basic wound management
      - b. Airway management
      - c. Bronchoscopy
      - d. Endotracheal intubation and ventilation
      - e. Thoracentesis and insertion of thoracostomy tubes
      - f. Insertion and ongoing assessment of central venous catheters
      - g. Insertion and ongoing assessment of arterial catheters
      - h. Insertion and ongoing assessment of PICC lines
      - i. Paracentesis and insertion of paracentesis catheters
      - j. Bone marrow biopsy
      - k. Lumbar puncture

# Documentation Competency Exemplar: AGACNP

- NGR 6230L: Diagnostics and Skills for the Critically Ill:
  - Course Objectives
    - Demonstrate safe techniques using ultrasonography in the following skills:
      - a. Insertion of central venous catheters
      - b. Insertion of arterial catheters
      - c. Insertion of PICC lines
      - d. Evaluating pneumothorax and pleural effusions
      - e. Evaluating IVC
      - f. FAST exam
      - g. Performing lumbar puncture
      - h. Evaluating right heart strain
      - i. POC ECHO
      - j. Paracentesis



# Documentation Competency Exemplar: AGACNP


- NGR 6230L: Diagnostics and Skills for the Critically Ill:
  - Documentation competency in this course is demonstrated by providing a “Procedure Note” at the conclusion of the performed skill.
  - Documentation is evaluated individually and in group documentation during simulation-based experiences.
  - Documentation competency facilitate learners to become familiar with required procedure’s note-writing terminology and modalities.

# Documentation Competency Exemplar: AGACNP

- NGR 6230L: Diagnostics and Skills for the Critically Ill:
  - Procedure Notes are required for:
    - Central Line (CVC) Access
    - Arterial Line
    - Endotracheal Intubation
    - Lumbar Puncture
    - Thoracentesis
    - Thoracostomy
    - Paracentesis
    - Bronchoscopy

# Documentation Competency Exemplar: AGACNP

- NGR 6230L: Diagnostics and Skills for the Critically Ill:
  - Procedure Note Exemplar

 <p>University of Central Florida Academic Health Sciences Center College of Nursing Department of Nursing Practice Adult-Gerontology Acute Care Nurse Practitioner Program</p> <p><b>NGR 6230L. Diagnostics and Skills for the Critically Ill</b></p> <p><b>Procedure Note Exemplar</b></p> <p><b>Central Venous Catheter (CVC, Central Line) Placement</b></p> <p>Date: _____ Time: _____ Unit: _____</p> <p>Indication: Hemodynamic monitoring/Intravenous access</p> <p>APRN Name: _____ NPI: _____</p> <p>Collaborating Attending: _____</p> <p>A time-out was completed verifying correct patient, procedure, site, positioning, and special equipment if applicable.</p> <p>The patient was placed in a dependent position appropriate for central line placement based on the vein to be cannulated.</p> <p>The patient's &lt;right/left&gt; &lt;neck/shoulder/groin&gt; was prepped and draped in sterile fashion. 1% Lidocaine was used to anesthetize the surrounding skin area.</p> <p>A triple lumen &lt;-French&gt; catheter was introduced into the &lt;internal jugular/common femoral vein&gt; using the Seldinger technique &lt;and under ultrasound guidance&gt;.</p> <p>The catheter was threaded smoothly over the guide wire and appropriate blood return was obtained.</p> <p>Each lumen of the catheter was evacuated of air and flushed with sterile saline.</p> <p>The catheter was then sutured in place to the skin and a &lt;Biopatch/sterile occlusive dressing&gt; applied.</p>	<p>If applicable, perfusion to the extremity distal to the point of catheter insertion was checked and found to be adequate.</p> <p>Attending/Fellow/Resident &lt;was/not&gt; present for the entire procedure.</p> <p>Estimated Blood Loss: _____</p> <p>The patient tolerated the procedure well and there were no complications.</p>
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# Documentation Competency Exemplar: AGACNP

- NGR 6211L: AGACNP II Clinical:
  - Clinical care of the stable and unstable adult-gerontology patient with complex cardiovascular, pulmonary, hematological, renal, and commonly occurring health care problems.
  - Clinical focuses on completion of 180 hours in the hospitalist role.
  - One 10-hour simulation day, focusing on interdisciplinary management of athletic-related orthopedic injuries (half day) and CAP (half day)

# Documentation Competency Exemplar: AGACNP

- NGR 6211L: AGACNP II Clinical:
  - Required Documentation Assignments:
    - Simulation Day: Documentation of an ED consultation on a patient meeting inpatient (IP) admission for CAP and one meeting outpatient (OP) discharge
      - Students are separated into IP and OP CAP groups
      - Simulation exercise completed
      - Both groups rejoin to discuss their cases and practice documenting the encounters together— This discussion is FACULTY lead
      - Evaluation is essentially participatory for this event

# Documentation Competency Exemplar: AGACNP

- NGR 6211L: AGACNP II Clinical:
  - Required Documentation Assignments:
    - Clinical Documentation:
      - All students are trained and cleared to work on hospital EMRs (NOT counted towards clinical hours), which ensures access to EMR and documentation during clinicals
      - Must complete both a focused-based and comprehensive plan of care
        - Worth 30% of course grade (A-F)

# Documentation Competency Exemplar: AGACNP

- NGR 6211L: AGACNP II Clinical:
  - Required Documentation Assignments:
    - Clinical Documentation:
      - Required Components for Comprehensive Plan of Care:
        - CC
        - HxPI
        - PMHx
        - PSurgHx
        - Allergies
        - Fam Hx
        - Soc Hx
        - ROS: General, integument, HEENT, CV, Pulm, GI, GU, Endo, Lymph, Heme/Onc, Neuro, Psych
        - Lab Data Review
        - Rad Data Review
        - Current Rx
        - Physical Examination: Integument, HEENT, CV, Pulm, GI, GU, Endo, Lymph, Heme/Onc, Neuro, Psych
        - Assessment (Dx)
        - Plan: Integument, HEENT, CV, Pulm, GI, GU, Endo, Lymph, Heme/Onc, Neuro, Psych

# Documentation Competency Exemplar: AGACNP

- NGR 6211L: AGACNP II Clinical:
  - Required Documentation Assignments:
    - Clinical Documentation:
      - Required Components for Focused Plan of Care:
        - CC
        - HxPI
        - PMHx
        - PSurgHx
        - Allergies
        - Fam Hx
        - Soc Hx
        - Pertinent ROS: Varies based on patient condition/ presentation
        - Lab Data Review
        - Rad Data Review
        - Current Rx
        - Focused Physical Examination: Varies based on patient condition/ presentation
        - Assessment (Dx)
        - Plan: For each Dx



# Documentation Competency Exemplar: AGACNP

- NGR 6212L: AGACNP III Clinical:
  - Complex clinical care of the stable and unstable adult-gerontology patient with common and complex occurring health care problems in acutely and critically ill young, middle and older adults.
  - Clinical focuses on completion of 180 hours in the intensivist role.
  - One 10-hour simulation day, focusing on AMI ED and ICU management.

# Documentation Competency Exemplar: AGACNP

- NGR 6211L: AGACNP II Clinical:
  - Required Documentation Assignments:
    - Simulation Day: Documentation of an ED consultation on an AMI admission requiring ICU management.
      - Students are separated into groups with various management roles
      - Simulation exercise completed
      - Both groups rejoin to discuss their plans of care and practice documenting the encounters together—This discussion is FACULTY lead
      - Evaluation is essentially participatory for this event

# Documentation Competency Exemplar: AGACNP

- NGR 6212L: AGACNP III Clinical:
  - Required Documentation Assignments:
    - Clinical Documentation:
      - All students are trained and cleared to work on hospital EMRs (NOT counted towards clinical hours), which ensures access to EMR and documentation during clinicals
      - Must complete both a focused-based and comprehensive plan of care
        - Worth 30% of course grade (A-F)

# Documentation Competency Exemplar: AGACNP

- NGR 6212L: AGACNP III Clinical:
  - Required Documentation Assignments:
    - Clinical Documentation:
      - Required Components for Comprehensive Plan of Care:
        - CC
        - HxPI
        - PMHx
        - PSurgHx
        - Allergies
        - Fam Hx
        - Soc Hx
        - ROS: General, integument, HEENT, CV, Pulm, GI, GU, Endo, Lymph, Heme/Onc, Neuro, Psych
        - Lab Data Review
        - Rad Data Review
        - Current Rx
        - Physical Examination: Integument, HEENT, CV, Pulm, GI, GU, Endo, Lymph, Heme/Onc, Neuro, Psych
        - Assessment (Dx)
        - Plan: Integument, HEENT, CV, Pulm, GI, GU, Endo, Lymph, Heme/Onc, Neuro, Psych

# Documentation Competency Exemplar: AGACNP

- NGR 6212L: AGACNP III Clinical:
  - Required Documentation Assignments:
    - Clinical Documentation:
      - Required Components for Focused Plan of Care:
        - CC
        - HxPI
        - PMHx
        - PSurgHx
        - Allergies
        - Fam Hx
        - Soc Hx
        - Pertinent ROS: Varies based on patient condition/ presentation
        - Lab Data Review
        - Rad Data Review
        - Current Rx
        - Focused Physical Examination: Varies based on patient condition/ presentation
        - Assessment (Dx)
        - Plan: For each Dx

# Documentation Competency Exemplar: AGACNP

- NGR 6212L: AGACNP III Clinical:
  - Complex clinical care of the stable and unstable adult-gerontology patient with common and complex occurring health care problems in acutely and critically ill young, middle and older adults.
  - Clinical focuses on completion of 180 hours in the intensivist role.
  - One 10-hour simulation day, focusing on AMI ED and ICU management.

# Documentation Competency Exemplar: AGACNP

- NGR 6215L: AGACNP Practicum Clinical:
  - Required Documentation Assignments:
    - Simulation Day: Documentation of a septic ED consultation with mega code event requiring requiring ICU management.
      - Students are separated into groups with various management roles
      - Simulation exercise completed
      - Both groups rejoin to discuss their plans of care and practice documenting the encounters together—This discussion is FACULTY lead
      - Evaluation is essentially participatory for this event

# Documentation Competency Exemplar: AGACNP

- NGR 6215L: AGACNP Practicum Clinical:
  - Required Documentation Assignments:
    - Clinical Documentation:
      - All students are trained and cleared to work on hospital EMRs (NOT counted towards clinical hours), which ensures access to EMR and documentation during clinicals
      - Must complete both a focused-based and comprehensive plan of care
      - Comprehensive plan of care requires dictation presentation through a narrated PPT submission
        - Worth 30% of course grade (A-F)



# Documentation Competency Exemplar: AGACNP

- NGR 6215L: AGACNP Practicum Clinical:
  - Required Documentation Assignments:
    - Clinical Documentation:
      - Required Components for Comprehensive Plan of Care:
        - CC
        - HxPI
        - PMHx
        - PSurgHx
        - Allergies
        - Fam Hx
        - Soc Hx
        - ROS: General, integument, HEENT, CV, Pulm, GI, GU, Endo, Lymph, Heme/Onc, Neuro, Psych
        - Lab Data Review
        - Rad Data Review
        - Current Rx
        - Physical Examination: Integument, HEENT, CV, Pulm, GI, GU, Endo, Lymph, Heme/Onc, Neuro, Psych
        - Assessment (Dx)
        - Plan: Integument, HEENT, CV, Pulm, GI, GU, Endo, Lymph, Heme/Onc, Neuro, Psych

# Documentation Competency Exemplar: AGACNP

- NGR 6215L: AGACNP Practicum Clinical:
  - Required Documentation Assignments:
    - Clinical Documentation:
      - Required Components for Focused Plan of Care:
        - CC
        - HxPI
        - PMHx
        - PSurgHx
        - Allergies
        - Fam Hx
        - Soc Hx
        - Pertinent ROS: Varies based on patient condition/ presentation
        - Lab Data Review
        - Rad Data Review
        - Current Rx
        - Focused Physical Examination: Varies based on patient condition/ presentation
        - Assessment (Dx)
        - Plan: For each Dx

# Documentation Competency Exemplar: AGACNP: Evaluation

*Documentation Samples: Evaluation Criteria*

Criteria	Focused Plan Points	Comprehensive Plan Points
Submitted as <u>scheduled</u> .*	2.5	2.5
Documentation is HIPAA compliant.	1.25	1.25
Documentation incorporates pertinent clinical data (as applicable for complete/focused exam) to describe physical assessment findings:  -Hx & demographics -Physical exam -Analysis of pertinent data <ul style="list-style-type: none"> <li>▪ Formulates problem list</li> <li>▪ Identifies five (5) diagnoses with supportive evidence throughout documentation</li> </ul> - Treatment plan <ul style="list-style-type: none"> <li>• plan addresses problems               <ul style="list-style-type: none"> <li>○ prioritizes needs</li> <li>○ acknowledges other problems to be addressed</li> </ul> </li> <li>• patient and/or family education</li> <li>• recommended diagnostics</li> <li>• pharmacotherapies</li> <li>• health promotion</li> <li>• appropriate referrals</li> <li>• patient disposition               <ul style="list-style-type: none"> <li>○ rationale for admission or discharge</li> </ul> </li> <li>• specific follow up needed</li> </ul>	5	5
Documentation is pertinent to the clinical scenario <ul style="list-style-type: none"> <li>• accurate</li> <li>• organized</li> <li>• concise</li> <li>• non-judgmental</li> </ul>	1.25	1.25
Dictation of Care Narrated PPT	N/A	10
Total possible points	10	20

*\*10 Points will be deducted for late submissions per day*

*Submissions must be scholarly, complete with scholarly-based references and use of APA 7<sup>th</sup> edition formatting*

# Documentation Competency Exemplar: FNP/AGPCNP

- BSN – DNP Family Practice and Adult Gerontology Programs
- 1 Health Assessment Course
  - NGR 5003/5003L: Health Assessment
- 4 -5 Major Clinical Immersion Courses w/ Documentation Requirements:
  - NGR 6240L: Adult 1 Clinical
  - NGR 6342L: Women's Health Clinical
  - NGR 6305L: Pediatric Primary Care Clinical
  - NGR 6202L: Adult 2 Clinical
  - NGR 6248L: Clinical Practicum

# Documentation Competency Exemplar: FNP/AGPCNP

- NGR 5003L
  - Simulations – Communication, Episodic, Comprehensive
    - SOAP note documentation and report-off to instructor
  - Biweekly System Assessments
    - SOAP note documentation
- NGR 6240L, NGR 6240L, NGR 6342L, NGR 6305L, NGR 6202L, NGR 6248L
  - Simulations (1 for each course)
    - SOAP note documentation and report-off to instructor
  - Course required SOAP note
    - Episodic, Comprehensive, 3<sup>rd</sup> is student choice
  - Documentation of all patients in database

# Documentation Competency Exemplar: FNP/AGPCNP

## Clinical Report Submission (SOAP Note) (1)



Criteria	Ratings			Pts
Chief Complaint	2 pts Included and Correct	0 pts Not Included		2 pts
History of Present Illness with OLD CARTS	5 pts Complete for All chief c/o's	3 pts Missing Elements	0 pts Insufficient for chief c/o's	5 pts
Subjective Assessment: PMH, FMH, SH, Meds, Allergies, ROS	5 pts Complete for All chief c/o's & HPI	3 pts Missing Elements	0 pts Insufficient for chief c/o's	5 pts
Objective Assessment: Physical Findings, Labs	5 pts Complete for All chief c/o's & Subjective	3 pts Missing Elements	0 pts Insufficient for chief c/o's	5 pts
Assessment/Diagnosis	5 pts Reflective of S & O with ICD Codes	3 pts Missing Elements	0 pts Does not reflect S & O with ICD Codes	5 pts

Included Date of Visit and Biographical Data	2 pts Included	1 pts Partial	0 pts Not Included	2 pts
Discuss Difficulties Encountered	3 pts Full Marks		0 pts No Marks	3 pts
Evidence Based Guideline Used To support Management	3 pts Full Marks		0 pts No Marks	3 pts
Late submission deduct 3 points per day late	0 pts Full Marks		0 pts No Marks	0 pts

Total Points: 30

# Documentation Competency Exemplar: FNP/AGPCNP

Program/Program [Format]: NUPRAC-DNP - DNP-FAMNRS [Primary Care NP Patient Journal] ▾

Experience ID: NEW ENTRY

Experience Status: Draft

Experience Date: 2/8/2021 31

Supervisor:  ▾

General	Procedures	Diagnosis	ICD	CPT
Clinical Site	<input type="text"/>			
Preceptor	<input type="text"/> ▾			
Age	<input type="text"/> ▾			
Gender	<input type="text"/> ▾			
Time With Patient (minutes)	<input type="text" value="0"/>			
Consult with Preceptor (minutes)	<input type="text" value="0"/>			
Race	<input type="text"/> ▾			
Insurance	<input type="text"/> ▾			
Type of Decision-Making	<input type="text"/> ▾			
Student Participation	<input type="text"/> ▾			
<input type="checkbox"/> Annual/Well-Person Exam <input type="checkbox"/> Employment Physical <input type="checkbox"/> Episodic <input type="checkbox"/> ER/ED Visit				

Supervisor:

General	Procedures	Diagnosis	ICD	CPT
<input type="checkbox"/> Show Competencies				
<input type="checkbox"/> N/A				
<input type="checkbox"/> PREVENTIVE SERVICES				
<input type="checkbox"/> OFFICE PROCEDURES				
<input type="checkbox"/> SKIN PROCEDURES				
<input type="checkbox"/> LABORATORY				
<input type="checkbox"/> VACCINES				
<input type="checkbox"/> IMMUNIZATIONS, INJECTIONS, MEDICATION				
<input type="checkbox"/> SOCIAL PROBLEMS ADDRESSED				

Program/Program [Format]: NUPRAC-DNP - DNP-FAMNRS [Primary Care NP Patient Journal] ▾

Experience ID: NEW ENTRY

Experience Status: Draft

Experience Date: 2/8/2021 31

Supervisor:  ▾

General	Procedures	Diagnosis	ICD	CPT
<input type="checkbox"/> Show Competencies				
<input type="checkbox"/> <b>CARDIOVASCULAR</b>				
<input type="checkbox"/> DERMATOLOGY				
<input type="checkbox"/> EENT				
<input type="checkbox"/> ENDOCRINE				
<input type="checkbox"/> GASTROINTESTINAL				
<input type="checkbox"/> GENITOURINARY				
<input type="checkbox"/> HEALTH MAINTENANCE				
<input type="checkbox"/> HEMATOLOGICAL				
<input type="checkbox"/> MENTAL HEALTH				
<input type="checkbox"/> MUSCULOSKELETAL				
<input type="checkbox"/> NEUROLOGICAL				
<input type="checkbox"/> NON-DISEASE CAUSES OF ILLNESS				
<input type="checkbox"/> RESPIRATORY				



# Conclusions

- Documentation is an integral component of NP practice and required competency in NP education
- NP students must demonstrate documentation competency in electronic formats
- Documentation skills are not innate
  - Faculty should take initiative to help educate NP students on proper and legally-defensible documentation that illustrates care provision following established standards of care
- Opportunities to demonstrate documentation competency should be varied and reflect the current primary and acute care clinical environments



# References

- References and suggested resources provided.

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