



# Master of Science in Nurse Anesthesia Admission Requirements and Application Procedure

## Admission Requirements

To be accepted/admitted into the Master of Science in Nurse Anesthesia Program, the applicant must meet the following requirements.

- Graduation from an accredited (NLNAC or CCNE) nursing program.
- Proof of current RN registration (photocopy of nursing license).
- Bachelor's degree in nursing or other appropriate baccalaureate degree. Degrees must be completed and final transcripts submitted prior to the enrollment date in August.
- Cumulative GPA of 3.00 on a 4.0 scale.
- Completion of the Graduate Record Examination (GRE) with a minimum score of 400 in each verbal and quantitative sections.
- One set of official transcripts from all institutions attended.
- Current resume.
- Personal essay.
- Two references: nursing unit director/manager and shift supervisor/critical care coordinator.
- Minimum of 1 year (2 years preferred), full-time experience as a registered nurse in a critical care setting.
- Prerequisites: chemistry (2 courses), elementary statistics or epidemiology (1 course).
- Core Performance Standards Form, signed and dated.
- Personal interview.
- Complete health questionnaire, physical exam, and immunization record (required prior to the start of the fall semester).

## Selection Process

The Admissions Committee will carefully review all components, including completed application and supporting material, academic performance, nursing experience, and references. Because class size is limited, not all candidates who meet minimum requirements will be invited for an interview. Invitations to attend a personal interview will be mailed the later part of December. Interviews are generally conducted late January or early February.

Incomplete applications, or applications received after the November 1 deadline, will be reviewed only at the discretion of Admissions Committee.

Applicants will be notified of the Admissions Committee decision regarding acceptance into the program within 4 weeks (approximately) of the personal interview. Applicants receiving a letter of appointment must return the Acceptance Form and a \$750.00 non-refundable enrollment fee within the time specified.

## Re-Application Process

All application materials being re-submitted must be received **no later than November 1st** for the class starting the following August. Incomplete applications, or applications received after the November 1 deadline, will be reviewed only at the discretion of Admissions Committee.

If reapplying, application materials that **MUST** be resubmitted include:

- **STEP 1:** Online Application
- **STEP 2:** Application packet contents and checklist (except application fee)

## Admission Requirements and Application Procedure

The following items **DO NOT** need to be resubmitted:

- Application fee
- Transcripts (unless a change has occurred)
- GRE score reports (unless a change has occurred)

### International Students

International students are asked to follow the additional admissions procedures on the Mount Marty College Web site at: <http://www.mtmc.edu/admissions/app-process/international.aspx/>



# Master of Science in Nurse Anesthesia Application Instructions and Checklist

Applicant \_\_\_\_\_  
Last First Middle Other

All application materials must be received **no later than November 1st** for the class starting the following August. Incomplete applications, or applications received after the November 1st deadline, will be reviewed only at the discretion of Admissions Committee.

## STEP 1: COMPLETE ONLINE NURSE ANESTHESIA APPLICATION Date submitted \_\_\_\_\_

Complete the online application **before** mailing the completed admission packet or forwarding materials. Supporting application materials cannot be processed unless the online application has been completed and your account established.

## STEP 2: APPLICATION PACKET CONTENTS AND CHECKLIST

Submit the following items together in a 9x13 envelope to the Admission Office, Yankton campus. Do not send directly to the Anesthesia Offices, Sioux Falls campus.

- Completed Checklist
- \$35 non-refundable application fee made payable to Mount Marty College
- Supplemental Forms
  - Core Performance Standards, signed and dated
  - Critical Care Experience/RN Licensure Form
  - Educational Data Form
- Two unopened reference letters. Opened reference letters will not be considered. References are required from the following RNs:  Nursing director/manager  Critical care coordinator/shift supervisor  
Use the reference forms provided. Indicate your decision regarding a waiver of the right of access to this reference before giving it to each person completing the reference. You should then give the form to the recommender with a business size envelope (self-addressed and stamped if indicated). The person providing the reference should seal the envelope and place their signature across the flap. The envelope should be returned to you, and you should return it **unopened** in your application packet. **Do not return separately.**
- Current resume
- Personal essay describing your goals for graduate study, reasons you selected nurse anesthesia as a career choice, what you have to offer the profession of nurse anesthesia and reasons why you chose Mount Marty. Essays should typed and no more than 500-600 words.
- Photocopy of your current RN license
- Photocopy of current ACLS (Advanced Cardiac Life Support) certification card.
- Photocopies of other certifications you hold:  PALS  CCRN  Other

## STEP 3: APPLICATION FORWARDED MATERIALS

Please have the following items sent directly to the Admission Office at Yankton campus. Do not send directly to the Anesthesia Offices, Sioux Falls campus.

- One official transcript from each college/university attended.
- Official transcript verification of classes in which you are currently enrolled
- One official GRE score transcript. Register for the **general** GRE test online at [www.gre.org](http://www.gre.org). The GRE code for Mount Marty College is 6416. Please allow 4-8 weeks for the GRE scores to be reported to the college admission office.

**Mail materials to: Admission Office, Mount Marty College, 1105 West 8th Street, Yankton, SD 57078**



## Master of Science in Nurse Anesthesia Core Performance Standards for Admission, Progression and Graduation

Students must be able to consistently demonstrate the following core performance standards while enrolled in the nurse anesthesia program.

### I. Observation and Communication

**Standard**

Collect evidence regarding a patient's status quickly and accurately using all five senses. Communicate effectively with patients, families, and members of the health care team.

**Example of  
Required Skills (Not  
comprehensive)**

- See both close and distant visual information in low light environments
- Hear high- and low-pitched sounds, soft sounds and the spoken word in environments with loud or distracting background noise
- Communicate accurately in verbal and written forms using the English language

### II. Physical Capabilities and Motor Skills

**Standard**

Possess mobility, strength, stamina, motor skills sensation and coordination to successfully complete physical assessment, cardiopulmonary resuscitation, and performance of therapeutic techniques for airway management, vascular access and regional anesthesia.

**Example of  
Required Skills (Not  
comprehensive)**

- Maintain sufficient upper and lower body strength to move patients safely and position equipment
- Move around obstructions in confining spaces
- Demonstrate sufficient mobility to provide care to several patients simultaneously
- Move from one patient care location to another without assistance
- Work in small, closed, and dark spaces for long time periods
- Work in abnormally warm and cool environments
- Discern three-dimensional relationships
- Demonstrate sufficient dexterity, hand-eye coordination and concentration to operate complicated medical instruments

### III. Cognitive Skills and Intellectual Capacities

**Standard**

Understand, synthesize and interpret complex health care information related to patient needs and care. Distinguish standard and non-standard patterns of patient response. Maintain vigilance for prolonged time periods.

**Example of  
Required Skills (Not  
comprehensive)**

- Interpret complex information from multiple sources quickly and accurately
- Translate and document complex data
- Recognize patterns of responses
- Complete simultaneous tasks, as necessary
- Monitor patient status over prolonged time periods without concentration lapses

**IV. Decision-Making Skills**

**Standard** Organize, prioritize and act on information appropriately in a rapidly-changing high acuity environment.

**Example of Required Skills (Not comprehensive)**

- Intellectually organize information and prioritize actions
- Identify cause/effect relationships
- Make correct decisions in a rapidly changing environment

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**V. Behavioral and Social Attributes**

**Standard** Exhibit professionally-appropriate behaviors at all times with patients, families, and members of the health care team.

**Example of Required Skills (Not comprehensive)**

- Establish rapport and trust with people of various sociocultural, religious and educational backgrounds.
- Demonstrate respect for team roles and norms
- Preserve confidentiality
- Complete work in timely fashion
- Demonstrate emotional maturity, effective coping skills, professional discretion, and the ability to adjust to social situations

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I have read and understand the core performance standards expected of nurse anesthesia students. I am able to meet all standards without special accommodations. Please sign the top signature and return in the application packet.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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*If you have any questions about program accommodations or college services, please contact the Mount Marty College Office of Admissions.*



## Critical Care Experience/RN Licensure Form

Answer the following questions. If yes, submit a letter of explanation.

Yes  No Have you ever been on probation or suspended from any place of employment?

Yes  No Within the last three years, have you ever experienced a physical, emotional or mental condition that endangered the health or safety of persons entrusted in your care?

### Certificates/Professional Organizations:

Please include photocopies of all certifications held.

ACLS Certification (Required)  Yes  No Expiration Date: \_\_\_\_\_

PALS Certification (Recommended)  Yes  No Expiration Date: \_\_\_\_\_

CCRN Certification (Recommended)  Yes  No Expiration Date: \_\_\_\_\_

Other Certifications: \_\_\_\_\_

List the professional organizations you are a member of: \_\_\_\_\_

### RN PROFESSIONAL LICENSE:

Applicants must provide proof of licensure as a professional Registered Nurse (RN). Please complete the requested information below. Include a photocopy of your current nursing license(s).

List all states where you have licensure as a professional Registered Nurse (RN)

State	Status	License number if active	Expiration Date
	<input type="checkbox"/> Active <input type="checkbox"/> Inactive		
	<input type="checkbox"/> Active <input type="checkbox"/> Inactive		
	<input type="checkbox"/> Active <input type="checkbox"/> Inactive		
	<input type="checkbox"/> Active <input type="checkbox"/> Inactive		
	<input type="checkbox"/> Active <input type="checkbox"/> Inactive		

Yes  No Have you ever had a nursing license suspended or revoked? If yes, submit a letter of explanation.

Yes  No Have you ever been the subject of a Nursing Board disciplinary action? If yes, submit a letter of explanation.

Yes  No Have you ever been refused a nursing license? If yes, submit a letter of explanation.

List the state in which you were originally licensed as an RN:



# Master of Science in Nurse Anesthesia Educational Data Form

Applicant \_\_\_\_\_  
Last First Middle Other

### Educational Data:

Applicants must possess an appropriate baccalaureate degree from a regionally accredited College or University and have maintained an overall GPA of 3.0 on 4.0 scale. Other factors of academic importance may be considered if this is not achieved. Degrees must be completed with final transcripts submitted prior to enrollment in August. Appropriate degrees include a baccalaureate degree in nursing or an associate/diploma in nursing plus a baccalaureate degree in an appropriate discipline.

NURSING EDUCATION	INSTITUTION	DATE CONFERRED	GPA
Diploma in Nursing			
Associate Degree in Nursing			
Bachelor of Science in Nursing			

### OTHER DEGREES


### Graduate Record Examination (GRE):

All applicants, regardless of other degrees held, are required to take the GRE. Applicants should register for the **general** GRE examination. One official copy of GRE score must be sent directly to the admission office, Yankton campus. Mount Marty's GRE code is 6416. Allow 4-8 weeks for the scores to be reported to the college. Include your GRE scores if known.

Date taken/scheduled: \_\_\_\_\_ Scores: Verbal: \_\_\_\_\_ Quantitative: \_\_\_\_\_ Combined Score: \_\_\_\_\_

### Course Prerequisites:

Courses must be completed at a junior college or university level with a minimum grade of C. (2 points on 4 point scale)

**CHEMISTRY:** 2 courses of chemistry (minimum total of 6 hours) are required. Acceptable chemistry courses include: general, organic, inorganic or biochemistry. Please list chemistry courses taken.

Chemistry: List <b>two</b> courses. If you have taken more than two chemistry courses, list the two with best grades. Note: labs are not required.				
Chemistry Course Title#	Completion Date	Institution	Letter Grade	# of hours

**STATISTICS:** 1 statistics or epidemiology course will satisfy the prerequisite. Please list statistics or epidemiology course taken.

Course Title#	Completion Date	Institution	Letter Grade	# of hours

### Missing Prerequisites:

Applicants who have not met all prerequisites by the application deadline must submit a plan with their application for completing any missing prerequisites.

Yes  No Have you ever attended another anesthesia school? If yes, use a separate sheet to fully explain.

If yes: Name: \_\_\_\_\_ Address: \_\_\_\_\_

Dates of Attendance: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_



## Master of Science in Nurse Anesthesia Recommendation by Nursing Unit Director/Manager

**To be completed by applicant. Please type or print.**

Applicant \_\_\_\_\_  
Last
First
Middle
Other

I have read and approved this request for information. I voluntarily waive any right of access to this confidential letter of evaluation.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**To be completed by current Nursing Unit Director/Manager.**

The Admissions Committee appreciates your cooperation in determining the applicant’s potential for success, both as a graduate student and in an advanced practice role as a nurse anesthetist. Your candid opinion will be appreciated. This information will be held in confidence if the applicant has signed the above waiver.

Please complete your evaluation using the MMC Recommendation Form provided. Place the completed evaluation in the business size envelope provided by the applicant and seal the flap. Next, sign your name across the flap and return it to the applicant. This recommendation is an essential part of the application. The deadline for completed applications is November 1 for fall admission.

**Applicant’s General Information**

Hospital/Medical Center where employed: \_\_\_\_\_  
 Primary Unit: \_\_\_\_\_ # of beds \_\_\_\_\_ Average hours worked/week \_\_\_\_\_  
 Secondary Unit (if any): \_\_\_\_\_ # of beds \_\_\_\_\_ Average hours worked/week \_\_\_\_\_  
 How long have you known the applicant professionally? \_\_\_\_\_

**Applicant’s Personal Attributes**

Please evaluate the applicant in each of the following categories by checking the appropriate column.

Personal Attributes	Excellent	Above Average	Average	Below Average
Integrity				
Emotional maturity				
Motivation				
Social values				
Intellectual ability				
Ability to organize				
Interpersonal skills				
Leadership qualities				
Professional manner				
Performance in critical situations				
Enthusiasm for learning				
Acceptance of criticism				
Communication skills				
Reliability				
Clinical/professional competence				
Critical thinking/analytic abilities				
Self-confidence				
Potential for advanced practice nursing				
Potential for graduate study				
Participation as mentor/preceptor				
Participation Unit Meetings/Committees				

What are the applicant's strengths?

What are the applicant's weaknesses?

Do you believe the applicant has adequate critical care experience to move on to an advanced practice nursing role?

**Comments**

Please provide any additional comments that would be of value to the Admission Committee. Feel free to use the space below or attach a letterhead bearing your signature.

**Overall Recommendation: Check one**

- I highly recommend this applicant
- I recommend this applicant with reservations
- I recommend this applicant
- I do not recommend this applicant (please explain under comments)

**Evaluator's Information**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

May we contact you for additional information/clarification?  Yes  No

If yes, phone number where you can be reached \_\_\_\_\_



**Applicant's Clinical Experience**

Please evaluate the applicant with respect to the following clinical procedures and skills by checking the appropriate column. The Admissions Committee is seeking information about the applicant's critical care nursing experience and level of competence. We do not expect that applicants will possess experience in or be an expert in every procedure or skill listed below. Indicate clinical experience not offered in your area as NA.

Nursing Procedures/Skills	Frequency of Experience				Level Of Competence		
	Daily	Weekly	Monthly	Rarely/ Never	Expert	Competent	Novice
Arterial pressure monitoring							
CVP monitoring							
Pulmonary artery pressure monitoring							
Invasive cardiac output/index determination							
Code Blue team leader/Rapid response nurse							
Emergency drug administration							
Mechanical ventilation/weaning							
Arterial blood gas interpretation							
Basic dysrhythmias interpretation							
12-lead ECG interpretation							
IV vasoactive drugs							
Cardioversion/defibrillation							
Recovery of immediate postoperative hearts							
Intra-aortic balloon pump							
Ventricular Assist device							
Hemofiltration/dialysis							
ICP monitoring							
Resource nurse							
Shift charge nurse							

**Comments**

Please provide any additional comments that would be of value to the Admission Committee. Feel free to use the space below or attach a letterhead bearing your signature.

**Overall Recommendation: Check one**

- I highly recommend this applicant     I recommend this applicant with reservations  
 I recommend this applicant             I do not recommend this applicant (please explain under comments)

**Evaluator's Information**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 May we contact you for additional information/clarification?     Yes     No  
 If yes, phone number where you can be reached \_\_\_\_\_