

Preceptor Program Preceptee Application

Please Print or Type

- Name _____
Address _____
Phone: Home _____ Work _____
Fax: _____ Email: _____
- Credentials: _____
Additional Preparation _____
- Professional Nursing Experience:
Present position _____
Employer _____
Previous Position(s) _____
- Areas of desired learning (check all that apply)

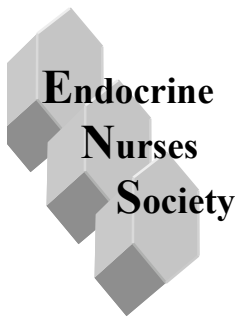
<input type="checkbox"/> Clinic Orientation	<input type="checkbox"/> Hypopituitarism	<input type="checkbox"/> Osteoporosis
<input type="checkbox"/> Research Coordination	<input type="checkbox"/> GH Deficiency	<input type="checkbox"/> Reproductive
<input type="checkbox"/> Patient Database	<input type="checkbox"/> Acromegaly	<input type="checkbox"/> Other _____
<input type="checkbox"/> Insurance Reimbursement	<input type="checkbox"/> Stim Test Procedures	_____
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Thyroid Disorders	_____
- Nursing Organization Activities
Current ENS member? Y / N (please circle)
ENS Activities _____
Other professional Activities _____
- Goals of ENS Preceptor Program _____
- Are financial resources available through your institution for travel expenses and the preceptor's honorarium? No yes

If enrolled into the preceptor program, I promise to serve to the best of my ability, comply with HIPAA Guidelines, and complete the program evaluation forms. The cost of visit to preceptor institution (airfare or gas for car, taxi, parking, and hotel x 1-2 nights) will be approved. ENS will make reimbursement after the visit and evaluation is complete; the reimbursement form and receipts to be sent to the ENS Treasurer. The evaluation forms should be sent to ENS Education Committee, c/o Colleen Weber, 1204 Lake Canyon View, Fenton, MO 63026 Phone: #636-225-4113 Fax: #636-225-4112

Email: Pulaski@helix.mgh.harvard.edu or tkm820@aol.com

Signature _____ Date _____

Office Use: Membership verified <input type="checkbox"/> Manual Sent <input type="checkbox"/> Crt <input type="checkbox"/> Preceptor _____ Approximate cost of travel _____ Hotel costs _____ Visit approved? _____ Visit Date: _____ Status: _____ Correspondence: _____
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To: New Endocrine Nurse

**From: ENS Education Committee Co-Chairs
Karen Pulaski-Liebert, RN
Teresa Kidder-Moore, RN**

Thank you for your interest in the Endocrine Nurses Society's (ENS) Preceptor Program. We are very excited about our new program and are eager to help nurses new to the field of adult endocrinology. We would like to assist in providing a hands-on approach to learning by allowing you (Preceptee) to make an observational visit with a more experienced nurse (Preceptor). In this environment, we feel you may be able to appreciate the complexity of care needed to manage a highly specialized adult endocrine patient and obtain necessary information that can be applied to your practice.

As a potential Preceptee, you should be a current ENS member and an educator or provider of direct patient care. You will be required to complete the enclosed application. Once the education committee reviews your application a Preceptee Manual will be sent to you. This contains the program guidelines, checklist, evaluation forms, and endocrine resource information. A Preceptor will contact you about making an observational visit. Together you will make tentative arrangements for an observational visit to the preceptor's site for 1 to 3 days. The preceptee should call or fax the estimate of travel costs (airfare/drive and hotel) for the site visit to the education committee for approval. Once approved, the travel arrangements may be made. Reimbursement will occur after the visit and the necessary forms are sent to the education committee. You should indicate whether your employer has financial resources to assist you in the site visit. If financial resources are available then that institution is responsible for preceptee's travel and the preceptor's honorarium.

We are excited about the prospect of being able to share information and experiences with our fellow endocrine nurses! If you have any questions, concerns, or comments, please do not hesitate to contact:

ENS Education Co-Chairs:

Karen Pulaski, RN

Pulaski@helix.mgh.harvard.edu

(617) 726-7473

Teresa Kidder, RN

tkm820@aol.com

(212) 263-6772