

## **SOUTH DAKOTA BOARD OF NURSING**

4305 S. Louise Ave., Suite 201 | Sioux Falls, SD 57106-3115 605-362-2760 | https://doh.sd.gov/boards/nursing/

## Dialysis Technician Training Program – Initial Application for Approval

		o the RN coordinator. <i>Renewal is required</i> of		_	
Name c	f Instituti	on:			
Name c	f RN Prog	gram Coordinator:			
Address	s:				
Email:					
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<ol> <li>Attach the following to demonstrate meeting all requirements in ARSD 20:48:04.02:08:         <ul> <li>a. Course syllabus: agenda, content outline, teaching methodologies, objectives and materials that show how the program will distribute 80 hours of classroom instruction listed in ARSD 20:48J:04.02:09;</li> <li>b. A reference list of textbooks, videos, other resources that will be used; send a copy of each resource used (returned upon request) or online access codes;</li> <li>c. A plan showing the distribution of the required 200 hours of clinical or laboratory instruction, including a copy of the skills performance evaluation tool;</li> <li>d. Describe how the program will meet the required faculty-to-student ratio of 1:2 in the clinical setting and a 1:1 ratio for skills performance evaluation.</li> </ul> </li> <li>Attach a copy of unit and final tests that will be administered;</li> <li>Describe record keeping; attach a copy of the completion certificate for successful students.</li> </ol>					
<ul> <li>Faculty Qualifications: Attach a resume or other evidence of meeting the following requirements:         <ul> <li>An RN instructor must:</li> <li>Hold an active SD RN or multi-state compact RN license;</li> <li>Have a minimum of two years of clinical nursing experience;</li> <li>Have a minimum of one year of experience in hemodialysis.</li> </ul> </li> <li>LPNs may assist the RN with classroom instruction and may serve as a preceptor in the clinical portion of the training program; an LPN instructor must:         <ul> <li>Hold an active SD LPN or multi-state compact LPN license;</li> <li>Have a minimum of two years of clinical nursing experience;</li> <li>Have a minimum of one year of experience in hemodialysis.</li> </ul> </li> </ul>					
Nurse Faculty Name:		State Licensed:	License #:	Expiration Date:	