Dialysis Technician Training Program – Request for Program Changes

Complete and submit this form to the South Dakota Board of Nursing to request approval for changes to a previously approved dialysis technician training program (DTTP).

Name of Institution: _____

Name of RN Program Coordinator: _____

Address: _____

Telephone: _____

Email: _____

Curriculum Changes: To significantly modify or change a previously approved curriculum, attach the following to demonstrate meeting all requirements in ARSD 20:48:04.02:08 for approval of changes:

- 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;
- 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;
- A plan showing the distribution of the required 200 hours of clinical or laboratory instruction, including a copy of the skills performance evaluation tool;

Request to Add Location(s) in South Dakota:

- Address: _____
- Address: _____

Remove or Add Faculty:

- Identify faculty to be removed: _____
- Identify new faculty to add: Attach a resume or other evidence of meeting the following requirements:
    - An RN instructor must:
        - o Hold an active SD RN or multi-state compact RN license;
        - o Have a minimum of two years of clinical nursing experience;
        - o Have a minimum of one year of experience in hemodialysis.
    - 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:
        - o Hold an active SD LPN or multi-state compact LPN license;
        - o Have a minimum of two years of clinical nursing experience;
        - o Have a minimum of one year of experience in hemodialysis.

Nurse Faculty Name:	State Licensed:	License #:	Expiration Date:

RN Coordination Signature: _____ **Date:** _____