

**UNCG SCHOOL OF NURSING
 MASTER OF SCIENCE IN NURSING DEGREE PROGRAM
 PLAN OF STUDY**

NAME: _____ **DATE:** _____ **STUDENT #:** _____ **COMPS DATE:** _____

EDUCATION CONCENTRATION 36 s.h. minimum for degree				
Course Number	Course Title	Type of Course	Credit Hours	Date Taken or Transfer or Waiver
Semester I (fall) NUR 551 NUR 610	Instructional Technologies in Nursing and Patient Education Theoretical Foundations of Advanced Nursing Practice	Support Core	3:3 3:3	_____ _____
Semester II (Spr.) NUR 550 NUR 616	Pathophysiology for Advanced Nursing Pedagogical Strategies in Nursing Education	Support Specialty	3:3 3:3	_____ _____
Semester III (Fall) NUR 602 NUR 651	Research Methods in Nursing Advanced Application of Nursing Concepts in Client Care	Core Specialty	3:3 4:1:9	_____ _____
Semester IV (Spr.) NUR 615 NUR 652	Theories, Design, & Evaluation in Nursing Education Adv. App. of Nursing Concepts in Professional Development	Specialty Specialty	3:3 4:1:9	_____ _____
Semester IV NUR 620 NUR 653	Law, Policy, and Economics of Healthcare Adv. App. Of Nursing Concepts in Academic Education	Core Specialty	3:3 4:1:9	_____ _____
Semester V NUR 698 or NUR 699 or NUR 601	Advanced Nursing Project Thesis Critique and Utilization of Research in Nursing	Project Thesis Capstone	3 3 3	_____ _____ _____
Total				36 Credits