NKUNurseAnesthesia Program Shadowin Documentation
Name/date:
Facility:
CRNA/MDSignature
Guidelines:
Theshadowingexperiences required prior to applying to the NKUNurseAnesthesia Program. Please complete this form and send it withour application materials to the Office of Graduate Education at <a href="mailto:graduate@nku.ed">graduate@nku.ed</a> u
Applicants are equired to shadow with either a CRNA or an anesthesiologisto gain an understanding of the nurse anesthesia role through both observation and discus shadowing a CRNA is preferred to learn the role. Applicants are responsible for arranging their own shadow experience and ensuring that the anesthesia provider completes the Shadowing Form.
Brieflydescribeyour experienceand your understanding of the role of the CRNA:
CRNA/MDcomments:
CRNA/MD:Questionsor commentspleasecontactthe NKU Nurse Anesthesia Program at (859) 572