



Checklist

Certificate of Completion - FNP (Post Master's)

Name: \_\_\_\_\_

ID: \_\_\_\_\_

Date: \_\_\_\_\_

**CORE COURSES** (Required of all students):

**CREDITS**

NURS 512 Advanced Health Assessment (Fall) .....	5
<b>(Prerequisite/Corequisite: BIOL 552)</b>	
NURS 514 Issues in Advanced Practice Nursing (Spring) .....	3
NURS 522 Pharmacotherapeutics (Fall) .....	3
BIOL 552 Advanced Human Physiology (Fall) .....	3
NURS 558 Adult Health Care Management (Fall) .....	6
<b>(Prerequisite: NURS 512; Prerequisite/Corequisite: NURS 522)</b>	
NURS 559 Women's and Children's Health Care Management (Spring) .....	6
<b>(Prerequisites/Corequisites: NURS 512, 522)</b>	
<b>TOTAL CREDITS</b> .....	<b>26</b>