INTRODUCTION

Thank you for your interest in applying to the US Army Graduate Program in Anesthesia Nursing (USAGPAN), the Army CRNA doctoral program. There is a pathway for Civilians and Reservists to become Active Component Army Nurse Corps Officers and move directly into the Army CRNA training program. The application process can be time consuming so it is recommended that you start as early as possible. The USAGPAN website is:

https://www.baylor.edu/nursing/armydnp/

The USAGPAN produces clinicians that are educated in the complexity of practice at the doctoral level and competent in the unique skills of anesthesia nursing. The US Army has prepared top quality Certified Registered Nurse Anesthetists for nearly 50 years. Since 1969, Army graduates have earned graduate degrees through University based affiliations. The USAGPAN produces the vast majority of active duty Army CRNAs and provides specialized education and training in regional and field anesthesia to ensure that graduates are capable of fulfilling the unique mission of the Army and the Department of Defense (DoD).

The USAGPAN is a two-phase, 36-month course that culminates in the Doctor of Nursing Practice (DNP) degree from Baylor University. Phase 1 consists of 52 weeks of didactic instruction at the Army Medical Department Center & School Health Readiness Center of Excellence (AMEDDC&S HRCoE), Fort Sam Houston, Texas. Phase 2 consists of 97 weeks of clinical and distance learning instruction conducted at select Army Medical Treatment Facilities (MTFs) affiliated with DOD, VA, and private sector hospitals. A DNP is awarded upon successful completion of Phase 2. The USAGPAN is fully accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA). Graduates are eligible to take the National Certification Examination (NCE) for Nurse Anesthetists. USAGPAN graduate first-time NCE pass rate is consistently higher than the national average.

GUIDELINE OVERVIEW

These guidelines are for the USAGPAN class starting in June 2019.

Applicants who apply to the USAGPAN/Baylor University must also apply for appointment into the active component Army Nurse Corps. The applicant is responsible for the Baylor University application.

All civilian applicants selected for this program are required to attend the AMEDD Direct Commission Course (DCC) and Basic Officer Leader Course (BOLC) prior to starting the anesthesia program. The DCC course begins in mid-February and leads into BOLC in March 2019.

*This is non-waiverable and failure to attend will revoke the applicant’s anesthesia school assignment. (Applicable only if the applicant has not previously completed BOLC).

*All applicants who attend DCC/BOLC must pass a record Army Physical Fitness Test (APFT) to include height/weight/body fat standards prior to starting at USAGPAN.
*Failure of any portion may result in the loss of applicant USAGPAN slot.

Applicants will be required to in-process Fort Sam Houston prior to DCC/BOLC start date due to permanent station requirements of Joint Base San Antonio.

It is preferred that all Reservists selected for this program complete the Captains Career Course prior to starting the anesthesia program if possible.

**ADMISSION REQUIREMENTS / ELIGIBILITY**

1. **BSN or other qualifying degree**: Applicants must have earned a Bachelor’s degree in Nursing from an accredited nursing program recognized by the U.S. Secretary of Education and acceptable to the Department of the Army (DA). Nursing programs accredited by the Accreditation Commission for Education in Nursing (ACEN) or the Commission on Collegiate Nursing Education (CCNE) at the time of graduation are considered acceptable.

2. **AGE**: You are ineligible to apply if you reach the age of 42 prior to your date of commission into the U.S. Army. (Army Reserve (USAR) and Army National Guard (ARNG) Officers please discuss any possible age or age-in-grade restrictions with a Health Care Recruiter).

   *AR 601-100 1-9. Age requirements: An original appointment as a commissioned officer in the RA may be given only to a person who is able to complete 20 years of active commissioned service (ACS) before the person’s 62nd birthday (see 10 USC 532(a)(2). A reserve commissioned officer receiving a new original appointment in the RA to the Army Nurse Corps, Medical Specialist Corps, Medical Service Corps, (Allied Science Officers only), or Veterinary Corps is not subject to this age requirement.

3. **GRADE**: USAR/ARNG field-grade officers should discuss the process of obtaining a waiver for entry onto active duty with their healthcare recruiter. This should be done early in the application process.

4. **CURRENT RN LICENSE**: Evidence of a current, unrestricted licensure as a registered nurse is required with the application.

   *You are required to notify the recruiter if you have been notified of any pending investigation or inquiry regarding your license.

   * A USAREC recruiter will notify the AN program manager through the chain of command and will receive acknowledgement of receipt.

   *Failure to adhere to this requirement will initiate immediate removal from the program application process or during the CRNA LTHET program and you may be liable for recoupment of all expenses by the government for your active duty accession.

5. **CLINICAL EXPERIENCE**

   a. Applicants must demonstrate that they have or will have at least one year of full-time experience as a Registered Nurse in a critical care setting at the time of active duty commissioning. Critical care experience must be within five years of application submission.

   b. The COA has clearly defined what nursing experience is required of potential candidates applying to nursing anesthesia programs. Acute care experience has been replaced with critical care experience. The COA defined critical care experience in the January 2015 Practice Doctorate
Standards for Accreditation of Nurse Anesthesia Educational Program as: Critical care experience must be obtained in a critical care area within the United States, the territories, or a U.S. Military hospital outside of the United States. During this experience, the registered nurse is to have developed critical decision making and psychomotor skills, competency in patient assessment, and the ability, to use and interpret advanced monitoring techniques. A critical care area is defined as one where, on a routine basis, the registered professional nurse manages one or more of the following: invasive hemodynamic monitors (such as pulmonary artery catheter, CVP, arterial); cardiac assist devices; mechanical ventilation; and vasoactive drips. The critical care areas are typically intensive care units. Those who have experience in other areas may be considered provided they can demonstrate competence with invasive monitoring, ventilators, and critical care pharmacology.

c. Direct accession applicants who are NOT applying as critical care nurses will need a letter from their critical care supervisor attesting to the applicant’s competency in the above described clinical skills or plan for attaining future competency prior to accession. Applicants unable to contact former supervisors may have clinical competency verified during Phase 2 interview with regard to 66S or 66T designation. Applicants must demonstrate evidence of critical care competency skills by presenting a completed Pre-Enrollment Verification of Clinical Competencies checklist to the Army Healthcare Recruiter before entry onto active duty. (see pages 8-10 for checklist)

6. PHYSICAL EXAMINATION
   a. All direct accession applicants will have a physical examination performed by the nearest Military Entrance Processing Station (MEPS). This medical exam will determine if the applicant is qualified for military appointment.
   b. All applicants to the USAGPAN must meet audiometric hearing H1 standards for enlistment/appointment as described in AR 40-501. Specifically, the audiometric hearing threshold level for each ear must be no more than 25 dB at 500, 1000, 2000 Hz with no individual level greater than 30 dB. Additionally, at 4000 Hz the audiometric hearing threshold level must not exceed 45 dB.
   c. Special Note: Disqualification for the anesthesia program may result from hearing deficits. An applicant may be MEPS qualified for appointment but the above mentioned condition can be a disqualifying criteria for the anesthesia program. AMEDD Healthcare Recruiters will provide you with more information on this issue.

APPLICATION PROCESS

All civilian and Reservist applications to the USAGPAN must go through the US Army Recruiting Command (USAREC) in order to complete the administrative actions required prior to accession to active duty as a Regular Army Nurse Corps Officer. This process can take several months so it is advised to begin as early as possible.

Step One: USAREC Appointment / Active Duty Accession Packet

a. Your Army Healthcare Recruiter is responsible for providing all guidance on requirements for the USAREC appointment / active duty accession packet. They will verify all eligibility requirements are met and facilitate the application packet through the process.
*This applies to both civilian and Reservists

Steps to contact an Army Healthcare Recruiter:

b. Healthcare Recruiters will assist applicants in arranging an interview with an active duty CRNA (Phase 2 Program Director) in order to receive the required Letter of Recommendation for their applications. Schedule as early in the process as possible.
*See Phase 2 locations and POC located on page 7 of this document

*In an effort to optimize funding, the applicant’s GRE scores, transcripts, CV, and work experience will be evaluated by Phase 1 faculty prior to the interview/shadow process to ensure the applicant meets eligibility requirements for the program. If the applicant is missing any documentation they will be asked to defer the shadow experience until all necessary documents are provided and the USAGPAN has had time to evaluate the entire academic record. This allows us to provide feedback if the applicant does not meet the basic admission requirements (how they can strengthen their admission packet) and save money and time if they are not eligible for the program. The applicant can come any time to speak to the director and/or tour the program, but prior to the official interview/shadow process all the academic documents are required for review.

c. Funding for Phase 2 interview is provided by the Medical Recruiting Brigade (MRB). Please consult the MRB regarding the Phase 2 interview Temporary Duty (TDY) request for funding account information and process. Applicant is not required to use out-of-pocket travel expenses. Funding requests and TDY approval (by Battalion level authority) must be completed prior to applicant travel.

d. The USAREC Precision mission defines a specific number of vacancies assigned to USAREC by the USAGPAN. An Order of Merit List (OML) will be generated once all seats are filled for those still desiring to attend. If a seat becomes available after the class has been filled, an applicant will be selected from the OML to fill the vacancy.

*Note: Current Reservists require an approved CONDITIONAL RELEASE signed by USAR G1 prior to going before the September accession board. Unit Commander does NOT have signature authority. See USAREC Message 12-028 for guidance.

*If you are an active duty Army Nurse Corps Officer please refer to the HRC Army Nurse Corps Branch website: [https://www.hrc.army.mil/Officer/Army%20Nurse%20Corps%20Engage%20the%20Present%20Embrace%20the%20Past%20and%20Envision%20the%20Future](https://www.hrc.army.mil/Officer/Army%20Nurse%20Corps%20Engage%20the%20Present%20Embrace%20the%20Past%20and%20Envision%20the%20Future)

Step Two: Gain admission to Baylor University

a. Baylor (BU) is the affiliate university for the US Army Graduate Program in Anesthesia Nursing. Applicants will find the BU admission process similar to other civilian
universities. BU has a website specifically for those interested in applying to USAGPAN: [https://www.baylor.edu/nursing/armydnp](https://www.baylor.edu/nursing/armydnp)
b. Applications can be downloaded from the BU website.

**Step Three: AN Branch Human Resources Command Packet Information**

a. Accession Packet: USAREC health Services Directorate Technician or AN Program Manager will forward a copy of the applicant’s accession packet once the candidate is approved for accession onto active duty.

b. Additional documents required with accessions packet
   a. One complete set of official undergraduate and graduate transcripts from each college or university attended.
      i. Transcripts bearing former last names require a page inserted in the application listing all names used.
      ii. Grade reports or letters from instructors must be included for courses in progress.
      iii. All non-English transcripts must be translated prior to submission.
   b. GRE score report
   c. Current Audiometric Exam

**APPLICATION DEADLINES**

1. USAGPAN
   a. 15 August 2018 is the deadline for the primary selection board. If all seats are filled then this will be the only selection board.
      i. If vacancies remain after the primary selection then a rolling selection board may convene until 1 September 2018.

2. Baylor University
   a. 15 August 2018 is the application deadline (submit application as early as possible)

3. USAREC Appointment Application
   a. Please work with the Army Healthcare Recruiter on these deadlines.
   b. Specific questions or unique situations can be referred to ANC Program Manager Lieutenant Colonel Brett Buehner.

**Points of Contact**

Active Duty Nurse Programs Manager, USAREC: LTC Brett Buehner:
brett.g.buehner.mil@mail.mil

*Along with your healthcare recruiter, this office will provide an excellent source for information on the process of getting applicants accessed as Active Duty Regular Army Nurse Corps Officers.
*Website: [http://www.goarmy.com/amedd/army_health_care_corps.jsp](http://www.goarmy.com/amedd/army_health_care_corps.jsp)

Army Nurse Corps Branch Education & Training Officer: (502) 613-6557

*Can provide information on Army Nurse Corps career, milestones after selection for program, other questions related to a career in the Army Nurse Corps.
US Army Graduate Program in Anesthesia Nursing (USAGPAN) Director: (210) 295-4794
COL Denise Beaumont: denise.m.beaumont.mil@mail.mil

US Army Graduate Program in Anesthesia Nursing (USAGPAN) Dep Director: (210) 295-4769
LTC Tim Adams: timothy.s.adams10.mil@mail.mil

Baylor University (BU):
Ms. Jana Johns: 214-820-3361 Jana_Johns@baylor.edu

2016 PHASE 2 LOCATIONS AND PROGRAM DIRECTORS:

LTC Paul Jones  BAMC  San Antonio, TX    paul.d.jones32.mil@mail.mil
LTC James Hacker  CRDAMC  Fort Hood, TX    james.b.hacker.mil@mail.mil
MAJ Katrina Cheek  DDMAC  Augusta, GA    katrina.l.cheek2.mil@mail.mil
MAJ John Buonora  MAMC  Tacoma, WA    john.e.buonora.mil@mail.mil
MAJ Mikelle Adamczyk  TAMC  Tripler, HI    mikelle.j.adamczyk.mil@mail.mil
LTC Jeffrey Thompson  WAMC  Fort Bragg, NC    Jeffrey.d.thompson4.mil@mail.mil
MAJ Richard Crocker  WBAMC  El Paso, TX    richard.e.crocker.mil@mail.mil

*BAMC – Brooke Army Medical Center
CRDAMC – Carl R. Darnall Army Medical Center
DEEAMC – Dwight D. Eisenhower Army Medical Center
MAMC – Madigan Army Medical Center
TAMC – Tripler Army Medical Center
WAMC – Womack Army Medical Center
WBAMC – William Beaumont Army Medical Center
Critical Care Nursing Clinical Competencies

CARDIOVASCULAR / HEMODYNAMIC

1. Able to provide immediate and continual assessment and intervention to stabilize and manage patients with:
   a. Cardiogenic shock
   b. Hypovolemic shock
   c. Septic shock
   d. Actual potential life-threatening cardiac dysrhythmias (ventricular tachycardia, ventricular fibrillation, asystole, and complete heart block).

2. Able to troubleshoot and manage the care of patients requiring the following devices/interventions;
   a. Continuous EKG monitoring
   b. Cardiac pacemaker (external, transvenous, or permanent)
   c. Invasive arterial pressure monitoring
   d. Central venous pressure monitoring
   e. Pulmonary artery pressure monitoring and cardiac output determination
   f. Fluid resuscitation

3. Able to describe the indications, expected effects, side effects/adverse effects, and demonstrate appropriate administration of the following:
   a. Inotropics (for example, Dopamine and Dobutamine)
   b. Vasodilators (for example, Nitroglycerine and Nitroprusside)
   c. Vasopressors (for example, Levophed and Neosynephrine)
   d. Antiarrhythmics (for example, Lidocaine and Amiodarone)
   e. Advanced cardiac life support medications
   f. Blood and blood products
   g. Intravenous paralytic and sedative drugs

RESPIRATORY / PULMONARY

1. Able to provide immediate and continual assessment and intervention to stabilize and manage patients with:
   a. Acute respiratory failure (pneumonia, ARDA, and/or COPD)
   b. Pulmonary pathology (e.g., hemo/pneumothorax, flail chest)

2. Able to troubleshoot and manage the care of patients requiring the following devices/interventions:
   a. Endotracheal tubes (and/or tracheostomy tube)
   b. Suctioning of artificial airway
   c. Continuous pulse oximetry
   d. Conventional mechanical ventilation
   e. Closed chest drainage systems
RENAL / ENDOCRINE

1. Able to provide immediate and continual assessment and intervention to stabilize and manage patients with:
   a. Acute renal failure (pre-renal, intra-renal, post-renal)
   b. Diabetic-ketoacidosis
   c. Acid-base imbalance
   d. Electrolyte imbalance

2. Able to describe the indications, expected effects, side effects/adverse effects, and able to demonstrate appropriate IV administration of insulin and electrolytes (potassium, magnesium, calcium, etc.).

NEUROLOGICAL

1. Able to verbalize immediate and provide continual neurological assessment and intervention to stabilize and manage patients with:
   a. Head trauma or intracranial hemorrhage
   b. Seizures (nay etiology)
   c. Increased intracranial pressure
   d. Stroke/intracranial hemorrhage
   e. Spinal cord injury
   f. Guillain-Barre syndrome

2. Able to describe the indications, expected effects, side effects/adverse effects and able to demonstrate appropriate administration of steroids and diuretics (e.g., Mannitol) and intravenous anticonvulsive agents

GASTROINTESTINAL

1. Able to provide immediate and continual assessment and intervention to stabilize and manage patients with:
   a. GI bleed
   b. Hepatic failure
   c. Pancreatitis
   d. Bowel obstruction
   e. Nutritional support

LABORATORY VALUE INTERPRETATION

1. Able to differentiate normal/abnormal values and recognize appropriate interventions for:
   a. Arterial blood gases
   b. Serum electrolytes
   c. CBC
   d. Cardiac enzymes
   e. Coagulation tests
PSYCHOSOCIAL

Demonstrates the ability to assess the needs of patients/families in crisis and develop a collaborative plan to address identified needs.

COLLABORATIVE PRACTICE

Able to verbalize the importance of interdisciplinary teamwork to enhance patient outcomes.

LIFE SUPPORT TRAINING

IAW AR 40-68, the individual named above has provided evidence that they possess:
   a. Current basic life support (BLS) certificate and training
   b. Current advanced cardiac life support (ACLS) certificate and training.

   *NOTE: ACLS is not a substitute for BLS
**DIRECT ACCESSION**

- Contact USAREC Healthcare Recruiter and ask for information on USAGPAN (Army CRNA Training Program)

- Ensure all admission eligibility requirements are met

- Begin application to USAGPAN

- Ensure all required documents have been submitted and schedule Phase 2 interview and shadow experience

- Work with AN Program Manager for accession packet submission. Submit Transcripts, GRE, current grades, audiometric exam

**RESERVISTS**

- Contact USAREC Healthcare Recruiter and ask for information on USAGPAN (Army CRNA Training Program)

- Ensure all admission eligibility requirements are met

- Obtain conditional release signed by USAR G1

- Begin application to Baylor University

- Ensure all required documents have been submitted and schedule Phase 2 interview and shadow experience

- Work with AN Program Manager for accession packet submission. Submit Transcripts, GRE, current grades, audiometric exam

**Admission to USAGPAN**