

**UMASS AMHERST Doctor of Nursing Practice Program
Post Baccalaureate Public Health Nurse Leader (PHNL)
Four Year Plan of Study**

Required prerequisite to DNP Program: *Graduate level Introductory Statistics Requirement: Met____Not Met_____

Summer Year I	Fall Year I	Spring Year 1
N605 Scholarly Writing – 3 cr. N603 Theoretical Components of Nursing Science – 3 cr.	EPI630 Principles of Epidemiology – 3 cr. N735 Informatics for Nursing Practice – 3 cr.	HPP601 Application of Social and Behavioral Theories in Public Health Ed – 3 cr. EHS565 Environmental Health Practices – 3 cr. N630 Research Methodology in Nursing – 3 cr.
Summer Year 2	Fall Year 2	Spring Year 2
SCH-MGMT 680 Organizational Behavior – 3 cr *Could take Intro to Biostats here	HPP620 Intro to US Health Care System – 3 cr. N701 Health Care Quality – 3 cr. HPP628 Financial Management of Health Institutions – 3 cr.	N715 Intermediate Biostatistics – 3 cr. N704 Health Disparities and Social Justice – 3 cr.
Summer Year 3	Fall Year 3	Spring Year 3
N651 Nursing Ethics, Health Policy, and Politics – 3 cr. N725 Leadership in Health Systems – 3 cr.	N640 Advanced Public Health Nursing I – 3 cr. N698G Practicum: Advanced Public Health Practice I– 3 cr. N742 Capstone 1: Defining Evidence for Problems and Solutions– 3 cr.	N750 Advanced Public Health Nursing II – 3 cr. N798LL Practicum: Advanced Public Health Practice II– 3 cr. N798U Capstone II Practicum: DNP Project Proposal Development (112 contact hours) – 2 cr.
Summer Year 4	Fall Year 4	Spring Year 4
N760 Contemporary Issues in Public Health Practice – 3 cr. N798M Practicum: Advanced Public Health Practice III – 3 cr N798W : Capstone III – DNP Project Proposal Finalization and Approval 1 cr. (56 contact hours)	N840 Capstone IV: DNP Project Implementation & Monitoring – 3 cr. (168 contact hours)	N898A Capstone V DNP Project Completion, Evaluation, and Dissemination - 3 cr. (168 contact hours)

DNP Curriculum is in final stages of revision. Plan may change slightly.

Signature of Student: _____ Date: _____

Print Name: _____

Please sign one copy and return to the Program office, and keep one copy for your files.