

Middle Tennessee State University  
Family Nurse Practitioner Program  
Part-Time – Fall/Spring Start Program of Study – Guided Curriculum  
(courses taken in the following combination and order)

NOTE: Based on fall and spring semesters only. Summer courses MAY be offered depending on enrollment but are NOT guaranteed.

Semester 1	Hrs	Semester 2	Hrs	Semester 3	Hrs
NURS6111 Advanced Pathophysiology	B	NURS6112 Advanced Pharmacology	3	NURS6014 NP Role & Leadership in Healthcare	3
NURS6010 Theory & Evidence Based Practice	B	NURS6013 Ethics, Healthcare Policy, & Economics	3	NURS6011 Health Promotion & Disease Prevention Across the Lifespan	3
<b>Completed Credit Hours</b>	<b>6</b>	<b>Credit Hours</b>	<b>6</b>	<b>Credit Hours</b>	<b>6</b>

Semester 4	Hrs	Semester 5	Hrs	Semester 6	Hrs
NURS6110 Advanced Health Assessment	4	NURS6210 Family Healthcare Diagnosis & Management I <i>(Didactic 4 credit hours/Clinical 2 credit hours)</i>	6	NURS6211 Family Healthcare Diagnosis & Management II <i>(Didactic 4 credit hours/Clinical 2 credit hours)</i>	6
NURS6012 Diversity & Caring for Special Populations	3				
<b>Credit Hours</b>	<b>7</b>	<b>Credit Hours</b>	<b>6</b>	<b>Credit Hours</b>	<b>6</b>

Semester 7	Hrs
NURS6213 Family Healthcare Diagnosis & Management Intensive <i>(Didactic 2 credit hours/Clinical 3 credit hours)</i>	5
<b>Credit Hours</b>	<b>5</b>

<b>Total Credit Hours</b>	<b>42</b>
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By signing this document, I am agreeing to the plan of study listed above and understand that any changes must be approved by the Program Coordinator and the Academic Advisor. I also understand that course availability is based on projected student enrollment each term. If a course is not offered, the MSN Advisor will assist with options for continuing program progression.

Student Name (Printed): \_\_\_\_\_

Student Signature: \_\_\_\_\_

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

M# \_\_\_\_\_