



**SAN FRANCISCO
STATE UNIVERSITY**

COLLEGE OF HEALTH AND SOCIAL SCIENCES
SCHOOL OF NURSING
1600 Holloway Avenue, Burk Hall 371
San Francisco, CA 94132
Tel: 415/338-1802
Fax: 415/338-0555
Email: nursing@sfsu.edu
Web: www.nursing.sfsu.edu

Name: Tamara Glasgow

Candidate number: C1000 777 44

Date of Birth: 23/12/1980

Tamara Glasgow attended San Francisco State University between 08/2004 and 12/2006 and during this time she obtained her Bachelor's Degree in Nursing.

Semester 1 (08/2004 to 12/2004):

Course Name	Theory Hours	Lab/Clinical Hours
Nurs 111 Professional Nursing Concepts	45	
Nurs 112 Healthy Aging	15	
Nurs 113 Nursing Practicum I		112.5
Nurs 114 Health Assessment	30	
Nurs 115 Health Assessment Skills Lab		45
Nurs 116 Basic Nursing Skills Lab		45

Semester 2 (01/2005 to 06/2005):

Course Name	Theory Hours	Lab/Clinical Hours
Nurs 222 Nursing of Adults	45	
Nurs 225 Pharmacology	30	
Nurs 333 Pathophysiology	30	
Nurs 223 Nursing Practicum II		135
Nurs 224 Technical Skills Lab		45



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Semester 3 (08/2005 to 12/2005):

Course Name	Theory Hours	Lab/Clinical Hours
Nurs 335 Nursing Practicum III		135
Nurs 337 Nursing Practicum IV		135
Nurs 336 Paediatrics	45	
Nurs 334 Family Assessment and Maternity	45	

Semester 4 (01/2006 to 06/2006):

Course Name	Theory Hours	Lab/Clinical Hours
Nurs 444 Psych/Mental Health	30	
Nurs 445 Nursing Practicum V: Mental Health		135
Nurs 446 Community Health	45	
Nurs 447 Nursing Practicum VI: Community Health		135

Semester 5 (08/2006 to 12/2006):

Course Name	Theory Hours	Lab/Clinical Hours
Nurs 557 Nursing Practicum VII		135
Nurs 555 Nursing Research	30	
Nurs 556 Nursing Leadership & Health Issues	30	

Total hours:

Theory: 420	Lab/Clinical: 1057.5
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Signature: 

Date: 11/9/19

Director, School of Nursing
San Francisco State University
1600 Holloway Avenue, Burk Hall 371
San Francisco, CA 94132



Overseas Registration: Form to Accompany Transcript of Training



Overseas Registrations Dept, 23 Portland Place, London, W1B 1PZ Phone: +44 207333 9333 Web: www.nmc-uk.org

To the applicant: Please forward this form to the training institution where you completed your nursing/midwifery training programme. If you are relying on evidence of your training in order to satisfy our English language requirements, please give your training institution sections **8a** and **8b** of this form to complete.

To the head of the training institution: You have been asked to complete this form by the applicant because he/she has applied to be registered with the UK Nursing and Midwifery Council (NMC). You should complete all relevant areas of the form. Please also attach the school's own transcript of training which must contain a breakdown of the theoretical and clinical hours separately. Once completed, please return this form and the applicant's training transcript directly to the NMC Overseas Registrations Department. **You are only required to complete sections 8a and 8b if you are asked to by the applicant.**

The NMC may make further enquiries of the applicant or the training institution in order to verify or clarify any information provided in this form.

Section 1: Applicant's details

Title (Mr/Mrs/Miss/Ms/Other)	Mrs	Candidate ID	C100077744
Name	Tamara Glasgow		
Application to NMC to register as	Overseas Registration (RN1) - Registered Nurse (Adult-General)		

Section 2: Training institution

Name of training institution	San Francisco State University, School of Nursing										
Address of training institution	1600 Holloway Avenue										
Town/City	San Francisco										
County/State	CA										
Postcode/Zip code	94132										
Country	United States										
Telephone number	4153381802										
Contact name	Mary Ann Van Dam										
Contact email address	Vandam@sfsu.edu										

Section 3: Programme details

Date training course commenced (DD/MM/YYYY)	08	20	2004
Date training course completed (DD/MM/YYYY)	12	20	2006
The training course attended was Full time / Part time	Full time <input checked="" type="checkbox"/>	Part time <input type="checkbox"/>	



Section 4: Summary of training programme

Please provide a breakdown of the total hours of clinical and theoretical instruction within the applicant's training programme. To make an assessment the NMC will compare the hours detailed below to the hours provided in the training transcript.

SUMMARY OF NURSING PROGRAMME	Training hours
Total hours of theoretical instruction	420
Total hours of clinical instruction	1057.5
Total hours of theoretical and clinical instruction	1477.5

Section 5a: Clinical instruction breakdown (Nursing)

Adult (General) nursing applications only

CLINICAL INSTRUCTION	Number of Hours
General or specialist medicine	135
General or specialist surgery	135
Child care and paediatrics	135
Maternity care	135
Mental health and psychiatry	135
Care of the elderly (geriatrics)	112.5
Community or primary care nursing	135

Mental health nursing applications only

CLINICAL INSTRUCTION	Number of Hours
Care of patients with acute and enduring or chronic conditions	
Care of adults and older people	
Community care	
Continuing care and rehabilitation	
Specialist mental health care: substance abuse or challenging behaviour	
Care of children and young people with mental health problems	

Learning disabilities nursing applications only

CLINICAL INSTRUCTION	Number of Hours
Care of children and adolescents	
Care of adults and the elderly	
Care of those with complex needs	
Caring in residential and day care settings	
Continuing care and rehabilitation	
Working with families and carers	

Children's nursing applications only

CLINICAL INSTRUCTION	Number of Hours
Paediatric and specialist medicine and surgery	
Working collaboratively with families, carers and children	
Care of children in emergency, neonatal and high dependency settings	
Care in schools and other community settings	
Health promotion and education in child health	

Section 5b: Clinical instruction breakdown (Midwifery)

Please see section 1 of this form for information in relation to which part of the NMC register the applicant is applying. For those applicants applying to the Midwifery Register, please complete the relevant table(s) below to indicate whether the training course included clinical training hours in relation to each of the areas specified. Please provide your answer as 'yes' or 'no' as appropriate.

SUMMARY OF MIDWIFERY PROGRAMME	Training Hours
Total hours of Theoretical Instruction (including skills lab practice)	45
Total hours of Clinical Instruction (programme related chemical practice)	135
Total hours of Theoretical and Clinical Instruction	180
CLINICAL INSTRUCTION	
	Number of Hours
Antenatal Area	33.75
Intranatal Area	33.75
Postnatal Area	33.75
Neonatal Area	33.75
MIDWIFERY PRACTICE	
	NUMBER OF WOMEN/BABIES
Total number of pre-natal examinations	
Supervision and care of pregnant women	
Total number of deliveries personally undertaken (lead role)	
Active participation in breech deliveries (excluding the above)	
Performance of episiotomy and Initiation into suturing. Initiation shall include theoretical instruction and clinical practice. The practice of suturing includes suturing of the wound following an episiotomy and a simple perineal laceration	
Supervision and care of women at risk in pregnancy, or labour or post-natal period	
Supervision and care (including examination) of post-natal women and healthy new-born Infants	
Observation and care of the new-born requiring special care, including those born pre-term, post term, underweight or ill	
Care of women with pathological conditions in the fields of gynaecology and obstetrics	
Initiation into care in the field of medicine and surgery. Initiation shall include theoretical instruction and clinical practice	

*unknown - not recorded and varies with clinical setting
MvD*

Section 6: Theoretical instruction breakdown (nursing and midwifery applications)

I confirm that our training programme broadly covers all of the following areas of theoretical nursing and midwifery instruction.

In relation to nursing:

a) Nursing - nature and ethics of the profession; general nursing principles; nursing principles in relation to: general and specialist medicine, general and specialist surgery, child care and paediatrics, maternity care, mental health and psychiatry and care of the old and geriatrics.

b) Basic sciences - anatomy and physiology; pathology; bacteriology; virology and parasitology; biochemistry and radiology; dietetics; hygiene; preventative medicine; health education; pharmacology.

c) Social sciences - sociology; psychology; principles of administration; principles of teaching; social and health legislation; legal aspects of nursing.

In relation to midwifery:

a) General subjects - basic anatomy and physiology; basic pathology; basic bacteriology, virology and parasitology; basic biophysics, biochemistry and radiology; paediatrics, with particular reference to new-born infants; hygiene; health education, preventative medicine, early diagnosis of diseases; nutrition and dietetics, with particular reference to women, new-born and young babies; basic sociology and socio-medical questions; basic pharmacology; psychology; principles and methods of teaching; health and social legislation and health organisations; professional ethics and professional legislation; sex education and family planning; legal protection of mother and infant.

b) Activities of midwives - anatomy and physiology; embryology and development of the foetus; pregnancy, childbirth and puerperium; gynaecological and obstetrical pathology; preparation for childbirth and parenthood including psychological aspects; preparation for delivery (including knowledge and use of technical equipment in obstetrics); analgesia, anaesthesia and resuscitation; physiology and pathology of new-born infant; care and supervision of the new-born infant; psychological and social factors.

Yes No

If this training programme does not contain all areas of theoretical instruction as outlined above, please provide details of those areas not covered below:

.....

Section 7: Declaration

I certify that to the best of my knowledge the information entered on this form represents a true summary of the theoretical and clinical instruction of the applicant.

By signing this form I also confirm that my personal data may be processed for the purposes of this application.

M. Ann Yan
 Signature

Date (DD/MM/YYYY) 09 01 2019

Full Name MARY ANN YAN DAM RN PHD PNT

Position held PROFESSOR + DIRECTOR

Please note that this form will not be accepted without the official stamp of the Education Institute.

If the Education Institute does not have a stamp, the employer must confirm on the Education Institute's letter headed paper that no stamp exists. This letter must be signed by the person completing this form.



Section 8a: Evidence of English language competence

To the applicant: If you are providing evidence of competence in the English language using a nursing/midwifery programme that was taught and examined in English, you must ask your training institution to complete this section of the form.

To the head of the training institution: You have been asked to complete this section of the form by the applicant because he/she wishes to use their training programme to satisfy the NMC's English language requirement. You should complete all areas of the form in as much detail as possible. If your country is not on this list of countries where English is the first and native language then you must complete question 5.

Please ensure that you read the guidance outlining the requirements for this type of evidence. Details of this may be found on our website at www.nmc.org.uk

Please complete the following:

1) Please confirm the language of instruction for the training programme(s):

.....

2) Please confirm the language of the set texts and recommended reading material:

.....

3) Please confirm the language of examination for the training programme:

.....

4) What percentage of clinical interaction, in the training programme, would have been with patients, service users, families and health care professionals who communicated in English?

.....

5) Please confirm how you ensured that the clinical interaction with patients, service users, families and health care professionals was conducted in English (you may attach additional documentation or written explanation to the form).

.....

.....

Section 8b: Evidence of English language declaration

I certify that, to the best of my knowledge, the information entered on this form is a true record of the English language content of the course that was completed by the applicant.

By signing this form I also confirm that my personal data may be processed for the purposes of this application.

..... Date (DD/MM/YYYY)

Signature

Full Name

Position held

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Stamp of Education Institute: