88 of the participants were PNP prepared, 42 were FNP prepared, 3 were ANP prepared, 2 were DNP prepared, 18 were MSN prepared, 12 were BS prepared, and 9 were CNS prepared.

Demographic Data (Continued)
- 60.7% of the APRNs worked at least 33 hours per week, while 39.2% worked 32 hours or less per week in clinical care practice.
- Average age of participants was 43 years, age range of participants was 26 years to 62 years.
- 53% of the APRNs perceived that they were only somewhat prepared or very unprepared to practice in their first clinical position.
- 108 (67.5%) of APRN participants reported that they would be extremely likely or very likely to apply for a NP Fellowship if it was available.

Results
- Upon completion of your initial NP education, how prepared were you to practice as an NP?
  - Only 43.7% of the APRNs perceived that they were very well prepared to practice in their first clinical position, P=0.010.
  - A scatterplot graph was organized to show the comparison of preparation verses the importance.

Overall theme for open ended question: “Is there anything else I need to know?”
- Inability to obtain student NP experiences in sub-specialty practices leads to difficulty in the overall transition to practice.

Top Characteristics for Successful Transition to Practice
- Problem solving abilities
- Competency
- Confidence
- Role Clarity
- Interpersonal Communication

Regarding the Need for an APRN Fellowship
- 108 (67.5%) of APRN participants reported that they would be extremely likely or very likely to apply for a NP Fellowship if it was available.

Conclusions
- Transition - Study results offered added knowledge of APRN pediatric sub-specialty transition to practice. A healthy transition, as described by Macnee and Tranquard (1994), with Transition Theory has process and outcome indicators that are connected to preparedness to practice.
- Results - Results have indicated that greater than 50% of the 186 APRNs who responded to the survey perceived that they were less prepared to practice in their first clinical role.
- Post Graduate Education - If the gap in post graduate APRN fellowship education and support is not met, there will be continued deficiencies across the continuum in healthcare practices (Hart & Macnee, 2007).
- APRNs need support from an APRN Fellowship Program that would offer the ability to gain fellowship education and support is not met, there will be continued deficiencies across the continuum in healthcare practices (Hart & Macnee, 2007).
- Interdepartmental Collaboration - This study has offered collaboration with Pediatric Human Resources Department, nursing leaders in Patient Services / Center for Professional Excellence, and communication with the DNP student’s Research Committee members.
- Educational improvements are needed to build a structure of support for APRNs as they transition to a new role.

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Top 4 benefits of attending an APRN Fellowship Program included:
- Increased medical knowledge of a sub-specialty practice
- Clinical practice experience
- Guided support through transition to practice

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