



# STUDENT ORIENTATION RECORD

STUDENT Name (PRINT): \_\_\_\_\_ Clinical Rotation: \_\_\_\_\_ Date: \_\_\_\_\_

SCHOOL AFFILIATION: \_\_\_\_\_ INSTRUCTOR NAME \_\_\_\_\_

*All sections must be completed on the first day of work*

| GENERAL                                 | LIFE / SAFETY DEPARTMENT ORIENTATION  | DATE | INITIAL |
|---|---|------|---------|
| ✓ Welcome & Orientation to Hospital     | <b>FIRE SAFETY</b>  |      |         |
| ✓ Customer Service (Courtesy, Rounding) | Locates department evacuation floor plan/closest pull box   |      |         |
| ✓ Patient Safety/ Culture of Safety     | Identifies location of gas lines and turn of valves   |      |         |
| ✓ National Patient Safety Goals         | States definition of R.A.C.E. and application in clinical area                                      |      |         |
| ✓ Risk Management Phone # 6327          | Locates fire/safety manuals for the department  |      |         |
| ✓ Hospital Occurrence Form              | States action to take in case of an utilities failure   |      |         |
| ✓ Pain Management                       | <b>EMERGENCY PAGING CODES</b>   |      |         |
| ✓ Equipment Safety                      | States how to access security and when to page code Gray  |      |         |
| ✓ Unit Information/ Tour                | States role in emergency code situations  |      |         |
|   | States emergency access number  |      |         |
|   | <b>HAZARDOUS COMMUNICATION</b>  |      |         |
|   | Identifies location and contents of MSDS Manual   |      |         |
|   | <b>INFECTION CONTROL/EMPLOYEE HEALTH – extension 7176</b>   |      |         |
|   | Demonstrates appropriate hand hygiene: washing and sanitizing. States Standard Precautions and use. |      |         |
|   | Utilizes personal protective equipment (PPE) appropriately.   |      |         |
|   | <b>SAFE MEDICAL DEVICE ACT</b>  |      |         |
|   | θ Verbalizes responsibilities in the case of equipment failure                                      |      |         |
|   | θ Verbalizes the proper mechanism to report equipment failure                                       |      |         |

*I have read, understand and received orientation to the above. I understand if I have further questions, I may ask my director/manager/supervisor any time.*

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Instructor Signature \_\_\_\_\_ Date \_\_\_\_\_