Baptist Health Paducah Orientation Packet

Welcome to Baptist Health Paducah for those of you who are new and welcome back to those who have been here before. We are glad that we have been given the opportunity to partner with your school in providing clinical experiences.

You will be required to wear a nametag at all times while on the hospital campus. If you have a nametag issued by your school or company, please use it as well as the paper badge provided. By wearing a nametag, you will be in compliance with security procedures and regulatory guidelines, and provide identification to staff and visitors. The nametag should be worn in a manner that is readily visible at all times, preferably on the right or left upper chest area of your clothing.

For your protection, you are expected to follow these procedures and instructions while at this facility. Should you need more information regarding policies & procedures, please contact any hospital staff member for assistance.

The Joint Commission requires that students receive orientation information similar to what an employee receives before caring for our patients. Your instructor will review the information with you and answer any question you may have. As with most things, we have to have documentation that the orientation occurred so there are forms that you will need to sign at the end of the orientation packet. Forms must be signed and turned in prior to beginning any clinical experience.

The information contained within this packet will not only help you take better care of our patients, but it also provides the information you need to be safe while you are here. The care you provide must be supervised by an appropriate certified/licensed instructor or healthcare provider. Your documentation of the care you provide must be co-signed by an instructor or a preceptor.

As a student, you are allowed to provide care for patients using the skills you have been taught by your program and successfully mastered with 4 exceptions.

1. Students may not administer any type of blood product
2. Students may not accept verbal orders or critical lab values
3. Students may not administer IV push medications in an emergency situation
4. Students may not administer IV chemotherapy

Student medication administration and performance of skills must be supervised. Students may only administer medications that are permitted under the appropriate regulating body for your profession. (i.e. Kentucky Board of Nursing, Kentucky Board for Respiratory Care Practitioners, Kentucky State Board of Physical Therapy, Kentucky Pharmacy Practice Act etc.)

Students are often required to complete projects while here at Baptist Health Paducah. Any project requiring access to either patient or employee data or collection of data from either group must go through our Research Office. Students will need to complete a questionnaire to determine if the project will need to be reviewed by the Research Office. Please have the student contact Tracy Phillips at (270) 575-2117 or Tracy.Philips@BHSI.COM to proceed.

We are really excited about the changes we are experiencing at Baptist; specifically, our transformation to our new EPIC computer documentation system mid-September and our building project for the new cancer center expected to be completed in 2017. We hope you enjoy your clinical experience here and that you develop a greater awareness and excitement for the profession you have chosen.

Sincerely,

Andrea Williams, RN, BS
Student Coordinator
Email: andrea.williams@bhsi.com
Phone: (270) 575-8370
Fax: (270) 575-2251
PRIDE Standards of Performance

These PRIDE Standards of Performance are the same standards you'll find on your annual evaluation (formerly known as the Core Competencies). Go over these important guidelines, so you can do your best in your job. The symbols at the right are visual reminders, to help you remember what's expected of you.

Communication:
The goal of good communication is being committed to listening attentively to our customers to fully understand their needs. It is speaking in terms customers can easily understand to deliver messages with courtesy, clarity and care. This includes face-to-face encounters, telephone and e-mail.

Professionalism/Excellence Orientation:
Professionalism and Excellence Orientation refer to the way in which our employees work to meet our customers’ needs and further the mission of the hospital.

Ownership/Stewardship:
The work we do is a reflection of ourselves. Ownership and Stewardship mean taking PRIDE in what we do and demonstrating a sense of responsibility for the outcomes of our work and job.

Teamwork/Commitment to Co-Workers:
We rely on each other to give the best possible service and care to our patients, visitors, co-workers and physicians. Respect and collaboration are essential.

Confidentiality and Privacy:
It is the responsibility of all Baptist Hospital East employees to protect our patients' privacy and modesty by creating a secure and trusting environment.
**Mission, Vision & Values**

**Mission:** Baptist Health demonstrates the love of Christ by providing and coordinating care and improving health in our communities.

**Vision:** Baptist Health will lead the transformation to healthier communities.

**Values:** Baptist Health Paducah will live out its Christ-centered mission and achieve its vision guided by:
- **Respect**
- **Compassion**
- **Excellence**
- **Integrity**
- **Collaboration**
- **Joy**

**General Student Information**

**Parking:** Parking for students and instructors is in the lot across from the Baptist Imaging Center at the corner of 28th and Kentucky Ave.
**I.D. Tag:** You must wear an ID tag. Students should have a name badge from their college/university identifying them as a student. Nametags should be placed *above* the waist and worn at all times for identification and security purpose. There are no exceptions. Cloth or other material lanyards are prohibited in patient care areas due to infection control concerns.

**Personal Items:** Please bring as little into the hospital as possible. Storage space for personal items is at a minimum. The unit director will show you the designated area where items such as coats and book bags can be stored. Money and valuables should be kept with you at all times in a safe place. The hospital cannot be responsible for the loss of personal items. Lost and found items are left with Security.

**Smoking and Tobacco use:** Baptist Health Paducah is a tobacco-free campus. This means that all patients, visitors, medical staff members, vendors, employees, and students will be prohibited from using tobacco of any kind on our campuses including cigarettes, vapes, cigars, pipes, herbal tobacco products and chewing tobacco.

- Baptist Health Paducah is a tobacco-free healthcare facility.
- Tobacco use is prohibited anywhere on the hospital campus including within personal vehicles parked on Baptist Health Paducah property and parking garages.
- There are no designated tobacco use areas on the campus and no medical exceptions to this policy.
- Patients will be given information and treatment options for tobacco cessation and will communicate with their treating physician or nurse to request nicotine replacement products.
- The smoking policy can be found in the Policy & Procedure Manual in BEN - Smoking and Tobacco Use Policy [LINK](#).

**Baptist Health Paducah Library:**

As a new college student or one that is re-enrolling, won’t you think about your hospital’s medical library and/or librarian as a valued resource to complete that next assignment? Remember, our librarian will work with you in a concerted effort to utilize our hospital’s medical library to its utmost potential. With over 35 years in the field of library science, she’s familiar with print indexes, reference resources, and health science databases from which to pull information that targets your topic of interest. In addition to over 135 electronic book titles and shelved texts, your medical library currently holds within its collection 10 print journal titles with over 150 archived journal titles ranging from 2006 – 2012. To augment the print journals, your medical library currently subscribes to 50 additional titles available electronically through the nursing bundle with OVID’s e-journals. There are also 40 additional titles in microfiche format ranging from 1996 - 2008.

Your medical library is located in the basement across from Health Information Management’s window (formerly Medical Records). Hours of operation are Monday – Friday, 7:30am – 4:00pm with hospital employee access after-hours and weekends using the ID badge scanner. You can contact our librarian, Carmen Davidson, at e-mail: cdavidso@BHSI.COM or phone 270.575.2108 with any questions.
Primary Stroke Center

In 2010 Baptist Health Paducah became recognized as a Primary Stroke Center. There are 20 stroke centers in Kentucky and BHP is the only Primary Stroke Center west of Owensboro, Kentucky. The accreditation is awarded from The Joint Commission.

The mission of BHP Stroke Center is to improve the quality of stroke care through prevention, intervention and treatment for the people and communities that we serve.

**Why should BHP be a Primary Stroke Center?**

- Because stroke is the 4th leading cause of death in Kentucky
- Because stroke is the leading cause of disability in the United States
- Because we can increase public awareness on the early recognition of the signs and symptoms of stroke
- Because we can offer early treatment when a patient arrives within the treatment window, every minute stroke care/treatment is delayed, 2 million brain cells die
- BHP is a member of the Stroke Encounter Quality Improvement Plan to assist in the development of the Kentucky stroke system of care
- Because we are the leader in the treatment of stroke in our region

**What does it mean to be a Primary Stroke Center:**

- BHP staff, Nurses, and Physicians in the Emergency Department and Stroke units are specially trained to recognize the signs and symptoms of stroke and initiate the best practice treatment
- BHP is a resource for the community education about stroke
- BHP collaborates with regional Emergency Medical Services to identify and treat the stroke patient
- BHP Stroke Units treat stroke patients with clinical guidelines that are best practice guidelines provided by the American Stroke Association and the Brain Attack Coalition

**To remember the signs of Stroke act F.A.S.T:**

**F** = face, does one side droop? Ask the person to smile.

**A** = arms, is one arm weak or numb? Can the person raise both arms?

**S** = speech, is speech slurred or odd? Ask the person to say a simple phrase.

**T** = time, time to call 911! And get to the hospital immediately.

**Time Saved is Brain Saved!**
Chest Pain Center

In 2008, Baptist Health Paducah proudly announced the accreditation by the Society of Cardiovascular Patient Care. The staff of Baptist Health Paducah is presently working on Version 5 accreditation through the Society. Version 5 accreditation looks at improving our current processes and increasing education on early heart attack care (EHAC) and acute coronary syndrome (ACS).

The mission of the Society of Cardiovascular Patient Care is to eliminate heart disease as the number one cause of death worldwide by providing facilities with a roadmap to improve cardiac care by utilizing published research and current best practices.

Why should BHP have a Chest Pain Center?
- Because heart disease is the leading cause of death for women and men in the U.S.
- Because Kentucky is one of the top 4 states in the nation for heart disease and related death.
- Because we must increase public awareness on the facts about heart disease and heart attacks.
- Because we can reduce the death rate for ACS patients.
- Because we will improve and standardize patient care for ACS.
- Because we are the leader in the treatment of cardiac care.

What does it mean to be an accredited Chest Pain Center?
- BHP Staff, Nurses, and Physicians in the Emergency Department and Cardiac Catheterization Lab are specifically trained to recognize signs and treat symptoms of ACS.
- BHP becomes a resource for community education about ACS.
- BHP leads the charge to reduce cardiac death by collaborating with regional Emergency Medical Service providers and transferring facilities to quickly treat Chest Pain in the field while transporting the patient to our Chest Pain Center.
- BHP treats ACS with clinical protocols that adhere to best practice clinical guidelines.

The National Heart Attack Alert Program notes these major symptoms of a heart attack:

- **Chest discomfort.** Most heart attacks involve discomfort in the center of the chest that lasts for more than a few minutes, or goes away and comes back. The discomfort can feel like uncomfortable pressure, squeezing, fullness, or pain.
- **Discomfort in other areas of the upper body.** This can include pain or discomfort in one or both arms, the back, neck, jaw, or stomach.
- **Shortness of breath.** This often comes along with chest discomfort. But it also can occur before chest discomfort.
- **Other symptoms.** These may include breaking out in a cold sweat or feeling nausea or light-headedness.

We encourage people in the community to immediately call 911 if they or someone they know show signs of a heart attack.
Dress Code

The purpose of Baptist Health Paducah’s dress code is to maintain high standards of dress, hygiene, grooming, and personal appearance by employees; to assure that a professional image is portrayed to patients, families, visitors and co-workers and to comply with safety and infection control standards.

Name Tags
Name tags must be worn at all times to clearly identify staff and students to patients and visitors, and to comply with regulatory guidelines. Name tags must be worn above the waist. All cloth or other material lanyards are a possible infection control issue and are prohibited in patient care areas.

Facility Wide Appearance Standards
Personal hygiene and neatness is each student’s responsibility. Clean nails, hair, teeth, body, clothes, and shoes are expected. Students are asked to dress modestly in attire and appearance. Natural fingernails must be well groomed, clean and should not extend more than one-fourth inch (1/4”) beyond the fingertips. The hands, including the nails and surrounding tissue, should be free of inflammation.

Hairstyles must be neat and clean. Unconventional hairstyles and colors should be avoided as should other dress styles and trendy apparel that would not be reasonable accepted as cultural norms or be offensive to customers served. Hair should not restrict vision. Any one in patient care areas with long hairstyles should wear hair back off the face and neck to avoid its interfering with performance of procedures or coming into contact with the patient in the course of treatment.

Non-Approved Attire Facility Wide

- Make up, jewelry and cologne should not be excessive
- Ear piercings are permitted but should be simple with no more than three earrings per ear.
- **Nose, facial, tongue and other visible body piercings are not permitted.** They must be removed or covered.
- **Tattoos and body artwork are not permitted and must be hidden if visible.**
- Fingernail piercing and fingernail art is not permitted. Nail polish must be free from chips, cracks. Peeling and loud/inappropriate nail polish colors are not acceptable.
- Wearing paraphernalia, i.e., buttons, armbands, pins, etc. are not permitted.
- Hats (including baseball caps) are not permitted unless specifically authorized by department leaders or authorized for special occasions.
- Sweat shirts, sweat suits or any hooded clothing are not permitted.
- Skintight attire is not permitted.
- Tank tops and tops with straps are not permitted.
- Any article of clothing that exposes bare midriff is not permitted.
- Dresses shorter than two inches above the knee are not permitted.
- Shorts of any length are not permitted.
- Leather pants, denim jeans of any color, spandex pants or leggings, pants with the waist band rolled down that reveal underwear and pants that drag the floor are not permitted.
- Shoes that are above 2.5 inch of heel height, or slick soled shoes are not permitted.
- No Flip Flops
- Cloth lanyards or badge straps are not permitted.
Approved Attire for Patient Care Clinical Areas
Uniform designated by the school that fits within the Baptist Health Paducah Dress code policy.

Definition: Scrub Sets: Approved scrub dress, or matching skirt/pants/tops or white nursing uniforms. Color coordinated. Color coordinating scrub jacket or sweater may be worn over scrubs. Socks or hose must be worn at all times and must be appropriate and coordinating in color. Shoes must be athletic shoes, nursing duty shoes, clogs with closed toes and no perforations.

Nails/hands:
Artificial nails, overlays, extenders and/or hardeners are forbidden in all clinical and clinical areas. Natural fingernails must be well groomed, clean and should not extend more than one-fourth inch (1/4”) beyond the fingertips. The hands, including the nails and surrounding tissue, should be free of inflammation. Nail polish may be worn but free from chips, cracks and peeling. Loud/inappropriate colors are not acceptable.

Approved Attire for Administrative/Clerical (Business Casual)
- Dresses, skirts or split skirts which are no more than two inches above the knee
- Dress pants, including khaki’s
- Blazers, dress shirts, golf shirts, turtlenecks, sweaters or blouses. Sleeveless shirts and dresses are acceptable but must cover the shoulder. When wearing sleeveless tops, the width of the strap should be no less than mid-shoulder to the shoulder joint
- Flats, low-heeled shoes, dress boots, and dress shoes with open toes are allowed with or without socks or hose. Heel height should not be in excess of 2.5 inches
- Artificial fingernails, overlays, bondings, tips, wrappings, and tapes are acceptable. Nail polish must be free from chips, cracks, and any peeling. Loud/inappropriate colors are not acceptable.

Information Management
Computerized information systems are one of Baptist Healthcare System’s most valuable assets. Our success and the privacy of our patients depend on the protection of this information against theft, destruction or disclosure to outside interests. Please use the following guidelines while you are here.

- Confidentiality of patient information must be protected at all times.
- Access only the patient information that is necessary to do your job.
- Do not use your student/instructor access privileges to access your health information, your neighbors, or your friends even if they give you permission to do so (unless you have been assigned to care for them)
- Do not share patient information with a patient’s family, friends, or an outside agency unless you have been authorized to do so.
- Do not discuss patient information in any public location: Hallways, elevators, cafeteria, grocery, etc.
- Ensure the patient’s chart is not accessible to a passerby.
- Ensure patient information is not left for viewing on computer screens. Privacy filters are used in areas where the public can view computer screens.
◆ Patient records may not be printed out or copied. It is permissible to hand copy but no patient identifying information can be included (name, address, employer, date of birth, SS#, hospital #, relatives names, etc.)
◆ A computer password is your electronic signature. Guard it and do not give it to anyone. **Never share your password with anyone.**
◆ You should always **log off** your computer terminal before leaving it unattended
◆ All entries in the medical record should be dated and authenticated. Student entries must be co-signed by the instructor or the nurse responsible for the patient.
◆ Workstations should be used for business activities. Activities that interfere with your job or compromise the availability, confidentiality or integrity of EPHI (Electronic Protected Health Information) are not permitted. Do not bring in media (CD, DVD/Thumb drives) from outside
◆ If you have a question or need to report a security incident contact the Information Security Officer or call the Compliance Hotline at 1-800-783-2318.

### Organizational Ethics

Today’s healthcare providers, patients and families often encounter difficult questions regarding medical treatment. The Ethics Committee is one way to address those issues. The Ethics Committee is not a decision-making body, but is available to provide advice, consultation, mediation and education in ethical issues involving medical treatment.

The Hospital’s ethics committee primary functions include:
- Encouraging and providing a forum for dialogue among medical disciplines on biomedical ethical issues.
- Providing a mechanism for ethics consultation for patients, families or surrogates, and healthcare professionals when there are conflicts of ethical concerns in medical decision making.
- Providing educational programs and forums for hospital staff, medical staff, and the community on biomedical ethical issues and case reviews.
- Advising the hospital’s management and Administrative Board of ethical issues in clinical practice and hospital management that are brought to the committee’s attention.
- Reviews hospital policies on biomedical ethical issues.

The composition of the Ethics Committee can be different for each issue but includes representation from at least the following: physicians from each medical/surgical department, nurses representing the major service lines of the hospital, social worker, chaplain, patient representative, member of the Administrative Board, a hospital administrator, a representative of the community-at-large, and an attorney. Other members may be added at the committee’s recommendation and the Administrative Board’s agreement.

Any physician, hospital employee, patient or family member may request a consultation with the Ethics Committee. To access the Ethics Committee ask the nursing supervisor, pastoral care staff, or any social worker.
Patient Rights

Baptist Health Paducah encourages respect for the personal preferences and values of each individual. We consider each patient a partner in their hospital care and believe the patient should be well informed, able to participate in treatment decisions, and able to communicate openly with health care professionals providing their care. A complete list of patient rights and responsibilities are given to each patient upon admission. A copy of these patient’s rights may be obtained by contacting any staff member at any time during the patient’s stay. In the event that the patient does not have decisional capacity, these rights apply to the patient's surrogate. The patient’s rights and responsibilities are displayed in lobbies and waiting rooms throughout the facility and all inpatient rooms.

Open and honest communication, respect for personal and professional values, and sensitivity to differences are important to provide the best care for our patients. Effective health care requires collaboration between patients and physicians and other health care professionals. As the setting for the provision of health services, primary care centers must provide a foundation of health understanding and respecting the rights and responsibilities of patients, their families, physicians, and other care givers. Primary care centers must ensure a health care ethic that respects the role of the patients in decision making about treatment choices and other aspects of their care. We must be sensitive to cultural, racial, linguistic, religious, age, gender, and other differences as well as the needs of persons with disabilities.

When you are a patient you have the right to:
1. Receive fair and compassionate care at all times and under all circumstances.
2. Be treated equally and receive the same level of care regardless of your race, religion, sex, age or disability.
3. Retain your personal dignity and privacy, receive care sensitive to your personal feelings and need for bodily privacy, receive care in a safe setting, and to be free from abuse and harassment.
4. Have family members, representatives, and physicians of your choice notified promptly of your admission to the hospital.
5. Receive personalized treatment through an individual treatment plan and to participate in the development and implementation of your treatment plan. This institution values each patient’s cultural, racial and religious heritage as part of that plan.
6. Maintain confidentiality of your clinical records and to access information contained in your medical record within a reasonable time frame.
7. Receive visitors unless such visits harm your medical condition and negatively affect your recovery.
8. Send and receive mail without interference from hospital personnel or other parties.
9. Examine and receive an explanation of your bill.
10. Be informed of hospital rules and regulations that affect your activities and behavior as a patient.
11. Formulate advance directives (living will, durable power of attorney, health care surrogate, etc.) and to have hospital staff and practitioners comply with these directives in accordance with federal and state law.
12. Be free from restraints and seclusion, of any form, that are not medically necessary or are used as a means of coercion, discipline, convenience or retaliation.
13. Appropriate control and management of pain.
14. Request assistance if you have difficulty reading, hearing or speaking English.

Patients and/or their designated surrogate have the right to:
15. Be informed of your rights before the furnishing or discontinuance of care, whenever possible.
16. Make informed decisions regarding your care, including being informed of your health status, be involved in care planning and treatment, be able to request or refuse treatment to the extent permitted by law, and be told of the medical consequences of your actions.
17. Refuse to participate in clinical training programs or to be used in the gathering of data for research purposes, regardless of your payment source – government, personal or third party.
18. Know the identity of the doctor responsible for your primary care.
19. Be told of any medical procedures and tests to be performed, the reason for the procedure and tests, and the identity of those who will be performing them.
20. Expect reasonable continuity of care to assure that you are advised of your outpatient care options, requirements and of your follow-up care needs.

21. Communicate your problems or concerns with the hospital to the Executive Assistant, Telephone (270) 575-2101, or to the Kentucky Cabinet for Health Services by contacting the Office of Inspector General, Division of Licensing and Regulation, 275 E. Main Street, 4E-A, Frankfort, Kentucky 40621, (502) 564-2800, or to the Joint Commission, Oakbrook Terrance, Illinois 60181 (800) 994-6610.

Ethical Concerns

If you feel that a patient’s rights have been violated or a patient voices a concern that may be a violation of their rights, follow the process listed below.

It is the policy of Baptist Health Paducah that the hospital staff, patient, or the patient’s designated representative has the right to participate in the consideration of any ethical concern related to the care of the patient.

1. Staff member or patient/family member identifies ethical concern that should be addressed. Concern may include but is not limited to that of health care provider, activity or policy of the facility.

2. Staff member or patient/family member notifies director/supervisor and attending physician of concern or situation.

3. Director/supervisor and attending physician will attempt to resolve the situation if possible. If resolved, no further action is taken.

4. Should the director/supervisor be unable to resolve the situation or the staff member, patient/family member are not in agreement with the actions taken at this level, a request for a consult with the Ethics Committee can be made.

5. The Ethics Committee Chair or designee should be notified immediately.

6. The Ethics Committee Chair or designee will consult with all parties involved and will arrange for a meeting consisting of members of the Ethics Committee, and others as needed, who are not involved with the issue/situation. The consultation should be arranged as soon as practical. When meeting for a consultation, any available members will be utilized. Persons other than Ethics Committee members will be consulted as appropriate, (i.e. physicians, attorneys, clergy, ethicists).

7. The Ethics Committee will function only in a consultative role and will advise only on the “ethical” appropriateness of any action. All decisions related to patient care will be made between the patient and/or the patient’s surrogate and the physician.

8. The committee will complete the “Ethics Committee Consultation” form located on Optio and will document appropriately in the patient’s chart.

9. If the issue cannot be resolved, Administration and/or the patient or patient’s surrogate may seek resolution through appropriate legal channels. Seeking court action should only be a “last resort” when all other attempts to resolve an issue have failed.

10. Confidentiality will be maintained at all times.

Pain

- **All volunteers and staff have an obligation to report a patient’s complaint of pain to the nursing staff.**
- A patient’s self-report of pain can be obtained by any staff member (clinical, non-clinical, volunteer, etc.). It is the responsibility of the staff member receiving the self-report of pain from the patient to report it to the patient’s nurse.
- Baptist Health Paducah strives to provide the best possible pain management for our patients.
- Patients have the right to appropriate pain control and management of pain.
- A list of patient rights & responsibilities is posted and is provided to all inpatients and is available upon request for outpatients.
- Nurses ask patients about the presence, absence and history of pain during initial assessment.
- The patient’s report of pain is the single most reliable indicator of the existence and intensity of pain.
- Patients will be assessed for pain based on the patient’s self-report of pain and ongoing assessment findings.
- Pain management is a collaborative effort and is included in the plan of care.
- The patient’s personal, cultural, spiritual and/or ethnic beliefs will be considered during the pain assessment and development of the plan of care.
Age-Specific and Cultural Awareness

Age-specific and cultural awareness are tools for learning more about how to best meet each patient’s unique needs as they are cared for. At Baptist Health Paducah the following definitions apply:

Neonate: Birth to 1 month
Pediatric: Birth/Toddler – Birth to 4 years
  School age – 5 years to 10 years
Adolescent: 11-18 years
Adult: 18 – 64 years
Elder: Geriatric – over 65 years

There are many ways to learn about each patient’s specific needs. Depending on the patient and your job, it may be appropriate to:

- Ask the patient questions (and talk with his or her family).
- Look for clues, such as what the patient wears or keeps in his or her room, or how he or she acts around others.
- Check with a supervisor for information.

Each patient is unique. Always keep in mind that:

- Growth and development follow general patterns. Every person grows and develops in his or her own unique way.
- Not every member of a cultural group may share all of its values, beliefs or practices.
- A patient may appear similar to you, but still be different from you in certain ways.
- Avoid stereotyping a patient – consider all the factors that may affect his or her care needs
- Being open-minded and respectful toward other beliefs, values and practices are important to making others feel comfortable.
Occurrence Reporting

SAFE REPORT

**Occurrence:** An occurrence is defined as any happening not consistent with the routine operation of the institution that may have caused or may have the potential for causing injury to patients, visitors or loss/damage to property. SAFE reports can be found on BEN under Applications/Misc. tools or under the Required Links on the BEN home page.

Patient SAFE Reports:
- Patient/visitor SAFE reports must be completed and submitted electronically. Paper reporting should only be used during computer downtimes. If a paper occurrence is necessary, please place a confidential copy under the director’s door or personally hand them a copy. The original occurrence report should be sent to Risk Management.
- When filling out a SAFE report, complete all appropriate sections of the SAFE Report. Provide a narrative with a detailed description and only the facts. Please do not include opinions. Do not use email to report or discuss incidents with other students or your instructor. Do not prepare any “statements” regarding occurrences.
- All reports and related documents are confidential and considered the property of Baptist Health Paducah.
- Examples of occurrences are slips/falls, medication errors, drug reactions, refusal of treatment, burns, biomedical device failures, and lost or damaged property, etc.
- A near miss (potential for causing injury to patients) could involve patient medications, treatments, procedures or patient identification issues.
- Notify security of any visitor incident and security will complete the SAFE report.

Employee SAFE Reports
- Report all employee work-related incidents on the SAFE Report and to the immediate supervisor of the area on the same day as the incident.
- Notify the Employee Health Nurse before medical attention is sought. On nights and weekends, notify the Clinical House Supervisor before going to the Emergency Department for treatment unless it is a severe emergency.
- SAFE reports are submitted online and automatically will be sent to all pertinent people.

**Sentinel Events**

A sentinel event is an unexpected patient occurrence involving death or major permanent loss of function not related to the patient’s illness or underlying condition. Some examples of Sentinel Events include:
- Surgery on wrong patient or wrong body part
- Infant abduction or discharge to the wrong family
- Rape of a patient
- Patient suicide
- Hemolytic transfusion reaction

**What do you do when one occurs?**

Contact the unit manager or Clinical House Supervisor and they will call the Director of Risk Management.
Infection Prevention & Control

There is no quick, method of determining which patients may be carrying an infectious disease. Treat ALL patients as though they may be infected. Use Standard Precautions every time you anticipate contact with blood, non-intact skin, mucous membranes, and body fluids. Standard precautions include: washing hands, using hand gel, wearing gloves and/or gown appropriately, and covering mouth, nose, eyes with a mask or face shield when you think you may get splashed/splattered.

Remember: Standard Precautions - “Every Patient Every Time”

Personal protective equipment (PPE) includes gloves, fluid-resistant gowns, face shields and resuscitation devices. You should wear as much or as little PPE needed to keep blood or other potentially infectious materials from getting on your clothing, skin or mucous membranes. PPE are located in clean supply room on clinical units. Gloves reduce hand contamination by 70 percent to 80 percent, prevent cross-contamination and protect patients and health care personnel from infection.

In addition to standard precautions, Baptist Health Paducah uses transmission-based isolation precautions: Contact Precautions, Neutropenic Precautions, Airborne Precautions, Droplet Precautions, and Contact Spore Precautions (for C Difficile only). Isolation precaution signs will be posted on the door to the patient’s room, a small sign will be found on the front of the patient chart, and a note will be in care manager. Report of precautions occurs during change of shift report.

**Hand hygiene is the single most important work practice for preventing the spread of infection.** The sooner you wash infectious material off your hands the less likely your chance for infection. Alcohol-based hand sanitizers significantly reduce the number of microorganisms on skin, are fast acting and cause less skin irritation. Hand sanitizers should be used before and after each patient just as gloves should be changed before and after each patient. Hand sanitizers should also be used before putting on non-sterile gloves.

Please be advised that Spore Precautions require both gown and gloves be used, and soap and water for hand hygiene rather than hand gel. Alcohol based hand rubs do not kill the Clostridium Difficile (C-Diff) organism. Hands much be washed with soap and water if the potential for C-Diff is present. Look for a brown “Spore Precautions” isolation sign.

**When to practice hand hygiene:**

When health care personnel's hands are visibly dirty or contaminated with proteinaceous material, blood or other body fluids, hands should be washed with soap and water.

- **Before** having direct contact with patients
- **Before** donning gloves
- **Before** inserting indwelling urinary catheters and peripheral vascular catheters
- **After** contact with a patient’s intact skin (e.g. when taking a pulse or blood pressure, lifting a patient)
- **After** having contact with body fluids or excretions, mucous membranes, non-intact skin, and wound dressings if hands are not visibly soiled
- **When** moving from a contaminated body site to a clean body site during patient care
- **After** contact with inanimate objects (including medical equipment) in the immediate vicinity of the patient
- **Immediately after** gloves are removed and between patient contacts
- **Before** eating, drinking, smoking, applying makeup, handling contact lenses or using the restroom
- **After** you eat smoke, cough, sneeze or use the restroom
• When entering a food preparation area
• Never use hand-washing sinks for food processing.

How to wash your hands:

When decontaminating hands with an alcohol-based hand rub, apply product to palm of one hand and rub hands together, covering all surfaces of hands and fingers, until hands are dry. When washing hands with soap and water, wet hands first with water, apply soap and rub hands together vigorously for at least 15 seconds, covering all surfaces of the hands and fingers. Rinse hands with water and dry thoroughly with a disposable towel. Use towel to turn off the faucet.

In the event of a blood spill:
• Warn others in the area and isolate the contaminated area. (Prevent others from walking through or near the spill.)
• Put on personal protective equipment (PPE) appropriate for the spill size. (e.g., gloves, long-sleeved coveralls, safety goggles).
• Remove glass or sharps, if necessary, with forceps, tongs or scoop.
• For a wet spill, cover with disinfectant-soaked absorbent towels, wipe, and remove toweling. (This decreases the likelihood of causing a splash.)
• Any visible blood or body fluid must be cleaned thoroughly before proceeding to the next step.
• Apply appropriate disinfectant to the area. Allow adequate contact time. (Approximately 5 minutes to help ensure all blood borne pathogens are killed.) Pre-soaked wipes may be used for smaller spills.
• Wipe up and clean again with soap and water. Properly dispose of clean-up materials into red biohazard waste bags/containers. Also, place glass, needles, and rigid plastic or other sharps into red biohazard sharps containers. No items are allowed to stick out of any biohazard container. (e.g., mops, etc.) The containers must be kept closed.
• Remove gloves, place in waste, but put on a new pair of gloves.
• Take the biohazard waste to the closest soiled utility room.
• Wash your hands

To dispose of contaminated (dirty) sharps:
• Wear gloves
• Do NOT recap needles
• Place all sharps in needle box immediately after use

Instructors: Please make sure your students understand the importance of using standard precautions and comply with donning the appropriate attire when entering an isolation room.
STOP

DROPLET PRECAUTIONS

DOCTORS AND STAFF
- Always wear mask to enter room
- Always perform hand hygiene

VISITORS
- Always clean hands before and after visiting patient
- Always wear mask if within 3 feet of patient

BAPTIST HEALTH®
Droplet Precautions

Display sign under room number. Environmental Services will remove sign after room is cleaned.

May apply to these common conditions:

- Meningitis
- Pertussis
- Mycoplasma pneumonia
- Seasonal Influenza (Flu)
- Mumps
- Rhinovirus
- Respiratory MRSA or other respiratory MDRO (in addition to Contact Precautions)

Personal Protective Equipment:

Put **ON** in this order: Take **OFF** & dispose in this order:
1. Wash or sanitize hands
2. Gown (if needed)
3. Mask
4. Eye Cover (if needed)
5. Gloves

Equipment/Supplies:

- Use patient dedicated equipment, **disposable if available** (i.e. BP cuff, thermometer and stethoscope).
- Only essential supplies to be stored in room
- Reusable equipment MUST be disinfected when removed from room prior to use on another patient

Room Cleaning:

- Routine cleaning. Environmental Services will change cubicle curtain at the time of discharge/transfer.

Transport:

- Essential transport only
- Place surgical mask on patient prior to transporting patient out of room
- Alert receiving department regarding patient’s isolation Precautions status
- Clean/disinfect transport vehicle after delivery of patient

12/2014 BHSIC
Droplet Precautions Information
Patient, Family, and Visitors

You or your loved one is in Droplet Precautions. These precautions prevent spread of infection between patients in hospitals. This type of infection is spread by droplets in the air.

A pink sign saying “Droplet Precautions” is outside the room letting staff, families, and visitors know what they can do to help keep patients safe.

As patient, family, or visitor, you can help by:
- Checking with the nurse before entering the room for the first time.
- Cleaning hands when you enter and leave the room.
- Wearing mask if you are in the room.
- Asking doctors and staff to wash or sanitize their hands as they enter and leave the room even if they are using gloves.
- Please do not visit if you have cold symptoms.

You will see physicians and staff doing the following:
- Hand Hygiene
  - Cleaning hands before and after caring for the patient.
- Gloves, Gowns, Masks, Goggles
  - They must wear masks when entering the room.
  - Might wear gloves, gowns, and goggles while in the room and remove them on leaving.
- Transportation
  - If the patient needs to go out of the room for a test, staff will help the patient put on a mask.
  - Staff will clean their hands.

If you have additional questions about Droplet Precautions, ask your nurse.
STOP

CONTACT PRECAUTIONS

DOCTORS AND STAFF

- Always wear gown and gloves to enter patient room
- Always perform hand hygiene

VISITORS

- Always clean hands before and after visiting patient
- Wear gown and gloves for contact with patient

BAPTIST HEALTH®
Contact Precautions

Display sign at room entrance. Environmental Services will remove sign after room is cleaned.

May apply to these conditions:

- MRSA*
- VRE*
- CRE (Carbapenem-resistant Enterobacteriaceae)*
- Bed Bugs
- Scabies
- Rotavirus
- Disseminated herpes zoster (shingles) and chickenpox, *(in addition, requires Airborne Precautions)*
- Lice
- MDR Acinetobacter*
- Other MDRO*
- RSV
- Norovirus

*If organism in the respiratory tract Droplet Precautions also required

Personal Protective Equipment

Put **ON** in this order:
1. Wash or sanitize hands
2. Gown
3. Mask (if needed)
4. Eye Cover (if needed)
5. Gloves

Take **OFF & dispose in this order:**
1. Gloves
2. Eye Cover (if used)
3. Gown
4. Mask (if used)
5. Wash or sanitize hands

Equipment/Supplies:
- Use patient dedicated equipment, **disposable if available** (i.e. BP cuff, thermometer and stethoscope).
- Only essential supplies to be stored in room
- Reusable equipment MUST be disinfected when removed from room prior to use on another patient

Room Cleaning:
- Routine cleaning. Environmental Services will change cubicle curtain at the time of discharge/transfer.

Transport:
- Essential transport only
- Alert receiving department regarding patient’s isolation precautions status
- Clean/disinfect transport vehicle after delivery of patient

12/2014 BHS IC
Contact Precautions
Patient, Family, and Visitors

You or your loved one is in Contact Precautions. These precautions prevent spread of infection between patients in hospitals. This type of infection is spread by directly touching the patient or something they have touched.

A green sign saying “Contact Precautions” is outside the room letting staff, families, and visitors know what they can do to help keep patients safe.

As a patient, family, or visitor, we ask you to help by:

- Cleaning hands when you enter and leave the room.
- Limiting where you go outside the room unless given permission by the nurse so that germs are not spread to other patients, visitors, and staff.
- Asking physicians and staff to wash or sanitize their hands as they enter and leave the room even if they are using gloves.
- Limiting visitors to close contacts only.

You will see doctors and staff doing the following:

- Hand Hygiene
  - Cleaning hands before and after caring for the patient.
- Gloves, Gowns, Masks, Goggles
  - They must wear gloves. A gown should be worn if contact with the patient or a contaminated article (e.g. bedrails) is likely. These items should be removed before leaving the room.
  - They might also wear mask and goggles.
- Transportation
  - If the patient needs to go out of the room for a test, staff will help the patient put on a clean gown to wear.
  - Staff will clean their hands.

If you have additional questions about Contact Precautions, ask your nurse.
CONTACT SPORE PRECAUTIONS

DOCTORS AND STAFF

- Always wear **gown** and **gloves** to enter patient room
- Wash hands with **SOAP AND WATER** after patient contact

VISITORS

- Always clean hands before visiting patient
- Always clean hands with **SOAP AND WATER** after visiting patient
- Wear gown and gloves for contact with patient
Contact Spore Precautions

Display sign under room number. Environmental Services will remove sign **after** room is cleaned.

**May apply to these common conditions:**
- Clostridium difficile

**Personal Protective Equipment:**

<table>
<thead>
<tr>
<th>Put <strong>ON</strong> in this order:</th>
<th>Take <strong>OFF</strong> &amp; dispose in this order:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Wash or sanitize hands</td>
<td>1. Gloves</td>
</tr>
<tr>
<td>2. Gown</td>
<td>2. Eye Cover (if used)</td>
</tr>
<tr>
<td>3. Mask (if needed)</td>
<td>3. Gown</td>
</tr>
<tr>
<td>4. Eye Cover (if needed)</td>
<td>4. Mask (if used)</td>
</tr>
<tr>
<td>5. Gloves</td>
<td>5. <strong>Wash hands with soap and water</strong></td>
</tr>
</tbody>
</table>

**Equipment/Supplies:**
- Use patient dedicated equipment, **disposable if available** (i.e. BP cuff, thermometer and stethoscope).
- Only essential supplies to be stored in room
- Reusable equipment MUST be disinfected when removed from room prior to use on another patient

**Room Cleaning:**
- Use **approved sporidical product for discharge cleaning**. Environmental Services will change cubicle curtain at the time of discharge/transfer.

**Transport:**
- Essential transport only
- Alert receiving department regarding patient’s Isolation Precautions status
- Clean/disinfect transport vehicle after delivery of patient

12/2014 BHS IC

BAPTIST HEALTH®
Contact/Spore Precautions

Patients, Family, and Visitors

You or your loved one is in Contact/Spore Precautions. These precautions prevent spread of the infection between patients in hospitals. This type of infection is spread by directly touching the patient or something they have touched.

A brown sign saying “Contact/Spore Precautions” is outside the room letting staff, families, and visitors know what they can do to help keep patients safe.

As patient, family, or visitor, you can help by:

- Cleaning hands with soap and water when you enter and leave the room.
- Family and visitors should not eat in room.
- Limiting where you go outside the room unless given permission by the nurse so that germs are not spread to other patients, visitors, and staff.
- Asking doctors and staff to wash their hands as they enter and leave the room even if they are using gloves.
- Limiting visitors to close contacts only.
- Upon discharge home, surfaces should be cleaned with a bleach product to kill C-diff spores.

You will see doctors and staff doing the following:

- Hand Hygiene
  - Cleaning hands before and after caring for the patient.
- Gloves, Gowns, Masks, Goggles
  - They must wear gloves and gown while in the room caring for the patient and remove them before leaving.
  - They might also wear mask and goggles.
- Transportation
  - If the patient needs to go out of the room for a test, staff will help the patient put on a clean gown.
  - Staff will clean their hands.

If you have additional questions about Contact/Spore Precautions, ask your nurse.
AIRBORNE PRECAUTIONS

DOCTORS AND STAFF

- Particulate respirator (N95) or PAPR **required** to enter room
- Current fit test required for N95 mask use
- **Always** perform hand hygiene
- Keep doors closed

VISITORS

- Always clean hands before and after visiting patient
- See staff at nurses’ station before entering room
Airborne Precautions

Display sign at room entrance. Environmental Services will remove sign after room is cleaned.

May apply to these common conditions:

- Tuberculosis
- Measles (Rubeola)
- Chickenpox (in addition, requires Contact Precautions)
- Disseminated herpes zoster (Shingles) (in addition, requires Contact Precautions)

Airborne Infection Isolation Room:
- Notify Infection Control/House Manager of patient placement
- Door(s) must remain closed

Personal Protective Equipment:

Put ON in this order: Take OFF & dispose outside room, in this order:

1. Fitted N-95 mask
2. Wash or sanitize hands

Equipment/Supplies:

- Use patient dedicated equipment, disposable if available (i.e. BP cuff, thermometer and stethoscope).

Room Cleaning:

- For patients with confirmed diagnosis, keep door(s) closed for one hour after patient discharged/ transferred to allow complete room air exchange. Environmental Services will change cubicle curtain if visibly soiled.

Transport:

- Essential transport only
- Place surgical mask on patient prior to transporting patient out of room
- Alert receiving department regarding patient’s isolation precautions status
- Clean/disinfect transport vehicle after delivery of patient
Airborne Precautions  
Patient, Family, and Visitors

You or your loved one is in Airborne Precautions. These precautions prevent spread of infection between patients in hospitals. This type of infection is spread by breathing tiny droplets in the air that carry germs.

A blue sign saying “Airborne Precautions” is outside the room letting staff, family, and visitors know what they can do to help keep patients safe.

As patient, family, or visitor, you can help by:

- Checking with the nurse before entering the room for the first time.
- Keeping the door to the room closed.
- Cleaning hands when you enter and leave the room.
- Wearing a mask unless otherwise instructed by hospital staff.
- Asking doctors and staff to wash or sanitize their hands as they enter and leave the room even if they are using gloves.
- Limiting visitors to close contacts only.

You will see doctors and staff doing the following:

- **Hand Hygiene**
  - Cleaning hands before and after caring for the patient.
- **Gloves, Gowns, Masks, Goggles**
  - They must wear a special mask when entering the room.
  - Might wear gloves, gown, and goggles while in the room and will remove them on leaving.

- **Transportation**
  - If the patient needs to go out of the room for a test, staff will clean their hands and help the patient put on a mask.

If you have additional questions about Airborne Precautions, ask your nurse.
NEUTROPENIC PRECAUTIONS

• Please see nurse prior to entry if visitors are 13 years of age or younger.
• Persons with signs and symptoms of infection (i.e. sore throat, fever, cough) are not to enter.
• Always clean hands before and after visiting patient.
• No live plants or flowers.
• Please come to nurse’s station if you have questions regarding these precautions.
Neutropenic Precautions

Neutropenic Precautions are to be used ONLY if ordered by a physician or if granulocyte count is < 1,000.

If appropriate initiate precautions and place sign at room entrance making sure visible to visitors.

Please screen all visitors age 13 or younger for signs and symptoms of infection prior to allowing entry.

Encourage all visitors to use hand sanitizer prior to entry. If you are feeling ill or are becoming ill (i.e. sore throat, cough, fever, or respiratory infection) please have patient assigned to another staff member. Patient care givers should not work when ill.

Display sign at room entrance. Environmental Services will remove sign after room is cleaned.

Personal Protective Equipment:

Put ON in this order:
1. Wash or sanitize hands
2. Gown
3. Mask (if needed)
4. Eye Cover (if needed)
5. Gloves

Take OFF & dispose in this order:
1. Gloves
2. Eye Cover (if used)
3. Gown
4. Mask (if used)
5. Wash hands with soap and water

Equipment/Supplies:
- Use patient dedicated equipment, disposable if available, i.e. BP cuff, thermometer and stethoscope.

Always contact Infection Control Nurse before discontinuing transmission/isolation precautions

3/2014

Provide a Private Room—keep door closed.
1. Effective handwashing technique must be used when entering the room.
2. Masks must be worn by anyone with cold symptoms entering the room.
3. Notify dietary—no raw fruits or vegetables.
4. No live plants or flowers should be allowed in the room.
5. Slippers or shoes must be worn when ambulating.
6. Patient must wear a mask when outside the room.
7. Healthcare professionals or visitors who have contagious diseases such as colds, flu, fever blisters, etc. should not enter the room.
8. Assess the patient for signs and symptoms infection and document findings of the assessment at least once every shift:
   a. Redness, swelling or drainage at IV sites, wounds, or mucosa.
      - Change peripheral IV sites every 48-72 hours or sooner if any evidence of infection appears.
      - Change IV site dressing every 24 hours.
      - Change all dressings as indicated.
   b. Cough, nasal congestion, rales or chills.
   c. Tachycardia, hyperventilation, hypotension, or change in mental status.
   d. Burning or pain with urination or frequent urination.
Patient Safety

Patient Safety is a priority for Baptist Health Paducah. It is the responsibility of every Baptist Health Paducah employee and all students to ensure that patients remain safe during their hospital stay. The organization commits to undertaking a proactive approach to the identification, handling and prevention of medical errors to foster a safe environment for patients. Baptist Health Paducah also recognizes that the patient is a very important part of the healthcare team. Therefore, patients will be educated about their role and responsibility in preventing medical errors upon admission whenever possible.

Baptist Health Paducah supports an environment that encourages error identification through the minimization of blame or retribution for those involved in an error or in reporting an error.

There are several ways to report errors:

1. SAFE report
2. Medication Event Report – Also under SAFE reports
3. Patient Safety Hotline Ext. 3777
4. Patient Safety Officer- (270) 575-2980
5. Adverse Drug Reaction Hotline Ext. 2909

National Patient Safety Goals

The purpose of Joint Commission’s National Patient Safety Goals is to promote specific improvements in patient safety. Hospitals must implement system wide solutions to meet these goals and are evaluated for continuous compliance during the Joint Commission survey. The goals are listed below along with implementation expectations. All patient care providers need to be aware of the patient safety goals and what Baptist Health Paducah is doing to meet these goals.

Additional information regarding the National Patient Safety Goals for critical access hospitals can be found on The Joint Commission web site at http://www.jointcommission.org/hap_2016_npsgs/
2016 National Patient Safety Goals!

Identify Patients Correctly: Use two patient identifiers NAME and DOB

Eliminate Blood Transfusion Errors

Report Critical Test Results Timely to the Physician

Safe Medication Use:
- Label medicines, syringes, cups, basins
- Take extra care with patients who are on anticoagulants
- Correct medication reconciliation

Use Alarms Safely: Ensure alarms are audible and respond timely

Prevent Infections:  □ Improve hand hygiene
□ Reduce occurrences of CAUTI, CLABSI, SSI

Identify patients at risk to commit suicide

Prevent Mistakes In Surgery:
- Verify correct patient, correct procedure, correct place
- Correct site marking prior to surgery
- Prior to procedure all staff participate in the Time Out process
Restraints

Please review the Restraint Guideline policy. Restraints will be used in limited circumstances with appropriate clinical justification based upon the assessed needs and behaviors of individual patient. Restraints should be used only with a physician order when necessary to improve the patient’s wellbeing or to ensure the safety of the patient or others. Restraints should be used in the least restrictive manner possible and only when less restrictive interventions have been determined to be ineffective. The hospital staff shall strive to respect, protect, and preserve the patient’s rights, dignity and well-being while implementing this policy.

There are two classifications of restraint recognized at Baptist Health Paducah: Non-violent, non-self-destructive restraints and violent, self-destructive behavior management restraints.

- Non-violent, non self-destructive restraint - used to limit mobility or temporarily immobilize in relation to acute medical-surgical care and/or post-surgical procedure. The primary reasons for use directly support the medical healing of the patient and prevention of patient injury (ex. pulling tubes, pulling IV lines etc.)
- Violent, self-destructive behavior management restraint – an emergency or crisis situation in which a patient’s behavior becomes aggressive or violent or self-destructive; the behavior presents an immediate, serious danger to the safety of the patient, other patients, staff or others.

Non-physical techniques are preferred when intervening to manage a patient’s behavior. Alternative interventions should always be considered prior to restraint use. Nursing evaluation and documentation for non-violent, non self-destructive restraint will occur at a minimum of every 2 hours. For violent, self-destructive behavior management restraint, evaluation and documentation will occur at a minimum of every 15 minutes. If a patient one of your students is caring for is in restraints, please go to the restraint policy by accessing BEN on Baptist Health Paducah’s intranet web page.

No Pass Zone

The no pass zone emphasizes that patients and visitors are not an interruption to our work. They are our reason for being here.

When you see a call light:

- **N** – Never pass them by
- **O** – Observe patient privacy
- **P** – Provide what they are asking for, OR
- **A** – Access or find someone who can
- **S** – Safety First, never put patients at risk
- **S** – Smile & introduce yourself

WHAT EVERYONE CAN DO:

- When you see a call light on, you CAN do the following for a patient:
- Reposition personal items such as call light, telephone, bedside table, chairs, trash can, tissues and etc.
- Assist with phone calls or answering the telephone.
- Help with TV
- Turn lights on or off.
- Hand personal items to patient such as blanket, pillow, towel, washcloth, slippers, and toiletries.
- Get items such as pens, pencils, books, magazines, etc.
- Open/close doors or privacy curtains.
- Reduce clutter

**WHAT YOU CANNOT DO:**

- For our patient’s safety, you cannot do anything that you are not trained and competent to do.
- In a case where a patient asks you for something outside your training; find the right staff member to fulfill the request. Remember to close the loop by letting the patient know when to expect the staff in to help them.

**KEY TAKEAWAYS:**

- Everyone is responsible to stop.
- Be attentive. Make eye contact. Watch your body language.
- Make certain you introduce yourself: Hello, my name is (name), from VOLUNTEER SERVICES. I noticed that your call light is on. Is there something that I can help you with?
  - If you can: Yes, I can help you with that.
  - If you cannot: Let me find the right person to help you. I will let you know how long it will take. Follow through with the request.
- Remember to ask before leaving: Is there anything else I can do for you? I have the time.

**Fall Prevention**

Patients should be assessed for potential risk to fall at point of entry and general safety measures may be considered for implementation, when appropriate. When a patient has been identified to be at increased risk for falls based upon nursing assessment, physician’s evaluation or other supporting clinical documentation, High Risk Fall Precaution strategies are considered. Strategies and interventions are to be documented in the patient's medical record, including an individualized plan of care. The patient’s falls risk potential should be communicated during the “hand off” process (SBAR) to the next provider of care.

**DEFINITIONS:**

- A fall is defined as a sudden, uncontrolled, unintentional, downward displacement of the body to the ground or other object, excluding falls resulting from violent blows or other purposeful actions.
- A near fall is a sudden loss of balance that does not result in a fall or other injury. This can include a person who slips, stumbles or trips, and is eased to the floor, bed, chair, etc. by staff or family members.
- An unobserved fall occurs when a patient is found on the floor and hospital or medical staff does not witness the event or when the patient reports a fall not observed by anyone.
- An assisted fall is when an employee was with the patient and attempted to minimize the impact of the fall by slowing the patient’s descent and lowering to the floor.
PROCEDURE:
All patient care areas including but not limited to out-patient treatment and procedure areas (excluding diagnostic testing) and the Emergency Department will be assessed for fall potential. Appropriate interventions are implemented during the patient encounter. Patients discharged from these areas receive fall prevention education as appropriate to their condition.

UNIVERSAL FALL PRECAUTIONS:
The following Universal Fall Precautions will be observed for ALL patients:

1. Ensure patient needs can be communicated (i.e., HOH, speech deficiencies, etc.) and provide alternatives whenever possible.
2. Orientation to room and call light use
3. Bed in low position, wheels locked
4. Room free of clutter and spills
5. Personal items within reasonable reach (telephone, call light, bedside table, water, eyeglasses, urinal)
6. Adequate lighting
7. Encourage patient and patient representative to call for assistance when help is needed
8. Patient/patient representative education on falls precautions
9. Document general safety measures such as: teaching/education
10. Nursing staff screens patients for Fall Risk potential utilizing one of the Falls Risk Assessment Tools on admission and at the beginning of each shift.
   - Falls Risk Assessment should be used on pediatric patients
   - Baptist Health High Risk Falls Assessment ICU should be used in all critical care areas
   - Baptist Health High Risk Falls Assessment- Non- ICU should be used on all adult patients not in critical care units

HIGH RISK TO FALLS
Once a patient is identified as High Risk to Fall, interventions should include an updated Plan of Care under the Activity/Safety Problem and a designated fall risk wristband.

Other interventions that may be considered:

- Need for a staff to remain with the patient when toileting.
- Upon hourly rounding, inquire and prompted for toileting needs.
- Staff to visualize the patient frequently
- Use of bed/chair alarms
- Room placement close to the nurses station
- Use of appropriate footwear
- Use of assistive devices, including but not limited to gait belts
- Physical, Occupational Therapy evaluation
- Family encourage to provide sitter

CRITICAL CARE AREAS:
A Confusion Assessment Method (CAM) score is obtained on all critical care patients to identify delirium. Patients in the critical care areas are considered High Risk to Fall and should be identified with a designated wrist band.
POST FALL MANAGEMENT:

1. Assess patient and document necessary components including but not limited to updating the plan of care and fall risk assessment.
2. The patient’s physician is to be notified after a fall and patient care will be rendered as appropriate.
3. Falls are communicated to the House Supervisor or Unit Director, and family/patient representative when authorized by the patient.
4. A post-fall huddle should be conducted after each event and any causative factors identified corrected. (Post Fall Huddle Form with a Post Fall Huddle SBAR should be utilized)
5. A SAFE (incident) report must be completed before end of shift.

Medication Administration

Students may administer medications under the direct supervision of licensed personnel (ex. Nursing students under the supervision of a nurse, respiratory therapy students under the supervision of a respiratory therapist).

Student Practice Guidelines - students may perform patient care skills at Baptist Health Paducah under supervision after they have learned and successfully mastered the skill according to your schools criteria. There are just a few things Baptist Health Paducah restricts students from performing.

1. Students may not administer any type of blood product.
2. Students may not accept verbal orders from physicians nor critical test results.
3. Students may not push IV medications in an emergency situation.
4. Students may not administer IV chemotherapy.

Hospital Safety - Environment of Care

Safety is everybody’s business.
The Environment of Care (EOC) is critical to patient care in hospitals and home care organizations. All hospital personnel play a critical role in protecting the patient and breakdowns in the EOC can put patients at risk. The Safety Officer coordinates Baptist Health Paducah’s safety plan and can be reached at 270.575.2556

Security Management

Security management - Security officers are available 24 hours per day through their radio at 2644

- Security should be called in the event of an emergency situation, unauthorized injury to visitors, bomb threats, hostage situations, weapons, locking patient valuables, lost and found items, missing patient, escorting employees and visitors to their car, jumpstarting cars, parking issues and workplace violence.
- Weapons are not allowed in Baptist Health Paducah.
- All outside doors will be locked at 9PM and unlocked at 5 AM except the emergency department triage entrance which will remain open.
Hazardous Materials and Waste Management (HAZMAT)

You have a right to know of the chemical hazards that may exist in your work place. Baptist Health Paducah identifies these items for your safety.

**Safety Data Sheets (SDS)**
- Located on Intranet in BEN under required links and under Applications / Misc. Apps / Tools
- Contains product information, first aid procedures, and emergency phone numbers
- Every chemical product used in the hospital has a SDS

**Hazardous Chemicals found in the Hospital**
- Formalin & Xylene are found mostly in the Laboratory
- Check Environment of Care Manual for spill cleanup procedures.

**Personal Protective Equipment (PPE)**
- Personal protective equipment (PPE) includes gloves, fluid-resistant gowns, face shields, and resuscitation devices. You should wear as much or as little PPE needed to keep blood or other potentially infectious materials from getting on your clothing, skin or mucous membranes. PPE are located in clean supply room on clinical units. Baptist Health Paducah provides all necessary PPE.
- At Baptist Health Paducah we practice standard precautions. Standard precautions include: washing hands, using hand gel, wearing gloves appropriately, covering mouth, nose, eyes then you think you may get splashed/splattered by using goggles or mask with face shield.

**Radiation Safety**

This symbol is for everything radioactive, both radioactive materials and radiation. Rooms posted with the radioactive symbol require caution.

None of the rooms posted with the radioactive symbol are to be entered when the red light over the door is lit. Students and volunteers may only enter those radiation areas when the red light over the door is NOT lit. Radioactive areas such as Radiation and Radioactive Material Areas may only be entered under the direction of authorized employees, such as nuclear medicine technologists and radiologic technologists. A device to monitor radiation exposure is required. The device is called a dosimeter.

If a student or volunteer does not have a dosimeter, observations of procedures may only be observed from the technologist office, a control room or some other area not included in the radioactive area.

There is a Radiation Safety Office and a Radiation Safety Officer located in the hospital to assist with any needs or questions pertaining to radioactive areas at Baptist Health Paducah. You may contact the Radiation Safety Officer, Robert Gandy, at 270-575-2780 or call the Radiation Safety Office at 270-415-7132 located in Radiology.

**Regulated Medical Waste (RMW)**
- Biohazard Waste, Red Bag Waste
- Chemotherapy Waste
- Pathological Waste
- Pharmaceutical Waste
This type of waste needs to be treated separately from the regular waste stream. Regulated Medical Waste is known throughout the hospital as **Red Bag Waste, Biohazardous Waste, and Bio Trash**. It is very important to know the difference between Regulated Medical Waste (RMW) and Regular Trash. The following RMW lists will help you to decide what is and what RMW isn’t.

### Regulated Medical Waste should be placed in RED waste containers only

- Saturated or grossly contaminated disposables
- Microbiology Waste/Pathology Waste
- Liquid blood/blood products/body fluids not otherwise discarded or flushed
- Personal Protective Equipment (worn and soiled with blood and/or body fluids)
- Dialyzers
- Wound Drains/Tubes

### Sharps are placed in needle boxes

- Disposable Needles
- Syringes
- Scalpels/Blades
- Pipettes/Lancets/Slides or Glass Tubes
- Staples
- Wires
- Broken Glass (i.e. Glassware containing blood and/or body fluids)
- Disposable Surgical Instruments and Electrosurgical Tips

### Regular Waste

- Wrappers, packaging, boxes, paper, office waste
- Unused medical products and supplies
- Personal Protective Equipment (worn but not soiled with blood and/or body fluids)
- Food products and waste
- IV Bags and Tubing without Needles
- Empty bottles and bags
- Sanitary napkins/tampons
- Disposable Drapes, Lab Coats, Paper Towels, Band-Aids
- Disposable Basins, Bedpans
- Aerosol Pressure Cans
- Suction canisters that have been emptied and rinsed

### Pharmaceutical Waste

Appropriate pharmaceutical waste management is critical for both patient and employee safety. Baptist Health Paducah has implemented a pharmaceutical waste program to conform to the Environmental Protection Agency mandate that all hazardous materials (including certain medications) be disposed of in a way that does not harm the environment. Compliance is essential! Waste will need to be disposed of in designated containers based on the category of waste. Medication waste will be disposed of in color coded bins according to a three digit code found on the medication packet and in the description of the drug name in the computer system. The three digit code identifies the appropriate waste container. Charts located on each unit will give additional information regarding which containers the waste should be placed in.

- Blue: Non-hazardous such as ointments, capsules, creams. If no code, the item defaults to the blue container. Purple: refers to dual waste, contaminated sharps plus live vaccine. Waste Code DW
- Black: Hazardous waste
- Yellow: Trace Chemotherapy (empty syringes, vials, IV bags PPE etc.)
Red: Non chemotherapy medication vials – empty and empty non chemotherapy medication syringes

For these and other policies:
- Go to BEN
- Click Quick Links drop-down menu in upper right-hand corner
- Click Policies and Procedures tab
- Type title of policy/procedure in Search box

Fire Prevention Management

If you detect a fire in the hospital, the proper procedure is as follows;

RACE
- Rescue persons in immediate danger and transport to a safe area
- Activate the nearest fire alarm and call CODE RED (2111) to report the location of the fire. (Offices outside the hospital will call 911.)
- Contain the fire by closing all doors and windows
- Extinguish the fire with the nearest appropriate portable fire extinguisher

To extinguish a fire, the proper procedure is as follows:

PASS
- Pull the safety pin
- Aim the nozzle at the base of the fire
- Squeeze the handles together
- Sweep the nozzle from side-to-side

Only use an extinguisher if you feel it is safe to do so! While using an extinguisher is encouraged, no employee is required to do so.

Who do you call if there’s a fire in the hospital? # 2111 (CODE) Who do you
call if there’s a fire outside the hospital? # 911

When you get to your unit/department, do the following:
1. Locate Fire extinguishers
2. Locate Fire Alarm Pulls
3. Locate exit route signs
4. Locate the smoke barriers
5. Ask about areas of refuge for your unit in the event of evacuation
Emergency Preparedness – Incident Command System (Code Yellow)
The hospital maintains a comprehensive program to respond to a variety of emergencies, which could occur in the hospital, or in the local community. When the Incident Command System has been activated, refrain from making outside calls.

Disaster Situations and the Student Role
A disaster can be announced at Baptist Health Paducah for a variety of internal (i.e. bomb threats, utilities failure, fire) and external reasons (tornados, severe weather, ice storms). The operator will announce, “The Incident Command Plan is now in effect.” Please refrain from making outside calls. In conjunction with the instructor or preceptor, a student must decide if it will be safer to stay at Baptist Health Paducah (tornado), or safer to leave Baptist Health Paducah. If your preceptor or instructor leaves, then students should also.
Inform the charge nurse/supervisor of the department or unit of your decision. Inform your school. Remember: No matter what the nature of the disaster, a student cannot perform any duties beyond the scope of practice as a student. Tasks that you do perform must continue to be performed under supervision.

Important Codes - Dial 2111
## Safety Procedures

**Emergency Phone Number: 2111**

**Security Phone Number: 2644**

---

### Summary of Emergency Codes – can be found on the Multi-colored Safety Kardex located on bulletin boards in areas.

<table>
<thead>
<tr>
<th>Emergency Code</th>
<th>Emergency Situation</th>
<th>Employee Response</th>
</tr>
</thead>
</table>
| **Code Blue**  | Cardiac and Pulmonary Arrest | ✓ Call 2111 if you find someone not breathing. State “Code Blue and location”  
✓ Initiate CPR  
See policy: D14.4-WBH: Allow Natural Death (AND/DNR) |
| Call 2111 when you are the first to recognize pulmonary or cardiac arrest | Code team consists of:  
1. Physician  
2. RNs from CCU, ICU and Telemetry units.  
3. Respiratory Therapists to intubate the patient as needed. |  |
| **RRT (Rapid Response team)** | Medical Emergency Response | ✓ Report findings to staff - IMMEDIATELY  
✓ Staff will call RRT  
See policy: M5.1-WBH: Medical Emergency Team (MET) |
| Notify staff when you recognize a significant change in the patient | Patient condition changes and immediate assistance is needed. The patient is still breathing and has a pulse. |  |
| **Code STROKE** | Stroke | ✓ Report findings to staff - IMMEDIATELY  
✓ Staff will call Code Stroke  
See Policy: C15.3-WBH: Code Stroke Team |
| Notify staff when you recognize the signs and symptoms of stroke | F=Face – Facial droop? Uneven smile?  
A=Arms – arm numbness? Arm weakness?  
S=Speech – Slurred speech? Difficulty speaking or understanding?  
T=Time – Report findings to staff immediately |  |
| **Cardiac Alert** | Patient reports chest pain | ✓ Report findings to staff - IMMEDIATELY  
✓ Staff will call Cardiac Alert  
See Policy: C1.7-WBH: Cardiac Alert Team |
| Notify staff if patient tells you they have chest pain | Patient's condition warrants expert assessment on acute cardiac syndrome (ACS) |  |
| **Code Red** | Fire or Explosion | ✓ Do not use elevators.  
✓ Know location of alarm pulls and extinguishers – alarm pulls by exits  
✓ Know fire zone(s) for your department  
✓ Close all doors in area  
✓ Touch a closed door before opening - if warm or hot to touch – DO NOT open |
| Call 2111 and pull fire alarm when smoke or fire is present | In a Fire you need to - R.A.C.E.  
(Remove, Alarm, Contain, Extinguish)  
To use an Extinguisher – P.A.S.S.  
(Pull pin, Aim, Squeeze, Sweep) |  |
| The first three minutes of a fire are more important than the next three hours | Classes of Fire Extinguishers  
Class A = ordinary combustibles, paper, cloth or trash  
Class B = flammable liquids such as gas, oil and solvents  
Class C = Electrical source |  |
<p>| <strong>Code Yellow External Alert</strong> | External Disaster | ✓ The charge nurse or department supervisor will give you instructions if any action is needed. |
| Overhead page | Casualties expected to arrive at the hospital. |  |</p>
<table>
<thead>
<tr>
<th>Code Yellow</th>
<th>External Disaster</th>
<th>The charge nurse or department supervisor will give you instructions if any action is needed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Code Yellow Internal</td>
<td>Internal Emergency</td>
<td>The charge nurse or department supervisor will give you instructions if any action is needed.</td>
</tr>
<tr>
<td>Code Amber</td>
<td>Baby or Child Abduction</td>
<td>All departments observe exits and stairwells in their area when code is paged</td>
</tr>
<tr>
<td>Code Black (combative person)</td>
<td>Bomb Threat</td>
<td>Keep caller on phone and get details.</td>
</tr>
<tr>
<td>Code Silver (Weapon/workplace violence)</td>
<td>Security Assistance</td>
<td>Call 2111, State “Code Grey and location for combative person, patient or visitor</td>
</tr>
<tr>
<td>Code Grey (combative person)</td>
<td>Evacuation</td>
<td>The charge nurse or department supervisor will give you instructions if any action is needed.</td>
</tr>
<tr>
<td>System Failure</td>
<td>Electricity, computers, dictation system, water, phones go out</td>
<td>Inform charge nurse or department supervisor of any problems with systems</td>
</tr>
</tbody>
</table>
Other Baptist Health Paducah EMERGENCY Codes:

**Code STEMI - ST Segment elevated MI Response** – Provides rapid response to decrease “door to balloon” time when patient is diagnosed with an Acute Myocardial Infarction. Includes notifying Cath lab staff, on call cardiologist, Clinical House Supervisors, and Rapid Response Team if needed.

**Code H (help) Patient/Family Response Request** – Patient/family activated system that may be used to respond and manage any change in patient condition. Clinical House Nursing Supervisor, ICU nurse, Respiratory Therapist, Chaplin, and Patient Relations respond.

### Important Telephone Numbers

Safety Officer – 270-575-2556

Administration – 270-575-2101

Pharmacy – 270-575-2105

Security – 270-575-2644

Compliance HIPAA Hotline 1 (800) 783-2318

Patient Safety/ Risk management – 270-575-2980

Compliance/HIPAA Officer – 270-415-7105

Emergency Department – 270-575-2180
Confidentiality Overview

During your clinical rotation, you may have access to confidential and proprietary information including, but not limited to, financial information about Baptist Health, patient information protected by HIPAA and other privacy laws, and proprietary Policies & Procedures related to patient care. Should you have access to such information, you are required to keep the information confidential. You are not to copy, disclose or otherwise share any such information with any person unless specifically authorized to do so. Breaching confidentiality is a serious offense that could result in termination of the student/facility relationship and/or legal action by aggrieved parties.

The patient privacy rule is to assure that individuals’ health information is properly protected while allowing the flow of health information needed to provide and promote high quality health care. BAPTIST HEALTH PADUCAH is committed to protecting the security and confidentiality of our patients’ information. Our patients must be able to communicate in confidence with caregivers.

Protected Health Information (PHI) is defined as: “individually identifiable health information” it includes demographic data that relates to:

- the individual’s past, present or future physical or mental health or condition,
- the provision of health care to the individual, or
- the past, present, or future payment for the provision of health care to the individual,

Examples of individually identifiable health information includes many common identifiers such as, but not limited to name, address, birth date, Social Security Number and diagnosis/medical condition.

......A few key takeaways

It is against the policy of BAPTIST HEALTH PADUCAH to use or disclose confidential medical information outside the scope of your clinical duties.

♦ You may use protected health information to care for your patients.
♦ You may share protected health information with other health care providers for treatment purposes.
♦ Do NOT photocopy patient information.
♦ No photography or videography in patient care areas.
♦ Access the minimum amount of information necessary to care for your patient or carry out an assignment.
♦ Do not record patient names, dates of birth, address, phone number, social security number, etc., on the assignments.
♦ You may only access the confidential information of patients for whom you are caring.
♦ Be aware of your surroundings when discussing confidential information. It is inappropriate to discuss patients in elevators, cafeteria, etc.
♦ If you have questions about the use or disclosure of confidential health information, contact your instructor or the student coordinator.
If you are in a setting where others are inappropriately discussing confidential information, it is your responsibility to protect a patient’s right to privacy by reminding others to be alert.

If a non-family member or non-medical staff ask question about a patient, the best source of information about the patient’s condition should be referred to the patients or direct family member.

Do not post any information about the patient or patient experience on social media.

Student/ Instructor Orientation

JCAHO and OSHA require that all students and clinical instructors participating in clinical activities at Baptist Health Paducah or on the hospital campus complete student/instructor orientation.

To fulfill this requirement please take time to:

- Read the enclosed information
- Ask your instructor or contact Andrea Williams, Baptist Health Paducah student coordinator, to explain any information that you do not understand
- Complete and return the first four pages to your instructor or Andrea Williams:
  1. Validation of Completion
  2. Confidentiality Statement
  3. Statement of Understanding
  4. Clinical Informatics Statement of Understanding — only for those students using clinical information systems for documentation or medication administration.
  5. Evaluation Comments

All Students and Instructors will receive a Baptist Health Paducah badge. Students with instructors in the building will receive their badge from their instructor. All other students must come to the Education Department to receive a badge. **Students and Instructors must wear the badge at all times.**

For questions, please contact:

Andrea Williams, RN, BSN
Education Instructor/Student Placement
Education Department
Baptist Health Paducah
2501 Kentucky Ave.
Paducah, Ky. 42003

270.575.8370 phone
270.575.2251 fax
andrea.williams @BHSI.com
BaptistHealthPaducah.com
Clinical Validation of Orientation to Baptist Health Paducah

Initial each item indicating you have received the following information pertaining to your clinical rotation:

- Baptist Health Paducah Mission, Vision and Values statement
- Dress Code
- Parking/ID badges
- Smoking Policy
- Information Management Guidelines
- Patient Rights and Ethics
- Age Specifics/Cultural awareness
- Incident Reporting (Safe Report)
- Infection Control
  - Hand Washing
  - Personal protective equipment
  - Standard Precautions
  - Types of Isolation
  - Blood spills/exposures
- Patient Safety
  - Restraints
  - Falls
  - No Pass Zone
  - National Patient Safety Goals
- Environment of Care – Hospital Safety Information
  - Hazardous Materials and Waste Management
    - Safety Data Sheet
    - Red Bag waste vs. regular waste
    - Procedure for contaminated (dirty) sharps
    - Pharmaceutical Waste
    - Radiation Safety
- Safety Procedures/Emergency Codes
- Fire Safety – RACE, PASS, Fire Extinguishers, Alarm Pulls, Evacuation Routes
- Emergency Preparedness
  - Student role in a disaster

I have read and understand the Baptist Health Paducah Orientation information. All my questions have been answered satisfactorily.

First name (print) ___________________________ MI ___________ Last Name ___________________________

Signature ___________________________ School Affiliation ___________________________

Unit ___________________________ Clinical Start date: ___________________________ Clinical End Date: ___________________________

I have read and understand the information on confidentiality and HIPAA. I realize that there are civil and criminal penalties for the unauthorized use and disclosure of confidential patient information. I will abide by the guidelines when completing my clinical rotation.

Signature ___________________________ Date ___________
STATEMENT OF UNDERSTANDING

I, _________________________________, by signing this Statement of Understanding, do hereby represent that I have read and understand the following:

1. The program in which I am enrolled requires a period of assigned guided clinical experiences in facilities other than school.

2. The clinical experiences will be assigned for their educational value. Thus, I will not be entitled to any wages, workers' compensation or other benefits, either from the School or from the Hospital.

3. While in the hospital facility, I will conduct myself in accordance with its rules, policies, procedures and regulations. Further, I will be subject to the supervision of both Hospital personnel and the School faculty.

4. I understand that neither the Hospital nor the School is responsible for injuries which I incur solely as a result of my own negligence. I acknowledge that the School has encouraged me to acquire personal medical and hospitalization insurance.

5. I have read and agreed to the School's policies, rules and regulations related to the program for which I have enrolled.

6. I understand that information regarding patients or former patients is confidential and is to be used only for clinical purposes. I agree to maintain permanently the confidentiality of all patient information obtained during my experience and understand that an inability to maintain patient confidentiality during this experience will result in immediate dismissal and/or additional legal ramifications.

7. I understand that the educational experience in which I am involved will in no way entitle me to a job at the Hospital.

8. I understand that any action on my part which is not fully consistent with the above statements may warrant removal from the clinical experience at the Hospital.

I have read and understand the above statements and accept them as conditions of my enrollment and participation.

Date: _______________  Student___________________________

Witness_________________________
Baptist Health Paducah
Clinical Informatics Statement of Agreement

Login in username and password:

Your login information including username, password and PIN numbers, as applicable are confidential and should not be shared or used by anyone else. You are not to use another person’s login; doing so will result in your account being terminated. This applies to instructors and students. This applies to access to all computer systems. HIPAA and Privacy rules apply to all patient information.

If you are a Baptist Health Paducah employee and attending school, use your school account when functioning as a student or instructor. Employee accounts are to be used only when working for Baptist Health Paducah. Security and privileges are different for students and instructors versus employee privileges.

Any problems accessing the network or clinical applications should be reported to the Help Desk at 2730. Inform the Help Desk you are a student and to please page the on call Clinical Informatics staff person. You will receive a call from Clinical Informatics to help you.

All Students:

Agreement Statement

I have received the above instructions. I agree to follow the above instructions. I understand that my account may be terminated if I allow another student or instructor to use my login or if I violate any of the above instructions.

Name: PRINT __________________________

Signature: ____________________________ Date: __________

School and Program: ________________________________

Medication Administration – applies only to Nursing and Respiratory Therapy students

Students and instructors will receive a medication administration badge with a bar code. Each badge is specific for one student.

Neither students nor instructors have the security to verify or create an order. Nursing or Respiratory staff will need to verify and create all orders.

Neither students nor instructors can administer a non bar coded medication. Staff must administer medications that are not bar-coded. There is never a reason for a student or instructor to give a non bar-coded medication. If a medication bar-code does not work or an unusual message pops up, such as "Dose Mismatching", notify the Help Desk at 2730 and ask them to page CIT for assistance.

Students cannot be a witness for insulin drug dose calculations and administration. Only exception is during the 120-hour practicum.

I understand and agree to follow the instructions specific to medication administration. ________ (initial)
Student Orientation Evaluation/ Comments

At Baptist Health Paducah, we want you to have an exceptional clinical experience. We ask that you please complete the following questions.

What did you like **best** about the training materials?

What suggestions do you have for improvement?

Are there other topics on which you would like more information?