MCHS Midwest is dedicated to meeting the needs of our patients by providing exceptional care to every patient, every day. Our growing health care system provides the region with quality health care backed by a team of highly-trained medical specialists, close to home.

Regions: Our geographic spread is 75 miles
- 6 hospitals
- 21 clinics

Hospitals in: Fairmont, Mankato, New Prague, Springfield, St. James and Waseca, Minnesota

Locations:
Clinics in: Waseca, Waterville, Springfield, Mankato, Fairmont, Janesville, LeSueur, Lonsdale, New Prague, Montgomery, St. Peter, Belle Plaine, Lake Crystal, Lamberton, St. James, Truman, Trimont, Sherburn and Blue Earth, Minnesota and Armstrong, Iowa.
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Welcome to Mayo Clinic Health System

This manual provides information for clinical instructors and student completing clinical experiences at MCHS Southwest Minnesota Region. In addition, this manual clarifies expectations of students, staff, clinical instructors, and faculty to enhance patient safety and ensure a positive experience for all involved.

Designated Clinical Encounter Definitions

1. **Group Clinicals**: The clinical instructor is present at all times. The clinical instructor, student, and staff work collaboratively to ensure patient safety and create an optimal learning environment. Clinical experiences can range from 4-8 weeks.

2. **Preceptorships/Syntheses Experiences** are intensive, culminating experiences occurring in the last semester of a student’s degree program. The student works one-on-one with an assigned preceptor. These experiences range from 60-120 hours over the course of a semester. Clinical instructors are not present during this experience, but can be reached via phone.

3. **Observational Experiences** is an experience which is less than 30 hours in length. During the experience the student is to observe only and to interact with patients at the guidance of their staff preceptor. Clinical instructors are not present during this experience, but can be reached via phone.

General Information

1. An affiliation agreement between MCHS and each school must be signed and available prior to commencement of the clinical experience.

2. The Academic Coordinator is responsible for the coordination of student clinical experiences, but each clinical site/department ultimately decides whether it can accommodate each request.

3. Patients and MCHS staff reserves the right to exclude a patient for a student clinical experience or observation.

4. Only one group of students will be assigned to a unit during a particular shift, unless exceptions have been discussed with Patient Care Manager.

5. Clinical instructors and students are expected to adhere to the MCHS dress code and any additional school policies. The “**Dress and Decorum**” policy can be found on the MCHS Intranet under the policies tab, and is also part of the student’s online orientation.

6. Smoking is not allowed anywhere in the hospital or on hospital grounds. This includes smoking in your car while parked in the MCHS parking lots.

7. If there is a low census on any day of student clinicals, please plan to double-up students for patient assignments and coordinate workflows appropriately. Do not call other departments directly to seek out alternative experiences unless previously arranged by the Academic Coordinator.
Responsibility of Student

1. If a student is unable to attend their designated clinical encounter for any reason, the student must notify the faculty member on his or her phone. Please do not call the department directly. If the student is assigned to a preceptor, the student is expected to contact the preceptor directly or the department in which he/she is assigned.
2. The student will be held legally to the same level of practice as their faculty/preceptor.
3. Students are expected to be present during change of shift report.
4. A student who has not attained competency in a skill or procedure is required to have the instructor present until the student has demonstrated competency.
5. All plans for patient care will be discussed with the patient’s nurse prior to the delivery of care. The patient’s primary nurse always makes the final decision on tasks delegated to the student.
6. **Preparing for Designated Clinical Encounter:** MCHS offers the following online orientation for students to be completed prior to participating in patient care:
   a. Online Student Orientation
      i. ***Students are required to complete online orientation annually. A new orientation module is uploaded on Mid-August of each year.***
   b. Online EMR Orientation (Electronic Medical Record)
      i. Only to be completed by students who will be accessing and charting within the EMR system.
7. Observes student parking requirements as outline in Student Parking Map.

Responsibility of Faculty

1. Attend Orientation **annually** in August. New instructors for Spring only attend in January as well.
2. **First Day of Experience:**
   a. Pick up badges from Mankato Office 1007, unless obtained during Clinical Instructor Orientation.
   b. Ensure students have completed all required training and have correct documents on file with school.
   c. Reinforce Student Parking requirements.
   d. Ensure Student Assignment Grid is Posted within Patient Care Unit (If possible, please try to print on yellow/gold paper so that it stands out from all other documents). This can be found online under Faculty/Instructor Section.
   e. If needed, access the EMR and print a patient list in order to make assignments in collaboration with each units Charge Nurse. Students may take notes regarding their patient(s); however, personal identification information may not be transcribed in order to ensure patient confidentiality.
3. **Every Day of Clinical Experience:**
   a. Work with Charge Nurses to identify student nurse assignments. Limit 1 student to each nurse if at all possible.
   b. Use **Student Nurse Assignment Form** and post in visible location.
   c. Provide a brief overview during the unit report prior to each shift. This should include the academic focus for the student’s clinical experience for the day. This should include time on the unit and departing time.
   d. Students should report off to assigned nurse prior to leaving unit.
   e. Distribute and collect ID badges each day, or create a tracking process.
4. Clinical instructors must be on-site for the entire clinical experience period/shift for Group Clinical Experiences.

5. When an onsite clinical faculty is absent, the school is to notify the Academic Coordinator of the assigned unit and provide a qualified replacement. Qualified replacements are those individuals that meet all the requirements identified under section "Responsibilities of University/College". Alternatively, the clinical may be canceled for that day. If so, the clinical instructor must notify the Patient Care Manager and Academic Coordinator of this cancelation.

6. School Faculty, Managers and the Academic Coordinator are strongly encouraged to meet throughout the clinical experiences to discuss problems, suggest changes for improvement, etc. regarding a student’s clinical experience.

7. Faculty or preceptors are responsible for orientation of their students to the unit/department on the first day of their clinicals. In addition, student competency assessment is the ultimate responsibility of the clinical instructor or precepting staff nurse. Assessment and reassessment of student competencies occurs on a continuous basis and is inherent in the student clinical experience.

8. On-site faculty is the primary overseers of a student’s actions and conduct with a patient unless the student is being precepted by an MCHS staff member.

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### Roles related to Nursing Student Experiences

<table>
<thead>
<tr>
<th>Faculty/Clinical Instructor</th>
<th>Student Nurse</th>
<th>Nurse</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communicate with Charge Nurse to identify clinical assignments for student nurses. Use Student Assignment Grid to post in designated location.</td>
<td>Communicate with nurse what role you are today: <em>Observation Student</em> <em>Instructor Student</em> Ensure that you are honest with the nurse about what clinical experiences you have had in clinical lab, to ensure that you have practiced prior to this clinical day.</td>
<td>When assigned to patient with:</td>
</tr>
</tbody>
</table>
| - Designate 3-4 students as “Instructor students” who will be providing total cares for patients that you will be overseeing and validating charting.  
- Designate 4-5 students as “observation students” who will be providing basic nursing cares to included hygiene, ambulating and feeding care for 1 assigned patient, while partnering with nurse to provider other cares as directed by nurse. These students will still perform assessments for school purposes in partnership with the nurse. The learning assessments will not need to be documented, unless | | *Observation Student*: support student learning in a hip to hip relationship when possible.  
- Discuss with student what they have had experience with in the clinical lab prior to the clinical setting.  
- Encourage students to report any concerns  
- Students to perform basic nursing cares  
- Students may perform other cares as directed by nurse  
*Instructor Student*: These students will be working directly with the clinical instructor and will complete basic nursing cares, medications, assessments, interventions, and documentation. Partner with the clinical instructor to identify joint care with this patient for the day. |
Responsibility of Hospital Staff

1. The MCHS staff maintains responsibility and accountability for patient care. Students should communicate with the staff as appropriate about their assigned patients throughout the day, before any breaks, at completion of their shift and whenever the patient’s condition changes. In addition, the staff is expected to communicate with the student and faculty regarding any changes in orders and patient status.
2. The staff is not responsible for the educational guidance of the student; however, they may assist the clinical instructor with teaching components if previously approved or arranged.
3. The staff will commit to having first party communication with students and/or clinical instructors when concerns are present.
4. The staff will bring unresolved and/or immediate safety issues to the attention of unit manager and academic coordinator.

Audit Process

The school is responsible for maintaining and providing evidence of the aforementioned required documents to the healthcare organization within 2 business days upon request only.

Safety Report

If a potential and/or actual safety event has happened in the treatment or administration of medication to the patient, it is the student’s responsibility to report this immediately to their clinical instructor and the staff nurse assigned to the patient. Once an error is made your actions should reflect your concern for the patient’s welfare. The proper reporting of such an incident assures prompt attention to the patient. The concern and honesty the student exhibits will become part of his or her developing professional role. The student, instructor, and patient’s primary nurse must complete a Safety Report. The Safety Report is located on the MCHS Intranet, Under Safety and then select “Employee Safety Reporting Tool”.

In the event a student and/or clinical instructor is outlined in a safety event a Performance Improvement Letter will be submitted to school lead and instructor to review and return to MCHS to be placed with Safety Report.

Pre-Clinical/Post-Clinical Meetings

In general, conference space is not guaranteed, but efforts will be made to support post-clinical meetings. Meetings are not permitted in public areas, hallways, etc. of the hospital in order to ensure patient confidentiality.

***Instructors are responsible for reserving their own conference space.

1. Go to Outlook Calendar
2. Select Open Calendar and open each of the room listed on the next page. This way you can see the rooms. You can open and close by selecting the box to the left. When you have done this, now you can make an appointment.

3. Select New Appointment

4. Select Invite Attendees

5. Select to button

6. Under Address Book, search for Mankato: MA Resources

7. Look for one of the following Rooms, depending on site: Add MA_Academic Coordination as well to invite.
8. Add room to resources not the default “required”.

   Required ->
   Optional ->
   Resources -> MA_Academic_Coordination; MA_Hospital_Room_2015 (16)

9. Fill in Subject Line with: Nursing Student Prep/Post: School Name: Instructor. In the open box write your name and phone number to be contacted at. Ensure dates and time are correct, then send. This will be added to your calendar, the room calendar and my calendar.

   Invitations have not been sent for this meeting.
   From: Microsoft Exchange Server
   To: MA_Academic_Coordination; MA_Hospital_Room_2015 (16)
   Subject: Nursing Student Prep/Post: Sabrina Ehmke: MSUM
   Location: MA_Academic_Coordination; MA_Hospital_Room_2015 (16)
   Start time: Wed 5/20/2015 1:00 PM
   End time: Wed 5/20/2015 2:00 PM

   Sabrina Ehmke 507-382-7927

Site Resources~ Fairmont

The Harvest Cafe is available for use by clinical instructors and students. Pre-clinical and post-clinical meetings *may not* occur in these areas. The Harvest café is located on the 1st floor of the hospital. Hot meals are available between 7 a.m.-6:30 p.m., Monday-Sunday. Vending machines are available 24 hours a day on the first floor by the Harvest Café. The Computer Training Room located on the first floor of the hospital is available for reservation.
Site Resources~ Mankato

The cafeteria is available for use by clinical instructors and students. Pre-clinical and post-clinical meetings may not occur in these areas. The cafeteria is located on the 2nd floor of the hospital. Hot meals are available between 6:30 a.m. - 7:00 p.m. Monday-Friday and 6:30 a.m. - 6:30 p.m. Saturdays and Sundays. Vending machines are available 24 hours a day on the first floor.

a. Lockers are available for clinical instructors and students. The lockers are located on the lower level of the hospital. The men’s locker room is room 0106 (Six little metal lockers) and the Women’s is room 0108 (metal locker numbers 14-24 are available). Students must bring their own padlock each day and take items with them at the end of each shift. No overnights, please. Feel free to use these lockers throughout your clinical time at MCHS. The lockers are available on a first come, first serve basis.

b. **Student Clinical Preparation Room #2014** available in Mankato for student preparation and requires an entrance code, specific to each school. Badges also enable students to access room.

Site Resources~ Waseca

a. Vending available on 1st floor by Cardiac Rehabilitation.

b. **Student Clinical Preparation Room #1-279** available in Waseca for student preparation and requires an entrance code, specific to each school. Badges also enable students to access room. Personal items are able to be kept in this room.

Communication - Vocera

1. Hands Free communication device worn by Hospital personnel.
2. Phone number to call into Vocera: 507-385-6400 to each staff or specific department. Internal number 4-6400.

Badges

1. ID Badges are general students badges, so students need to wear both Mayo and School Issued Badges
2. Mankato Campus Students and/or Clinical Instructors need to pick up badges in office 2703B
3. Other campus, student badges will be sent directly to preceptor interdepartmentally.
4. Badges are to be returned at the end of the Experience to Office 2703B on the Mankato Hospital Campus.
5. This can be done by dropping off or sending interdepartmentally.
6. If room access is incorrect for badges, please contact Julie Schwamberger.

Network Access

1. In an effort to maintain EMR access without deletions/cancelations please follow these instructions.
   a. Please enroll your account in the secure authorization site first. You can only enroll from a Mayo workstation on campus. The enrollment page address is [http://access.mayo.edu/enroll](http://access.mayo.edu/enroll).
   b. External address is “mcmail.mayo.edu”, which can only be accessed outside of Mayo Clinic Health System Computer Systems.
   c. Internal address: [http://imail.mayo.edu](http://imail.mayo.edu).
d. *Every 25 days the Mayo System must be accessed from either onsite EMR/Email or off site email access.*

e. If you have students who may have clinicals which sets them up for more than 25 days in between clinical days, have them enroll at this site as well, as accessing the system within 25 days or less, allows for maintenance of their EMR access. *(FYI: When you are issued a LanID you also get an email account).*

2. **Email Communication:** Faculty emails from schools will be used, but I will also begin using faculty Mayo Email address, so please ensure that you are checking the Mayo email account.

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**Electronic Medical Records (EMR)**

1. Access is obtained through assigned LanID with a generic password of (First 2 letter of last name followed by birth year (example: AB1989).

2. ***Internal Student access: They are sent very specific log in information to their Mayo Email, so the state is #1 does not apply to them.

3. Instructors are required to review the following:
   a. EMR Orientation Video
   b. Clinical Instructor Learning Packet

4. Documentation: Students and faculty are to chart in *Ad Hoc* charting only, as charting anywhere else will remove the task from the staffs task list. **Ensure students are accessing their encounters only.**
   a. Students can only chart in the following five areas *(INPATIENT)*
      i. Activities of Daily Living (Adult, Pediatric, and Newborn)
      ii. Assessments – Ongoing and focused (Adult, Pediatric, and Newborn) ~ creates a pending validation
      iii. Basic Care – Height, Intake and Output, Orthostatic, Peripheral IV Care, Restraints, Safety Checks, Urinary Catheter Discontinuation, Vital Signs, Weight, & Warming/Cooling Measures.
      iv. Medication Administration Record (MAR)
      v. Notes/Communication Note: *Only utilize for items that cannot be captured in the other Ad Hoc Forms*
   b. Students can only chart in the following areas *(OUTPATIENT)*
      i. Adult and Peds Ambulatory Care Intake/History ~ creates a pending validation
      ii. Notes
      iii. Health Maintenance
      iv. Immunizations

5. **Downtime Procedures:** Before beginning clinical encounter, faculty are expected to be familiar with the MCHS EMR downtime policy. You can find this policy in the MCHS Intranet under the policies tab. Health Unit Coordinators may also assist the clinical instructor with this process.

6. **Additional Documentation Fields:**
   a. While faculty and all students can navigate to other charting areas, it is strongly recommended that charting does not occur outside of the five recommended screens without prior approval from the staff nurse. Staff are encouraged to communicate and partner with their assigned student to prevent duplication of tasks. For example, the staff can observe a student completing a specific task and then teach a student to chart that task to complete the task list.

7. **Pending validations**
a. The faculty and staff serving as preceptors have the responsibility to sign-off the student's documentation at the end of the shift.
b. This ensures that the “pending validation” has been cleared from the patient’s record.
c. If a “pending validation” is not signed off at the end of the clinical, instructors will be asked to come back into the hospital to sign-off of all students charting, if this happens more than 2 times the organization will address the “Student/Faculty Dismissal and Conflict Resolution” section.

Medication Administration - CareMobile Access
1. All medication administration is done with CareMobiles
2. CareMobiles are located on each patient care unit.
3. During medication administration times students should be logging into the CareMobile with their own LAN ID and password.
4. Faculty may carry one CareMobile device with them for the entire shift.

Medication Administration - Pyxis Access
1. Pyxis access is required for all Clinical Nursing Faculty, as students are not permitted access.
   a. The Nursing Faculty must obtain all medications from the PYXIS.
   b. Access is obtained once the coordinator sends Lan Ids and start dates to Pharmacy Leads.

Point of Care Testing - Glucometer Use
1. Glucometer use is restricted to:
   a. Nursing Faculty who are internal employees and externals who have attended/completed biannual glucometer training.
   b. Students who are internally hired as PCAs

Student/Clinical Instructor Dismissal and Conflict Resolution
1. If there is a concern or conflict on the unit, every effort should be made to resolve it by contacting the Patient Care Manager, clinical instructor, and precepting staff nurse as appropriate. If the problem cannot be resolved, it is to be directed to the Academic Coordinator.
2. When a student or clinical instructor is experiencing performance problems and/or unable or unwilling to improve, as evidenced by failure to complete designated improvement activities, they shall be prohibited from participating in the MCHS clinical experiences.
3. The MCHS personnel may require that the student and/or onsite clinical instructor leave the room/unit/site by being escorted by security.
4. Students and clinical instructors may also be prohibited from participating in the MCHS clinical experience in cases where the student’s or clinical instructor’s personal characteristics prevent desirable relationships with MCHS or where the student’s or clinical instructor’s health status is a detriment to the student’s or clinical instructor’s successful completion of the clinical experience or to other persons at MCHS.
5. Students or Faculty who were prior employees of MCHS, and whose employment was terminated due to unsatisfactory job performance, are prohibited from participating in clinical experiences at MCHS.

6. The school shall process any complaints by MCHS against any student or clinical instructor in accordance with its academic policies.

Nursing Student May Not Perform List

This list pertains to nursing students participating in clinicals at Mayo Clinic and includes students in traditional clinical, capstones/preceptorships and Dedicated Education Units (DEUs). There are separate guidelines provided for Summer Interns, Nurse Technicians, and Nurse Interns; therefore, this list does not apply to those groups.

Students may perform skills/procedures for which they have received academic preparation and have been deemed clinically competent as designated by their clinical instructor, preceptor, and/or Clinical Nurse Teacher (CNT). The nurse preceptor, CNT, staff nurse, or nursing instructor must be present throughout the entire medication administration process for every medication the student administers.

- Please note, this is not an exhaustive list, there may be other skills that the student should not perform at the discretion of the preceptor, CNT, staff nurse, or instructor. They should not perform any skill that requires specialty training and/or certification of nurses.
- The student can observe these skills being performed unless there are extenuating circumstances, such as patient/family refusal, infection control issues, or too many people in the room.

Students may NOT perform the following skills (even under the supervision of a nurse):

Medications
- Administer the following medications: Calcium injection, Chemotherapeutic medications (parenteral and oral), Concentrated Electrolyte injections (see List of High Alert Medication resource), Epoprostenol injection (Flolan), Neuromuscular blocking agents, Treprostinil injection (Remodulin), Anesthetic agents, Ketamine, Propofol and Etomidate.
- Students may not act as a secondary licensed witness for medication administration, or any other task

Equipment
- Initiate patient restraints or seclusion
- Point-of-care testing (Glucometer): Mayo employees and clinical instructors who have received the training and have maintained competency are allowed
- Remove any type of wound drain (Penrose, JP, Duval, etc.)
- Maintenance of mechanical ventilators and external/transvenous pacers
- Pregnancy test point-of-care
- Change batteries in Ventricular Assist Device (VAD)/artificial heart
Procedures
- Assist with central venous catheter insertion
- Access or de-access Implanted Venous Access Devices (IVADs)
- Remove central lines
- Administer blood products
- Perform venipuncture for blood draws
- Scrub in for surgical procedures
- Interpret ECG or fetal monitor tracings

Orders
- Take verbal/telephone orders, or critical lab value results
- Verify or witness informed consent
- Accompany transportation of patients who require licensed personnel supervision

Student Medication Administration Tool

Seven Safety Checks
Be prepared To discuss these checks with your preceptor or Clinical Instructor

| Right Medication | Does this medication match the order and Medication Administration Record (MAR)? Was it reviewed by a staff preceptor or clinical instructor? Is this a medication that students are allowed to give (e.g., IV chemotherapy must be given by specially trained RN)? |
| Right Indication | Why is this medication indicated for your patient?  
What will you assess?  
- How will you know if the medication is helping the patient?  
- What kinds of side effects will you assess for?  
- What will you teach the patient regarding this medication using Mayo-approved patient education resources?  
- Is the patient allergic to this medication? |
| Right Dosage of Medication | Does the dosage of medication you are going to give match the dosage of medication ordered?  
Is this dosage appropriate for this patient? |
| Right Route | What is the route ordered for this medication (e.g., PO, IV push/piggyback, IM, SQ)?  
Is the route appropriate for the patient’s condition (e.g., patient was NPO but is now eating and can take PO versus IV)?  
- Is the ordered route approved for this medication?  
- If IV, Is the pump programmed correctly? |
| Right Time | Does the time ordered match the time you are going to give the medication?  
|           | Is this a PRN drug? If so, has sufficient time passed since the last administration? |
| Right Patient | Use two-patient identifier  
|               | Use Bar Code Medication Administration, where applicable |
| Right Documentation | Explain to your staff preceptor or clinical instructor what you are going to document. |

**Before You Hang or Push that IV Medication with the nurse Ask Yourself:**

Once you have checked the seven rights, the CATS assessment is done prior to actually giving the IV medication.

| C COMPATABILITIES | Is the drug that I am going to hang or push compatible with the fluid currently infusing according to Mayo-approved medication reference tool? |
| A ALLERGIES | Does the patient have drug allergies? Did you ask the patient if they have drug allergies? |
| T TUBING | Do I need to change the tubing? Is it the correct tubing for the drug I am going to administer? Is the tubing kinked or clamped? Is it attached to the patient? |
| S SITE | Is this site safe for drug administration? Does it appear infiltrated? Does it look inflamed? Should the med be delivered via peripheral or central IV? |
****Note Overflow parking is for students
1. Carpool when possible from campus
2. Arrange to meet and carpool from Madison East Parking lot (1400 Madison Avenue, Mankato) and drive to Mayo Clinic Health System Mankato Hospital (1025 Marsh Street)
3. When parking on Mayo Campus use any of the following locations:
   a. Mulberry Street
   b. Garden Boulevard
   c. Oaklawn Avenue
   d. Lot L
   e. BLC Parking
   f. If the locations listed above are full, use lots I, H, F, and G. Please do not use patient parking at any time.
### UNIT SCAVENGER HUNT

<table>
<thead>
<tr>
<th>Item - Check Box when Complete (Mark N/A if not applicable for position or location)</th>
<th>Inpatient/Outpatient</th>
<th>Ambulatory</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Desk Area</strong></td>
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<td></td>
</tr>
<tr>
<td>Central Desk</td>
<td></td>
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</tr>
<tr>
<td>Patient Assignment</td>
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<tr>
<td>Nursing Station/Item locations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Charting Areas/Computer access</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Printers: Patient Labels, faxes, extra paper, trouble shooting</td>
<td></td>
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</tr>
<tr>
<td>ID bands, allergy bands, color band system</td>
<td></td>
<td>N/A</td>
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<tr>
<td>Hourly Rounding Supplies</td>
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<td>N/A</td>
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<tr>
<td>Patient Education printed materials</td>
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<tr>
<td><strong>Staff Information</strong></td>
<td></td>
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<tr>
<td>Kitchen: patient use only, patient refreshment supplies</td>
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<tr>
<td>Resources and Offices: supervisor, support staff</td>
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<td></td>
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<tr>
<td>Schedule Book</td>
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<tr>
<td><strong>Patient Rooms</strong></td>
<td></td>
<td></td>
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<tr>
<td>Directions and Locations of other patient care sites</td>
<td></td>
<td></td>
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<tr>
<td>Oxygen and Suction outlets</td>
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<tr>
<td>Code Button, CPR equipment</td>
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<tr>
<td>Communication &quot;Whiteboard&quot;</td>
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<tr>
<td>Patient Transfer Route</td>
<td></td>
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<tr>
<td>Bathing locations for patients</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>Cleaning policies</td>
<td></td>
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<tr>
<td><strong>Medications and Supplies</strong></td>
<td></td>
<td></td>
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<tr>
<td>Medication Room including Pyxis, if applicable</td>
<td></td>
<td></td>
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<tr>
<td>Scanner for Meds/Caremobile</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>Linen Closet</td>
<td></td>
<td></td>
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<tr>
<td>Supply Room: Dressings, etc.</td>
<td></td>
<td></td>
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<tr>
<td>Clean &amp; Dirty Utility Rooms, Waste Disposal Plan</td>
<td></td>
<td></td>
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<tr>
<td>Shower Rooms</td>
<td></td>
<td>N/A</td>
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<tr>
<td>Personal Protective Equipment and Isolation door signs</td>
<td></td>
<td></td>
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<tr>
<td>Equipment: scale, wheelchair, oxygen tanks, lift equipment</td>
<td></td>
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<tr>
<td>Respiratory Supplies, if separated</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Point of Care Testing Supplies: glucometer</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Telemetry</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>Specimen equipment and sending eg. pneumatic tube if applicable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blanket warmer location</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>Location of Patient Restraints</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Safety and Emergencies</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Panic Button/Staff emergency button/patient help</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Location of Stat Cart for Code Blue and/or Emergency Equipment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fire Extinguishers, Fire Alarm Pulls, Emergency Exit Plan and Exits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oxygen Shut-off Valves</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>Location for staff to wash eyes in the case of emergency (e.g. Eyewash Station)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Call Light System; Bed Controls;</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>Patient monitoring alarms (e.g. Bed Exit, Tabs, pressure sensor pads)</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>Special Measures eg. parent-baby identification systems</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>--------------------------------------------------------</td>
<td>-----</td>
<td></td>
</tr>
<tr>
<td>Where to Sequester and Tag Equipment for Repair</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Communication**

<table>
<thead>
<tr>
<th>Phones: location; phone numbers; how to transfer; reminders about Smart Web</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Interpreter Service/Phone</td>
<td></td>
</tr>
<tr>
<td>Cheat Sheets for Common Phone Numbers</td>
<td></td>
</tr>
<tr>
<td>Vocera Communication Tool: location and/or purpose (as applicable)</td>
<td>N/A</td>
</tr>
<tr>
<td>Hill-Rom System at FMC, and cell phones.</td>
<td></td>
</tr>
<tr>
<td>Assignment Sheets</td>
<td>N/A</td>
</tr>
<tr>
<td>Call Schedules and how to use</td>
<td></td>
</tr>
<tr>
<td>Recycle/Shred for HIPAA</td>
<td></td>
</tr>
<tr>
<td>Standard Precaution Signs</td>
<td>N/A</td>
</tr>
<tr>
<td>Downtime Documents</td>
<td></td>
</tr>
<tr>
<td>Whiteboard Communication Tool</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**Tour of Other Departments**

| Patient/Family Waiting Areas                                              |     |
| Gift Shop/Vending Food Locations                                          | N/A |
| Administration                                                            | N/A |
| Volunteer Desk                                                            | N/A |
| Radiology                                                                 |     |
| Emergency Room                                                            | N/A |
| Operating Room/Same Day Surgery/Post Anesthesia Room                      | N/A |
| Laboratory                                                                |     |
| Morgue                                                                    | N/A |
| Dialysis                                                                  |     |
| Health Information Systems                                                |     |
| Others areas (OB, Nursery, Physical Medicine, Clinics, Outpatient facilities, etc.) |     |