**Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_**

**CHI Franciscan Health Nursing Student Orientation**

**Didactic and Clinical Information Checklist**

|  |  |  |
| --- | --- | --- |
| **Pre-Arrival Modules and Materials**  **(To be completed prior to arrival at CHI FH)** | **Date Review**  **Completed** | **Nursing Student Signature** |
| **Nursing Student Orientation Modules – Located on the Clinical Placement Northwest (CPNW) website:**  **CHI FH specific – Student and Instructor Orientation:**   * Mission, Vision, Values, AIDET, Safety First     **CPNW Modules:**   * Bloodborne Pathogens * Infectious Medical Waste * Compliance * Patient Safety * Emergency Procedures * Standard Precautions * Patient Rights * Chemical Hazard Communication * Post Tests |  |  |
| Has completed CPNW Student/Faculty Clinical Passport Requirements |  |  |
| Wearing CHI FH Approved Picture Identification (badge)  and has received CHI FH parking sticker from security. |  |  |
| Has a copy of current quarter’s objectives and instructor contact information (CHI FH Clinical Objective Form) |  |  |
| **Verification of Completion:**  Nursing Student Signature | Date Written Review Completed | Date Completed in Clinical Area |

**Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CHI Franciscan Health Nursing Student Orientation**

**Didactic and Clinical Information Checklist**

|  |  |  |
| --- | --- | --- |
| **Topics: General Orientation** | **Date** | **Nursing Student Signature** |
| Activate Emergency Code: Dial 5555 Code Red = Fire  Code Yellow = Hospital only Trauma  Code Blue = Cardiopulmonary Arrest  Code Gray = Combative Patient  Amber Alert= Neonatal Incident  Rapid Response Team = Activate Rapid Response Team  Code Silver = Weapon/Hostage  Code 5 = Shelter in Place  Code Triage = Disaster Response  (phase 1: alert, phase: 2 activate) |  |  |
| Location of Equipment: (Scavenger Hunt)   * Crash Cart * Fire Pull Station, Fire Extinguisher and Floor Evacuation/Emergency exit * Eye wash station * BLS resuscitation devices * Safety equipment: PPE, face shields and goggles * Pharmaceutical Waste Disposal Containers * Sharps containers * Isolation carts and supplies * Spill kit * Emergency preparedness disaster kits * Linen supplies * Patient care supplies * Dietary supplies * Dirty utility Café/lunch room * Lab * Diagnostic Imaging |  |  |
| Location of Medical Gas Shut Off Valve |  |  |
| Operation of call light system |  |  |
| Identify meaning of Signage Alerts   * High Risk for Falls * Skin Precautions * Stop Sign * Cytotoxic * See Nurse before entering room |  |  |
| Location of Policy and Procedure Clinical Manual: Policy Stat |  |  |
| Medication Administration/Medication Safety 945.00 |  |  |
| Clinical Instructor/ RN Preceptor/UBE Signature and Date |  | |
| Nursing Student Signature and Date |  | |