Hello Students

Our Vision Statement:
“To become nationally recognized for our clinical outcomes and world famous service because patients are our priority.”

- This module was prepared by the Education Department of Brookwood Baptist Medical Center to orient nursing and faculty to our facility prior to clinical rotation.
- Students will be required to review the module and complete the post-test with a score of at least 85%.
- Please contact Julie Smith (Julie.Smith@tenethealth.com) for any question regarding the information included in this module.

We are
what we repeatedly do.
Excellence, therefore, is not an act, but a habit.

-Aristotle-
Brookwood Baptist Medical Center is located at 2010 Brookwood Medical Center Drive, Birmingham, Alabama 35209 near the Brookwood Mall. There is a Brookwood Medical Center exit off of Highway 31 in Vestavia that will bring you directly to our campus.

From I-59, the Carraway Blvd exit will take you Highway 31-S (Red Mountain Expressway). Follow it through Homewood and Brookwood will be on your left.

From Highway 280, the Alabama Highway 149, Shades Creek Parkway exit will take you by Brookwood Mall and you will turn left at the Shell Station. This road will take you directly to the Employee Parking Deck where you will park.

From I-65, you can take the Lakeshore Drive exit, cross Green Springs Highway and either merge right onto Highway 31 or go under the Highway 31 and turn right at the Shell Station.
Parking

- All students and faculty will park in our Employee Parking Deck - the speed limit is 10 mph and **DO NOT BACK INTO PARKING SPACE** unless you are on levels 5-7.

- **NEVER** park in the Patient/Visitor deck.

- If you do not have a parking pass, you may push the button at the entrance, identify yourself as a student or faculty and gain access from Security.

- The crosswalk to the parking deck atrium is on Level 4.

- Do not park in assigned parking spaces, specifically Volunteer parking spaces.

- **ALWAYS** display your Temporary Parking Permit **on the front dash of your car**.

- If you have a parking pass to enter the deck, you MUST return it to Education Department at the completion of your clinical rotation or a fee will be charged.

- Security – Extension 1675: After-hour escort to deck, auto assistance (except retrieval of keys locked in car)
Welcome to Brookwood Baptist Medical Center!! Our goal is to provide a hands-on learning experience to support your course of study and integrate you into our Brookwood Baptist culture. Our Professional Practice Model is Caring Relationships – relationships that extend from professional to patient, professional to student, and among co-workers working as a team. We hope you will gain both skills and knowledge during your clinical rotations.

Our Values at Brookwood Baptist Medical Center are to:
- Foster Trust
- Focus on People
- Enhance Value
- Change Through Innovation
- Lead Through Partnership

Our Nursing Mission is: To provide high quality, evidence based nursing care in a caring, collaborative environment. While you are here, we expect you to help support our mission through your thoughts and actions.
General Information

- Our Standards of Behavior are:
  - Attitude – a positive, helpful attitude
  - Personal appearance – always neat and clean
  - Facility appearance – clean, safe and inviting
  - Communication – supportive interaction with patients, families, and co-workers
  - Sense of Ownership – feeling that we, as employees, are “heard”
  - Commitment to Co-Workers – assisting without being asked
  - Call Lights – answer within 10 minutes
  - Privacy – respect the privacy of our patient and co-workers
  - Customer Waiting – if our patients have to wait, keep them informed of timeframe
  - Elevator Etiquette – always defer to patient transportation and be aware of elevator conversations
  - Safety Awareness – fall prevention, patient and co-worker safety
  - Teamwork – leads to quality patient care

- National Patient Safety Goals:
  - Patient Identification:
  - Every Medication
  - Every Lab Specimen
  - Every Transport
General Information

- **Professional Relationships with Patients:**
  - You are expected to maintain a professional relationship with patients at all times in order to provide the highest quality of patient care. Please refer to your school handbook for further information.

- **Name Tags/Dress Code:**
  - Every student has an impact on the overall image of the facility in the eyes of patients and the community.
  - You are required to present a clean and neat appearance and dress according to the requirements of your school.
  - Always wear school name tag on upper part of uniform with name side visible.
  - Wear conservative street clothes with lab coat and name tag for picking up assignments or any time entire school uniform is not required. No jeans, shorts or visible cleavage.
  - No artificial nails or gel tips allowed.
  - Two earrings only – one per ear.
General Information

- **Elevators:**
  - Use service elevator (bank of 3 elevators) only when transporting patients or equipment.
  - Use staff/visitor elevators (banks of 2 elevators) for all other use.

- **Employment:**
  - Visit [www.brookwoodbaptisthealth.com](http://www.brookwoodbaptisthealth.com) and click on For Health Professionals.
  - Call Nurse Recruiter at 877-2614 or 877-1916 for Allied Health positions available for students and graduates

- **Human Resources Policies:**
  - Brookwood Medical Center is Drug-Free Workplace. As a pre-qualification for clinical rotation, proof is required that each student has passed a drug screen administered by their school.
  - Brookwood Medical Center is a Smoke-Free Workplace. Students may not smoke in the visitor deck or anywhere on the Brookwood campus.
Diversity

- Diversity may be reflected in a person’s culture, beliefs, age, lifestyle, or physical attributes.

- At Brookwood Baptist, we:
  - Recognize that diversity, including cultural diversity, exists in both patients and co-workers
  - Demonstrate respect for people as unique individuals with culture as one factor that contributes to their uniqueness
  - Respect the unfamiliar
  - Identify and examine your own cultural beliefs
  - Recognize that some cultural groups have a definition of health and illness, as well as practices that attempt to promote health and cure illness, that may differ from your own
  - Be willing to modify health care delivery in keeping with the patient’s cultural background
  - Do not expect all members of one cultural group to behave exactly the same way
  - Appreciate that each person’s cultural values are ingrained and therefore very difficult to change
HIPAA

- Health Insurance Portability and Accountability Act – Protects Patient Privacy
- Respect your patient’s privacy – IT’S THE LAW!!
  - Do not discuss patient by name or room number
  - Be aware of discussions in hallways and elevators
  - Do not look at any chart other than your patient’s
  - Do not take any patient identifiers home with you
  - Be aware of discussions after you leave the hospital
  - Social media references often constitute HIPAA violations
  - If a patient knows you or recognizes you as the friend of a friend, assure them that you will respect their privacy and make sure that you do.

Social Media:
- Do not post any clinical info on Facebook – Do not even post that you are at Brookwood Baptist. It may leave you open to HIPAA violation and penalty.

Cell Phones:
- Do not keep your personal cell phone on while in clinical area.
- Do not use your cell phone in the clinical area.

No Photos in the Clinical Area- photos of any type (camera, phone) are strictly prohibited.

HIPAA violations are punishable by fine and/or incarceration.
Security Sensitive Areas

- The safety and security of the patients and their information is a top priority at Brookwood Baptist Medical Center
- Each of these areas utilize special security policies, procedures, and devices to maintain patient security and privacy
- You will not be given access to these areas unless you have clinicals in these areas

<table>
<thead>
<tr>
<th>Area</th>
<th>Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother/Baby Units</td>
<td>Infant abduction, domestic violence</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>Internal or external theft of medications</td>
</tr>
<tr>
<td>Psychiatric Units</td>
<td>Patient violence, domestic violence</td>
</tr>
<tr>
<td>Emergency Department</td>
<td>Theft due to storage of medications, domestic violence, gang violence, patient violence</td>
</tr>
<tr>
<td>Medical Records</td>
<td>Theft of sensitive patient information</td>
</tr>
</tbody>
</table>

- The number for Security: 877-1675 or extension 1675
Patient Rights

The following statement is not meant to be all-inclusive – it represents some of the concerns of Brookwood Baptist Medical Center regarding the relationship between hospital and patient. Patient Rights include:

- **Access to Care** – access to treatment or rooms that are available or needed because of their condition, regardless of race, creed, sex, national origin, handicap or sources of payment for care.

- **Respect and Dignity** – to receive care in a safe setting, free from verbal or physical abuse or harassment. Considerate, respectful care at all times.

- To make decisions concerning medical care, including the decision to have life-sustaining procedures withheld or withdrawn in instances of a terminal condition (Advance Directives) and to have hospital staff and practitioners who provide care in the hospital comply with those directives, in accordance with the law.

- To refuse treatment to the extent permitted by law. When refusal of treatment by the patient or legal representative prevents the hospital from providing appropriate care, the hospital may end its relationship with the patient after giving reasonable notice.

- To be free from restraints and seclusion of any form used as a means of coercion, discipline, convenience or retaliation by staff.

- To receive an itemized and detailed explanation of their total bill for services rendered in the hospital.
Patient Rights

- To be informed of the hospital rules and regulations that apply to their conduct as a patient. Patients are entitled to information about the hospital’s procedure for handling complaints.

- Privacy and Confidentiality – within the law, personal and information privacy
  - To refuse to talk or see anyone not officially connected with the hospital, including visitors. To refuse to talk to persons officially connected with the hospital, but not directly involved with their care.
  - To wear appropriate personal clothing and religious or other symbolic items as long as they do not interfere with tests or treatments.
  - To be interviewed and examined in privacy.
  - To expect that any discussion of their case will be handled discreetly. Persons not directly involved in care will not be present without permission.
  - To have their chart read only by those directly involved in treatment. Persons who monitor the quality of care may also read the chart. Other individuals cannot read their chart without written consent.
  - To expect that their records of care, all communications and other records pertaining to their care, including the source of payment for treatment, to be treated as private and confidential.
  - To request a transfer to another room if another patient or visitor in the room is unreasonably disturbing them.
  - To be placed in protective privacy when considered necessary for their personal safety.
As we know communication is absolutely an essential element in our everyday work environment with our patients, family members, physicians, visitors, and co-workers. AIDET is our basic tool we use as our standard for communication at Brookwood.

- **What is it?**
  - Acknowledge
  - Introduce
  - Define Duration
  - Explain
  - Thank you

- **Why AIDET?**
  - It structures communication
  - Involves EVERY employee
  - Reduces employee anxiety
  - Reduces patient anxiety
  - Increases compliance
  - Improves outcomes
  - Transforms our culture by setting expectations and holding employees accountable
AIDET Communication

- How do you do it?
  - **Acknowledge**…patients and/or families by smiling, making eye contact, and greeting them in a pleasant manner.
  - **Introduce**…yourself by saying who you are, what department you are from, the purpose of your interaction, and your credentials. This is a great time to explain your role in their care as well as any special certifications held. Don’t worry about bragging, your purpose is to build the patient’s confidence in your expertise.
  - **Define the Duration**…by keeping patients and families informed about time expectations: wait times, physician rounds, pain medicine, meal delivery, and any special issues related to keeping them informed as to time.
  - **Explain**…what will happen so patients and families are clear on what to expect. Ask if they have any questions. Make sure the interaction is comfortable so they feel free to communicate with you. If you appear rushed or disinterested, they will not ask any questions. Keeping patients informed throughout the procedure and any other educational information that can be shared will help the patient make choices when possible and be involved in their care.
  - **Thank**…patients and family members for their time, patience, cooperation, and for choosing Brookwood Medical Center as their hospital of choice.

- Hardwiring AIDET helps us to ultimately reduce patient anxiety and improve clinical outcomes. AIDET is the tool that gives you the outline.
## Emergency Codes

<table>
<thead>
<tr>
<th>Code Blue</th>
<th>CARDIOPULMONARY ARREST (Adult, Child Infant)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Dial 1444 and state, “Code Blue, Room # and Unit”</td>
</tr>
<tr>
<td></td>
<td>• If it is your patient, start CPR using protective equipment</td>
</tr>
<tr>
<td></td>
<td>• If not your patient, follow directions of staff or instructor</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Code Pink</th>
<th>INFANT/CHILD ABDUCTION</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Close all fire doors</td>
</tr>
<tr>
<td></td>
<td>• Stand at fire doors, elevator doors, stairwell doors, exterior doors and observe for child, infant or large package/box</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Dr. Red</th>
<th>FIRE – Remember acronym R-A-C-E:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Remove patient from danger</td>
</tr>
<tr>
<td></td>
<td>• Alarm (Dial 1444 and pull alarm)</td>
</tr>
<tr>
<td></td>
<td>• Contain Fire/Smoke (close room and fire doors)</td>
</tr>
<tr>
<td></td>
<td>• Extinguish or Evacuate as directed</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Code White</th>
<th>INCLEMENT WEATHER (SNOW OR ICE)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Check with your instructor</td>
</tr>
<tr>
<td></td>
<td>• Call 877-CODE to check status</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Code Brown</th>
<th>VIOLENT BEHAVIOR/ COMBATIVE PATIENT OR VISITOR</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Special response team will subdue patient</td>
</tr>
<tr>
<td></td>
<td>• Follow direction of team or instructor</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Code Silver</th>
<th>ARMED ASSAILANT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Take action to protect yourself and others</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Code Orange</th>
<th>INTERNAL OR EXTERNAL DISASTER – Follow directions of staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bravo</td>
<td>BIOTERRORISM ATTACK – Follow directions of staff</td>
</tr>
<tr>
<td>Code Orange Alpha</td>
<td>BIOTERRORISM ATTACK AND ER HAS BEEN CONTAMINATED – Follow directions of staff and stay away from ER</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Code Yellow</th>
<th>TORNADO WATCH (PENDING) OR WARNING (STAT)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Code Yellow Stat</td>
<td>• Close blinds or drapes; Move patient away from window</td>
</tr>
<tr>
<td></td>
<td>• Send visitors to basement</td>
</tr>
<tr>
<td></td>
<td>• If Code Yellow Stat – move patient to hallway or bathroom, or cover with blanket if unable to move</td>
</tr>
</tbody>
</table>
# Emergency Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Lime</td>
<td>SURVEYERS OR INSPECTORS IN HOUSE – follow directions of your instructor</td>
</tr>
<tr>
<td>Code Black</td>
<td>BOMB THREAT</td>
</tr>
<tr>
<td></td>
<td>• Follow directions of staff</td>
</tr>
<tr>
<td></td>
<td>• Notify instructor or Security for any suspicious, unattended packages</td>
</tr>
<tr>
<td>Code Green</td>
<td>FACILITY EVENT (construction, power outage, etc.)</td>
</tr>
<tr>
<td>Code Cerner</td>
<td>INFORMATION SYSTEMS EVENT</td>
</tr>
<tr>
<td>Code Emergency Cath</td>
<td>Notification – cardiac patient in the ER</td>
</tr>
<tr>
<td>Dr. Flight</td>
<td>PATIENT ELOPES FROM UNIT</td>
</tr>
<tr>
<td></td>
<td>• Stand at fire doors, elevator doors, stairwell and exterior doors</td>
</tr>
<tr>
<td></td>
<td>• Observe for adult patients</td>
</tr>
<tr>
<td>Code Quick Step</td>
<td>EMERGENCY OUTSIDE HOSPITAL WALLS</td>
</tr>
<tr>
<td></td>
<td>(parking deck, sidewalk, etc.)</td>
</tr>
<tr>
<td></td>
<td>• Assigned teams respond</td>
</tr>
<tr>
<td></td>
<td>• Render aid/CPR</td>
</tr>
<tr>
<td></td>
<td>• Stay with victim until team arrives</td>
</tr>
<tr>
<td></td>
<td>• 1444 or press panic button</td>
</tr>
<tr>
<td></td>
<td>POTENTIAL JUMPER (includes buildings/parking decks)</td>
</tr>
<tr>
<td>Hazardous Materials Spill</td>
<td>CALL 1144</td>
</tr>
<tr>
<td></td>
<td>• Follow staff directions</td>
</tr>
<tr>
<td></td>
<td>• Evacuate area for large spills</td>
</tr>
<tr>
<td>SECURITY</td>
<td>CALL 1675</td>
</tr>
</tbody>
</table>
Guidelines for Waste Disposal

- **Clear Bags**: Where there is NO Evidence of Blood and/or Infection
  - Rinsed bedpans, urinals, emesis basins, IV lines and bags
  - Foley catheters and bags
  - Gauze and dressings
  - Diapers and chux
  - Gloves, gowns, aprons, masks
  - Ventilator circuits
  - Suction canisters with disinfectant
  - Packages and boxes
  - Newspapers and magazines
  - Plates, cups, plastic utensils
  - Food and food packaging
  - Tissues and paper towels

- **Sharps Containers**:  
  - Needles
  - Lancets
  - Sutures
  - Scissors
  - IV catheter/needle
  - Medication vials (non-chemo)
  - Ampoules
  - Glass medical vials
  - Vials of blood
Guidelines for Waste Disposal

- **Red Bags:** Where there is Evidence of Blood and/or Infection
  - Gloves/gowns/masks
  - Foley catheters/bags
  - Gauze and dressings
  - Ventilator circuits
  - IV lines
  - Blood, blood products, specimens for microbiologic culture, and used culture plates and culture tubes
  - Hemodialysis tubing
  - ET tubes
  - Blood bags
  - Suction canisters without disinfectant Premicide
  - Sump tubes, drains/NG/chest drainage systems
Guidelines For Pharmaceutical Waste

Pharmaceutical Waste Stream Management

<table>
<thead>
<tr>
<th>Items NOT to be Collected in the Containers</th>
<th>Non-Hazardous Rx Waste No Messaging</th>
<th>Hazardous Rx Waste Place in Black Container</th>
<th>P-Listed Rx Waste Place in 1qt Black Container</th>
<th>Incompatible Rx Waste Return to Pharmacy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plain Maintenance Solutions such as:</td>
<td>DEFAULT Container (~95% of Medications)</td>
<td>Leftover medication including (but not limited to):</td>
<td>Leftover medication AND its packaging such as:</td>
<td>Leftover medication such as:</td>
</tr>
<tr>
<td>• Potassium chloride</td>
<td>Dispose in Blue Container</td>
<td>• Insulin</td>
<td>• Coumadin plus the empty blister pack</td>
<td>• Inhalers with canister</td>
</tr>
<tr>
<td>• Saline</td>
<td>Dispose in Black Container</td>
<td>• Some Multivitamins</td>
<td>• Nicotine plus the peel off the back of a patch</td>
<td>• Dermoplast</td>
</tr>
<tr>
<td>• Sodium phosphate</td>
<td>Place packaging in Acutely Hazardous Waste Container</td>
<td>SHARPS with meds</td>
<td></td>
<td>• Unused Silver Nitrate</td>
</tr>
<tr>
<td>• Calcium</td>
<td>Bag and Return to Pharmacy</td>
<td></td>
<td></td>
<td>• Leftover BOTOX</td>
</tr>
<tr>
<td>• Sodium bicarbonate</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Lactated Ringers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Magnesium Sulfate</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

CONTROLED SUBSTANCES

Follow Current Hospital Policy for Proper Disposal of these Items

REGULAR TRASH
• Empty medication packaging, wrappers and overwrap

SHARPS
• Needles and Broken Ampoules
• Empty syringes
• Broken Glass

Red Bag Waste
• Semi-liquid blood or other potentially infectious material
• Contaminated items that would release blood or other potentially infectious materials

Bulk Chemo
• Leftover Chemo and PPE saturated with Chemo drugs

Trace Chemo
• Gloves, Gowns, Syringes, empty Bags and other trace material that contacted Chemo Drug

Stericycle
Protecting People, Reducing Risk.
Safety Measures For Working With Sharps

- It is the law…Bloodborne Pathogen Standard
  - To prevent work-related exposure to diseases, AIDS, Hepatitis B&C, OSHA has issued a Federal Regulation – the Bloodborne Pathogen Standard.

- Needle sticks pose the biggest risk!!

- If an exposure occurs, REPORT IT IMMEDIATELY

- All students must be trained:
  - Understand the risks of exposure and the means of transmission
  - Universal Precautions
  - Procedures and Practices that prevent exposure
  - Proper use and disposal of sharps

- To prevent cuts, abrasions, and puncture wounds:
  - Put sharps away in their proper places.
  - Hold sharps securely by their handles.
  - Don’t point a sharp at another person – or yourself.
  - Use caution and communicate when you pass sharps to another person
  - Clean reusable sharps very carefully.
  - Don’t leave a sharp lying point-out on a table, counter or other surface
  - Carry sharps in a sheath or other puncture proof holder.
  - Don’t try to catch a sharp if it falls.
  - Don’t bend, break, shear, or recap used needles or other sharps by hand.

- Common sense, knowledge, and caution prevent accidental contact with sharps:
  - Correctly engage safety device and dispose of entire syringe in sharps container
  - Follow policy/procedure
  - Be alert
  - Lookout for hidden sharps
  - Help co-workers
  - Wear the required protective equipment
Standard Precautions
For Infection Prevention

- **Definition:**
  - Blood/body Fluids – Blood, semen, vaginal secretions, and pleural, amniotic and joint fluids are fluids which may contain blood-borne viruses. Other fluids such as sputum, nasal drainage, tears, saliva, feces and urine are not covered under Standard Universal Precautions unless they are blood-tinged.

- **Requirements:**
  - Hands must be thoroughly washed between all direct patient contact and/or after handing soiled or contaminated equipment.
  - Gloves will be worn by staff performing penetrating procedures or for any patient care measures that involve blood/body fluid contact.
  - Protective eye wear and masks will be worn when splattering, splashing, or aerosolization is anticipated (i.e. during surgical procedures, gastrointestinal hemorrhages, trauma cases, etc.).
  - Gowns will be worn when splattering or splashing is anticipated as outlined above. Fluid repellant gowns or plastic aprons should be worn when soak-through damage is anticipated.
  - Waste that is dripping blood or that drips when compressed should be separated from other waste and biohazard procedures should be followed (red bag disposal). Linen is bagged and closed at the locations where it is used.
  - Needle sticks, splashes and other potential exposures for students will be evaluated and managed according to school policy.
  - Patient Placement – Place a patient who contaminates the environment or who does not (or cannot be expected to) assist in maintaining appropriate hygiene or environmental control in a private room. If a private room is unavailable, consult with infection control professionals regarding patient placement.

- Questions regarding appropriate protective measures should be directed to the Infection Prevention Department at ext 1341.

- Remember to use Universal Precautions for routine daily work as well as in an emergency situation.

- Play it safe…Treat all blood and body fluids as if they are infectious.
Look for this sign to guide you when entering the room of a patient with contact precautions:

- Gowns, gloves and masks will be hanging on the door to the patient’s room.
- Don appropriate items prior to entering the patient’s room. Remove barrier items at the door before you exit the patient’s room.
- Remove barrier items at the door before you exit the patient’s room.
- There should be a designated garbage can by the door — use it for disposal.
Handwashing Tips (excerpts from Brookwood Baptist Policy, *Handwashing and Hand Antisepsis*). Wash hands:

- At the beginning of the workday, before eating or drinking, and after coughing, sneezing or using the restroom.
- Before and after direct contact with patients, blood/body fluids or equipment and environmental items that are likely to be contaminated.
- Prior to donning gloves and after removing gloves.
- The choice of plain soap, antimicrobial soap, alcohol based hand rub or surgical hand scrub should be based on:
  - Whether or not the hands are visibly dirty or contaminated with blood or other body fluids. Alcohol hand rubs should not be used on hands that are visibly dirty.
  - The patient or patient population with whom the caregiver will be interacting.
    - Alcohol hand rub or antimicrobial hand wash should be used on resistant organisms.
    - Soap and water are preferred over alcohol rub for hands contaminated with bacterial spores produced by organisms such as *C difficile* or *Bacillus anthrax*, for removal of spores from hands. Alcohols and antiseptic agents have poor activity against spores.
Fall Prevention

- **Internal Factors:**
  - Increased age
  - History of falls
  - Changes in ambulation or mobility
  - Increased weakness / motor deficits
  - Mental status changes
  - Urinary frequency / incontinence
  - Medical conditions such as stroke, diabetes, respiratory disease
  - Drug interactions

- **External Factors:**
  - Unfamiliar environment (hospital room)
  - Rolling / movable furniture (moves when patient leans on or uses for support)
  - Glare or decreased visibility
  - Lack of nonskid footwear
  - Bed position too high
  - Assistive devices out of reach
  - Bathroom or BSC too far away

- If patient is a fall risk, implement the “arm’s reach” policy:
  - “Arm’s reach” means that you may not be further away from the patient than the length of your arm.
  - Keep patient at “arm’s reach”, even when on the commode.
  - May stand at bathroom door to allow for privacy – not acceptable to be at the bedside or any other part of the room.
Fall Prevention

- We will reduce falls by addressing the following needs:
  - Physiological
    - Address and treat patient’s pain as ordered
    - Make rounds and regularly offer assistance to bathroom
    - Remind patient to call for assistance to bathroom, especially if on pain medication
    - Address patient’s need for position change or thirst regularly
  - Safety/Security
    - The environment
      - Keep room and walkways free of clutter
      - Be aware of placement of bedside table, bedside commodes, and chairs in room relating to ambulation
    - Make sure wheels are locked on chairs in room and wheelchairs before transfers to or from bed or chair
    - Keep patient’s possessions and call light within patient’s reach at all times
    - Keep bed in lowest position and side rails up times two
  - Social Needs
    - Engage family & visitors
    - Regularly provide reinforcement of education
    - Ask patient and family to “teach back” to verify understanding
  - Respect
    - Allow autonomy and privacy as much as possible
    - If fall risk, stay within “arm’s reach”
While On The Unit

- Always make sure one side of hallway is clear to allow for transport.

- Don’t prop fire doors open or block with stretchers, etc, as they must be free to close automatically in an emergency.

- Patient Call Button and Wall Mount:

- Patient rooms are equipped with red plugs (below) that will retain power during a power outage.

- They are to be used for equipment that is a priority for patient care (IV pump, fetal monitor, etc).

- Units also have red phones that are always operational and are to be used for priority communication only.
While On The Unit

- Each unit has a TTY text telephone for patients who are hearing or speech impaired:

- **Ethics Compliance**
  - If you identify a practice or situation that constitutes a potential ethics violation, notify your instructor first and he/she will notify the Director. The flow chart below outlines the process for ethics mediation review.

*How To Access The Ethics Committee  
Ethics Case Review Subcommittee*

- Identify Ethical Dilemma
- Notify Director *
- Call Jackie Maltinek **
  - CNO 877-2304
- CNO Notifies Appropriate Administrative Staff
- Determination Made Regarding Consultation vs. Called Meeting
- Consultation Takes Place
- Meeting Is Called
- Executive Assistant to CNO Notifies Members
- Dilemma Addressed

* After hours, notify house supervisor

** After hours notify administrator on call
Student Orientation
Post-Test

1. Students **must** wear their name badges, on the upper part of clothing with name side visible, at all times.
   a. True
   b. False

2. The National Patient Safety Goal of Patient Identification involves verification of patient’s identification:
   a. every medication
   b. every lab specimen
   c. every transport
   d. every time
   e. all of the above

3. It is OK to take pictures on the unit to post on Facebook as long as a patient is not in the picture.
   a. True
   b. False

4. Personal Protective Equipment (PPE), such as gloves, masks, gowns and shoe covers, must be removed:
   a. Before leaving the hospital
   b. Before leaving the unit
   c. Before leaving the isolation

5. Under emergency power, red outlets will have power.
   a. True
   b. False

6. Self-closing doors may be propped open if they are in high-traffic areas.
   a. True
   b. False

7. A Code Pink is a suspected infant or child abduction.
   a. True
   b. False
Student Orientation
Post-Test

8. Diversity may be reflected by:
   a. ethnicity
   b. beliefs
   c. age
   d. lifestyle
   e. weight
   f. A, B, D only
   g. All of the above

9. Included in Patient Rights is the right to
   a. Respect and dignity
   b. Refusal of care
   c. An itemized copy of their bill
   d. All of the above

10. It is acceptable to review your classmates’ patients’ charts for educational purposes.
    a. True
    b. False

11. In conversation, it is acceptable to identify your patient by name
    a. In the elevator
    b. In the cafeteria
    c. At home
    d. All of the above
    e. None of the above

12. The most important way to prevent infections is to wash/sanitize your hands both before and after patient contact.
    a. True
    b. False

13. It is acceptable to use red biohazard waste bags for a patient’s belongings.
    a. True
    b. False
14. To prevent patient falls the nurse should
   Keep the patient at arm's reach
   a. Make sure wheels are locked on chairs and wheelchairs
   b. Make rounds and offer assistance with ambulation to bathroom
   c. Educate the patient and family
   d. All of the above

n. You are walking into work and you find a visitor who has collapsed in the parking lot and is not responding. You should:
   a. Call a Code Blue
   b. Call a Code Quickstep
   c. Call a Code Pink

o. Standard Precautions are designed for the care of all patients in the hospital, regardless of their diagnosis or infectious status.
   a. True
   b. False

p. During a Code Yellow Stat, patients should be:
   a. Moved away from the windows
   b. Place in hallway or bathroom if possible
   c. Covered in blankets if they cannot be moved
   d. All of the above

q. The wearing of artificial fingernails is prohibited by all patient care staff.
   a. True
   b. False

r. A Code Brown Alpha is a combative patient with a weapon.
   a. True
   b. False
20. Which of the following is true?
   a. Needles only should be discarded in a sharps container
   b. The entire syringe should be discarded in a sharps container

21. When your hands are visibly soiled and dirty, you should wash your hands with soap and water instead of using alcohol-based rubs.
   a. True
   b. False

22. A Code Blue is a sudden stoppage of heart regardless of the age of the victim.
   a. True
   b. False

23. What does AIDET stand for?
   a. Assess, Implement, Document, Evaluate, Teach
   b. Acknowledge, Introduce, Define Duration, Explain, Thank You
   c. Ask, Implement, Define, Educate, Train

24. When parking for your clinical rotation, which statement(s) are true?
   a. It is best to park in the deck closest to the unit you will be going to, especially if it is at night
   b. It is OK to park in the Volunteers’ designated parking spaces if no one is there and it is the night shift
   c. If I have a gate pass, there is no need to display my Temporary Parking Permit on the dash of my car
   d. All of the above
   e. None of the above

25. Match the Waste to the Receptacle (must answer all correctly for credit)
   ____Newspaper                      S = Sharps container
   ____Syringes with safety cap engaged  C = Clear bag
   ____Suction canisters with disinfectant  R = Red bag
   ____Bloody gauze