



## **Student Orientation**

### **Reedsburg Area Medical Center**

Welcome to Reedsburg Area Medical Center for your clinical. We hope you will have a rewarding learning experience. If you have any questions during your time here, please contact Linda Olson RN, MSN (Director of Education) at 608-768-6240 or by email [lolson@ramchealth.org](mailto:lolson@ramchealth.org)

In addition to the sections already covered on:

- Immunizations
- Criminal Background check
- Infection Control
- HIPPA – Health Insurance Portability and Accountability Act

We would like you to:

- Review some Reedsburg Area Medical Center documents prior to your clinical experience at RAMC.

### **Reedsburg Area Medical Center's Mission Statement:**

We pledge to provide high quality health care to bring healing and comfort to our acute care, swing bed, hospice and respite patients and their families.

**Reedsburg Area Medical Center** is committed to going beyond the expected. We strive to fulfill each individual's needs by encompassing skill, compassion, communication, caring, teamwork, professionalism, accountability, positive attitude and respect.

### **Parking**

When you have clinical at the Reedsburg Area Medical Center, you may park in the parking lot across the street from the Emergency Room which is located behind the hospital. Additionally, you may park on the street in front of the hospital.

### **Smoking Policy**

Reedsburg Area Medical Center is a **smoke free environment both in buildings and on grounds.**

### **Identification**

Whenever you are on the hospital grounds, you must wear your **college name badge.**

### Students May Not:

- Apply restraints independently
- Administer blood. (Students may observe the process, and may assist with vital signs).
- Witness consents
- Be the discharging nurse on discharge documentation
- Take verbal orders
- Access central lines
- Administer IV chemotherapy medications
- Care for patients in Airborne Isolation (Use of PAPR).

### Patient Identification – Per policy

1. Checking patient identification. To maintain a high level of patient safety throughout the organization, at least two identifiers will be used whenever administering medications or blood products; taking blood samples and other specimens for clinical testing; or providing other treatments or procedures. For RAMC purposes, treatments or procedures are defined as activities that require a consent form signed.
    - a. **To accurately identify patients you will need two patient identifiers (may not use patient's room number). Identifiers of choice are the patient's name and date of birth.**
    - b. **When a patient is unable to confirm their identity due to patient age (pediatric), unconsciousness or cognitive impairment these are available options:**
      - i. A person accompanying this patient can initially identify the patient.
      - ii. If the patient is unaccompanied:
        - a. Picture identification, such as a drivers' license can be used.
- Or**
- b. They can be assigned a temporary "name" and registration number.

These identifiers will be used to identify the patient and verified or corrected when more information is available.

### Safe Injection Practices

Medication preparation and administration practices to prevent contamination:

#### Aseptic Technique:

- Hand hygiene must be performed before handling medication.
- Medication must be drawn up in a designated clean medication area.

- Medication vial and septum and IV access port must be disinfected with alcohol pad **and allowed to air dry** before accessing.

**Timing:**

- Medications are not to be drawn up until ready to administer.

**Syringe/Needles**

- Needles and syringes are sterile, single-use, single patient items.
- Never administer medications from the same syringe to more than one patient.

**Never re-use:**

- Never enter a medication vial, IV bag or connect to IV administration set with a used syringe or needle.
- Never use medications packaged as single-dose vials for more than patient.

**Vials:**

- When medications are drawn up from a single-dose vial or multi-dose vial, the syringe must be labeled with patient's name, medication name and dose if the medication is not given immediately.
- Do not enter a vial with a used syringe and needle. A new syringe and needle must be used each time.
- Syringe and vial are discarded after single dose is administered.
- Syringe and / or vial with left over medication should be wasted and not saved for possible additional doses.

**Exceptions:**

- When administering an IV push medication via saline well, the same saline syringe may be used to check patency, and to flush prior to medication administration as to flush post administration if asepsis of the saline syringe is maintained.
  - Cap the saline syringe after checking patency.
  - Never leave the saline syringe unattended.
  - Discard saline syringe immediately after flushing.

### Medication administration:

**5 rights** Safe medication practice is based on the five (5) rights of medication use:

1. The right patient
2. The right medication
3. The right dose
4. The right time
5. The right route

### Safety

- When drawing up any medications from a glass ampule, fill-filter blunt tip needle will be used.
- Medication cupboards, drawers, storage rooms and medication carts shall be kept **locked at all times, unless able to be monitored.**
- Medications are to be taken with nurse/therapist/technician in attendance. Medications are not to be left at bedside for administration at a later time.
- The individual administering medication is responsible for documentation of same.
- Patients receiving medications have a right to request a lower dosage if available (ie. 1 tablet instead of 2). The change will be noted in the medical record and the unused medication will be returned and credited or wasted.
- Unused portions of single dose vials or oral medications will be discarded according to the "Pharmaceutical Waste Management Flow Sheet".
- Refrigerated medications shall be labeled (except insulin pens and bottles) with a standard pharmacy label and stored in a refrigerator.
- If unfamiliar or uncomfortable with a specific medication, the individual has the right to refuse to administer that medication; however they must notify a supervisor/unit director of decision so arrangements can be made to administer medication.
- IV Chemotherapy medications **may only be administered or discontinued by specially trained RNs at Reedsburg Area Medical Center.**
- Medication administration will be documented in the patient's medical record.
- All injections will have administration site documented.

### Admixtures

- Will be covered in orientation at the clinical site.

### **Vaccinations**

- Influenza and Pneumovax vaccinations will be given to all screened eligible inpatients unless practitioner enters and order stating “do not give vaccine”.
- It is strongly recommended that staff check the Wisconsin Immunization Registry (WIR) prior to administration to verify that patient is eligible for vaccination.
- Vaccinations are documented on the appropriate electronic vaccination record prior to administration.
- Additionally, vaccinations are documented through the Medication Verification Administration screen.

### **High Alert Medications**

- Heparin and other high alert medications require a 2<sup>nd</sup> witness prior to administration.
- Insulin requires a 2<sup>nd</sup> witness for the correct insulin and the correct dose prior to administration.

### **Fall Prevention**

- Universal Fall Precautions will be implemented on all patients admitted to RAMC.
- In addition, all inpatient adults will be assessed for fall risk using the Hendrich II Fall Scale. The Humpty Dumpty scale will be used for those under the age of 18. The Birth Center uses the OFRAS fall scale.
- Reassessments will be done minimally every shift.
- The patient and patient’s family will be educated on fall reduction strategies.
- After identifying the level of assist needed, nursing staff will document findings on the whiteboard in patient’s room.

### **Diversity**

- We value differences; including differences in opinions, knowledge, culture and religious beliefs