

# Advent Health

## Porter



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## ADVENTHEALTH CONFIDENTIALITY AGREEMENT

AdventHealth ("AdventHealth") recognizes the importance of protecting sensitive, confidential, and proprietary information concerning its patients and their families, its associates, and its business operations, transactions, and relationships ("Confidential Information"). To protect the trust of our customers and patients, maintain respect for all persons, and comply with legal and regulatory requirements, it is the obligation of every associate, care provider, student, volunteer, contractor, and other non-employee ("User") to safeguard Confidential Information. **As a User, I agree to the following:**

1. I will protect the security and confidentiality of all Confidential Information shared with me or acquired by me. Any patient information, confidential information about a fellow associate or their family, physician, or management and financial information regarding the facility, AdventHealth Systems that is made available to me is for my professional use only. I will not use Confidential Information or disclose Confidential Information to any third party, within or outside AdventHealth, except to the extent necessarily required to perform my assigned job duties and as authorized by law or AdventHealth policy. I will not discuss Confidential Information outside of the facility, in public areas, or any place where I may be overheard, or with any other individual not involved in the scope and performance of my duties.
2. I will not access or attempt to access Confidential Information other than that information that I have been authorized to access and have a need-to-know in order to perform my job.
3. If I will have access to AdventHealth's computer systems, applications, and network, I also agree that:
  - a. I may be issued a computer user-ID and password. This user-ID and password is unique to me. I will not share my user-ID and password with any other person, nor will I attempt to use any other person's user-ID. All system accesses and entries that I make are monitored. I am responsible for any and all activity performed using my user-ID.
  - b. I will log off of any systems that contain or provide access to Confidential Information as soon as I am finished using such system in order to prevent unauthorized access. I will not print or copy Confidential Information unless specifically authorized to do so.
  - c. If at any time I believe my password security may have been violated, I will immediately contact AdventHealth.
4. There are various security codes and passwords belonging to AdventHealth's physical premises or equipment that I may be given in the course and scope of my duties. These codes and/or passwords are confidential and are subject to the terms of this Agreement.
5. I understand that my failure to comply with applicable laws and hospital policies or unauthorized or indiscriminate use or disclosure of Confidential Information, user-IDs or passwords, access codes, or any violation of this Agreement, may subject me to corrective action up to and including termination of my employment, contract, or status at AdventHealth and/or suspension or loss of privileges. In addition, violations of law may be reported to law enforcement officials and may lead to civil and criminal penalties under HIPAA and other State and federal laws.
6. AdventHealth routinely monitors its computer systems, applications, and networks. I understand that I should have no expectations of privacy in the use of these resources. By using AdventHealth computer systems, applications, and networks, I am expressly consenting to such monitoring.
7. AdventHealth may modify or revoke my access to its systems, applications, and network at any time for any reason.
8. My obligation to safeguard Confidential Information continues even after leaving AdventHealth.

**By my electronic consent, I am indicating that I have read, understand, and agree to adhere to all terms of this Confidentiality Agreement, as well as all applicable privacy and confidentiality laws and hospital policies.**



## **Roles, Responsibilities, and Expectations of the Student**

### **Documentation**

1. Students may document in the computer and/or written medical permanent record. (Exception: EFM or cardiac rhythm documentation). Such documentation must include the student's name (first and last name) and the designation SN school. (Example: Sue Smith SNACC.)
2. Students are responsible for their own documentation.
  - All documentation must be co-signed by clinical scholar/instructor and/or patient's primary RN by the end of each clinical shift.
3. Students will adhere to the Documentation of Patient Care policy.

### **Medication Administration**

1. Students may administer medication by IM, IV, SQ, PO, SL, rectally and/or topical routes as appropriate to the validated competency level of the student skills and course objectives as taught by the school of nursing. All medication administration **MUST** be administered under the direct and visual supervision of the patient's primary RN, clinical scholar or instructor.
2. Prior to removal of any medication from the medication dispensing machine and/or medication room, the patient's primary RN must be consulted and agree to the medication treatment plan.

### **Skills/Procedures**

**Students MAY INDEPENDENTLY PERFORM the following tasks, routinely completed by a CNA, after competency validation by the clinical scholar or instructor.**

- ADLs
- Vital signs
- I & O calculations
- Feeding
- Tray removal
- Safety checks (bed alarm, chair alarm, environment assessment)

**Students MAY perform tasks routinely completed by an RN ONLY under the direct and visual supervision of the patient's primary RN, clinical scholar or instructor.**

- Physical assessment
- Administer routine intravenous (IV) fluids

- Administer continuous medication infusions
- Administer IV piggyback medications
- Administer IV push medications
- Perform venipuncture for blood drawing (only in select units)
- Insertion and care of a peripheral IV line
- Wound care
- NG tube insertion and care
- Feeding tube care (not insertion)
- Insert/remove/obtain specimens Foley catheter
- Insert/remove rectal tube
- Monitoring patient with minimal or moderate patient sedation
- Monitor patient on PCA or epidural therapy
- Monitor patient during administration of blood and/or blood products
- CPR
- CPM correct position/alignment/placement of and monitoring
- Empty, record and remove JP drain (excluding mastectomy patients)
- Chest tube care
- Adhere to the No Pass Zone process – No Pass Zone AIDET
- Transport patient on cardiac monitor with ACLS RN present

**Students May NOT perform the following activities.**

- Access of controlled substances
- Administration of ANY controlled substances
- Administration/Adjustment of IV cardiac medications
- Narcotic counts
- Administer, titrate or discontinue patient-controlled analgesia (PCA) or epidural therapy
- Administer chemotherapy
- Administer vasoactive drugs (May monitor under direct visual RN supervision.)
- Administration of blood or blood products, including cannot check for patient identification and blood type, including Rhogam/Rhophylac
- Arterial blood gas (ABG) puncture
- Draw blood from arterial line
- Remove central lines
- Change central line dressing
- Draw blood from central lines/PICC lines
- Blood glucose
- Wound VAC dressing changes
- Insert feeding tube
- Empty, record and remove JP drain for mastectomy patients
- Accept verbal or telephone physician orders
- Be a witness for living wills, read patient rights or any legal matters
- Interpret or document cardiac rhythm
- Interpret or document EFM/contractions
- Perform a 12-lead ECG

## **Unit Specific Instructions**

### **Surgical Services**

- Observation only unless prior written approval from manager is obtained and sent to the student placement coordinator.\*\*
- OR students will be required to wear blue, hospital-laundered scrubs for direct patient care.
- Includes these areas:
  - Main OR
  - GYN OR (includes C-sections)
  - Pre/Op
  - PACU
  - GI Lab

### **Emergency Services**

- Observation only unless prior written approval from manager is obtained and sent to the student placement coordinator.\*\*
- Adult Population
  - Students must NOT perform the following activities:
    - Any procedures in the ED that are of a legal nature such as legal blood draws, sexual assault exams, reading of patient rights.
- Pediatric Emergency Care
  - All activities must be performed under the direct and visual supervision of the RN or unit educator assigned to the patient.
  - Students must NOT perform the following activities:
    - IV insertion/care or related activities

### **Inpatient Rehabilitation Unit**

- Prior to any/all patient transfers the patient's primary RN must be consulted.
- Transfers MUST be performed under direct and visual supervision of the patient's primary RN, PT/OT or as directed by the patient's primary RN.

### **Procedural Services**

- Observation only unless prior written approval from manager is obtained and sent to student placement coordinator.\*\*
  - Cath Lab
  - Interventional Radiology (IR)
  - Radiology Care Unit (RCU)
  - Cardiac Diagnostics

### **Women's Services Units**

- Prior to patient interventions the patient's primary RN must be consulted.
- L&D students will be required to wear blue, hospital-laundered scrubs for direct patient care.
- Students must NOT perform the following activities:
  - Administer IV magnesium
  - Transport infants to or from the nursery
  - Independently remove patients from fetal monitors for any reason
  - Apply or remove internal electronic fetal monitors
  - Administer induction/ripening agents (i.e., Pitocin, Cytotec-vaginal, Cervidil)

- Perform newborn blood screen – heel stick
- May not interpret or document EFM

**\*\*Senior Practicum Students** may be able to perform these cares with consent of the unit educator and per unit policy.

### **Definitions**

*Clinical Scholar:* AdventHealth associate that has completed the clinical scholar course provided by CCNE (Colorado Center for Nursing Excellence) and paid by normal AdventHealth payroll practices.

*Instructor:* University/College-employed RN (can be a AdventHealth associate) and paid by university/college.

*Observation:* Hands-off experience. Students may not perform any tasks during the observation experience.

*Patient's Primary RN:* The RN assigned to perform patient care.

*Unit Educator:* Unit-based RN educator



# Informed Consent to Intimate Patient Examinations

[HB 23-1077](#) prohibits a licensee, student, or trainee from performing an intimate examination on a **sedated** or **unconscious** patient without first obtaining informed consent from the patient or patient's authorized representative prior to the examination.

The following Q & A is to provide some guidance to implementation.

## Frequently Asked Questions

### 1. When are we required to comply with the regulation?

- The regulation is effective January 1, 2024.

### 2. What does “intimate examination” mean?

- Palpation of a breast or an internal pelvic, prostate, or rectal examination. An intimate examination does not include visual examination that occurs incidental to the care being provided or impact a medical forensic examination which includes the collection of evidence in connection with an alleged sexual assault or other crime, pursuant to applicable laws.

### 3. Who does this law apply to?

- A licensee, student, or trainee from performing an intimate examination; licensee includes the following: physicians, physician assistants, a person holding physician training, a resident, an intern enrolled in an approved internship, a fellow, APRNs, RNs, midwives, and direct-entry midwives.

### 4. When is an intimate examination informed consent required?

- When a student or trainee will be performing, observing or will be present for an intimate examination for educational or training purposes.
- When performing an intimate examination on a sedated or unconscious patient. Unless the licensee obtained consent to provide health care that includes an intimate examination and has informed the patient in the process of obtaining consent.

### 5. Are there exceptions to the requirement for an intimate examination consent?

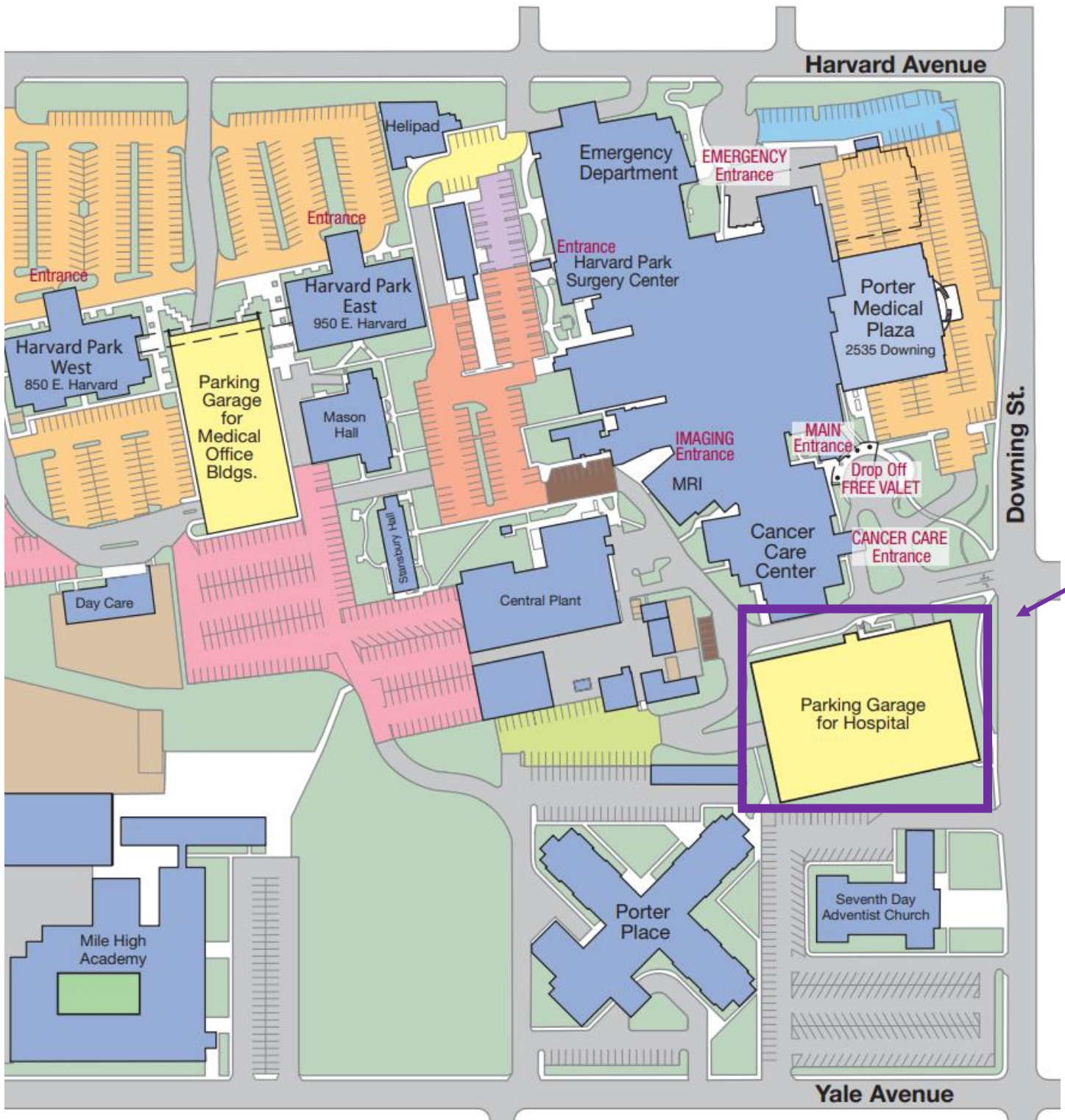
- Yes. There are two exceptions permitted in the law:
  - i. An intimate examination on a sedated or unconscious patient is medically necessary in an emergency for the life or well-being of the patient.
    - The licensee must document to performing the examination without consent and must include an explanation of the reason for not obtaining the patient's consent.
    - Prior to discharge the record must be provided to the patient.

- ii. Consent to provide health care that includes an intimate examination of the patient has been obtained and the licensee has informed the patient in the process of obtaining consent.
- 6. **Does the consent need to be separate from the general admission consent to treatment?**
  - Yes. The law requires the consent form to be separate from any other notice or agreement.
- 7. **Is an intimate examination consent form required in addition to a surgical consent form (e.g., hysterectomy or colonoscopy)?**
  - No. Provided the surgical consent form includes that the health care provided includes an intimate examination of the patient, and the licensee has informed the patient in the process of obtaining consent.
- 8. **Is an intimate examination consent form required for the following scenarios: insertion of a foley catheter, fecal incontinence bag application, wound care, bathing of pelvic area and diapering of an unconscious patient, etc.?**
  - No. An intimate examination consent form is not required.
- 9. **What form should be used to obtain informed consent to intimate patient examinations?**
  - The AdventHealth legal team has created a consent form for intimate patient examinations.
  - Independent practitioners not employed or contracted with the health care facility may use their own informed consent to intimate examination document if it complies with the specific consent form requirements.
- 10. **Can the form be provided electronically?**
  - Yes. The form may be provided to the patient or patient's authorized representative in a written or electronic format.
  - Electronic forms will not be available until a later date, and paper intimate examination informed consents will be required.
- 11. **When must intimate examination informed consent be obtained by the patient or patient's authorized representative?**
  - During a pre-operative appointment or as soon as possible before the procedure occurs. In the event of an emergency the licensee must document to performing the examination without consent and must include an explanation of the reason for not obtaining the patient's consent.
- 12. **Are there penalties?**
  - Yes. A licensee, student or trainee may be subject to disciplinary actions and a health care facility may be subject to sanctions if found to be in violation of this regulation. The law permits a patient to pursue civil action; this would not be considered a medical malpractice action.

**By my electronic consent, I am indicating that I have read, understand, and agree to adhere to all terms of HB 23-1077 Informed Consent Of Intimate Patient Examinations.**



# PORTER ADVENTIST HOSPITAL Campus Map



Students and instructors are to park in the purple area/Parking Garage for Hospital on floors 3, 4, and 5.



# Tip Sheet

## NURSING STUDENTS AND COSIGNS

Nursing students' documentation in Epic requires a cosign by either their instructor or nurse preceptor assigned to the student.

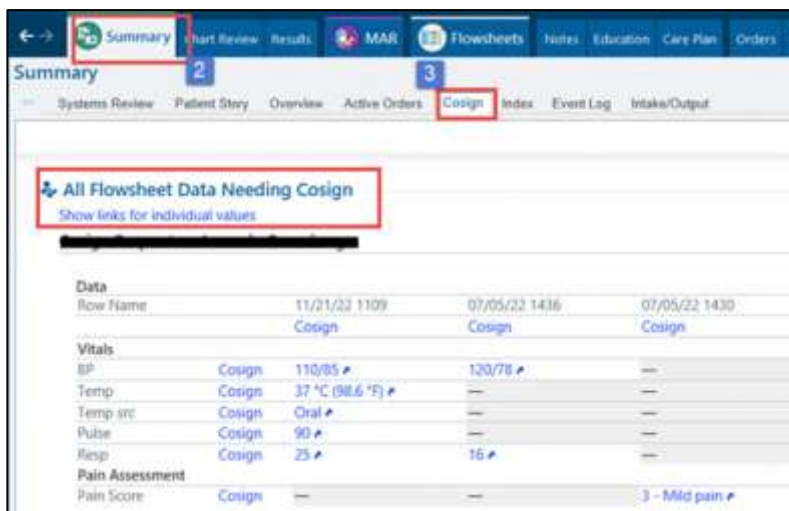
**Note:** The preceptor is different based on the school. Please follow your SOP/Policy.

### Try it out

1. When a student nurse logs in, they will choose their preceptor to have them be their default co-signer

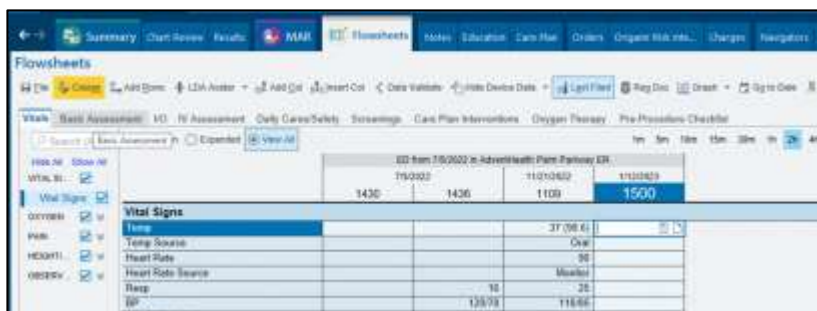


2. From the **Summary activity**, the preceptor or instructor has a **Cosign tab** they can pull into their view so they can see all cosigns. (Use the search bar to pull it in, if needed).
3. Click onto the Cosign tab to view data needing cosigned.
4. Preceptors Cosign All items from the Cosign Activity in Summary or can individually Cosign certain flowsheets (see Flowsheets #5).



Data	Flow Name	11/21/22 1109	07/05/22 1436	07/05/22 1430
		Cosign	Cosign	Cosign
Vitals				
BP	Cosign	110/85	120/78	---
Temp	Cosign	37 °C (98.6 °F)	---	---
Temp site	Cosign	Oral	---	---
Pulse	Cosign	90	---	---
Resp	Cosign	25	16	---
Pain Assessment				
Pain Score	Cosign	---	---	3 - Mid pain

5. In **Flowsheets**, nurses will see a co-sign activity light up **yellow** if there is an item that needs to be cosigned.



	1430	1436	1109	1500
Vital Signs				
Temp			37.0 (6)	
Temp Source			Oral	
Heart Rate			90	
Heart Rate Source			Manual	
Resp		16	25	
BP		120/78	110/85	

Version: 1

Date: 1/13/2023



Version Number	Changes Made	Date	Author
1	Tip Sheet created with Chester Parong and Omar Parong	1/13/2023	Daphney Dragone, MSN, RNC-OB

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