

# *Addendums:* IHC Facility and/or Region Specific information

This packet includes specific information from each Intermountain Health Care (IHC) facility or region you might have a scheduled rotation with this semester. Please read those addendums relevant to your rotation.

Information found in this packet is in addition to the student orientation manual.



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# Urban Central Region

## Region Specific Information

*Alta View Hospital, Cottonwood Hospital Medical Center, LDS Hospital, TOSH Hospital*

Student Placement Coordinator .....801-507-2810

*Address:* 5424 College drive  
Murray, Utah

### Main Hospital Numbers:

- Alta View Hospital.....801-501-2600
- Cottonwood Hospital Medical Center .....801-314-5300
- LDS Hospital.....801-408-1100
- TOSH Hospital.....801-314-4100

### Disaster Hotline Phone Numbers:

- Alta View Hospital.....801-501-2686
- Cottonwood Hospital Medical Center .....801-314-2686
- LDS Hospital.....801-408-2686

### Employee Health Phone Numbers:

- Cottonwood Hospital Medical Center .....801-314-2886
- LDS Hospital.....801-408-3944

### Human Resource Department Phone Numbers:

- Alta View Hospital.....801-501-2770
- Cottonwood Hospital Medical Center .....801-314-2275
- LDS Hospital.....801-408-1961
- TOSH Hospital / Clinics ..... Contact IHCHS Supervisor

Security ..... Ext 2000

Risk Management.....801-408-1851

Computer Training .....801-314-4204

### POCT Training

Point of Care Testing consists of things such as fecal occult testing and blood sugar testing. Please contact the IHC lab at 314-4739 (Cottonwood hospital), or 408-1419 (LDS hospital)

### Parking at IHC UCR Hospitals

Students are to park in employee parking areas only. DO NOT park in patient & visitor parking areas. Parking is very competitive at all three hospitals and we need to ensure that our patients and their guests have access to parking spaces.

**LDS Hospital:** You may park in either parking garage on C Street. Parking is always a problem, so please allow for additional time to find parking. Salt Lake City Police to patrol the area and issue tickets every day. If you park on the street (not recommended) be sure to notice any signs detailing parking restrictions (i.e. two hour parking, no parking, etc).

**Cottonwood:** Do not park in Patient & Visitor Parking Areas! The Employee parking area is along the South end of the South Parking lot.

**Alta View:** Do not park in Patient & Visitor Parking Areas! The Employee parking area is North of the hospital and East of the IHC clinic. It is North East of the Helipad.



# Urban North Region – Logan Regional Hospital

## Facility Specific Information

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Student Placement Coordinator..... 435-716-5301  
 Main Hospital number ..... 435-716-1000  
 Student Placement / Contract Assistant ..... 435-716-5112

### LRH Emergency Code Responses

*Emergency Codes are listed in your Student Orientation manual; the following are in addition to those listed.*

#### Dial 66 – State problem and location

Code	Description	Initial Response	Follow-up
<b>Code Trauma Alert</b>	<b>Emergency Room Alert:</b> Expected arrival of a limited number of <b>severely injured patients</b> in the Emergency Department.	<ul style="list-style-type: none"> <li>- OR, Respiratory, Radiology, Emergency, Critical Care and Laboratory are alerted.</li> <li>- Trauma surgeon is paged</li> <li>- Prepare for patient(s) to arrive</li> </ul>	- N/A
<b>Code Disaster</b>	<p><b>Disaster External</b> Rapidly admit a large number of patients from external site</p> <p><b>Disaster Internal</b> Disaster within the hospital</p>	<b>Refer to Disaster Procedures Employee Outline Summary</b> (attached)	<ul style="list-style-type: none"> <li>- Assess and complete report of incident</li> <li>- Submit report to Safety Officer</li> </ul>
<b>Code Evacuation</b>	<p><b>Partial Evacuation</b> (Effected Department(s) evacuate to area designated by each department)</p> <p><b>Total Facility Evacuation</b> (Evacuate to area designated by incident commander)</p>	<p><b>Internal (Code Announced "Code Evacuation location")</b></p> <ul style="list-style-type: none"> <li>- Administrator On-Call</li> <li>- Evacuate laterally or down to a</li> <li>- Use telephones for emergency communications only</li> <li>- Call Code Green if more help needed</li> </ul> <p><b>External (Code Announced "Code Facility Evacuation to destination")</b></p> <ul style="list-style-type: none"> <li>- Administrator decision only</li> <li>- Incident Commander determines the order in which areas are evacuated</li> <li>- Use telephones for emergency communications only</li> </ul> <p><b>Evacuation Priority:</b></p> <ol style="list-style-type: none"> <li>1) Immediately Endangered</li> <li>2) Ambulatory (Walking)</li> <li>3) Non-Ambulatory (Wheelchair)</li> <li>4) Bedfast (Critically ill)</li> </ol>	<ul style="list-style-type: none"> <li>- Assess and complete report of incident</li> <li>- Submit report to Safety Officer</li> </ul>

Employee Health .....	Ext 5427
Human Resource Department .....	Ext 5112
Risk Management .....	Ext 5450

**Specific Guidelines for Supervision of Students in Patient Care Areas**

- It is the responsibility of the employed patient care provider to assess the student's competence level and ensure an appropriate level of supervision. Students only perform high-risk skills if there is direct supervision (physically standing next to student). High risk skills include but are not limited to administration of ALL medications, invasive procedures (including IV insertion) complex wound care, inserting tubes, chest tube removal, pacing wire removal, or any high risk skill identified by the student's profession.
- The patient care provider reports promptly to the instructor if the competence level of the student is below what is expected given the clinical experience objectives.
- Medication administration is the responsibility of the patient care provider within appropriate scope of practice. The student may participate in medication administration. The patient care provider is accountable to ensure right medication, right dose, right route, right patient, right time, patient's right to know and right to refuse.
- The RN or LPN patient care provider emphasizes that insulin and heparin dosage must always be checked by a second RN or LPN prior to administration.
- The patient care provider does not direct students to give medications intravenously unless they confirm that the student has completed IV training in the school program (typically no IV's in the first year of nursing school.) After the instructor confirms that the IV training has been completed, the care provider may direct the student to administer IV and IV push medications under the direct supervision of the patient care provider, but may never direct the student to push narcotics, chemotherapy, experimental drugs or medications being used in a drug study.
- The student may not make adjustments to nor set up pain management systems on intravenous pumps.
- The student may NOT carry narcotics keys. Students may assist with end of shift narcotics audits as a learning experience, but CANNOT sign as the second person on the audit form nor sign to receive narcotics from the pharmacy. The employed RN, LPN or Respiratory Care Practitioner documents all narcotic administration.
- The patient care provider validates documentation of care performed by students, including medication administration and other procedures. This is done by cosigning documentation on paper charting.
- Patient care departments may have additional guidelines that further define the skills in which students may participate. If this is the case, the patient care provider is responsible to review the guidelines with the instructor and student before the student begins the clinical experience.

**Computer Access**

If you need computer access, please complete the computer access form in your Forms Packet. Your supervisor must sign this form before you return it to IHC University.

**Parking Information**

Any person parking on this campus while working is required to park in blue-lined parking stalls. This includes all hospital personnel, all physician office staff, all students/interns, or anyone else working in the building. The yellow-lined parking stalls are reserved for patients and visitors ONLY. If you have questions, call (435) 716-5141.



## Urban North Region – McKay-Dee Hospital

### Facility Specific Information

Student Placement Coordinator ..... 801-387-8007  
 Main Hospital number ..... 801-387-2800  
 Security ..... Ext 7100

## MKD Emergency Code Responses

*Emergency Codes are listed in your Student Orientation manual; the following are in addition to those listed.*

### Dial 5000 – State problem and location

Code	Description	Initial Response	Follow-up
<b>Code Cardiac Alert</b>	<b>Emergency Department Alert:</b> Expected arrival of a <b>cardiac patient</b> to the Emergency Department.	<ul style="list-style-type: none"> <li>- Heart Institute, Critical Care Shift</li> <li>- Coordinator and Respiratory Care respond to this alert</li> <li>- Prepare for patient arrival</li> </ul>	- N/A
<b>Code Trauma Alert</b>	<b>Emergency Room Alert:</b> Expected arrival of a limited number of <b>severely injured patients</b> in the Emergency Department.	<ul style="list-style-type: none"> <li>- OR, Respiratory, Radiology, Emergency, Critical Care and Laboratory are alerted.</li> <li>- Trauma surgeon is paged</li> <li>- Prepare for patient(s) to arrive</li> </ul>	- N/A
<b>Code White</b>	<b>Additional nursing personnel needed</b> during short-term clinical crisis.	<ul style="list-style-type: none"> <li>- Each nursing unit will send all available RNs or LPNs to the designated unit</li> <li>- Bring IV start kit, gloves, BP cuff and stethoscope</li> </ul>	<ul style="list-style-type: none"> <li>- Assess and complete report of incident.</li> <li>- Submit report to Safety Officer, Paul Lanier - Security Office x7102</li> </ul>
<b>Code Manpower</b>	<b>Additional personnel needed</b> to respond to any emergency.	<p><b>Code Manpower:</b></p> <ul style="list-style-type: none"> <li>- All supervisors send one person from each department to the announced location.</li> <li>- Engineering respond</li> </ul> <p><b>Code Manpower Maximum Response:</b></p> <ul style="list-style-type: none"> <li>- ALL available personnel respond</li> </ul>	<ul style="list-style-type: none"> <li>- Assess and complete report of incident.</li> <li>- Submit report to Safety Officer, Paul Lanier - Security Office x7102</li> </ul>
<b>Code Hazardous Material</b>	<ul style="list-style-type: none"> <li>- Spills &amp; Leaks</li> <li>- <b>Unmanageable:</b> Operator will call Fire Department</li> <li>- <b>Manageable:</b> Notify Security (Chemical Spill Team) x7100</li> </ul>	<ul style="list-style-type: none"> <li>- Rescue victims and provide first aid if safe to do so</li> <li>- Call 7100 for Spill Team (Security)</li> <li>- <b>Isolate</b> the area</li> <li>- <b>Identify</b> material, check label</li> <li>- <b>Contain</b> spill, using towels etc.</li> <li>- <b>MSDS:</b> call (800) 451-8346</li> </ul>	<ul style="list-style-type: none"> <li>- Assess and complete report of incident.</li> <li>- Submit report to Safety Officer, Paul Lanier - Security Office x7102</li> </ul>

Code	Description	Initial Response	Follow-up
<b>Code OB</b>	Mother in labor - medical emergency	<b>Code OB Team members respond:</b> - Security, Family Practice Resident, Crit.Care Shift Coord., Lab, OR Nurse, OR Anesthesiologist, Intensivist, Pharmacy, Respiratory Therapy, NICU.	- Assess and complete report of incident. - Submit report to Safety Officer, Paul Lanier - Security Office x7102
<b>Code Earthquake</b>	<b>Earthquake</b> <i>Motion sickness or dizziness may be 1st indication of an earthquake.</i> - DO NOT EVACUATE unless Code Evacuation is activated	<b>DUCK - COVER – HOLD</b> - Rescue persons in - Move patients away from - Lock bed wheels/side rails up/Lower and attach IV to - Leave doors open (unless fire - Disconnect equipment with fire - DO NOT USE ELEVATORS	- Assess and complete report of incident. - Submit report to Safety Officer, Paul Lanier - Security Office x7102
<b>Code Evacuation</b>	<b>Partial Evacuation</b> (Effected Department(s) evacuate to area designated by each department)  <b>Total Facility Evacuation</b> (Evacuate to south-east parking lot)	<b>Internal (Code Announced "Code Evacuation location")</b> - Department - Evacuate laterally or down to a location - Use telephones for emergency communications only - Call Code Manpower if more help is needed  <b>External (Code Announced "Code Facility Evacuation to destination")</b> - Administrator decision only - Incident Commander determines the order in which areas are evacuated - Use telephones for emergency communications only  <b>Evacuation Priority:</b> 1) Immediately Endangered 2) Ambulatory (Walking) 3) Non-Ambulatory (Wheelchair) 4) Bedfast (Critically ill)	- Assess and complete report of incident. - Submit report to Safety Officer, Paul Lanier - Security Office x7102
<b>Code Computer</b>	<b>Computer Virus Response</b>	Immediately save work and log off <u>every</u> computer shutting them down within <b>one minute</b> of the code announcement. If computer will not log off properly, shut it down by pressing the off button or unplugging the machine. All computers are to remain off until the code is cleared. DO NOT call PBX office, wait for them to call each department.	- Assess and complete report of incident. - Submit report to Safety Officer, Paul Lanier - Security Office x7102

Employee Health ..... Ext 7715  
Human Resource Department ..... Ext 7000  
Risk Management ..... Ext 3185

## Specific Guidelines for Supervision of Students in Patient Care Areas

- It is the responsibility of the employed patient care provider to assess the student's competence level and ensure an appropriate level of supervision. Students only perform high-risk skills if there is direct supervision (physically standing next to student). High risk skills include but are not limited to administration of ALL medications, invasive procedures (including IV insertion) complex wound care, inserting tubes, chest tube removal, pacing wire removal, or any high risk skill identified by the student's profession.
- The patient care provider reports promptly to the instructor if the competence level of the student is below what is expected given the clinical experience objectives.
- Medication administration is the responsibility of the patient care provider within appropriate scope of practice. The student may participate in medication administration. The patient care provider is accountable to ensure right medication, right dose, right route, right patient, right time, patient's right to know and right to refuse.
- The RN or LPN patient care provider emphasizes that insulin and heparin dosage must always be checked by a second RN or LPN prior to administration.
- The patient care provider does not direct students to give medications intravenously unless they confirm that the student has completed IV training in the school program (typically no IV's in the first year of nursing school.) After the instructor confirms that the IV training has been completed, the care provider may direct the student to administer IV and IV push medications under the direct supervision of the patient care provider, but may never direct the student to push narcotics, chemotherapy, experimental drugs or medications being used in a drug study.
- The student may not make adjustments to nor set up pain management systems on intravenous pumps.
- The student may NOT carry narcotics keys. Students may assist with end of shift narcotics audits as a learning experience, but CANNOT sign as the second person on the audit form nor sign to receive narcotics from the pharmacy. The employed RN, LPN or Respiratory Care Practitioner documents all narcotic administration.
- The patient care provider validates documentation of care performed by students, including medication administration and other procedures. This is done by cosigning documentation on paper charting or by completing the "Nurse On Duty" option in the computer.
- Patient care departments may have additional guidelines that further define the skills in which students may participate. If this is the case, the patient care provider is responsible to review the guidelines with the instructor and student before the student begins the clinical experience.

## Computer Access

If you need computer access, please complete the computer access form in your Forms Packet. Your supervisor must sign this form before you return it to IHC University.

## Smoking Policy

McKay-Dee has several designated smoking areas. In accordance with the Utah Indoor Clean Air Act, all smoking areas are outside and away from hospital entrances. Canisters for discarded cigarettes have been placed at each location, and a bench is available for sitting. Employees, students, residents, and other hospital personal are encouraged to smoke outside of the loading dock. You can access this point just outside of the A level. Also, for directional purposes patients and family are asked to smoke outside of the emergency room entrance.

## Parking Information

Any person parking on this campus while working is required to park in blue-lined parking stalls. This includes all hospital personnel, all physician office staff, all students/interns, or anyone else working in the building. Parking Permits are required and should be displayed on rear of vehicle preferably rear window driver's side. Parking permits are available by

contacting security 387-7100. The white-lined parking stalls are reserved for patients and visitors ONLY. (see attached map)

## WARNING

Please be advised that a computer program tracks citations received. After receiving two citations, the third citation will result in the towing of the vehicle at the owner's expense.

**QUESTIONS:** If you have any questions concerning parking, please call Security Monday – Friday 8:00 am – 4:00 pm at extension 7100 or 7101.

Thank you for your cooperation





# Urban South Region Region Specific Information

*American Fork Hospital, Orem Community Hospital, Utah Valley Regional Medical Center*

Student Placement Coordinator phone number .....801-357-8735

**Main Hospital Numbers:**

- Utah Valley (UVRMC) .....801-357-7850
- American Fork (AFH) .....801-855-3300
- Orem Community (OCH).....801-224-4080

**Security phone numbers**

- UVRMC .....801-357-7233
- AFH .....801-855-3565
- OCH .....801-357-7233

**Emergency Code Response phone numbers**

- UVRMC .....801-357-5555
- AFH .....801-855-5555
- OCH .....801-714-5555

Employee Health .....801-357-7219

Human Resource Department.....801-357-7035

Risk Management.....801-357-7299

**POCT Training**

Point of Care Testing consists of things such as fecal occult testing and blood sugar testing. Please contact IHC Laboratory Services or Deanna Cleveland at 1-801-357-3759.

**Parking Information**

**UVMRC:** We have secured a safer and slightly more convenient place for students to park. The lot is located east of the hospital block on 300 West, directly behind (south) the strip mall on 1230 North between 200 and 300 West.

Available to students are stalls along the northern edge of the parking lot and east of the covered parking spaces. There are approximately 100 stalls. The sign on the street of this parking area reads: Physicians Plaza, Employees and Service Personnel Only.

NOT AVAILABLE to the students are the covered parking stalls within this parking lot.

In order to access this lot, students must have the student parking sticker (issued through security) visible on the lower left corner of their front windshield. To access the lot when the gate is up, the students need only drive in. When the gate is down, the students will need to push the button on the keypad to raise the gate. The lot is monitored electronically.

**AFH:** Parking for students is available in the west parking lot at the hospital's front entrance. Students should not park in any stalls that are designated for physicians, or those reserved for "Parking By Permit Only." Handicap parking is located near all hospital entrances.

**OCH:** Students are allowed to park in any designated visitor parking area. Students may not park in designated physician parking or those stalls that are reserved for "Parking By Permit Only."



# Southwest Region – Dixie Regional Medical Center

## Facility Specific Information

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Director of Education ..... 435-251-2116

Educator ..... 435-688-5483

Chief Nursing Officer / Assistant Administrator ..... 435-251-4097

Main Hospital number ..... 435-251-1000

### Parking Information

400 East Campus: You can park in the Employee Parking lot on the corner of 600 South and 300 East during the day. You can also park on the street, however we encourage you to use the parking lot since the streets are frequently used by the neighborhoods surrounding us. After 5:00 pm you can park in the hospital lot.

River Road Campus: You can park in any of the blue lined spaces during the day. These spaces are generally at the back of the parking lot and behind the hospital. After 5:00 pm you can park in any space.

### Entering the Hospital

400 East Campus: Please use the entrance on 300 East. This is now the main entrance to the hospital.

River Road Campus: Do not use the ER entrance during the day unless you are doing clinical hours there. Otherwise please use the two front entrances of the hospital. The entrance on the south side puts you the closest to the patient tower. After 8:00 pm you must enter through the ER and check in with security.



**Southwest Region – Garfield Memorial Hospital**  
**Facility Specific Information**

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Student Placement Coordinator..... 435-676-1256  
Main Hospital number ..... 435-676-8811  
Security ..... Ext xx

**GMH Emergency Code Responses**

*Emergency Codes are listed in your Student Orientation manual*

**Dial xxxx – State problem and location**



# Southwest Region – Valley View Medical Center

## Facility Specific Information

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Student Placement Coordinator..... 435-868-5496  
Main Hospital number ..... 435-686-5000  
Security ..... Ext xx

### VVMC Emergency Code Responses

*Emergency Codes are listed in your Student Orientation manual*

**Dial xxxx** – State problem and location



# Rural Community Hospitals

## Facility Specific Information

*Bear River Valley Hospital, Cassia Regional Medical Center, Delta Community Medical Center, Fillmore Community Medical Center, Heber Valley Medical Center, Sanpete Valley Hospital, Sevier Valley Hospital*

### - Bear River Valley Hospital and Care Center -

Student Placement Coordinator Phone number ..... 435-257-4385  
Main Hospital number ..... 435 257-7441

### BRVH Emergency Code Responses

*All emergency Codes are listed in your Student Orientation manual. There are no additional Codes for Bear River Valley.*

#### Dial 331 – State problem and location

Employee Health ..... Ext 4305  
Human Resource Department ..... 435-257-4385

#### Parking Information

Students may park in the main front lot at the hospital, or in the far west lot at the Care Center. Please do not park in the stalls closest to the hospital, Care Center, or outside of the ER. These stalls are for our patients and hospital visitors.

If you are a long-term student with a proxy badge, you may park in the employee lot behind the buildings.

### - Heber Valley Medical Center -

Student Placement Coordinator phone number: ..... 435-657-4378  
Main Hospital Number ..... 435-654-2500

### HVMC Emergency Code Responses

*All emergency Codes are listed in your Student Orientation manual. There are no additional Codes for Heber Valley.*

#### Dial 85 – State problem and location

Employee Health ..... 1-435-657-4377  
Facility Privacy Coordinator ..... 1-800-442-4845  
Human Resource Department ..... 1-435-657-4378  
Risk Management ..... 1-435-657-4374

## **Parking Information**

Students may park in the south employee lot (south of the dock), the southeast employee lot (far east side of hospital campus), or in the main front lot (in the far west stalls on the edge of the parking lot).

- **Do not park in the stalls closest to the hospital;** these are for our patients and hospital visitors.
- **Do not park in the stalls outside of the ER, or the Radiology department** (east side of hospital). These stalls are also for our patients.



# Primary Children’s Medical Center

## Facility Specific Information

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Student Placement Coordinator.....	801-588-4066
	SarahAnn Whitbeck <a href="mailto:sarahann.whitbeck@ihc.com">sarahann.whitbeck@ihc.com</a>
Main Hospital number.....	801-588-2000
Security phone number: .....	801-588-2450
PCMC Privacy Coordinator phone number: .....	801-588-2236
PCMC Human Resources and Employee Recruitment:.....	801-588-2203

### Philosophy

“The Child First and Always.”

### Mission

“To attain the highest levels of excellence in the provision of healthcare for children in an atmosphere of love and concern.”

### Vision

“To provide the highest value for outstanding pediatric care, medical education, child advocacy, and research in the United States.”

### Values:

- Mutual Respect: We treat others the way we want to be treated.
- Accountability: We accept responsibility for our actions, attitudes, and mistakes.
- Trust: We can count on each other.
- Excellence: We do our best at all times and look for ways to do it even better.

### Informatics Instruction

#### Quick Guide to Using Tandem

Tandem is PCMC’s main computer reporting program. Tandem is used to view labs, order labs, order blood, and to access the central line database. This guide should assist the student in viewing labs.

#### To view labs:

- Click on the Help icon
- Enter user name
- Enter password
- Select patient (enter either room number or patient name)
- Push F8
- A screen with all of the labs that have been done on this patient will be displayed at this time. You may choose which labs you wish to view or you may enter ‘CA’, which will prompt the computer to bring up all of the labs.

- You will also have the option of changing the range of labs displayed (i.e., 1 day, 1 week). To do this, push F8.
- You may also switch to another patient in this screen by pushing F12.

## **Hand washing, Hand Antisepsis (Hand Hygiene), and Artificial Fingernails**

### **POLICY STATEMENT:**

To reduce the risk of transmission of infectious organisms, PCMC standards require hand washing, hand antisepsis, and care/condition of fingernails.

### **SCOPE:**

All PCMC staff and volunteers

### **DEFINITION:**

**Artificial Nails:** Substances or devices applied to natural nails to augment or enhance nails. They include, but are not limited to extenders, bonding, acrylic tips, appliqués, wrappings (i.e. silk), tapes, inlays, or jewelry (glued or pierced).

### **PROVISIONS:**

1. Clinical staff (those who have direct patient contact during a shift) must complete a 2-minute wash with soap and water at the beginning of each shift (scrub brush or sponge may be used but is optional). Thereafter, hand hygiene as described below is acceptable. This is a hospital-wide requirement; individual units may have higher requirements.
2. Hands must be washed thoroughly with soap and water when visibly soiled.
3. Hands must be cared for by hand washing with soap and water or by hand antisepsis with alcohol-based hand rub (if hands are not visibly soiled):
  - a. Before and after each work shift.
  - b. Before and after physical contact with each patient.
  - c. After using the toilet.
  - d. Before eating, drinking, or handling food.
  - e. After blowing or wiping the nose, or covering a sneeze.
  - f. Before performing any invasive procedure.
  - g. Before and after contact with wounds, whether surgical, traumatic, or associated with an invasive device (e.g. central line entrance site)
  - h. Before contact with immunosuppressed patients.
  - i. After handling contaminated items.
  - j. After glove removal
  - k. As soon as feasible after contact with blood, body fluids, or other potentially infectious material.
  - l. Whenever hands become obviously soiled.
4. An antibacterial soap (e.g. Chlorhexidine gluconate) should be used for hand washing when caring for a patient with a multiple antibiotic resistant organism (MRO)
5. In the event water supply is interrupted, alcohol-based hand rub solutions should be used.
6. Artificial nails, natural nails, and nail polish:
  - a. All employees should have clean and neatly trimmed fingernails.
  - b. Employees who provide direct (hands-on) patient care (e.g. nursing, RT, PT, OT, phlebotomy, radiology, EKG, OR) and personnel who handle sterile equipment or prepare infant formula must meet the following additional requirements:

- c. ACCEPTABLE: Short, natural nails; nail polish that is not chipped or damaged.
- d. UNACCEPTABLE: Artificial nails, natural nails that could puncture gloves and/or injure patients; chipped or damaged nail polish.
- e. DESCRIPTION OF PROCEDURAL STEPS:
  - To wash hands:
  - Wet hands with running water.
  - Apply soap and lather 10 – 15 seconds using friction.
  - Scrub between finger and under nails.
  - Rinse downward – wrist to fingers.
  - Dry hands with paper towels.
  - Turn tap off with a clean, dry paper towel.

- 7. To use alcohol-based hand rub:
  - a. Apply to dry hands that are visibly free from debris.
  - b. Apply a sufficient amount to wet hands thoroughly (One pump).
  - c. Rub hands together covering the whole surface including nails.
  - d. Allow to dry thoroughly.

**REFERENCES & ATTACHMENTS:**

Centers for Disease Control and Prevention Hand Hygiene Task Force. (2002). Guideline for Hand Hygiene in Health Care Settings. Morbidity and Mortality Weekly Report, 51, R-16.  
<http://www.cdc.gov/mmwr/PDF/rr/rr5116.pdf>

**Safety and Security Information**

**Missing or Unaccompanied Children Visiting the Hospital**

- 1. Children who are visiting or who are outpatients may wander away from their parents.
- 2. Immediately report any missing child to Security by calling x2222. This may not be a kidnapping or abduction attempt, but we won't know for sure until the child is found.
- 3. Ask unattended children, "Where is your Mom (or Dad)?" If they don't know or don't answer, notify Security by calling x2222. Security will assist you in finding/identifying family of the child.
- 4. Be prepared to provide as much of the following information as you can to the hospital operator/Security:
  - Name of child, if known
  - Age
  - Gender
  - A description of the child (hair color, clothing, etc.)
  - Any assistive devices the child may have (hearing aid, wheelchair, cane, etc.)
  - If the child speaks a language other than English
  - How long the child has been missing
  - Where the child was last seen
  - Your name and location

**Code Pink**

- 1. Any PCMC staff or volunteer should initiate a Code Pink response if:
  - You suspect that an unknown person has inappropriately removed a child/infant from a patient room or other area.
  - You suspect that a patient or a child visiting the hospital is missing.

2. Contact the Hospital Operator immediately (dial x2222) and inform the dispatchers of the Code Pink situation, provide the same information as “Missing or Unaccompanied Children Visiting the Hospital” (above).
3. Do not leave the area until a Security Officer arrives and gathers information.
4. When a “Code Pink” is announced, staff and volunteers immediately monitor all exits on each floor and watch stairwells, elevators, and corridors until released by a Security Officer or an overhead announcement.

### **Raising Staff Awareness in the 21<sup>st</sup> Century**

1. What does a terrorist look like? A kidnapper? What makes someone appear suspicious?
  - The person is in an area reserved for staff (utility rooms, staff lounges, supply rooms, the dock, etc.)
  - When asked, the person doesn't have a reasonable answer for why they are in the area.
  - The person may be carrying unusual packages, bags, sacks, etc.
2. Think about the following:
  - Elevators: Pay attention to people who board an elevator with you. Notify Security if any visitor seems suspicious.
  - Secured Areas: Be aware of anybody who “tailgates” or follows another employee through a secured door without using card access. They probably are not authorized to be there. Notify Security if you observe someone using a door they are not authorized to use.
  - Delivery Docks: Notify Security or the Materials Management Manager if you see a truck that looks like it doesn't belong or isn't part of the normal delivery cycle.
3. Call Security immediately.
4. If you DO open a package or letter containing a note that “announces” the contents as a biological agent:
  - Do not panic.
  - Immediately seal the package or letter and place it in a plastic bag or container.
  - Do not shake the object or show it to anyone else in the room.
  - Stay in the room with the package.
  - Close the door to the room, and no one should enter or exit the area.
  - The exposed employee should remain calm and wait for assistance from Security.
  - Security will immediately notify Hospital Epidemiology, Hospital Administration, and the Medical Director. Hospital emergency response will be activated.

Security will notify Engineering to shut off ventilation to the affected area to prevent the potential spread of the biological agent through the ventilation system.

# Primary Children's Hospital

## Student Quiz

*Please complete this quiz and return with your student profile*

1. Your first action when you hear a CODE PINK is to:
  - a. Go to the closest exit
  - b. Report to your supervisor for instructions
  - c. Stay by the phone
  - d. Call ext. 2222
  
2. To prevent security or terrorist threats you should:
  - a. Be aware of your surroundings on a daily basis
  - b. Look for bags and packages that are out of place
  - c. Notify Security of suspicious individuals in the facility
  - d. All of the above
  
3. When you see an unattended child, what should you do?
  - a. Call the Hospital Safety Officer
  - b. Ask the child where his/her parents are & call Security if parents can't be found
  - c. Stay with the child and see if their parents return
  - d. Call the operator and have them announce overhead that there is a lost child
  
4. Which of the following are required as "Standard Precautions" and must be used for every patient regardless of diagnosis?
  - a. Hand hygiene before and after patient contact
  - b. Gloves when touching any body fluids
  - c. Gowns if within patient room
  - d. Answers A & B
  
5. When you become aware a child (patient or visitor) is missing, you should:
  - a. Wait to see if the child returns to the department or if the parents have found the child
  - b. Call the parents immediately
  - c. Being an immediate search of the area
  - d. Call Security immediately at ext. 2222
  
6. Clinical staff must complete a 2-minute wash with soap and water at the beginning of each shift.
  - a. True
  - b. False



# Home Care / Hospice Care Specific Information

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Student Placement Coordinator..... 801-887-6309  
 Security..... 801-408-2000

## HC Emergency Code Responses

*Emergency Codes are listed in your Student Orientation manual; these are in addition to those listed.*

Description	Initial Response
Emergency Contact Number for CODES	Codes will show on your preceptor's pager 1- Standby 2- Call office 3- Come to office 4- Report to alternative (based on region)

Life Threatening Emergency..... 911  
 All other Emergencies..... 801-977-9900  
 Employee Health Nurse..... 801-887-6145  
 Compliance Coordinator ..... 801-887-6756  
 Risk Manager..... 801-887-6756

### Home Care Orientation

A Home Care Orientation is required prior to a student's rotation. Please contact Kate Hanks, Student Placement Coordinator, at 801-887-6309 to schedule your Home Care Orientation.



## Physician Division Specific Information

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Student Placement Coordinator..... 801-442-3980

*The IHCHS Physician Division services several IHC clinical sites. Contact the Student Placement Coordinator, at the phone number listed above, for information relevant to the specific location(s) you have been assigned.*