broadlawns
MEDICAL CENTER

Student Orientation Packet

This orientation packet is designed to provide general orientation and basic safety information to those participating in educational opportunities at Broadlawns Medical Center (BMC).

Those of us at BMC are entrusted with the safety of our students, preceptors, and co-workers. Failure to follow safety policies, inadequate response to unsafe conditions, and lack of preparation for emergencies can put you and others at risk for injury or harm. As part of the BMC team, you have the responsibility for understanding and adhering to the general orientation and basic safety policies outlined on the following pages.

Please read and familiarize yourself with the information provided in this packet.

This must be done one week prior to your first day at BMC. **No exceptions!**

Updated October 2025

Welcome to Broadlawns Medical Center

Behaviors for Service Excellence

At Broadlawns Medical Center, our dedicated staff of over 1,200 employees and 100 physicians work together to provide high-quality healthcare that is coordinated, compassionate and cost-effective. The Broadlawns Medical Center campus includes an acute care hospital, emergency services, inpatient and outpatient services, lab and radiology services, mental health services, specialty clinics, dentistry, and a 24-hour crisis team.

It is a privilege to attend to the healthcare needs of our community, and our top priority is ensuring that high-quality healthcare is accessible and affordable to the patients that we serve. The Broadlawns staff looks forward to attending to your healthcare needs.

In order to achieve our mission and fulfill our vision, BMC needs people who share the values of Broadlawns Medical Center and model the Standards of Excellence. Values are demonstrated through behaviors and attitudes. These behaviors and attitudes establish a shared practice for excellence.

Mission

Medical Center strives to build a healthy community in which there is accessible, cost-effective and high-quality patient care for all.

Vision

People in Polk County reach their full health potential regardless of social position or socially determined circumstance.

Principles of Responsibility

The Principles of Responsibility serve as Broadlawns Medical Center's code of conduct. These are the guiding tenets for Broadlawns Medical Center. These principles represent our values and guide our workplace interactions.

- Do what is right.
- Ensure confidentiality and safety.
- Focus resources on providing optimum patient care.
- Impact the greater good of the community.
- Respect our organization, our patients and our colleagues.
- Represent the organization with the highest standards of professionalism.
- Treat everyone with respect and compassion.
- Be mindful of conflicts of interest and act accordingly.
- Meet or exceed government expectations.
- Voice any questions or concerns that may arise.

Standards of Excellence

Standard: Empathy Actions

- Communicate openly, accurately, and directly with everyone within the organization.
- Treat individuals with respect and dignity.
- Avoid shame or blame, but use opportunity for development and self-growth.

Standard: Enthusiasm Actions

- Commit to and advocate Broadlawns Medical Center's mission, vision, and values
- Be accountable to assure success of our Vital Signs scorecard objectives.
- Promote a positive, productive teamwork environment.
- Seek new learning and development opportunities.

Standard: Ownership Actions

- Be action-oriented; commit to solving the problem.
- Approach situations with an open mind in a non-judgmental, non-defensive manner.

Standard: Responsibility Actions:

- Follow through on commitments.
- Be responsible for keeping my job skills and knowledge current to enhance my productivity and effectiveness.
- Respect and maintain each individual's right of privacy, confidentiality, safety and security.
- Commit to assisting the patient or co-worker even if it is "not my job".

Standard: Adaptability Actions:

- Embrace diversity.
- Demonstrate versatility and flexibility

Standard: Balance Actions

- Work to satisfy the patient and customer while taking into account the resources and needs of the organization.
- Be accountable for actions.

Standard: Resilience Actions

- Give each patient or employee a "healthy attitude free of conflict, bias and negativity."
- Do not participate in gossip or inappropriate criticism of others

Tobacco-Free Environment

As a healthcare organization, staff is responsible not only for the treatment of disease but for taking steps to promote the prevention of illnesses and injuries. It is the mission of all staff to set the standard for and demonstrate healthy lifestyles for the communities in which we serve. Tobacco use is widely recognized as a major preventable cause of many diseases in smokers and non-smokers alike. For these reasons, all health care organizations have been designated as tobacco-free institutions.

- Smoking or otherwise using tobacco products (including cigarettes, cigars, chewing tobacco, snuff, pipes, etc.) on property is prohibited.
- Tobacco use in any vehicle when on property is prohibited. Tobacco use in vehicles by visitors is discouraged.
- The distribution or sale of all tobacco products is prohibited.

All employees, physicians, students, visitors, patients, vendors, contract workers, and volunteers must comply with this policy. You are expected to set the example for patients and visitors by adhering to a tobacco-free environment policy. Violation of this policy will result in you being asked to leave.

Drug-Free Environment

Position Statement: The use or possession of illegal drugs as well as the abuse of alcohol and other intoxicants creates a serious threat to the health and well-being of the user and in some instances to fellow employees, students, and private citizens. Students have a responsibility to provide a work/learning environment free of drugs and alcohol.

In compliance with the Drug Free Workplace Act of 1988, all students are herein notified that the unlawful manufacture, distribution, dispensation, possession or use of a controlled substance is prohibited on the health care organization's premises, in the workplace, or in such places and at such times that the above activities have or could have an adverse effect on work performance or behavior or interferes with the rights and privileges of co-workers or the public.

Criminal Conviction: Any student who receives a criminal drug statute conviction for a violation occurring in the workplace must notify their preceptor and the BMC Student Education contacts within five (5) days of conviction.

Harassment-Free Environment

We are committed to providing a work environment that is free of unlawful harassment, actions, words, jokes, or comments based on an individual's sex, sexual orientation, race, ethnicity, age, religion, or any other legally protected characteristic. Sexual misconduct, both overt and subtle, can create an offensive work environment and is thus prohibited. Specifically, the following conduct is illegal, as defined in the Equal Employment Opportunity Commission's Sexual Discrimination Guidelines:

- Unwelcome sexual advances, requests or physical conduct of a sexual nature when:
  - submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment;
  - submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individual, or such conduct has the purpose or effect of substantially interfering with an individual's work performance or creating an intimidating, hostile or offensive work environment.

If you have a reason to believe that you have been the victim of any type of unlawful harassment, you should immediately report the facts of the incident to your supervisor/preceptor or the BMC Human Resources Director.

Any employee, student or volunteer, engaging in any improper harassment, will be subject to disciplinary action, up to and including discharge.

Student Guidelines:

Parking:

Main Campus parking for students will be at the **River Plaza, located at 2300 Euclid Ave.** Big Dog Shuttle is available to transport from the River Plaza Lot Monday – Friday from 5:30 AM to 6:30 PM every 15 minutes. Primary shuttle contact number is 515-249-8292, secondary is 515-238-7793.

Offsite Locations:

Broadlawns East University Clinic: 2508 E. University Ave. Des Moines, IA **515-282-3278**
Broadlawns Community Clinic at Drake 2970 University Ave. Des Moines, IA **515-216-5100**
Broadlawns Cityville Clinic 580 SW 9th Des Moines, IA **515-282-2489**

Work/Meal Breaks:

Students may eat and/or take breaks in the cafeteria/break room as arranged or agreed upon with your preceptor.

Dress Code:

- Please dress in your school uniform/scrubs.
- Wear closed-toed shoes for clinical areas and all departments must wear socks or hose. No loose-fitting clothing (hoodies, etc.) No legging scrubs, need to be full length (joggers are ok). **Only white or black undershirts**
- No acrylic nails. No jewelry or fingernail polish in OR.
- Facial piercings should be studs (nothing dangling). You should consult with your instructor/preceptor for specific rules relating to dress code in the area or department in which you are working. You are to practice good personal hygiene.

Name Badges:

An identification name badge is to be worn at all times during clinical time at BMC. If you do not have a school ID, you will need to see public safety for temporary badge/sticker.

Reporting to Clinical:

In the event that you are unable to report for your specified schedule please call your preceptor or Clinical Coordinator.

Duties:

Any questions about your duties, hours or other issues should be directed to your preceptor, supervisor, or instructor.

Department Rules:

Ask the preceptor in your assigned department to discuss the following rules that may be specific in that department:

- Food/drink allowed in department
- Break time/Lunch time
- Whom/when to notify if unable to come to work
- Personal phone calls, use of cell phones

Safety Procedures

TO REPORT SUSPICIOUS OR CRIMINAL ACTIVITY, OR TO REQUEST PUBLIC SAFETY ASSISTANCE, CALL EXTENSION:

4736

If calling from outside of the hospital, call 282-4736.

TO REPORT AN EMERGENCY CALL EXTENSION:

350

This line rings to the BMC Operator. There is no way to identify the caller. When calling this number, **please identify where and what the problem is.** This extension should be used for **EMERGENCIES** such as fires, out of control individuals, medical emergencies, or any other Codes.

Emergency Codes and Fire Safety

The following codes are used at Broadlawns Medical Center to alert personnel to emergencies. All codes are announced overhead. The code and its location are preceded by three tones and are announced two times.

Internal OR External Emergency + City Alert OR Decontamination Event + Activate Incident Command:
Major disaster in city. Refer to Disaster Plan. Decontamination Event. Refer to Bio-Terrorism tab.

Missing Child + Description + Hospital staff survey your work areas:
Abduction or missing child.

Patient Elopement or Missing Adult + Description + Hospital staff survey your work areas:
Patient Elopement or missing adult

Medical Emergency + Code Blue + Location:
Any medical emergency including cardiac arrest - child or adult.

Medical Emergency + Code Pink + Location:
Any medical emergency including cardiac arrest - infant.

Security Assistance + Location:
Out of control individual (patient/visitor/staff).

Fire Alarm + Location + Hospital staff activate fire response procedures:
Fire: Actual or drill.

Evacuation + Location + Staff follow evacuation procedures:
Evacuation: Specified area or entire facility.

Attention, Attention + Active Shooter + Location + Clear All Hallways:
An act of violence within the facility. This can include an active shooter, hostage situation, or any other violence that affects patients, visitors, and staff.

Weather Alert + Descriptor + Take immediate precautions:
Tornado or High Wind Warning - take immediate precautions.

Fire Safety

R: Rescue – Move yourself and others in immediate danger to a safe area.
A: Alarm – Activate the nearest fire alarm pull station and call x350
C: Contain – Close doors to contain the fire
E: Extinguish (if trained) or Escape

Tornado Safety

Your preceptor/supervisor will go over the tornado escape route for your area. *Patient Care Areas:* Move patients (who can't be moved to the basement) into an interior corridor; close patient room doors; assure adequate staff is available to care for these patients and those who are directed to the basement.

Electrical Safety

If equipment has been dropped or damaged, do not operate it as a shock hazard may exist. Immediately report any of the following to your preceptor/supervisor:

- **Frayed, worn, burned wire**
- **Broken, bent loose plugs**
- **Loose cable connectors**
- **Loose switches, control knobs**
- **Overheated equipment**
- **Equipment that has produced a shock**

ACTIVE SHOOTER

Broadlawns Medical Center is committed to providing a safe environment for its patients, visitors and staff. In the event an aggressor enters Broadlawns' property with the intent of doing harm, employees, patients and visitors should follow RUN – HIDE – FIGHT:

RUN

Move away from the shooter(s) and sounds of gunfire or explosions. Persons near an exit may choose to leave the building and head for a place of safety away from the shooting.

HIDE

Find the closest area or room that has a lockable door (if possible) while directing patients, visitors and other staff to do the same. Once in the room:

1. Lock all doors and windows. If the door is not lockable, barricade the door if possible.
2. Turn off lights, computer monitors, and other sources of illumination.
3. Lie on the floor away from the doorway and behind or underneath furniture.
4. Remain quiet, and turn off radios and other devices that emit sound.
5. Do not use cell or desk phones, circuits will be needed for critical communications.
6. Do not attempt to contact the BMC Operators, as they too have taken shelter and communication capabilities will be limited or reduced to essential communications.

FIGHT

Only as a last resort, when a person's life is in imminent danger (encounter the shooter in an open area, shooter enters a person's area), should that person attempt to overpower the shooter.

1. Improvise weapons
2. Attempt to incapacitate the shooter
3. Act with aggression

Please read Safety policy S-0417 "Active Shooter" for more information

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OSHA

Occupational Safety and Health Administration

U.S. Department of Labor | OSHA® Occupational Safety and Health Administration

Job Safety and Health
IT'S THE LAW!

All workers have the right to:

- A safe workplace.
- Raise a safety or health concern with your employer or OSHA, or report a work-related injury or illness, without being retaliated against.
- Receive information and training on job hazards, including all hazardous substances in your workplace.
- Request a confidential OSHA inspection of your workplace if you believe there are unsafe or unhealthy conditions. You have the right to have a representative contact OSHA on your behalf.
- Participate (or have your representative participate) in an OSHA inspection and speak in private to the inspector.
- File a complaint with OSHA within 30 days (by phone, online or by mail) if you have been retaliated against for using your rights.
- See any OSHA citations issued to your employer.
- Request copies of your medical records, tests that measure hazards in the workplace, and the workplace injury and illness log.

This poster is available free from OSHA.

Employers must:

- Provide employees a workplace free from recognized hazards. It is illegal to retaliate against an employee for using any of their rights under the law, including raising a health and safety concern with you or with OSHA, or reporting a work-related injury or illness.
- Comply with all applicable OSHA standards.
- Notify OSHA within 8 hours of a workplace fatality or within 24 hours of any work-related inpatient hospitalization, amputation, or loss of an eye.
- Provide required training to all workers in a language and vocabulary they can understand.
- Prominently display this poster in the workplace.
- Post OSHA citations at or near the place of the alleged violations.

On-Site Consultation services are available to small and medium-sized employers, without citation or penalty, through OSHA-supported consultation programs in every state.

Contact OSHA. We can help.

1-800-321-OSHA (6742) • TTY 1-877-889-5627 • www.osha.gov

OneSource Docs | Search

- **Contains all Chemical Inventory Lists, Safety Data Sheets, and IFU's for all products hospital wide.**

Every chemical and every container, regardless of size or purpose is labeled as follows:

❖ **Health Hazard Rating (H) Blue: Risk to health, or severity of injury likely to occur from exposure.**

❖ **Flammability Hazard Rating (F) Red: Degree of flammability or the amount of heat needed before ignition (based on the flash point).**

❖ **Reactivity Hazard Rating (R) Yellow: Degree to which the chemical reacts with other substances (how stable the chemical is – the more stable, the less reactive).**

If you come across an unlabeled container, treat it as if it were hazardous until it is known to be otherwise.

Infection Control

Standard Precautions for All Patient Care

Please go to the above webpage used as the reference for all infection control processes at Broadlawns Medical Center.

Standard Precautions

***Hand Hygiene*- Protects both the healthcare personnel and patients. "Some healthcare personnel may need to clean their hands as often as 100 times during a work shift to keep themselves, patients and staff safe." Please watch the below CDC video before continuing.**

Clean Hands Count (youtube.com)

(ABHS) Alcohol Based Hand Sanitizer	Soap & Water
Put product on hands and rub together. Cover all surfaces and rub until hands feel dry. This should take around 20 seconds. Frequently missed areas are thumbs, fingertips, between fingers.	**Wet hands, apply product. Rub hands together for at least 15-20 seconds covering all surfaces. Rise with water and use disposable towels to dry. Use towel to turn off faucet. Avoid using HOT water to prevent drying of skin.**
• **Unless hands are visibly soiled, ABHS is preferred over soap and water in most clinical situations** • **· More effective at killing germs** • **· Easier to used** • **· Results in improved skin condition- less irritation and dryness** • **· Improves hand hygiene adherence**	• **· Use when hands are visibly soiled** • **· Before eating** • **· After using the restroom** • **· ALWAYS during care of patients with suspected or confirmed *C. difficile* and norovirus**

TECHNIQUE MATTERS WHEN CLEANING YOUR HANDS

ALCOHOL-BASED HAND SANITIZER

It only counts if you use the right amount, the right way.

- Use enough alcohol-based hand sanitizer to cover all surfaces of your hands.
- **You might need more than one pump.**
- For alcohol-based hand sanitizer, your hands should stay wet for **around 20 seconds** if you used the right amount.

Protect Yourself.
Protect Your Patients.

CLEAN HANDS COUNT

Who do your #CLEANHANDSCOUNT for?

CDC

www.cdc.gov/HandHygiene

This material was developed by CDC. The Clean Hands Count Campaign is made possible by a partnership between the CDC Foundation and GOJO.

Gloves- **Are NOT a substitute for Hand Hygiene.**

- **Perform Hand Hygiene *before* donning gloves**
- **Clean your hands *after* removing gloves**
- **Remove carefully as dirty gloves can soil hands**

When to wear gloves:

· When you anticipate you will come into contact with blood or other infectios materials, mucous membranes, non-intact skin, potentially contaminated skin, or contaminated equipment- STANDARD PRECAUTIONS

· When needed for Transmission-based precautions

When to change gloves & clean hands

- · If gloves become damaged
- · If gloves become soiled after a task (ie blood or body fluids)
- · If moving from work on a soiled site to a clean site. Or if a clinical indication for hand hygiene occurs
- · If moving from care on one patient to another patient
- · Before exiting a patient room.

Gowns-

· **Wear a gown, that is appropriate to the task, to protect skin and prevent soiling or contamination of clothing during procedures and patient-care activities when contact with blood, body fluids, secretions, or excretions is anticipated.**

· **Remove gown and perform hand hygiene before leaving the patient's environment.**

· **Do not reuse gowns, even for repeated contacts with the same patient.**

Personal Protective Equipment (PPE)- Mask, Eye protection, Face shield

During procedures and patient-care activities likely to generate splashes or sprays of blood, body fluids, secretions, especially suctioning, endotracheal intubation. During aerosol-generating procedures on patients with suspected or proven infections transmitted by respiratory aerosols wear a fit-tested N95 or higher respirator in addition to gloves, gown and face/eye protection.

Patient-care equipment and instruments/devices & Care of the environment

Wear PPE (e.g., gloves, gown), according to the level of anticipated contamination, when handling patient-care equipment and instruments/devices that is visibly soiled or may have been in contact with blood or body fluids. Handle in a manner that prevents transfer of microorganisms to others and to the environment; wear gloves if visibly contaminated; perform hand hygiene.

Clean and disinfect surfaces that are likely to be contaminated with pathogens, including those that are in close proximity to the patient (e.g., bed rails, over bed tables) and frequently-touched surfaces in the patient care environment (e.g., door knobs, surfaces in and surrounding toilets in patients' rooms) on a more frequent schedule compared to that for other surfaces (e.g., horizontal surfaces in waiting rooms).

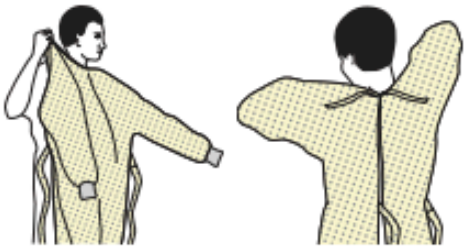
Handle, transport and process linen visibly soiled with blood, body fluids, secretions and excretions with gloves. Prevent contamination of clothing by holding the bag away from you or wearing a gown while transporting. Wash your hands after removing gloves or touching soiled linens

SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist



2. MASK OR RESPIRATOR

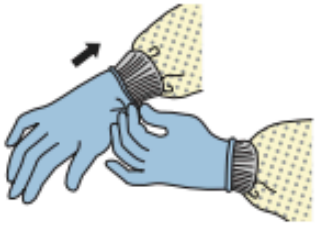
- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator

3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit

4. GLOVES

- Extend to cover wrist of isolation gown



USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION

- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated
- Perform hand hygiene

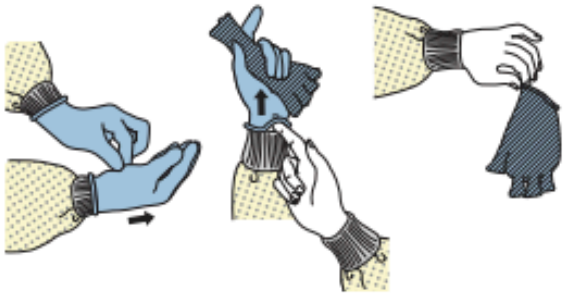
CDC

HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 1

There are a variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GLOVES

- Outside of gloves are contaminated!
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in a waste container



2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band or ear pieces
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container

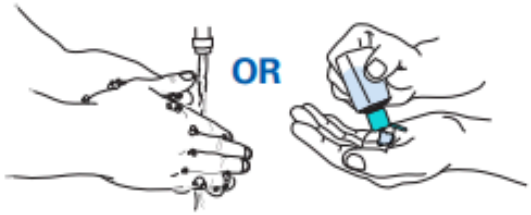
3. GOWN

- Gown front and sleeves are contaminated!
- If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties
- Pull gown away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard in a waste container

4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container

5. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE

CDC

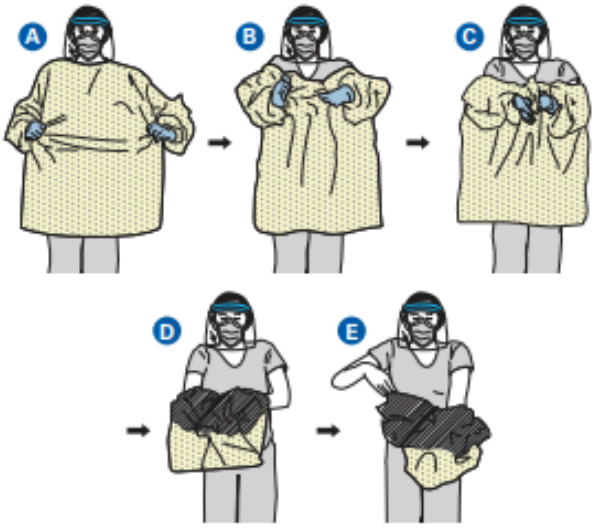
CS250672-E

HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 2

Here is another way to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GOWN AND GLOVES

- Gown front and sleeves and the outside of gloves are contaminated!
- If your hands get contaminated during gown or glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp the gown in the front and pull away from your body so that the ties break, touching outside of gown only with gloved hands
- While removing the gown, fold or roll the gown inside-out into a bundle
- As you are removing the gown, peel off your gloves at the same time, only touching the inside of the gloves and gown with your bare hands. Place the gown and gloves into a waste container



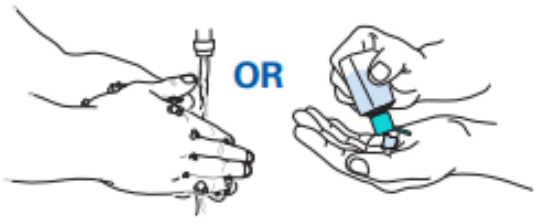
2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band and without touching the front of the goggles or face shield
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container

3. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container

4. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE

CDC

Bloodborne Pathogen exposures and infections

OSHA FACTSHEET PPE REDUCES EXPOSURE TO BLOODBORNE PATHOGENS:OSHA FACTSHEET PPE

· **Prevent sharps injuries by utilizing the safety devices available to you.**

· ***Never* recap needles.**

· **Dispose of sharps in puncture resistant container, immediately after use**

· **Report exposures to your immediate supervisor/instructor/preceptor as soon as possible after they occur.**

· **Medications can be given that may prevent transmission of blood borne disease.**

Transmission Precautions

· **In addition to Standard Precautions, use Transmission-Based Precautions for patients with documented or suspected infection or colonization with highly transmissible or epidemiologically-important pathogens for which additional precautions are needed to prevent transmission.**

· **Extend duration of Transmission-Based Precautions, (e.g., Droplet, Contact) for immunosuppressed patients with viral infections due to prolonged shedding of viral agents that may be transmitted to others**

Contact Precautions 	**In addition to Standard Precautions, use Contact Precautions for a patient known or suspected to have infection with microorganisms that can be transmitted by direct contact. IE-MRSA, Lice, Scabies**	• **· PPE: Gloves, Gowns upon entry to room. Remove prior to leaving.** • **· When possible, keep reusable patient care equipment at patient's bedside. If common use equipment is needed for multiple patients, clean/disinfect prior to using on another patient.** • **· Prioritize frequent cleaning and disinfection (@ least daily) of patient's environment- focusing on frequently touched surfaces.**
	Enhanced Precautions **In addition to Standard & Contact precautions, use enhanced precautions for patients known or suspected to have: Clostridium Difficile or Candida Auris.**	• **· PPE: fit-tested NIOSH-approved N95 or higher level respirator for respiratory protection.** • **· Place patient in an airborn infection isolation room (AIIR) also known as negative pressure isolation room.** • **· Personnel who are susceptible to measles and varicella are not permitted to care for the patient with these diseases.** • **· Surgical mask for the patient for transport only when medically necessary.**

Droplet Precautions

For patients known or suspected to be infected with pathogens transmitted by respiratory droplets that are generated by a patient who is coughing, sneezing or talking IE- Influenza, pertussis, mumps, RSV, Rubella	• · PPE: Don a surgical mask upon entry into the patient room. • · Patient to wear surgical mask during transport. • · When possible, keep reusable patient care equipment at patient's bedside. If common use equipment is needed for multiple patients, clean/disinfect prior to using on another patient. • · Prioritize frequent cleaning and disinfection (@ least daily) of patient's environment- focusing on frequently touched surfaces.

Airborne Precautions

For patients known or suspected to be infected with infectious agents transmitted person-to-person by the airborne route. IE- Covid-19, Tuberculosis, Varicella Pneumonia, Measles	• · PPE: fit-tested NIOSH-approved N95 or higher level respirator for respiratory protection. • · Place patient in an airborne infection isolation room (AIIR) also known as negative pressure isolation room. • · Personnel who are susceptible to measles and varicella are not permitted to care for the patient with these diseases. • · Surgical mask for the patient for transport only when medically necessary.

Confidentiality

No matter where you are working in the health organization, you may hear or see intimate and private information about patients. This information is confidential and must never be disclosed to others except as it is required in caring for the patient.

Use discretion when discussing patient information with other members of the health care team who need to know. Do not use the hallways, cafeteria, elevators, or other open areas as a meeting place to discuss patient information, as there is no guarantee that information will not be overheard by other employees, patients or visitors.

Patients have the right to expect that all communications and records pertaining to their care will be treated as confidential. The patient's right to confidentiality is protected by both federal and state courts.

Health Insurance Portability and Accountability Act

HIPAA

Background:

HIPAA is a law that was passed and went into effect on April 14, 2003. While patient confidentiality has always been a part of healthcare, the original goal of HIPAA was to make it easier for people to move their medical records and get care more easily. One important part of HIPAA is that it focuses on keeping patient information confidential. It is illegal to release any type of health information inappropriately.

What types of information are considered to be confidential?

Patient identity or demographic information such as social security number, address, symptoms or reason the patient is being treated, medications, information regarding the patient's condition and any information regarding past treatments received.

General Rule:

A Patient's Protected Health Information cannot be disclosed to another without the patient's consent.

- Protected Health Information is "any information, whether oral or recorded in any form or medium" that is created or received by a health care provider, health plan, public health authority, employer, life insurer, school or university, or health care clearinghouse"; and "relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual," and that identifies the individual or for which there is a reasonable basis to believe can be used to identify the individual. Individually identifiable health information includes many common identifiers (e.g., name, address, birth date, Social Security Number)

How can I protect patient privacy?

- When performing your job, keep patient privacy in the forefront at all times. (Knock on a door before entering the room, sign off on your computer when not in use, keep the computer screen from being viewed by others, keep records or confidential papers secured and locked up)
- Know the BMC privacy policies
- Do not discuss patients in the hallway or lunchroom .
- Do not share patient information with others who do not have a need to know for their job.
- Shred confidential information; make sure that contents of the shred bins cannot be removed.

When can I release patient information?

- Providers have the right to report a communicable disease to state health agencies.
- Police have the right to certain information about patients if they are a suspect in a criminal investigation.
- The court has the right to order a facility to release information.
- Hospital staff may call funeral directors or coroners when a patient dies.
- Hospital staff must report crime victims, suspicious deaths and gunshot wounds.

How do I report a violation?

- Report violations or suspected violations to the hospital's privacy officer. The violation may be reported anonymously.
- Broadlawns' Privacy & Security Officer – 282-2529
- Corporate Compliance & HIPAA Confidential phone line – 282-5647