



**Orientation Packet**  
**for**  
**Nursing Students and Instructors**

## **Welcome to Thomas Hospital**

While you are here with us, we want you to understand the following information so that you and our patients may remain safe. Please read the following information on our safety plans and emergency codes.

Please complete the Safety Education Assessment.

### **SAFETY EDUCATION INFORMATION** **Safety Plans**

The seven Environment of Care safety plans at Thomas Hospital are listed below:

1. Safety Management Program
2. Security Management Program
3. Hazardous Material (Haz-Mat) and Waste Management Program
4. Emergency Management Program
5. Fire Prevention Management Program
6. Medical Equipment Management Program
7. Utility Systems Management Program

### **Forms**

The forms used for reporting incidents which occur are as follows:

1. The Event Report is used to report incidents involving patients and visitors and should be forwarded to Risk Management.
2. The Employee/Auxiliary Occurrence Report is used to report incidents involving employees or auxiliary. This form should be forwarded to Human Resources.
3. The Unsafe Condition/Hazard Report should be filled out to notify Plant Management of any hazardous and unsafe conditions that exist. This form should

be forwarded to Plant Operations. The problem will be corrected and be reported to the Safety Committee.

Report Forms are available on the nursing units.

## **EMERGENCY CODES**

- The **Emergency Codes** which affect you are:

**Mr. Red** – (Fire) – If a fire is in your patient’s room.....

- R-** Remove your patient from immediate danger
- A-** Call 4444 and report the fire
- C-** Confine the fire (close the door)
- E-** Extinguish the fire (only if the safety of the patient and yourself can be assured)

If the fire is not in your patient’s room, please close the door and remain in your room until there is an “all-clear” announced by the operator.

**Dr. Love** – (Violent Patient) – If your patient becomes violent, use the **emergency call button** found in the bathroom. Call the charge nurse and the Dr. Love team will arrive promptly.

**Code 10** – (Disaster) – Remain in your room until notified by the nursing staff as to what you need to do.

**Code 4** – (Cardiac Arrest) – If your patient has a cardiac arrest, pull the **emergency call button** and initiate CPR. The code team will arrive promptly.

Other codes may be called (Code 1 and Signal 47) which do not directly affect you, so please remain in your room with your patient.

All **Emergency Codes** may be reported from any house phone by dialing **24444**.

### **Safety Management Program**

1. A Safety Committee oversees all safety issues within the hospital setting.
2. Some safety information which is not explained in the seven plans include:

## The Basic Lifting Techniques

- Use wide base of support
- Hold the load close to the center of the body
- Kneel rather than bend
- Turn rather than twist the back
- Lift by bending the knees and using the muscles of the legs rather than the small muscles of the back

## Security Management Program

1. There are three major situations included under the Security Management Program.
  - **Dr. Love** is a violent situation where all available males respond.
  - **Signal 47** is an Infant Abduction  
In your area, cover all exits including stairwells and observe for suspicious individuals with an infant size package.
  - **Hostage Situation – Code 1**
  - **Bomb Threat**
2. In all three major situations, Administration is notified and directs all the decision making processes and responses. Consult the Safety Manual for your individual responsibilities.

## Hazardous Material and Waste Management Program

1. The “Right to Know” law mandates that an employer inform all employees of the chemicals (hazardous materials) with which they may come in contact. **If you spill a hazardous substance in your area, you will need to check the MSDS book.** There is an MSDS (Material Safety Data Sheet) on each chemical located in most departments. The MSDS is divided into eight different sections.
  - I. Identification
  - II. Ingredients
  - III. Physical Data
  - IV. Fire & Explosion Hazard Data
  - V. Health Hazard Data
  - VI. Reactivity Data
  - VII. Spill or Leak Procedures
  - VIII. Special Protection Information
  - IX. Special Precautions – Storage Handling
  - X. Other Information

This information must be available to all personnel on all shifts. Familiarize yourself with where the nearest MSDS book is located in your department. Master books are kept in the ER and Security.

2. The procedure for reporting a Hazardous Materials/Waste exposure is to fill out an **Employee/Auxiliary Occurrence Report** , if an employee or auxilian is involved. An **Event Report** is filled out if the exposure involves a patient or visitor.
3. There are four spill kits which can all be obtained from Purchasing. Housekeeping should be notified for chemical spills involving clean-up of Cidex, OPA, and Mercury. Chemotherapy nurses and pharmacists are trained to use the Chemotherapy spill kit.
3. Needles or other sharps may only be disposed of in a SHARPS container at the point of use.
5. **The most likely transmission sources of HBV and HIV are blood and body fluids containing blood**, which must be cleaned up with either an approved disinfectant or a 1:10 bleach solution. Safety devices have been mandated for use, if appropriate. **The policy regarding recapping of contaminated needles is DON'T**. If recapping becomes absolutely necessary, use of the one-handed method is dictated.
6. Red Bag Trash is for drippy, bloody items only.

### **Emergency Preparedness Management Program**

1. The DISASTER alert code is "**Code 10**". This would include hurricanes, explosions, mass casualties, tornadoes, or floods.
2. Your role in a **Code 10** is to report to your department and wait for further instructions.
3. During emergencies when the telephone system is out of order, communicate via runners and cell phones.
4. Supplies and equipment can be obtained during an emergency by requisitioning from Sterile Processing and using runners.
5. If a **Code 10** is called, the departmental disaster roster will be activated. If your home phone is out of order, come in to the hospital.

### **Fire Prevention Management Program**

1. The nearest fire extinguisher and pull station on your unit varies. You must be able to locate the fire extinguisher and pull station nearest your work area. Pull

stations are usually located near the exit doors. Fire extinguishers are in the nursing stations and kitchen area on your unit.

2. In the event there is a fire (**Mr. Red**) , your primary duties are **R-A-C-E**:

**R – Rescue** anyone in immediate danger  
**A – Alarm** (activate the fire alarm and call 24444)  
**C – Confine** the fire (by shutting doors)  
**E – Extinguish** the fire (if your safety can be assured)

3. To use a fire extinguisher, remember to **P-A-S-S**:

**P – Pull the pin**  
**A - Aim at the base of the fire**  
**S – Squeeze the handle**  
**S – Sweep the base of the fire**

4. **Your duty when you hear the fire alarm sound is to listen for the location and respond according to your unit specific plan.** If you have been designated, take a fire extinguisher to the fire location.
5. A smoke compartment is a safe area behind a fire door (which closes when the fire alarm sounds) away from the point of fire.
6. An evacuation is ordered only by Administration or their designee. Your role in preparing for building evacuation varies depending on your department and job category. You must know your role. Patients are evacuated via ambulatory, wheelchair, stretchers, blanket pull, or one or two man carry, depending on the safety need of the patient.
7. **Visitor evacuation is the same as patient evacuation.**
8. Do not enter a room where a fire is behind a door if the door is hot to touch. Prevent smoke from entering an area by placing a wet towel at the bottom of the door.
9. Respiratory Therapy makes the decision to turn off medical gases in all areas of the hospital except in the OR, Cath Lab or Recovery. The senior clinical person turns gases off in these areas, if the Fire Department deems it necessary.

### **Medical Equipment Management Program**

1. The Bio-Med Department focuses on medical equipment which is used for patient care while Plant Operations Department focuses on building repairs. **All equipment must have a green Thomas Hospital safety sticker.**
2. **Faulty medical equipment is reported to Bio-Med via computer.**

3. The procedure for reporting patient incidents involving equipment is to fill out an Event Report and forward it to Risk Management.
4. If an IV pump fails on a patient you are caring for, you would change out the IV pump, send a request via computer, and tape a note to the faulty machine before sending it to decontamination.
- 5.
6. **For ICU RN/LPN only:** If a ventilator failed on a patient you were caring for, you would bag the patient and notify Respiratory Therapy STAT. A Respiratory Therapist would immediately bring another ventilator and exchange them out. After the crisis was over, the malfunctioning ventilator would be taken to Respiratory Care for a pressure check to determine the cause of the problem. If the Respiratory Therapist was unable to correct the problem, the Bio-Med Department would be notified as well as the service representative for the company if necessary.

### Utility Systems Management Program

1. To report a faulty utility (**Gases, Electrical, Power, Water**), send a requisition to Plant Operations via fax or work order. Weekend requests must be faxed.
2. All red outlets are used for emergency power.
3. If a gas alarm goes off in your area, you need to call Plant Operations, who in consultation with respiratory, anesthesia, and the nursing supervisor can cut off medical gas, if required. The medical gas cut off valves are labeled in your area.
4. **For ICU, OR, ER, SICU, Open Heart Unit & Endoscopy only:** There is isolated power in these units and they are designed to minimize the potential for an electric shock. If the isolated power system alarms, you should unplug the last piece of equipment plugged in and call Plant Operations.

## *Thomas Hospital Safety Education Assessment Follow-Up*

Student Name: \_\_\_\_\_

College of Nursing: \_\_\_\_\_

Date: \_\_\_\_\_

**The seven Environment of Care safety plans at Thomas Hospital are listed below:**

(Match them with the appropriate items listed to the right)

- |   |  |
|---|--|
| _____ 1. Safety Management Program              | a. MSDS  |
| _____ 2. Security Management Program            | b. Mr. Red   |
| _____ 3. Hazardous Material and Waste (Haz-Mat) | c. All equipment must have a Management Program green Thomas Hospital safety sticker |
| _____ 4. Emergency Management Program           | d. Signal 47   |
| _____ 5. Fire Prevention Management Program     | e. Code 10   |
| _____ 6. Medical Equipment Management Program   | f. Safety Committee Meeting  |
| _____ 7. Utility Systems Management Program     | g. Gases, Electrical, Power, Water   |

**Directions:** Select the one most appropriate answer unless otherwise instructed.

1. The **Event Report** is used to report incidents involving
  - a. Patients and visitors
  - b. Employees
  - c. Auxilians
  - d. All of the above
  
2. The **Employee/Auxiliary Occurrence Report** should be forwarded to
  - a. Human Resources Department
  - b. Risk Management Department
  - c. Quality Management Department
  - d. Plant Operations Department
  
3. The **Unsafe Condition/Hazard Report** should be forwarded to
  - a. Human Resources Department
  - b. Risk Management Department
  - c. Quality Management Department
  - d. Plant Operations Department
  
4. The basic principles of proper lifting techniques are: (Circle all correct answers)
  - a. Using wide base of support
  - b. Holding the load close to the center of the body
  - c. Kneeling rather than bending

- d. Twisting the back
  - e. Lifting by using the muscles of the back
5. For all emergency codes, you should dial \_\_\_\_\_.

### Security Management Program

6. Dr. Love is a violent situation where all available males respond  
TRUE FALSE
7. For the following security situations, Signal 47, Hostage situation (Code 1), or Bomb Threat, you should notify:  
a. Administration  
b. Risk Management Department  
c. Plant Operations Department  
d. Purchasing Department
8. A Signal 47 is the code for an Infant Abduction  
TRUE FALSE

### Hazardous Material and Waste Management Program

9. How do you report a Hazardous Materials/Waste exposure if a patient or visitor is involved:  
a. Employee/Auxiliary Occurrence Report  
b. Event Report  
c. Unsafe Hazard Condition Report
10. How do you report a Hazardous Materials/Waste exposure if an employee is involved:  
a. Employee/Auxiliary Occurrence Report  
b. Event Report  
c. Unsafe Hazard Condition Report
11. If you spill a hazardous substance in your area, what do you do first?  
a. Check the MSDS book  
b. Call Housekeeping  
c. Call Plant Operations  
d. Call Dietary
12. The policy regarding recapping needles states not to do what?
- 
13. Where do you dispose of needles and other sharps?  
\_\_\_\_\_



14. The most likely transmission sources of HBV and HIV are \_\_\_\_\_ and \_\_\_\_\_.

### Emergency Management Program

15. The Disaster alert code is "Code 10".  
TRUE                      FALSE
16. Your role in a "Code 10" is to report to your department and wait for further instructions.  
TRUE                      FALSE

### ***Fire Prevention Management Program***

17. If there is a fire, your primary duties are R-A-C-E. What does each letter represent?  
R - \_\_\_\_\_  
A - \_\_\_\_\_  
C - \_\_\_\_\_  
E - \_\_\_\_\_
18. Your duty when you hear the fire alarm sound is to listen for the location and respond according to your unit specific plan.  
TRUE                      FALSE
19. A smoke compartment is a safe area behind a fire door (which closes when the fire alarm sounds) away from the point of fire.  
TRUE                      FALSE
20. Visitor evacuation is the same as patient evacuation.  
TRUE                      FALSE

### ***Medical Equipment Management Program***

21. Faulty equipment is reported to \_\_\_\_\_.
22. The procedure for reporting patient incidents involving equipment is to fill out \_\_\_\_\_ and forward it to \_\_\_\_\_.
23. **For ICU RN/LPN only:**  
If a ventilator failed on a patient you were caring for, you would \_\_\_\_\_ and \_\_\_\_\_.
24. **For Respiratory Therapy only:**

If a ventilator failed on a patient and the nurse notified you STAT, you would immediately \_\_\_\_\_. After the crisis was over, you would take the malfunctioning ventilator back to Respiratory Care for a \_\_\_\_\_. If they were unable to correct the problem, you would notify the \_\_\_\_\_ Department.

#### Utility Systems Management Program

25. To report a faulty utility, send a requisition to \_\_\_\_\_.
26. The red outlets are \_\_\_\_\_.
27. If the medical gas alarm goes off in your area, you need to call:  
\_\_\_\_\_.
28. **For ICU, OR, ER, SICU, Open Heart Unit & Endoscopy Only:**  
There is isolated power in these units and they are designed to minimize \_\_\_\_\_.
29. If the isolated power system alarms, what should you do?  
\_\_\_\_\_  
\_\_\_\_\_.



## ***ETHICS AND CONFIDENTIALITY INFORMATION***

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- *Physicians alone have the training and legal right to diagnose and treat patient illnesses and injuries.*
- *All information regarding patient, physicians or Thomas Hospital business is confidential. Such information may be disclosed only to appropriate Thomas Hospital personnel and may not be discussed outside the hospital. Even casual conversation with employees or other volunteers may be overheard and may, thereby violate the confidentiality of such information.*
- *Inquiries from the press or other outside sources concerning patients, physicians, or Thomas Hospital business should be referred to Public Relations. This is most important.*
- *Do not give any advice to the public, patients or staff concerning the selection of a physician. You may, however, indicate what physicians are on the Thomas Hospital Medical Staff without implying a preference.*
- *All information regarding personnel issues, including salary information, is considered confidential and shall not be discussed with other hospital employees, physicians or outside of Thomas Hospital.*

### ***Confidentiality Statement***

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I understand and agree with, that in my association with Thomas Hospital, I must hold in confidence all medical information and all other items of information relating to patients and business operations. Further, I understand that intentional or involuntary violations of confidential medical or other information may result in punitive action.

**Signature of student:** \_\_\_\_\_

**Date:** \_\_\_\_\_

