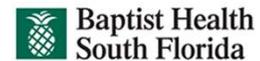


Student and Resident Orientation for Baptist Health

Baptist Health South Florida Office of Academic Affairs

Updated December 2021



Welcome



As the Chief Academic Officer for Baptist Health South Florida, I wish to welcome you as you begin your rotation. As the largest healthcare provider in the region, with over 1 million patient encounters annually from West Palm Beach to the Florida Keys, we support over 9,000 student and resident rotations each year.

We have worked to ensure that each of our facilities will be an extraordinary place to learn and grow. We are committed to continuously nurturing a culture of collaboration and engagement focused on delivering high-quality patient- and family-centered care.

If we can do anything to further enhance your experience during your time with us, please let us know.

Cordially,

Javier Hernandez-Lichtl
Chief Academic Officer, Baptist Health South Florida
Chief Executive Officer, Doctors Hospital

Orientation Objectives



By participating in a rotation at Baptist Health, **you** are a part of the Quality and Safety program, **you** are contributing to the patient's experience and **you** are responsible for upholding our high standards of excellence.

After reviewing this document, you should understand Baptist Health's policies and expectations related to:

1. Patient and Family Experience
2. Safety and Security
3. Risk Management
4. IT Access and Documentation
5. Educational Guidelines

1. Patient and Family Experience

Patient- and Family-Centered Care, Communication and Patients' Rights

Patient- and Family-Centered Care



Patient- and family-centered care is our hallmark. It is how we incorporate the experience, insights and perspectives of patients and their families into the care we provide. But it goes beyond care, to include the facility design and our program and policy development.

To ensure the satisfaction of our patients and their families, many of our facilities offer special features including:

- Open visitation hours
- Wi-Fi
- Room service food delivery
- Soothing ambient sounds
- Chapel services

At Baptist Health we want our patients and guests to feel like family by treating them that way. We are committed to providing compassionate, high-quality care with a focus on excellent service, along with a sense of family and comfort. This is the reason so many of our patients trust us and return for care.

Communication Expectations



We only get one chance to make a positive first impression on our patients and guests.

First impressions make a difference. To sustain a strong service culture, it is important for us all to remember certain key behaviors that drive patients' perception of care:

- Speak clearly and avoid jargon
- Escort people to where they need to go rather than pointing or giving directions
- Be familiar with culturally appropriate styles and gestures
- Maintain a well-groomed and professional appearance
- Try to anticipate the patient's or guest's needs before they ask
- Greet everyone whom you encounter with a smile

AIDET is a framework for communicating with patients and guests.

A: Acknowledge the patient and guest in the room with a smile and use their names.

I: Introduce yourself and explain your role in the patient's care plan.

D: Keep in touch often to ease waiting times. Set expectations for the **duration** before their next encounter with a staff member or provider.

E: Explain what you are doing, how the procedure works and whom to contact if they need assistance.

T: Thank people for their patronage, help or assistance.

Communication Expectations



If you are having trouble communicating with a patient or his or her family, don't wait!



Contact your preceptor or the unit nurse to assist you or the patient/family in a timely fashion.

Patients' Rights



Patients have the following basic human rights, and they must be given a document with these listed when they come to our facilities. You must know about these rights in order to honor them.

All patients have a right to:

- Respect and dignity
- Privacy and confidentiality
- Freedom from abuse and neglect
- Control their own money
- Choose their own provider(s)
- Make decisions about their medical care
- Competent care
- Religious and social freedom
- Accurate bills for services provided
- Complain and be heard

2. Safety and Security

Safety Codes and Badge Access

Safety



Baptist Health strives to provide a safe and educational environment for all visitors. It is understood, however, that the hospitals cannot totally eliminate certain risks (exposure to infection, injury, unpleasant sights, sounds, odors, etc.).

By following the organization's safety protocols, you will help us maintain the environment we strive to provide for our patients and families.

Safety Codes



CALL #7777 FOR ALL EMERGENCY CODES

Code	Emergency Code Definitions
Blue	Cardiac Arrest
Rescue	Patient Clinical Deterioration
HELP	Patient or Family Requesting Immediate Medical Assistance
Pink	Neonatal Clinical Deterioration
Purple	Pediatric Clinical Deterioration
Stork	Missing Infant Under 28 Days Old
Adam	Missing child Over 28 Days Old
Orange	Unattended Delivery
Red	Fire
Black	Bomb Threat
Green	Combative Person
Silver	Active Threat/Active Shooter
White	Hazardous Spill
9	Non-patient Injury (inside building)
250	Non-patient Injury (outside of building)
Delta	Internal/External Disaster

Code Rescue - Clinical Deterioration



Code Rescue is the term utilized across the system to alert a specially trained team to respond to a patient who is in distress and requires immediate intervention. Code Rescue will be initiated by dialing #7777 for any of the following situations:

SYSTEM	PRESENTATION
Respiratory	<ul style="list-style-type: none"> Rate < 8 or > 36 New onset difficulty breathing New pulse oximeter reading less than 90% for more than 5 minutes (unless patient known to have chronic hypoxemia on previously prescribed oxygen)
Heart Rate	<ul style="list-style-type: none"> < 40 or > 140 with new symptoms; or rate > 160
Blood Pressure	<ul style="list-style-type: none"> Systolic < 90 or > 200 Diastolic > 110 with symptoms (neurological change, chest pain, difficulty breathing)
Acute Neurological Change	<ul style="list-style-type: none"> Acute loss of consciousness New onset lethargy or difficulty waking Sudden trouble walking, dizziness, loss of balance or coordination, or collapse Seizure Sudden loss of movement (or weakness) of face, arm or leg, especially on one side of the body Sudden confusion, trouble speaking or understanding Sudden severe headache with no known cause Sudden trouble seeing in one or both eyes
Other	<ul style="list-style-type: none"> Multiple stat pages required to assemble the team needed to respond to a crisis Patient complaint of (cardiac) chest pain, (unresponsive to nitroglycerine, or MD unavailable) Color change (of patient or extremity); pale, dusky, gray or blue Unexplained agitation for more than 10 minutes Suicide attempt in progress Uncontrolled bleeding Bleeding into airway Narcan use without immediate response

Code Green - Combative Person



Hospitals can be highly stressful environments. You may encounter a patient or family member who becomes upset and verbally or physically intimidating to you, another patient or a staff member. It is important to deal with this potentially volatile situation appropriately.

Control of Combative Individual (Patient or Non-Patient) Procedure:

- Call #7777 and tell the operator to page a "Code Green" and the location
- The Code Green Team will respond to the location
- Before the Code Green Team arrives, reassure the patient **without trying to control him or her physically**. Other patients and unnecessary personnel should be removed from the area, and the patient's physician will be called to obtain appropriate orders
- Upon Code Green Team arrival, a plan of action will be followed
- A report must be completed and sent to the office of Risk Management within three business days

Code White - Hazardous Spill



Hazardous spills can present both an exposure and a fall hazard.

A **major spill** has occurred under the following conditions:

- A life-threatening condition exists, requiring the assistance of emergency personnel
- The condition requires the immediate evacuation of all employees from the area or the building
- The spill involves quantities greater than 2.0 liters
- The contents of the spilled material is unknown
- The spilled material is highly toxic, biohazardous, radioactive or flammable
- Physical symptoms of exposure can be felt

If you've identified a major spill:

- Do not inhale, if possible, and quickly determine what spilled.
- Evacuate the personnel in the area and close all doors.
- Notify a supervisor and other people in the immediate area and dial #7777 - Code White. Report name of spilled chemical (if known), amount spilled, and location.
- Stand by the area of spill to direct emergency response personnel. If any special hazard, such as flammability, corrosiveness or toxic fumes, exists, notify emergency personnel
- Re-enter area only after spill has been eliminated

Code Red - Fire Safety



In case of fire, remain calm; it is important to prevent panic. This will be easier if you know the fire emergency plan, know the location of fire equipment, alarms and exits, and participate fully in fire drills. It is your responsibility to know where the fire extinguisher and fire exits are for each department in which you are rotating. **If you are unsure, ask your preceptor.**

	What to do if you suspect a fire		How to operate a fire extinguisher	
Fire Safety Procedures	R	Rescue	P	Pull
	A	Alarm	A	Aim
	C	Confine	S	Squeeze
	E	Extinguish/Evacuate	S	Sweep

Code Red - Fire Safety



Remember “**R.A.C.E.**” in the event that there is a fire:

- **Rescue** anyone in immediate danger from the fire. Move patients horizontally first. If a whole floor is in danger, move to the next lower floor. Never use elevators to evacuate. Evacuate ambulatory patients first to reduce confusion and congestion.
- **Alarm** your coworkers by dialing #7777 or activating the fire alarm box. Report a “Code Red” and give the exact location.
- **Contain** the fire by closing all doors and windows. Shut off air-conditioning and fans, if possible.
- **Extinguish** a small fire, if possible, with an ABC fire extinguisher or smother it with a blanket.

Fire Safety - Fire Extinguisher



Remember "P.A.S.S." to operate a fire extinguisher:

- **P** - Pull the pin from the handle
- **A** - Aim the nozzle at the base of the fire
- **S** - Squeeze the handle to operate
- **S** - Sweep from side to side along the base of the fire

Security - Badge Access



Students and residents will be issued Baptist Health identification badges that **must be worn at all times**. Badges will be printed by the Security office, and should:

- Be worn above the waist
- Not be covered by any other student or institution badge
- Not be punctured or defaced
- Be accompanied by a "Badge Buddy" card if issued by the Security Office
- Be turned in at the end of your rotation. Not returning your badge may result in a fee

Badges will grant you access to entrances and elevators at all facilities. Surgical Services access is granted separately by the surgery department director upon completion of the department's orientation, usually on the first day of your rotation.

Badges are required to be returned at the end of the experience to the security office. Failure to do so will result in an invoice for the lost badge fee. If you are experiencing trouble with your badge access, please call 786-467-2633.

3. Risk Management

Incident Reporting, Infection Control, Exposures and Patient Identification

Incident Reporting



The primary purpose of the Risk Management/Patient Safety Departments is to maintain a safe and effective healthcare environment for patients, families, visitors, employees and physicians, thereby reducing harm to patients and loss to the organization.

An **incident** is any unanticipated occurrence, accident, or event that has caused injury, has the potential to result in injury, or is not consistent with the routine operations of providing healthcare services. Some examples of "incidents" involve:

- Falls by patients or visitors
- Medication errors, such as. wrong dose
- Professional misconduct
- Failure to obtain consent
- Failure to obtain consent to administer blood or obtain two signatures before administering
- Environment of Care, e.g., unsecured sharp, medications
- All incidents must be reported to your preceptor immediately.
- You should create an incident report as soon as possible. The online reporting system can be found via the Baptist Health intranet. For assistance, please call 786-467-2633.

Infection Control



As part of our commitment to patient safety and infection control, **you may not participate in your rotation if you:**

- Are experiencing any flu-like symptoms or symptoms of any other contagious illness
- Are COVID-19 positive or have recently been exposed to someone who is confirmed or presumed COVID-19 positive
- Have a draining lesion (including fever blisters, conjunctivitis, etc.)
- Are experiencing symptoms of respiratory or gastrointestinal infection, or other infectious disease
- Are wearing acrylic nails

Hand-washing is the single most important factor in preventing the spread of disease and should be done:

- Upon arrival at your rotation site
- Upon arriving at and leaving each patient's room
- Before leaving the restroom
- Before and after eating
- After removing gloves

- Routine hand-washing requires vigorous rubbing together of all surfaces of lathered hands for at least 20 seconds, followed by thorough rinsing under warm running water. Dry your hands with paper towels and use the towel to turn off the faucet.
- An alcohol-based hand rinse can be used when sinks are not readily accessible and/or to enhance hand-washing. In the case of a patient with suspected clostridium difficile infection, routine hand-washing should be practiced as described above.

Personal Protective Equipment (PPE) Guidelines/Practices



- Universal masking is **required** at all Baptist Health South Florida facilities.
- All individuals entering BHSF facilities including employees, medical staff, vendors, visitors and patients, are required to wear a face mask for source control while in the facility.
- Universal use of eye protection:
 - The CDC recommends the universal use of eye protection by healthcare workers in areas with moderate to substantial community transmission.
 - All Baptist Health caregivers providing direct patient care are **required** to wear eye protection, regardless of COVID-19 and/or vaccination status of the patient.



Different patient care areas and different tasks can require different PPE ensembles to provide adequate protection.

Our “**What PPE to Wear to Stay Safe**” chart defines what combination of PPE is appropriate for different settings and tasks.

Note: Eye protection is required for all direct patient care activities (COVID and non-COVID).

PERFORM HAND HYGIENE BEFORE AND AFTER USING PPE

	Eye Protection/ Face Shield	Gown	Gloves	Medical-Grade Surgical Mask**	Respirator
Follow Standard and Transmission-Based Precautions if required in accordance with CDC's Guidelines for Isolation Precautions and OSHA's Subpart J, Personal Protective Equipment (1910.132-1910.140).					
Minimum PPE to use during any patient contact (not providing direct/ prolonged care) Note: In addition, follow noted Standard/Transmission-Based precautions for patients under isolation precautions, when applicable.	 Choose One				
Direct patient care (in any unit/area) for a patient with a Suspected or Confirmed COVID-19 Status (i.e., patient does NOT meet CDC criteria for discontinuation of isolation and precautions)*** (physical assessments, vital signs, auscultation, medication administration, and other non-aerosol generating procedures/ non-invasive care)	 Choose One				
Invasive Care and/or Aerosol Generating Procedures* for a patient with a Suspected or Confirmed COVID-19 Status (i.e., patient does NOT meet CDC criteria for discontinuation of isolation and precautions)*** Note: PAPR use is permissible IF user is trained!	 Use Both Goggles and Face shield				
Prolonged and/or close contact when transporting a patient or Security responding to combative person with a Suspected or Confirmed COVID-19 Status Note: Remove gloves and gowns during transport outside of patient's room	 Choose One				
EVS in patient room following discharge of a patient with a Suspected or Confirmed COVID-19 Status Follow required room wait time, as appropriate. Follow enhanced room disinfecting and cleaning protocol.	 Choose One				
Patient-facing Greeter/ Registration/ Front Desk/ Security/ Screener, when physical barrier/ Plexiglas was infeasible (AND not prolonged/ close contact) Screeners to wear gloves while performing temperature checks.	 Choose One				

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Respiratory Protection Basics



Procedure Masks

Procedure masks traditionally have ear loops and are intended for use outside of the operating room.



Surgical Masks

Surgical masks traditionally have surgical ties and are close-fitting. Recommended for use in the operating room.



- ❑ Procedure and surgical masks are generally used to reduce the risk of pathogen transfer between individuals.
- ❑ Masks accomplish this by covering the mucous membranes of the nose, mouth, and lungs with filtering materials, and the eyes, where applicable, with a visor.
- ❑ They can be used as protection for asymptomatic individuals or as a way to contain droplets from symptomatic individuals (source control).

Masks vs. Respirators



	Procedure/Surgical Mask	N95 Respirator
Intended Use and Purpose	Fluid resistant and provides wearer protection against droplets, splashes, or sprays of bodily or other hazardous fluids. Protects the patient from the wearer's respiratory emissions.	Reduces wearer's exposure to particles including small particle aerosols and large droplets (only non-oil aerosols).
Fit Testing Requirement	No	Yes
Use Limitations	Disposable (NOTE: reference PPE conservation guideline)*	

4/6/20 #1.0

*CDC: COVID-19, Strategy for Optimizing the Supply of PPE

Healthcare vs. Industrial-Grade Respirators



Healthcare-Grade N-95 respirator: NIOSH certification **MUST** appear on the device. Provides protection to the wearer and the patient and is appropriate for staff respiratory protection where a sterile field must be maintained (e.g., Surgery, Cath Lab, Interventional Radiology, Labor/Delivery, etc.).



Industrial-Grade N-95 Respirator: NIOSH Certification **MUST** appear on the device. **Cannot be used where a sterile field must be maintained due to UNFILTERED exhalation port.** Currently used in healthcare by special FDA authorization during Covid-19-related healthcare respirator shortages

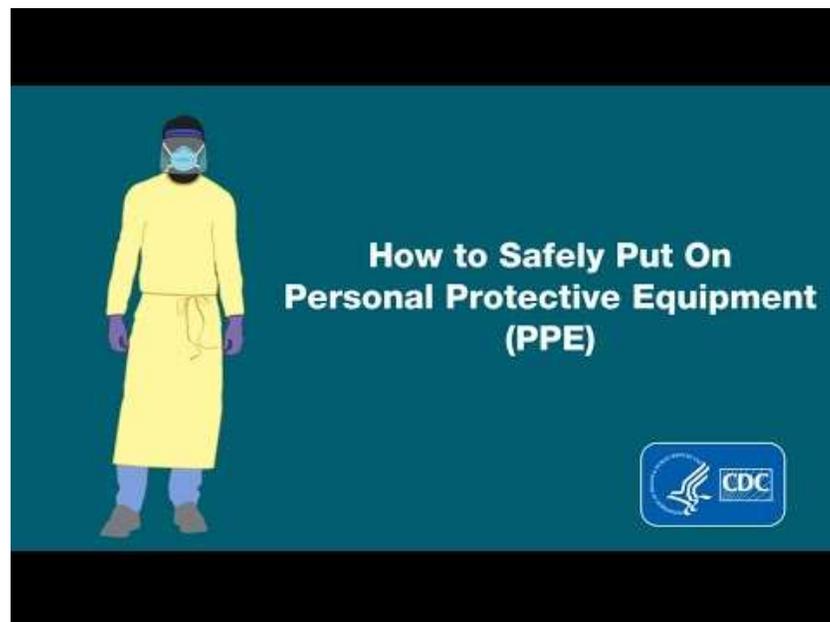
Aerosol-Generating Procedures (AGPs)



- Certain clinical procedures are known to produce potentially infectious aerosols that can persist in the environment for longer periods than droplet-borne hazards.
- Such procedures include (but are not limited to):
 - Intubation and extubation
 - Bronchoscopy and endoscopy
 - CPAP and BiPAP
 - Bag-valve-mask ventilation
 - Nebulizer treatments
 - Sputum induction
 - Bedside swallow evaluation
 - High-flow nasal cannula O2 delivery

During AGPs on any patient who is confirmed or under investigation for Covid-19:

- **Only necessary personnel should be present.**
- All staff present must use the appropriate PPE ensemble:
 - An air-purifying respirator (fit tested, inspected and user seal checked prior to entering the hazard area)
 - Goggles **and** face shield
 - Splash protection for body and hands (AAMI level 3 or 4 isolation gown and gloves)
 - Unless a patient's clinical status dictates otherwise, observe a 30-minute waiting period after the AGP is completed before transporting the patient from the room or allowing additional staff to enter.
 - This waiting period will allow aerosolized particles to dissipate and reduce the level of hazard present.



PPE Conservation Strategies



- Conservation strategies:
 - Industrial respirators and reusable gowns may be used when appropriate.
- Extended/Limited Reuse: When appropriate, extended use and limited reuse of the following PPE devices in all patient care units (except surgical/sterile environment), are allowed:
 - Eye and face protection and isolation gowns (if gown is non-reusable, extended use only).
 - Never extend the use of a face-filtering respirator (e.g., N95, non-reusable industrial respirators, etc.) beyond one shift.
 - Non-reusable face-filtering respirators cannot be shared by other individuals

What PPE Is Not Permitted by Baptist Health?



- To ensure the protection of our employees, patients and visitors, the PPE used within any Baptist Health facility **must** be issued by that facility.
 - As we cannot verify that personal PPE (i.e., brought from home) provides adequate protection for staff or adequate source control for patients/visitors, **only** the hospital-issued PPE will be permitted.
 - Upon arrival, all medical staff, employees and visitors with personal face masks or respirators will be required to remove them and don hospital-supplied PPE.
- Policies and procedures are in place for refusal to comply by employees, physicians and visitors.
 - Additional information on these policies and procedures is available from leadership, supervisors and infection control practitioners at each Baptist Health clinical facility.

CDC Guidelines for Discontinuation of Isolation and Precautions



CDC guidelines for discontinuation of isolation and precautions are as follows:

- 10 days after mild or moderate symptom onset and resolution of fever for at least 24 hours, without the use of fever-reducing medications, and with improvement of other symptoms.
- For persons who never develop symptoms, 10 days after the date of their first positive PCR test for COVID.
- If in doubt regarding history of moderate vs. severe COVID-19 diagnosis, may discontinue isolation/precautions after 20 days.

Exposures



If you are exposed to bodily fluids (fluid splash, needle stick, etc.), you must immediately notify your preceptor and:

1. Perform first aid, including flushing the site of exposure with water
2. Proceed to the nearest hospital emergency department for assessment and treatment
3. Follow up with your home institution and primary care provider

You are responsible for the payment of fees associated with the diagnostic and therapeutic services from exposures and injuries, including filing health insurance claims.

Patient Identification



Step 1: Ask your patients to tell you:

- Their name
- Date of birth

Step 2: Match patients' verbal information with the patient name and date of birth on identification band.

Step 3: Verify these 2 identifiers - patient name and date of birth - with your order, requisition or screen.

Speak Up!



If at any time you are unsure of your role, or suspect a safety issue, speak up! You are participating in an educational program and you should feel comfortable asking for guidance from your preceptor or the unit staff.

I am **C** ONCERNED!
 I am **U** NCOMFORTABLE!
 This is a **S** AFETY ISSUE!
"Stop the Line"

4. IT Access and Documentation

IT Access and Medical Records Documentation

Information Technology (IT) Access



As part of your rotation at Baptist Health, you may be provided access to the Electronic Medical Record (EMR). The purpose for this access is to both assist in the evaluation and management of the patient and to continue your education on clinical documentation. You are required to maintain appropriate and timely documentation.

Accessing patient records, whether at a Baptist Health facility or remotely, imparts significant responsibility on you as a member of the healthcare team. You are required to follow Baptist Health's HIPAA privacy and security policies governing your responsibility to protect patient information at all times in all settings. Failure to maintain these standards can result in disciplinary action up to and including removal from rotations and reporting to licensure and regulatory authorities. Baptist Health privacy policies are located at <http://baptisthealth.net/privacy>.

To access the EMR, you will receive a personalized username (A.D. account). You will also be sent a link to a mandatory online training module.

NEVER SHARE YOUR EMR PASSWORD

If at any point you forget your password, or if more than 90 days have passed since your login date, you can reset your password by calling the Information Technology Department:

Medical students and medical residents call 786-662-7879
All other students and residents call 786-527-8977

Medical Record Documentation



Documentation:

All notes entered by a student or resident must be forwarded to the supervising/teaching physician preceptor for review, feedback and co-signature.

- Students are not permitted to dictate and/or prepare discharge summaries.
- Pharmacy residents will be provided with directions and training on documentation by their preceptors. Pharmacy residents trained and licensed in Florida, do not require co-signatures.

Placing Orders: (For medical students and residents only)

- Medical students may draft orders to be reviewed by their preceptor
- Medical residents (physicians) may place orders without co-signature

Do Not Use Abbreviations	
Abbreviations	Preferred Term
Q.D.	Daily
Q.O.D.	Every other day
Trailing zero (X.0 mg)	Never write a zero by itself after a decimal point. Write "X mg"
U	Units
IU	International unit
Lack of leading zero (.X mg)	Always write a zero before a decimal point. Write "0.X mg"
MS or MSO4	Morphine Sulfate or Morphine
MgSO4	Magnesium Sulfate or Mag Sulfate

5. Educational Guidelines

Scope of Practice, Observer Program and Research

Scope of Participation



MEDICAL STUDENTS

Years 1 & 2: Observation only, and under direct supervision

Years 3 & 4: May participate in patient care under indirect supervision, with direct supervision required for any invasive procedure

RESIDENT PHYSICIAN

Will function within the Medical Staff delineation of privileges of their teaching physician, based on their level of competency as determined by their preceptor. Detailed scopes of participation, by discipline, will be provided by you.

PHARMACY RESIDENTS

Must adhere to all Florida Board of Pharmacy regulations as well as the Baptist Health's entity-specific and departmental policies and procedures.

Observer Program



If you are interested in shadowing/observing a clinician outside of the scope of your current clinical rotation, you may apply to the Baptist Health Observer Program.

Please visit [BaptistHealth.net/Observer](https://www.baptisthealth.net/Observer) for information including eligibility requirements.

Research



The Center for Research & Grants acts as a hub for research at Baptist Health South Florida.

If you wish to conduct research at a Baptist Health facility, you must obtain clearance from the Center for Research & Grants prior to starting the study. This is a separate process from student and resident rotation clearance.

For more information, please call 786-596-7725

Questions?

Please call the
Baptist Health Office of Academic Affairs
at 786-467-2633