

# Pre-Rotation Unit Specific Orientation: Clinical Student Group (Nursing & Nursing Related)

Faculty Name: \_\_\_\_\_

School Name: \_\_\_\_\_

Facility & Unit Name: \_\_\_\_\_

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

## Clinical/ Rounding Faculty:

- The instructor is responsible for orientating the students to their assigned location and returning this form ***within one week*** of the first clinical. The instructor may collaborate with the clinical unit/site to best orient the students for:
  - Specialty Areas (Critical Care, Specialty Pediatrics, PeriOp, GI) and Community Health - the assigned preceptor can orient the student or the instructor can orient in advance of the clinical start date.
  - Mark NA for the below items that do not apply to the clinical area.
- Please complete the following orientation checklist below. The purpose of this document is to ensure the students' unit specific orientation (regulatory requirements, life-safety, patient safety and quality expectations and initiatives) are reviewed, acknowledged, and documented for ***regulatory*** and auditing purposes. Thank you in advance for helping to ensure that your students are prepared to work in this clinical area and provide safe, quality patient care.
- Make sure you have received the unit's float cheat sheet, if applicable, and other unit specific documents to assist in preparing for an optimal rotation on the unit. It is your responsibility to ask questions and understand the limitations on your scope of practice while working in this area.

For Questions email [NursingAcademics@PrismaHealth.org](mailto:NursingAcademics@PrismaHealth.org)

Return Completed Form [Clinical Nursing & Nursing-Related Instructors - Prisma Health Academics](#)

CLINICAL UNIT ORIENTATION	Facilitator's Initials
<i>* Elements listed are covered in-depth through various methodologies as applicable to content (didactic / discussion, simulation, testing, demonstration, touring)</i>	
Unit Layout	
Overview of Patient Population	
Overview of Roles and Unit Routines	
Fire Safety – location of alarms, extinguishers, exits	
Crash cart – locations	
Patient Call System / Paging Systems	
Clean Supplies/ Omnicell Supply	
Infection control and Dirty Utility Room	
Unit Specific Floor Charge Items and Proc. Trays – <i>if applicable</i>	
Bed/Stretcher Operation	
Hand off Communication Requirements for this unit - BSSR	
Patient Rounds/Expectations	
Review of Unit Specific Procedures & Policy	
Unit Forms (location, process)- <i>if applicable</i>	
Unit Quality and Patient Safety/Patient Experience Expectations and Initiatives	
HIPAA / AIDET	

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Student Roster:

Student First & Last Name (print/type)	Student Initials	Date