



Fairfield Medical Center

Pre-Orientation Manual

2026 Edition

Updated 3/2026

Welcome to Fairfield Medical Center!

Part of our responsibility to you is to ensure your safety and that of our patients and staff before you actually begin clinicals. In order to do so, we have put together this pre-orientation manual for you to review. This manual is a quick, condensed reference to many of the issues and concerns that you, as a student, may need to know during the course of your clinicals.

Again, welcome to Fairfield Medical Center! We look forward to meeting you and having the opportunity to build a personal and professional relationship with you!

IMPORTANT TELEPHONE NUMBERS

Fairfield Medical Center	740-687-8000	
FMC – Center Police	740-687-8019	
Human Resources	740-687-8017	Recruiter: Jared Schoenlaub Recruiter: Audra Harden Recruiter: Kellie Sharp Recruiter: Shannon Seminsky
Student Liaison	740-687-8544	Student Liaison: Terri Hanna

Student Requirements

Post-test	Please review this manual and complete the post-test. Please submit the completed post-test to Human Resources prior to starting clinicals.
FMC Badge	All paperwork must be received before a badge is issued. Human Resources will notify you should any forms be missing. However, if you would like to contact Human Resources, you may call 740-687-8017.
Medical Records	All required documents will need to be turned in prior to starting clinicals
Parking Tag	Your parking tag will be distributed to you when you receive your name badge. A map of our approved parking will also be provided.

Fairfield Medical Center

Our Mission:

FMC delivers outstanding healthcare for our patients, their families and our communities.

Our Vision:

FMC will be recognized as the leader in patient/family-centered care for those we serve both in our facilities and in our communities.

Our Values:

We put *Patients First* by adhering to a core set of organizational values:

EMPATHY

- Understanding others' perspectives, without labeling or judging
- Being personally engaged in providing patient and family-centered care
- Treating patients/families with compassion; every patient, every time

INTEGRITY

- Having the passion and courage to do the right thing
- Taking responsibility for your words and your actions
- Delivering on promises and commitments
- Achieving excellence in all that we do
- Honest, legal and ethical behavior

STEWARDSHIP

- Using FMC resources wisely
- Respecting the time and resources of patients and families
- Giving back to the Center and community with time, talent and/or money
- Showing pride in FMC

AGILITY

- Taking initiative to find creative solutions
- Demonstrating courage
- Anticipating concerns and responding promptly
- Exploring opportunities for growth
- Minimizing bureaucracy

TEAMWORK

- Treating others with courtesy and respect
- Working in collaboration and fellowship and not in silos
- Appreciating and drawing on the strengths of each person
- Welcoming differing viewpoints
- Embracing the FMC Culture
- Creating a spirit of belonging within FMC
- Assuming good intent

Our Common Purpose:

We make a difference for everyone by creating exceptional care and experiences from the heart always.

Our Service Standards:

Safety, Personal Connection, Seamless Experience, Appearance, and Efficiency

FMC CAFÉ

The café meal periods are: breakfast 0630-0930, lunch 1030-1330, dinner 1600-1830, and overnight 0030-0200. Sandwiches, salads, and other items are available for purchase throughout the day.

EQUAL EMPLOYMENT OPPORTUNITY

FMC provides equal employment opportunity, consistent with applicable law, to all qualified persons without regard to of race, religion, color, sex (including pregnancy, gender identity, and sexual orientation), parental status, national origin, age, disability, family medical history or genetic information, political affiliation, military service, or other non-merit based factors. This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation, and training.

WORKPLACE DRESS AND APPEARANCE

Please adhere to the uniform or dress requirements for your school. In general, uniforms should be kept properly fitted, neat and clean. Recreational clothing, such as jeans, are prohibited while on duty at Fairfield Medical Center, which includes meetings and education. Name badges will be issued by Human Resources and are to be worn above the waist and forward-facing during clinicals. If lost, replacement badges cost \$25.00. Earrings are permitted to be worn only in your ears, and limited to two per ear. Tattoos should not be visible under any circumstance unless for a medical reason such as being a diabetic. Fragrance should be used sparingly.

PARKING

Fairfield Medical Center provides free, off-street parking for its students on a first come, first serve basis. Upon starting clinicals, employees are provided a parking tag that is required to be displayed in their vehicles while attending clinicals and parking in Center parking lots. Students who do not park in their assigned parking area will be subject to disciplinary action. Students are not permitted to park on public streets while working at the Center.

PERSONAL PROPERTY

The Center is not responsible for lost or stolen articles. Please limit the amount of money and other valuables you bring to the Medical Center. Ensure that these items are either with you or properly secured at all times.

PERSONAL PHONE CALLS

Students are not to place or receive personal phone calls while in patient rooms or hallways. Students should only make personal phone calls during their lunch or break times and should occur outside of patient care areas including public hallways. This also applies to text messaging and other use of personal cell phones and devices. Use of personal cell phones is prohibited in working areas such as visible hallways or work stations.

SMOKING

Effective July 1, 2006, FMC became a smoke-free campus. You are not permitted to use tobacco products, including e-cigarettes and vaping, on the premise while on or off duty, including in vehicles in any parking lot.

SOLICITATION AND DISTRIBUTION

Students cannot solicit or distribute any materials to anyone for any purpose.

Orientation to Standards and Guidelines

The content below is information that you need to know as required by The Joint Commission, the Occupational Safety and Health Administration (OSHA) and Fairfield Medical Center.

The Joint Commission - The Joint Commission accredits and certifies health care organizations and programs in the United States. Joint Commission accreditation and certification is recognized nationwide as a symbol of quality that reflects an organization's commitment to meeting certain performance standards.

OSHA - OSHA's mission is to assure the safety and health of America's workers by setting and enforcing standards; providing training, outreach, and education; establishing partnerships; and encouraging continual improvement in workplace safety and health.

Emergency Codes

The following codes are listed on the back of your identification badge.

NOTE: For satellite campus locations: please dial 9-911 and then give your address. Satellite employees need to refer to their clinic/office specific disaster manual for instructions/directions.

Code Red – Fire

If you discover a fire and are nearby:

R – Rescue – move patients and assist visitors away from immediate danger.

A – Alert others – activate the red pull down alarm and call 3111.

C – Confine – close all doors and windows and leave all the lights on.

E – Extinguish the fire. Use PASS: **p**ull the pin, **a**im the hose, **s**queeze handle, and **s**weep side to side.

Remember:

- Do not use elevators
- Follow instructions from the manager or supervisor

Know the locations of the nearest emergency exit and fire extinguisher in your area. Emergency exit signs are located hanging from the ceiling. Fire extinguishers are located under all solid red squares hanging from the ceiling (check on your unit or work area).

Code Adam – Missing Child

In the event of a suspected or observed infant or child abduction:

- Notify the Center's Switchboard Operator (ext. 3111) and Center Police (ext. 8019) if you believe that you have located the missing child.
- The operator will announce the code, location and age of the child.
- Immediately report to your assigned exit or stairwell.
- Check and man stairwells, elevators and all entrances to departments and the facility.
- Watch for persons not appropriate for their area and observe if they could be hiding an abducted infant.
- Remain calm and STAY at your assigned area until ALL CLEAR stated.

Code Brown – Missing Adult Patient

A Code Brown is called when an adult patient is missing from your unit. You will begin an immediate search of your department and the Center. Notify the Center's Switchboard, Center Police, House Supervisor, Manager, the attending physician, and the patient's residence. Note a time frame when the patient was last seen.

Code Green – External Disaster

Code Yellow – Internal Disaster

A Code Yellow is called within the Center when patients, visitors or employees are injured suddenly and unexpectedly **within** the Center. A Code Green is called when the event occurs **outside** of the Center. The Center's Switchboard Operator will page the message three times: "Attention! Attention! Code Yellow (or Green) Level One is now in effect."

The designation of Level I or II is the same for both Code Yellow and Code Green. Level I defines that there has been notification that a disaster is in progress. Employees are to be on standby for further instructions. When Level II is paged, staff is sent to the labor pool.

The Center has a state-of-the-art decontamination shelter and specialized personal protective equipment (PPE) for trained employees to safely provide care for patients who have been contaminated or exposed to chemical, biological or radiological events.

Code Gray – Severe Weather

Option I indicates that a tornado or high wind WATCH has been issued by the National Weather Service for this vicinity. Option II indicates that a tornado has been sighted or a high wind WARNING has been issued for Fairfield County.

Option I

1. Remove objects from windows, sills and ledges
2. Locate and prepare flashlights and batteries
3. Close blinds and drapes.

Option II

1. Close all office, hall, patient room and smoke barrier doors
2. Ensure all imperative equipment is plugged into red outlets
3. Evacuate patients and visitors to inside hallways away from windows and glass
4. Keep Surgical Tower clear of all pedestrian traffic.

Code Blue – Adult Medical Emergency

Code blue is called to alert team members that an adult medical emergency exists, or an adult resuscitative effort is needed. Code blue is called via pagers and will not be heard overhead.

Who is on the Code Blue Team?

1. The patient's nurse (RN).
2. House Supervisor.
3. Emergency, Attending, or In-House Physician.
4. Laboratory.
5. Pharmacist.
6. ICU Nurse.
7. Respiratory Therapist.
8. Chaplain.

Code Pink – Infant/Child Medical Emergency

Code pink is used to alert the team members that a resuscitative effort is needed for an infant or child. Members of this team are the same as the Code Blue team.

Code Violet – Violent / Combative Person

Code Violet is used when a person has lost control and immediate assistance is needed in order to manage their violent/combative behavior. When a Code Violet condition exists, contact the switch board operator at ext. 3111 specifying the location of the violent/combative behavior. Switch board operator will announce the Code Violet location and staff trained/experienced in Non-Violent Crisis Intervention techniques are to report to the location to assist with stabilizing the situation.

Code Silver – Hostage situation or person with a weapon

If a patient, visitor or staff person is in possession of a firearm, weapon or explosive device, contact Center Police at 8019 immediately. If they determine that a Code Silver needs to be called, the operator will announce it overhead.

If announced:

1. Patient care staff will stay with their patients and all other staff will remain in their work areas
2. Manually close all doors
3. Cease all patient transport
4. Stop all elevator use
5. Clear all hallways and lobbies of patients, visitors and staff.
6. Await further direction or activation of the ALICE (active shooter) or Hostage Plan

Authorities will take control of the situation until it is determined to be all clear.

Code Black – Bomb / Bomb Threat

There are 3 types of bomb threats:

1. Threat by telephone
 2. Direct threat
 3. Suspicious package
- In the event of a known location, Center Police will respond to the area of concern and provide further instruction.
 - In the event the location is unknown, employees are responsible for searching assigned areas for suspicious items.
 - In the event of a threat by telephone or a direct threat, it is important to remain calm and be attentive to any details which may aide in identifying the suspect. Details include distinguishing voice or physical characteristics.

Code Assist – Code Assist Response

There may be times when a non-clinical employee/volunteer may need assistance with an uncertain situation occurring on hospital premises or surrounding hospital grounds. A “Code Assist” may be called when assistance is needed and other emergency codes are not applicable.

To activate a Code Assist, please dial 3111. The caller is to indicate the location and the nature of the situation and that a Code Assist is requested. The PBX operator will give priority to the call and initiate an overhead page for the Code Assist with the location.

Code Orange – Hazardous Material Spill

A Code Orange is called when a spill or release of a hazardous material is large enough to create an emergency situation such as any of the following:

1. A life-threatening situation for patients, visitors and/or staff.
2. An immediate threat to patients, visitors and/or staff's health and well-being.
3. Substantial impact on FMC's activities (inhibits the ability of a department to perform its basic functions).
4. Substantial impact on FMC's building or grounds, enough to cause a change of normal operations.


When a Code Orange condition exists contact the switch board operator at ext. 3111 specifying the location of the spill/release to address the hazard. The switch board staff will notify Center Police, House Nursing Supervisor, Environmental/Occupational Safety Coordinator, Environmental Services and Plant Engineering and announce the Code Orange. Staff not involved with remediating the hazard need to stay clear of the area.

Stroke Care

Fairfield Medical Center is a Joint Commission Primary Stroke Center. We are surveyed every two years and must comply with The Joint Commission (TJC) standards that includes education for all who administer care to our patients.

Signs of a Stroke

Stroke patients may first display symptoms that include Facial droop, Arm weakness or drift, slurred Speech....If you recognize any of these, it is Time to get help.



The graphic displays the acronym FAST in large white letters on red square backgrounds. Below each letter is a corresponding symptom description and a checklist of questions and instructions.

F	A	S	T
Face Drooping	Arm Weakness	Speech	Time to Call 9-1-1
DOES ONE SIDE OF THE FACE DROOP OR IS IT NUMB? Ask the person to smile. Is the person's smile uneven?	IS ONE ARM WEAK OR NUMB? Ask the person to raise both arms. Does one arm drift downward?	IS SPEECH SLURRED? Is the person unable to speak or hard to understand? Ask the person to repeat a simple sentence, like "The sky is blue."	If someone shows any of these symptoms, even if the symptoms go away, call 9-1-1 and get to a hospital immediately. Check the time so you'll know when the first symptoms appeared.

Time is BRAIN

- The faster stroke is treated, the more likely the patient is to recover.
- If your patient displays any of the FAST symptoms – Call a Stroke Alert

Updated 2019 Stroke Guidelines

- There is a **4.5 hour window** from the onset of symptoms to administer tPA to stroke patients.
- There is a **24 hour window** from the onset of symptoms to perform a thrombectomy in patients found to have a large vessel occlusion on CTA of the head and neck. This new data was published in the NEJM in 2018 after 2 successful trials: DAWN and DEFUSE 3.
- Therefore, a stroke alert should be called on all patients in the ER or on the floor who have symptoms beginning within 24 hours including those with wakeup stroke symptoms.

Updated Stroke Alert Process

A stroke alert should be called for patients with active stroke symptoms & LKW (Last Known Well) within 24 hours:

- ED provider and/or Hospitalist for an inpatient, is to accompany/meet the patient in CT to determine eligibility for CTA.
- CTA of the head and neck should be completed after the non-contrast head CT if the patient has a NIHSS >6 and the non-contrast head CT shows **NO** hemorrhage. Abort if CTA cannot be done within 5 minutes for any reason.

Emergency Information

For emergencies within the center, dial 3111. For satellite locations, dial 911. The Emergency and Disaster Plan can be found on the FMC intranet.

Infection Control

Standard precautions is treating **ALL** patients as if their blood and body fluids are potentially infectious regardless of known infectious disease.

Hand washing is the single most important procedure in Infection Control.

1. Wash with soap and water
2. Wash with an alcohol-based hand sanitizer (Purell)

The protections you use to prevent exposure - gloves, masks, gowns, aprons, and eye protection are called Personal Protective Equipment (PPE).

If you were to be stuck by a contaminated needle you would:

1. Notify your Supervisor or Manager immediately
2. Report to Employee Health (Monday – Friday) and House Supervisor (evenings and weekends)
3. Complete an Event Report

Blood Borne Pathogens

Examples of blood borne pathogens are Malaria, Hepatitis, HIV, and Syphilis. You can prevent contact with a blood borne pathogen by treating all blood and body fluids as if they are potentially infectious. Use gloves, masks and gowns. Always wash your hands.

Infectious Waste

Infectious wastes are spread by blood, air, and contact. Any waste product that is potentially infectious is considered biohazard waste. Examples include blood soaked items or used sharps.

Hazardous Communication Program

In order to identify hazardous products on the units you are assigned, check for the warning labels on the container. You can also look for the material safety data sheet or (M)SDS which is located on the intranet or in the Orange and White manual located on the units.

Interruption Plan – Power & Telephones

1. **Power Failure** – FMC has a primary and secondary utility power feed. If Primary fails within 3 seconds we will shift to the secondary utility power feed. If both utility feeds fail, the Emergency Generator would automatically start within 7 seconds. Emergency power can be found throughout the facility based on needs. All egress corridors, public areas and office spaces have emergency lighting as well as emergency exit signs. Red outlets that are emergency power have been strategically placed in various locations based on need. All patient rooms have emergency outlets.

2. **Telephones** – If the Center encounters a telephone outage – cell phones are available on each of the units.

Center Police

The Center has police officers on duty 24 hours a day who are responsible for safeguarding individuals while they are on the Center premises, as well as for providing security of the buildings and grounds. If an unsafe situation exists, employees are encouraged to call the Center Police at **8019** immediately. In addition, the officers are available to escort students to their cars in the parking lot, if requested.

Safety Program

The Safety Hotline is an anonymous method in which an employee, patient, or family can report a safety violation or concern. The number for the Safety Hotline is 687-8988. Our Patient Safety Officer is Eric Brandt. The goal of the Safety Program at Fairfield Medical Center is to reduce the risk of errors, improve communication between physicians, managers, employees, and patients about safety issues, and to openly discuss patient safety at all levels of the organization and provide a blame-free environment.

You are responsible for following all safety rules and to report to your manager unsafe conditions, adverse outcomes, medical errors, close calls, Never Events/Sentinel Events, and any potential safety issues. Remember, SAFETY IS EVERYONE'S JOB and we need your help to make FMC as safe as possible.

Customer Service and AIDET

It is everyone's responsibility in the Center to provide great service to our customers.

Examples of great customer service include:

- ✓ Always take a person where they need to go – do not point and give directions.
- ✓ If someone looks lost, ask if they need assistance.
- ✓ Answer call lights immediately.

AIDET: Five fundamentals in effective communication with our patients and their families.

Acknowledge

- Show a positive attitude
- Make your patients and coworkers feel like you are glad to be caring for them/working with them
- Put patients at ease and make them feel comfortable
- Ask for permission to enter a room

Introduce

- Introduce yourself by name and department
- Introduce other staff with you – coworkers, students, and volunteers
- Introduce the patient to other caregivers – show them we are a team

Duration

- Communicate how long preparation, tests/procedures, results, and waiting times will be.
* Be more specific than “a while” or “in a little bit.”

Explanation

- Help patients and family members understand what you will be doing and why
- Clarify expectations and future plans
- Narrate your care – say what you are doing while you are doing it, walk them through the process

Thank You

- Let patients and coworkers know that you have enjoyed working with them
- Thank the family for selecting FMC and entrusting us with the care of their loved one

Falls Prevention

You will know if a patient is at High Risk for Falling when you see:

- a yellow dot on patient's chart and on name card on patient's door
- High Fall Risk label at head of bed below patient's name
- Yellow wrist band on the patient

Remind the patient and their family to please use the call light to ask for assistance in getting up. Hourly, ask the patient if there is anything they need like getting to the restroom. Keep the bed in low position, put the call light within reach, and have 1-3 side rails up. Also, proper use of the FMC's bed technology I-bed awareness can lessen patient falls. Remember the concept of "green means go" with I-bed awareness (the bed is set properly). I-bed Awareness monitoring system for Stryker beds will be initiated for all patients and will include brake, side rail position x2, low bed height. Patients who are HFR will have the bed exit activated. Green light on footboard means desired bed configurations are maintained. If amber lights flashing on the footboard this indicates the bed is no longer in the configured position.

Patient Rights and Responsibilities

All patients and family members need to know where the Patient Rights and Responsibilities are located. There are Patient Rights brochures on each unit, on the intranet, and at each point of entry. In the event of a patient or family complaint or grievance, please call a Patient Representative at ext. 8555 or (740) 687-8555.

What are the Patient Rights? Basic rights are as follows:

- Access to Care. Individuals shall be accorded impartial access to accommodations that are available or medically indicated, regardless of age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, gender, sexual orientation, and gender identity or expression.
- Respect and Dignity.
- Privacy and Confidentiality.
- Personal Safety. The patient has the right to expect reasonable safety insofar as the Center practices and environment are concerned. The patient has the right to request and receive special protective services offered by Center staff and police when appropriate.
- Identity. The patient has the right to know the identity and professional status of individuals providing service to him or her and to know which physician or other practitioner is primarily responsible for his or her care.
- Information about care, diagnosis, treatment, outcomes of treatment and prognosis.
- Communication. The patient has the right of access to people outside the Center by means of visitors and by verbal and written communication. When the patient does not speak or understand English, he or she will have the option of access to an interpreter. The patient with a communication disability has the right to receive assistance from an interpreter free of charge.
- Visitation. The patient has the right to request or designate visitors who may not be immediate family members and for these designated visitors to receive the same visitation privileges, regardless of whether the visitors are legally related to the patient. FMC will ensure that all visitors enjoy full and equal visitation privileges consistent with the patient's preferences.
- Lay caregiver. The patient has the right to designate a lay caregiver, if an inpatient 55 years of age or older, and the right to have discharge instructions reviewed with the lay caregiver.
- Consent. The patient has the right to informed participation in decisions involving his or her healthcare.
- Consultation. The patient, at his or her own request and expense, has the right to consult with a specialist.
- Refusal of Treatment. The patient may refuse treatment to the extent permitted by law and to be informed of the consequences of that refusal.
- Transfer and Continuity of Care.

- Center Charges. Regardless of the source of payment for his or her care, the patient has the right to request and receive an itemized and detailed explanation of his or her total bill for services rendered in the Center.
- Center Rules and Regulations.
- The patient has the right to formulate advance directives and to have hospital staff and practitioners who provide care in the hospital comply with these directives.
- The patient has the right to specify a desire to become an organ, eye, or tissue donor. An explanation of the Center's organ and tissue donation policy will be given to the patient or the patient's representative upon request to the nursing staff or physician.
- The patient has the right to effective pain management within the limits of safety. The patient has the right to have their pain symptoms assessed and treated, and the patient experiencing pain will receive education to assist in the assessment and resolution of his or her symptoms. The long stay patient who has a specific desire to go outside the building will have this request accommodated whenever their safety, staffing, and logistics can be arranged.
- Rights of a Patient who is a Minor. A minor is defined for interpretation of this policy, based on Article 2151.421B of the Ohio Revised Code, as any person who is under the age of 18 years or a mentally or physically handicapped person under 21 years of age.

Confidentiality / HIPAA

All students have the legal and ethical responsibility to keep all information about patients and their families confidential and private. Patient information may only be discussed with other healthcare providers who need that information in order to do their job. HIPAA stands for The Health Insurance Portability and Accountability Act of 1996.

HIPAA FAQs:

Q. Can a patient or family member review the patient's chart or get photocopies?

A. All requests for information from the patient, family or any other outside party that is not a healthcare provider must be referred to Medical Information Services, even if the patient is still in the Center. Based on the condition of the patient, other individuals may be authorized to sign for release of information. Our patient portal, *My FMC Portal*, is also available. It is an online tool that provides secure access to your health and wellness records. *My FMC Portal* allows you to review lab, X-ray and other test results.

Q. Are patient records kept safe, secure, and confidential?

A. Yes. All patient records are stored in secure areas which are continuously staffed by Center employees responsible for protecting access to stored records. This includes areas such as nursing units or Medical Information Services.

Q. Can information be sought regarding patients without a work-related need to know?

A. No. Do not inquire or seek information associated with a patient's stay or discuss the private lives of a patient or family member without a specific work-related need to know in order to perform your job duties. Employees may not visit patients or their families during on-duty hours. Also, employees may not post any information regarding a patient or their case on social media.

Q. Can information be shared regarding patients with other healthcare providers who have a work-related need to know?

A. Yes, but do not discuss information in public areas such as the cafeteria, elevators or anywhere that information can be overheard by others.

Q. How would you report a HIPAA/confidentiality concern?

A. You can contact your manager or supervisor, compliance coordinator, compliance officer or Human Resources. The ethics/compliance hotline (1-855-541-4169 or fmchealth.ethicspoint.com) may also be utilized to report HIPAA and confidentiality concerns. Employees may also use the incident system to report privacy violations.

Suicide Screening

- Fairfield Medical Center (FMC) is committed to providing a safe environment for patients, students, visitors, and employees. Early identification of patients at risk for suicide is a first step in providing reasonable care and intervention. Patients will be assessed for suicidal potential as part of the hospital's admission procedures. Staff will continue to assess suicide risk on a regular basis as part of ongoing clinical assessment.
- Patients at risk for suicide will be placed in precautions to assist in reducing the risk and provide treatment for the patient's condition. Additional intervention may be taken to address individual circumstances when authorized by a Physician or Licensed Independent Practitioner (LIP) order. Suicide precautions will be discontinued when clinically indicated.

Bariatrics Sensitivity Training

Bariatric patients are those:

- Who are overweight or obese.
- Who have health issues, limited mobility or limited access to the world because of their weight and size.
- Have special concerns/needs when in the hospital beyond physical barriers.
- It is estimated that 1 in 10 persons admitted to a hospital is morbidly obese.
- Obese patients tend to have health problems in addition to their weight.

Some strategies for improving care for bariatric patients is being prepared to care for them in a safe, sensitive, accessible environment:

- Appropriate furniture (sturdy, armless, high/firm sofas)
- Bathrooms with safely mounted grab bars and floor-mounted toilets
- Availability of higher weight capacity equipment (beds, carts, wheelchairs, etc.)
- Availability of medical equipment and supplies suitable for obese patients.
- Discreet equipment labeling – does not indicate obesity to others.
- Availability of staff and supplies during all shifts who are trained to care for the obese patient.

Abuse and Neglect

- By Ohio law, reporting is required if, while acting in a professional or official capacity, a mandated reporter suspects that a child under 18 years of age, or a developmentally disabled or physically impaired child under 21 years of age, has suffered or faces a threat of physical or mental abuse or neglect.
- It is mandatory for any healthcare practitioner that is in his or professional capacity to report suspected forms of elder (60 years of age or older)/dependent adult physical abuse to Adult Protective Services.
- FMC will refer adult victims of abuse/neglect to the appropriate agency to seek counseling and/or protective services and will assist the victim with obtaining these services.
- It is mandatory for any healthcare practitioner that has knowledge that a sexual assault (felony) has been or is being committed to report it to law enforcement authorities.
- No physician, limited practitioner, nurse or person giving aid to a sick or injured person shall negligently fail to report to law enforcement authorities any gunshot or stab wound treated or observed by them. Any serious physical harm to persons he/she knows or has reasonable cause to believe, resulted from an offense of violence, any second or third degree burn that was inflicted by an explosion or other incendiary device or any burn that shows evidence of having been inflicted in any violent, malicious or criminal manner.

Restraints

- Fairfield Medical Center (FMC) is committed to preventing, reducing, and is striving to eliminate the use of restraint(s) thereby preserving the individual's safety and dignity. Restraints are used when the use of alternative measures are unsuccessful. The least restrictive type of restraint/device or therapeutic intervention will be considered first. Progression to more restrictive methods will be implemented as necessary and documented in the plan of care. Anti-psychotic and/or anti-anxiety agents may also be used to assist with the control of an individual's behavior.
- FMC's approach and philosophy is that restraints are used to protect the patient from injuries to self or others, or to prevent disruption of medical management when alternative measures have not been successful, while preserving the patient's dignity, human rights, and well-being. Safety straps may also be used to immobilize a pediatric patient during procedures, examinations or treatments as a method to reduce radiation exposure, less motion on images and to protect and keep the child safe.
- Restraint(s) may only be imposed to ensure the immediate physical safety of the patient, a staff member or others and must be discontinued at the earliest time possible. Restraints may not be used as a means of coercion, discipline, convenience or retaliation by staff.
- The staff will be responsible for reassessing the need for continued use of restraints and encouraging the release of restraints as soon as possible. Staff education on safe restraint use is completed during orientation and annually during department competency testing. You are required to complete a skills check-off.

Pain Stewardship

- FMC is committed to providing patients with the best level of pain relief without compromising patient safety. This includes chronic or acute pain, substance abuse patients and pain related to a procedure.
- To provide pain management in a safe manner for all patients and to help reduce the adverse psychological and physiological effects of unrelieved pain. Consistent monitoring and documentation of the patient's pain level and physical assessment will be completed using a standardized process. All patients will be provided with education on pharmacological and non-pharmacological techniques for pain relief and how important it is to their overall health.

Standard of Behavior

EXPECTATIONS – Desirable behavior by all caregivers including employees, medical staff, and healthcare workers include:

- Place the well-being of the patient's first.
- Assume responsibility for his or her own behavior.
- Identify and report Quality and Safety concerns.
- Give clear instructions for patient care.
- Respectfully discuss concerns in a private setting.
- Participate in additional education.
- Cooperate and participate in Quality and Safety improvement activities.
- Respect the knowledge and experience of colleagues.
- Agree and abide to Medical Staff Bylaws and/or FMC Policies and Procedures.

TABLE OF DANGEROUS ABBREVIATIONS & SYMBOLS

The following list of abbreviations and symbols has compiled by the Pharmacy and Therapeutics Committee due to their potential for error. Please do not use these dangerous abbreviations or symbols.

Abbreviation/Symbol	Intended Meaning	Misinterpretation	Correction
MgSO ₄	Magnesium sulfate	Morphine sulfate	Use “magnesium sulfate” or “mag sulfate”
MSO ₄	Morphine sulfate	Magnesium sulfate	Use “morphine” or “morphine sulfate”
MS	Morphine sulfate	Magnesium sulfate	Use “morphine” or “morphine sulfate”
ug	Microgram	mg	Use “mcg”
U or u	Unit	Read as a 0 or 4 causing 10-fold overdose, 4U seen as “40” or 4u seen as “44”	“unit” has no acceptable abbreviation. Use “unit”
IU	International units	Misread as IV (intravenous)	Use “international units” or “units”
cc	Cubic centimeter	Misread as “U” or “00”	Use “ml”
Zero after decimal point (1.0)	1mg	Misread as 10mg if decimal point is not seen	Do not use terminal zeros for doses expressed in whole numbers
No zero before decimal point (.5mg)	0.5mg	Misread as 5mg if the decimal point is not seen	Always use zero, before a decimal point when the dose is less than a whole number
QD, qd	Daily	Misread as QID or QOD	Use “daily”
QOD, qod	Every other day.	Misread as QD or QID	Use “every other day”

2019 Hospital National Patient Safety Goals

The purpose of the National Patient Safety Goals is to improve patient safety. The goals focus on problems in health care safety and how to solve them.

NPSG.01.01.01	Identify patients correctly Use at least two ways to identify patients. For example, use the patient’s name <i>and</i> date of birth. This is done to make sure that each patient gets the correct medicine and treatment.
NPSG.01.03.01	Identify patients correctly Make sure that the correct patient gets the correct blood when they get a blood transfusion.
NPSG.02.03.01	Improve staff communication Get important test results to the right staff person on time.
NPSG.03.04.01	Use medicines safely Before a procedure, label medicines that are not labeled. For example, medicines in syringes, cups and basins. Do this in the area where medicines and supplies are set up.

NPSG.03.05.01	Use medicines safely Take extra care with patients who take medicines to thin their blood.
NPSG.03.06.01	Use medicines safely Record and pass along correct information about a patient's medicines. Find out what medicines the patient is taking. Compare those medicines to new medicines given to the patient. Make sure the patient knows which medicines to take when they are at home. Tell the patient it is important to bring their up-to-date list of medicines every time they visit a doctor.
NPSG.06.01.01	Use alarms safely Make improvements to ensure that alarms on medical equipment are heard and responded to on time.
NPSG.07.01.01	Prevent infection Use the hand cleaning guidelines from the Centers for Disease Control and Prevention or the World Health Organization. Set goals for improving hand cleaning. Use the goals to improve hand cleaning.
NPSG.07.03.01	Prevent infection Use proven guidelines to prevent infections that are difficult to treat.
NPSG.07.04.01	Prevent infection Use proven guidelines to prevent infection of the blood from central lines.
NPSG.07.05.01	Prevent infection Use proven guidelines to prevent infection after surgery.
NPSG.07.06.01	Prevent infection Use proven guidelines to prevent infections of the urinary tract that are caused by catheters.
NPSG.15.01.01	Identify patient safety risks Find out which patients are most likely to try to commit suicide.
UP.01.01.01	Prevent mistakes in surgery Make sure that the correct surgery is done on the correct patient and at the correct place on the patient's body.
UP.01.02.01	Prevent mistakes in surgery Mark the correct place on the patient's body where the surgery is to be done.
UP.01.03.01	Prevent mistakes in surgery Pause before the surgery to make sure that a mistake is not being made.

Pre-orientation Manual Post-test

Name: _____ Date: _____

1. What is Fairfield Medical Center's mission : _____

2. List our five Service Standards: _____, _____,
_____, _____, and _____.
3. Jeans are permitted to be worn when attending education. Circle: True or False
4. The _____ accredits and certifies health care organizations
and programs in the United States.
5. For emergencies within the center, dial _____. For satellite locations, dial _____.
6. During a Code Red, what two important acronyms must you remember: _____ and
_____.
7. Name two of the eight members of the Code Blue team. _____ and
_____.
8. Center Police can be reached at extension _____.
9. The signs and symptoms of a stroke include the following (circle all that apply):
 - a. Facial droop,
 - b. Arm weakness or drift,
 - c. Slurred Speech
 - d. Chest Pain
10. Patients at risk for suicide will be placed in precautions to assist in reducing the risk and
provide treatment for the patient's condition. Circle True or False.
11. It is not mandatory for healthcare practitioners to report suspected forms of abuse or neglect
of adults. It is only mandatory to report suspected forms of abuse or neglect of children. Circle
True or False.
12. There may be times when a non-clinical employee/volunteer may need assistance with an
uncertain situation occurring on hospital premises or surrounding hospital grounds. What code
should you call? Code _____

13. _____ is the single most important procedure in Infection Control.

14. What is the code for a missing child? _____

15. Name two 2019 National Patient Safety Goals: _____
_____ and _____
_____.

16. The phone number for the Safety Hotline is _____.

17. List the five fundamentals of effective communication in the AIDET model:

_____, _____, _____,
_____ and _____.

18. Name one indicator that a patient has been identified as High Fall Risk:

19. It is okay to discuss patient status with anyone YES NO

Please submit your completed post-test to Human Resources prior to starting employment.