Student Nurse Orientation Manual

LifeBridge Health: The Freedom to Learn

NURSING SCHOOL ORIENTATION PACKET FOR LIFEBRIDGE HEALTH

The objective of this packet is to help the clinical instructor/clinical group become familiar with the philosophy of LifeBridge Health facilities providing the information needed for a successful clinical rotation.
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STUDENT & INSTRUCTOR REQUIREMENTS

Nursing students must meet the following requirements prior to beginning clinical experience at any healthcare facility within LifeBridge Health.

1. Education Affiliation Agreement
The nursing school (college, university, school program) must be covered by a current affiliation agreement with the health care provider/organization before requesting an educational experience/rotation with the hospital or clinical service area. Students and/or instructors can contact the school representative or the health care provider/organization to verify that an agreement is in place.

2. Accredited Educational Programs
Students must be from educational programs that are accredited by national accrediting agencies and/or state organizations as appropriate (MHEC, MBON, CCNE, NLN, etc.).

3. Verification & Documentation
The Educational Program (college, university, school) must have verification or documentation of the following items:
Measles-Mumps-Rubella, Tdap, Varicella, Hepatitis B
- Verification can be provided by: 1) documentation of immunization 2) positive antibody titer.
- Verification of TB testing within the past year
  - Each student is required to have an annual screening for tuberculosis by an intradermal PPD test.
  - Students that are PPD positive need to verify that an adequate work-up for tuberculosis has been completed and that they are currently not communicable by producing a (chest x-ray report, Physician, or Health Department note).
- Influenza vaccine
  - Students are required to have an influenza vaccine if working during winter months.
  - Also the following is required:
- Criminal Background check (if 18 years of age or older)
- Urine drug screen results
- Current CPR or BLS certification

4. Read the Student Orientation Booklet
This orientation booklet provides a list of standards to be followed by nursing students in health care settings.
As part of the school’s affiliation agreement with the health care provider/organization, students are subject to the rules, policies and regulations of the facility.

5. Completion of the Nursing Student Passport Orientation Checklist:
Clinical Coordinators and/or instructors must verify necessary documentation needed for each student and instructor by completing the Nursing PASSPORT Orientation Checklist. This form is to confirm that students and instructors have the necessary immunizations, influenza vaccination, urine drug screen, CPR or BLS certification, and criminal background check and have reviewed the orientation manual before entering onsite.
Please note that this form must be completed by ALL nursing students and ALL instructors entering into a LifeBridge Health facilities, including student groups, practicum students, leadership students and graduate students.

If ALL paperwork is not received 10 days before clinical starts, it will not be ready for start date.

Please make sure all paperwork is legible and that all sections are completed or it may delay processing and delay entire group’s access.

A copy of this form can be found on the LifeBridge Health Nursing Student website: http://www.lifebridgehealth.org/nursingstudents/#passport

This completed form is a part of the orientation packet which must be returned to the Educational Resource Center (ERC) at least ten days prior to the start of clinical rotation via email nursingstudents@lifebridgehealth.org PLEASE place in subject line which hospital the clinical rotation will be completed at.

6. Meeting Stated Requirements
Students may begin their experience once all the above requirements are met; as well as any facility specific and/or health care provider/organizational requirements.

7. Documents Required Prior to Start of Clinical Rotation are as follows:

The following documents MUST be submitted by the instructor/university/school to ERC at least 10 days prior to start of clinical rotation:

<table>
<thead>
<tr>
<th>Document</th>
<th>Sinai</th>
<th>Northwest</th>
<th>Levindale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Roster with ID #s &amp; instructor name and contact information</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Student PASSPORT</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Copy of Student ID</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Orientation Manual Confirmation – one each student &amp; instructor</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Parking Form</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Badge Form</td>
<td>X</td>
<td></td>
<td>X only instructors for BHU/4c</td>
</tr>
<tr>
<td>Certificate of completion of Cerner on-line Program</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Certificate of Completion for Blaustein Security Module (only if students will be rotating through Women’s and Children’s Services at Sinai)</td>
<td>X</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8. Once each groups’ paperwork is processed, ERC member will email back to instructor via school email address each students’ badging form and computer access. The instructor/students will be responsible to take badging paperwork to badging office during regular hours of operation to get their badge.

9. All Instructors new to LifeBridge Health going to Sinai or Northwest Hospitals must attend the Instructor Orientation Session. Registration dates and times are located on the Nursing Student website: www.lifebridgehealth.org/nursingstudents

Practicum Students - must follow the process as outlined above

All practicum students will be partnered with a preceptor and will need ERC approval. Once the student is paired with a preceptor all required paperwork must be completed and turned in before starting any hours.
What is Culture?

Culture is the values, beliefs and practices shared by a group of people. We have an obligation to be respectful and sensitive to other belief systems (co-workers, patients, families). It’s important to be culturally competent and comfortable with those we serve and serve with, by examining our own personal biases and cultural values. By examining our own personal biases we will better understand how they may inhibit effective communication.

How to be Culturally Competent

- Ask yourself these questions:
  - Who are my customers?
  - How can I learn about them?
  - What are my beliefs about this group?
- Acquire basic knowledge about the cultural values, beliefs and practices of your customers:
  - Ask questions
  - Listen
  - Account for language issues
- Be aware of communication styles
- Have an open mind

Be sensitive to personal health beliefs and practices

- As a student, ask your instructor/preceptor to help you find answers to the following questions:
  - How does my patient stay healthy?
    - Special foods, drinks, objects or clothes
    - Avoidance of certain foods, people or places
    - Customary rituals or people used to treat illnesses
  - What are the expectations for medicine usage?
    - Past experiences with medicine usage
    - Will the patient take medicine even when he/she doesn't feel sick?
    - Is the patient taking other medicines or anything else to help them feel well?
- Family and community relationships
  - Are illnesses treated at home or by a community member?
  - Who in the family makes health care decisions?
- Language barriers
  - Can the patient understand limited English?
  - Consider literacy level
  - Use visual aids and demonstrate procedures
  - Check for understanding
  - Is an interpreter necessary? If yes, follow hospital guidelines by using a trained medical interpreter. Avoid using family members
- Body language
  - Is there cultural significance for:
    - Eye contact
    - Touching
    - Personal space
    - Privacy / modesty
Other cultural factors to consider
- Gender
- Wealth or social status
- Presence of a disability
- Sexual orientation

Religious / Spiritual beliefs
- Are there beliefs associated with:
  - Birth, death, age
  - Certain treatments, blood products
  - Prayer, medication and worship
  - Food preparation, clothing, special objects, and gender practices

ENVIRONMENTAL SAFETY

EMERGENCY CODES

- Code Yellow: Emergency or Disaster
- Code Red: Fire
- Code Blue: Cardiac Respiratory Arrest
- Code Purple: Security Only Response
- Code Gold: Bomb Threat
- Code Orange: Hazardous Material Spill
- Code Pink: Infant or Child Abduction
- Code Green: Combative Person
- Code Gray: Elopement

Sinai Emergency Alert call 25911 FOR
Northwest Emergency Alert call 55555
Levindale Emergency Alert call 113#00 and state the type of code and the location three times.
Safety is Everyone’s Concern

Students should call Security when they:

- See any criminal activity
- See any suspicious circumstances
- Need to access lost and found items
- Need to report visitor accidents
- Need escort or vehicle assistance

Each health care facility has a number to contact security directly. Students should be aware of the emergency contact phone number in the facility they are completing clinical rotation in.

Fire Prevention and Response include

All promote fire safety by recognizing and correcting fire hazards, and appropriately responding to any fire incident. This is a shared responsibility of everyone.

Employees and students can apply simple safety measures that will help prevent fires by:

- Properly storing and disposing of combustible materials.
- Complying with the electrical equipment policies.
- Reporting any defective wiring (frayed cords, brown fuses, etc.)
- Enforcing your facility’s smoke free policy.
- Finding out when and who should turn off medical gas valves.
- Learning your department evacuation plan.
- Maintaining clear and unobstructed hallways, doorways and aisles.

Hospitals are designed to contain a fire behind closed doors for a period of time to allow fire-fighting efforts to occur.

Closed fire doors contain fire and allow areas within the facility to remain functional. It is important not to block or prop doors open in any way.

Fire Alarms and Evacuation Plans

Each health care provider/organization has a process for alerting staff of a potential fire or a fire drill. Students are orientated to fire safety procedures, patient evacuation plans and escape routes by the facility and their assigned department(s).

RACE and PASS are universal acronyms used to educate health care workers and students to basic fire safety procedures and the management of fire extinguishers.
RACE

R – Rescue
Rescue anyone (including patients, visitors, employees and yourself) in immediate danger from flames or smoke.
NOTE: Many patients are connected to oxygen tanks and monitoring equipment. These items need to be moved with the patient whenever possible.

A – Alarm
Activate the nearest fire alarm pull box and call your facility emergency number or 911.
Take the time before a fire emergency to locate the fire alarm pull boxes in your work area.

C – Contain
Keep the smoke and fire from spreading to other locations within the facility by closing any open doors or windows. If the fire is in a patient’s room, turn off the oxygen flow meter and remove from the wall.

E – Extinguish/Evacuate
Take time before an emergency to locate the fire extinguishers in your area. If a fire is small and manageable, use the nearest fire extinguisher. Follow the steps in PASS. The PASS acronym will help you properly extinguish a fire.
  P Pull the pin
  A Aim the nozzle
  S Squeeze the handle
  S Sweep at the base of the fire

PATIENT SAFETY: WRISTBANDS
(For Sinai and Northwest ONLY. Please see pg. 35 for Levindale). The newest wristband colors are YELLOW for fall, and PURPLE for Allow Natural Death (A.N.D), which replaces DNR. The PURPLE AND WHITE striped wrist band is for limited interventions. The patient will be wearing a purple and white striped wristband to alert you that limited interventions were requested. Please note that selected choices for limited interventions are not denoted on the wristband. Treatment choices are denoted on the MOLST form, located in the patient’s chart.
LifeBridge Health facilities are committed every day to providing safe patient care. This means that if patients suffer from an allergy, are at risk for falling, have chosen not to be resuscitated, have a latex allergy or have restricted limb use, they will be asked to wear a wristband as an alert to those providing care.
Infection Prevention and Control

The purpose of an infection prevention and control program is to prevent the transmission of infections within a health care facility. Students can protect themselves and patients by adhering to basic infection prevention and control principles. Standard precaution procedures should be used routinely when caring for patients, regardless of their diagnosis.

Standard Precautions / Body Substance Precautions

Standard Precautions or Body Substance Precautions are names associated with the isolation system used by health care providers/organizations. These precautions are used for every patient, regardless of diagnosis. The aim is to minimize risk of exposure to blood or body fluids. To accomplish this, personal protective equipment (PPE) (i.e., gloves, gowns, masks, and goggles) are used for potential contact with body fluids from any patient.

Standard Precautions / Body Substance Precautions include these principles:

- **Hand Hygiene**: Wash hands with soap and water or sanitize hands with an alcohol-based hand rub before and after each patient contact, and after removing gloves.
- **Gloves**: Use when touching any body fluids or non-intact skin.
- **Gowns**: Use if splashing or splattering of clothing is likely.
- **Masks and goggles**: Use if aerosolization or splattering is likely.
- **Needles**: Activate sharps safety devices, then discard uncapped needle/syringe and other sharps in containers provided for this purpose. Use safety products provided.
- **Patient Specimens**: Consider all specimens, including blood, as bio-hazardous.
- **Blood Spills**: Clean up with disposable materials (i.e, spill kit), clean and disinfect the area. Notify Housekeeping for thorough cleaning.

Droplet

Droplet Precautions are used when patients have a disease process that is spread by contact with respiratory secretions. These include: Respiratory infections (RSV, Human Metapneumovirus, Parainfluenza, Influenza), Neisseria meningitides (meningitis or sepsis), Invasive Haemophilus Influenza type B (meningitis, sepsis, epiglottises), Diphtheria, Pneumonic Plague, Mumps, Parvovirus B19, Rubella.

Droplet Precautions include:

- **Private Room**: Private room or rooms with a patient who has a similar diagnosis. Patient is confined to the room until directed by Infection Prevention and Control.
- **Mask and Gloves**: Worn by all hospital personnel upon entering the room.
- **Gown**: To be worn if there is a possibility of contact with bodily fluids.
- **Hand Hygiene**: Wash or sanitize hands upon: entering a patient room, removing gloves, and when leaving the patient room.
Contact

Contact isolation is used when patients have a disease process that is spread by contact with wounds or body fluids. These include: Diarrhea (Rotavirus, Clostridium difficile, E. Coli 0157:H7, Shigella, Salmonella, Hepatitis A, Campylobacter, Yersinia), open draining wounds, infection or colonization with multi-drug resistant organisms (MDROs).

Contact Precautions include:

- Private room: Private room or rooms with a patient who has a similar diagnosis. Patients who are undiapered and incontinent of stool should be confined to the room.
- Gloves: All hospital personnel wear gloves when entering the room.
- Gown: To be worn if clothing will have contact with patient or objects in the room.
- Hand Hygiene: Wash or sanitize your hands upon: entering patient room, removing gloves, and when leaving the patient room.

NOTE: For patients with Clostridium Difficile (C-Diff), do not use a hand sanitizer or other products which contain alcohol. Use soap and water only.

Airborne

Airborne precautions are used when the infection is spread through the air. Students will not be assigned these patients due to OSHA’s medical evaluation and fit testing requirements for the use of respirators. Examples of diseases requiring airborne precautions are:

- TB (tuberculosis).
- Measles.
- Chickenpox.

Precautions include:

- Place patient in a private negative pressure room. Keep door closed except to enter / exit.
- Wear an N-95 respirator mask, which requires a fit test, or a Powered Air Purifying Respirator (PAPR) when entering the room.
- Use proper hand hygiene. Wash or sanitize your hands upon: entering patient room, removing gloves, and when leaving the patient room.

Other Infection Prevention and Control Concerns include:

Sharps Containers

All sharps should be placed in a sharps container after use. These containers are placed frequently throughout units. Containers should be changed before full (pay attention to the “fill line” on container).

Waste

If bio-hazardous waste, blood or other body fluids, can be squeezed or crushed out of the container, they must be disposed of properly per health care provider/organization policy (i.e.: red bags, biohazard bags, etc).
Back Safety
Even the simplest activity if done incorrectly can strain the back and cause permanent injury. Every year many health care workers suffer back injuries, some of these injuries lead to permanent loss of work. Prevent injuries by following these simple safety guidelines.

Moving Patients
Be familiar with and follow the facility policy when moving any patients at Lifebridge Health. Do not attempt to use any lift equipment without proper education or supervision.

Student Injury/ Illness Reporting
Any on-the-job injury or illness involving a student must be reported immediately to the school instructor and the department manager or supervisor. If necessary, report to the facility Emergency Department ("ED") for initial treatment. ED will assess injuries and determine the risk level, treatment options, and medical services required.

The student and/or the school will be responsible to pay for services provided.

Documentation of any job-related illness or injury is to be done within 24 hours of injury. Ask manager/supervisor of the unit how and what to document on in accordance to facility and/or health care provider’s policy/procedure.

OSHA: OCCUPATIONAL SAFETY & HEALTH ACT
Students are required to fully comply with all OSHA standards.

CORPORATE COMPLIANCE & ETHICS
The purpose of a compliance program is to reduce the risk of misconduct, error or fraud. All who work or learn in lifebridge facilities are encouraged to practice ethically. Each person is expected to protect patient privacy, following expectations of personal conduct, respect and valuing others. All privacy rules, Medicare regulations, and laws must be followed to protect patients, employees, of all facilities. The program also calls for ongoing compliance monitoring, intervention and discipline as needed.

EMTALA
The Emergency Medical Treatment and Labor Act is a federal law that requires hospitals to treat all people who request emergency care.

Employee / Student Responsibility
- Get help for people (adults or children) who request or need emergency care.
- If help is required to transport the person, call the hospital operator; state the problem and the location. Request Security to help transport the person.
- Initiate an overhead medical emergency code, if appropriate
- Never direct a person seeking emergency care to another hospital or facility if a patient requiring treatment for an emergency medical condition refuses to stay at the hospital. Hospitals cannot force individuals to receive treatment, however:
  - If the individual insists on leaving or going elsewhere for treatment, it is important to give them information regarding the possible risk and benefits involved in staying or leaving
  - It is vital to document the individual’s refusal of treatment.
  - Contact your Instructor/ preceptor and manager if you have questions.
**HIPAA PRIVACY AND SECURITY OF HEALTH INFORMATION**

Certain laws and regulations require that practitioners and health plans maintain the privacy of health information. Health Insurance Portability and Accountability Act (HIPAA) is a privacy rule that limits the risk that personally identifiable health information will be viewed. The rule covers all individually identifiable health information in the hands of practitioners, providers, health plans, and healthcare clearinghouses.

HIPAA impacts students in the following ways:

- Patient records may not be photo copied or printed from a computer terminal for personal use (i.e. writing care plans or other papers)
- Students must not release any patient information independently
- Any request for patient information should be directed to your instructor/preceptor
- Violations of HIPAA may result in termination of the student experience
- Computer access must be used only to access records of assigned patients for the purposes of providing and documenting appropriate care

Do not use any of the above elements when writing reports or making presentations.

**Other Protected Information**

While this section primarily addresses the requirements of the HIPAA Privacy Rule, additional protections and requirements may apply to certain types of sensitive information, such as substance abuse records, genetic test results, Social Security numbers and credit card numbers. If the student assignment includes accessing or disclosing these types of information, the student should consult with their instructor/preceptor for relevant policies and procedures.

**Additional steps to protect a patient’s privacy**

- Close room doors when discussing treatments and administering procedures.
- Close curtains and speak softly in semi-private rooms when discussing treatment and performing procedures
- Avoid discussions about patients in public areas such as cafeteria lines, waiting rooms, and elevators.
- Safeguard medical records by not leaving the record unattended in an area where the public can view or access the record.
- Log off computer when finished viewing an electronic medical record.
- Do not share computer systems access code or password with anyone. Take precautions to prevent others from learning these access codes.
- Before discarding any patient-identifiable information, make sure it is properly shredded or locked in a secured bin to be destroyed later. Do not leave information intact in a trashcans.
- Do not use cell phones or other electronic devices to take or send photographic images and audio/video recordings of patients and/or medical information.
- **Do not publish medical information, photo images, or audio/video recordings on networking web sites or blogs, such as My Space, Twitter or Facebook.** This includes de-identified and “virtually” identifiable information.
- Employees may convey medical information in a secured email if relevant to one’s job and patient treatment. However, email communication is not permitted as a means for student learning.
- Students must not release any patient information independently. Any request for patient information should be directed to instructor/preceptor.
Disclosures to Patients’ Family & Friends
Only employees may disclose health information to a family member, other relative, close personal friend of the patient or any other person identified by the patient. This is never the responsibility of the student.

Information Privacy and Security Incidents
If you become aware of a situation where patient health information has been shared with the wrong person, or the privacy and/or security of patient health information has been compromised in anyway regardless of whether it was intentional or accidental, immediately report the situation to your instructor/preceptor and manager.

SMOKING FREE/TOBACCO-FREE ENVIRONMENT
In an effort to create a healthy work environment for all LBH employees, medical staff, patients, families, visitors, volunteers, contractual workers, and others in the community, this policy prohibits smoking on all LBH premises including in vehicles parked on any LBH property, and in LBH managed vehicles. Smoking materials shall not be sold at any LBH facility. In accordance with Maryland law, smoking is also prohibited in the LBH Hospitals and their adjacent buildings.
## 2018 National Patient Safety Goals

### Improve the Accuracy of Patient Identification

**Goal 1**

**NPSG.01.01.01:** Use at least two patient identifiers when providing care, treatment, or services.

**NPSG.01.03.01:** Eliminate transfusion errors related to patient misidentification.

### Improve the Effectiveness of Communication Amongst Caregivers

**Goal 2**

**NPSG.02.03.01:** Get important test results to the right staff person on time.

### Improve the Safety of Using Medications

**Goal 3**

**NPSG.03.04.01:** Label all medications, medication containers, and other solutions on and off the sterile field in peri-operative and other procedural settings. Note: Medication containers include syringes, medicine cups and basins.

**NPSG.03.05.01:** Reduce the likelihood of patient harm associated with the use of anticoagulation therapy.

**NPSG.03.06.01:** Maintain and communicate accurate patient medication information.

### Improve the Safety of Clinical Alarm Systems

**Goal 6**

**NPSG.06.01.01:** Reduce the harm associated with clinical alarm systems.

### Reduce the Risk of Health Care-Associated Infections

**Goal 7**

**NPSG.07.01.01:** Comply with current Centers for Disease Control and Prevention (CDC) hand hygiene guidelines or World Health Organization (WHO) hand hygiene guidelines.

**NPSG.07.03.01:** Implement evidence-based practices to prevent health care-associated infections due to multiple drug-resistant organisms in acute care hospitals.

**NPSG.07.04.01:** Implement evidence-based practices to prevent central line-associated bloodstream infections.

**NPSG.07.05.01:** Implement evidence-based practices for preventing surgical site infections.

**NPSG.07.06.01:** Implement evidence-based practices to prevent indwelling catheter-associated urinary tract infection (CAUTI).

### The Organization Identifies Safety Risks Inherent in its Patient Population

**Goal 15**

**NPSG.15.01.01:** Identifies patients at risk for suicide. Note: This requirement only applies to psychiatric hospitals and patients being treated for emotional or behavioral disorders in general hospitals.

### Universal Protocol for Preventing Wrong Site, Wrong Procedure, and Wrong Person Surgery™

**Universal Protocol**

**UP.01.01.01:** Conduct a pre-procedure verification process.

**UP.01.02.01:** Mark the procedure site.

**UP.01.03.01:** A time-out is performed before the procedure.

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Source: [www.jointcommission.com](http://www.jointcommission.com) - Joint Commission online
HARASSMENT-FREE
Each health care provider/organization supports a workplace where everyone is treated professionally, respectfully and not subject to harassment.

What is Harassment?
Harassment is unwelcome conduct that creates an intimidating, hostile or offensive work environment that unreasonably interferes with an individual's ability to perform their work / student assignment and/or is directed at an individual because of his/her age, disability, national origin, race, color, religion, gender, sexual orientation or veteran status.

What is Sexual Harassment?
Sexual harassment is unwelcome conduct of a sexual nature when submission to or rejection of this conduct explicitly or implicitly affects an individual's employment, unreasonably interferes with an individual’s work performance (including a student assignment), or creates an intimidating, hostile or offensive work environment.

This includes:
- Sexual advances
- Requests for sexual favors
- Other verbal or physical conduct of a sexual nature

How to Report Harassment
Each health care provider/organization has a thorough reporting process. Contact your instructor/preceptor or manager and they will assist you. If it is necessary to exclude either of these individuals, contact the facility Human Resource department. Investigations surrounding incidents of harassment will be conducted confidentially to the extent reasonably possible. Only those individuals with a need to know will have access to confidential communications resulting from the receipt and investigation of a complaint.

VIOLENCE IN THE WORKPLACE
Each health care provider/organization has a number of measures in place to keep employees, students and patients safe from workplace violence (e.g. emergency phones in parking lots, reinforce visitation policy, etc.).

Students can assist and support staff by learning the following:
- To recognize the warning signs
- How to respond appropriately
- What to do to prevent workplace violence
- How to report offenders
Recognizing the Warning Signs
Workplace violence and its warning signs can take many forms.

- Emotional: Paranoia, manic behavior, disorientation, excitability
- Physical: Frequent change of posture, pacing, easily startled, clenching fist, aggressive behavior
- Verbal: Claims of past violent acts, loud forceful speech, arguing, making unwanted sexual comments, swearing, threatening to hurt others, refusing to cooperate or obey policies

Other
A person with any of the following could also be a potential threat:

- Psychiatric or neurological impairments
- History of threats or violence
- Loss of power or control
- Strong anxiety or grief
- Alcohol or substance abuse

Responding to Situations that Could Become Violent

- Don’t reject all demands outright
- Don’t make false statements of promise
- Do respect personal space
- Don’t bargain, threaten, dare or criticize
- Do keep a relaxed but attentive posture
- Do manage wait times
- Do listen with care and concern
- Do offer choices to provide a sense of control
- Do avoid being alone
- Don’t make threatening movements
- Do ask security or police to stand-by (an officer nearby can provide a quick response if needed, or may stop the misbehavior altogether.)
- Don’t act impatient

Preventing Workplace Violence
By simply avoiding situations that are potentially unsafe, you can decrease the occurrences of workplace violence.

ALWAYS:

- Walk to cars in groups or call security for an escort
- Have car keys ready before leaving the building
- Check around, under and inside the car
- Secure belongings
- Be aware of surroundings
- Don’t talk on cell phones when walking to cars unescorted
NEVER:
- Go in deserted departments or dark hallways
- Share personal information with strangers

When prevention does not work, remember these important points
- Remain calm
- Secure personal safety
- Call security and/or immediate supervisor so they can follow up
- Cooperate fully with security and law enforcement

For Patient Care Areas
- Set limits and boundaries
- Understand and maintain the allowed number of visitors, and defined visiting hours, in your assigned work area
- Recognize and maintain staff space versus visitor space
- Contact security if behavior is out of control
- Students should never allow themselves to become involved in a confrontational situation. When confrontation is necessary, alert the appropriate staff member

Reporting Workplace Violence
Report all workplace violence incidents no matter how insignificant they may seem to your supervisor/preceptor.

LIFEBRIDGE HEALTH DRESS AND CONDUCT

Dress Code

All LifeBridge Health staff, including residents, staff physicians, volunteers, temporary/agency employees and contracted employees, instructors and students will adhere to these dress code requirements and appearance standards.

General Standards

1. Exhibit and maintain a well groomed appearance. Attire and personal grooming must satisfy all safety and health regulations.
2. Your identification badge must be visible at all times, face front, at chest level and in good condition.
3. Acceptable attire will be clean, pressed and in good repair.
4. Perfumes, after shave and lotions will be used in moderation
5. Fingernails (artificial nails are not allowed) and nail beds will be clean and neatly trimmed.
6. All tattoos must be covered.
All nursing instructors are responsible for enforcing the hospital dress code policies and have students change attire when in violation.

**Personal Conduct**

All students are expected to follow LifeBridge Health’s personal conduct policy

1. Treat patients, visitors and co-workers with the highest level of respect and courtesy.
2. Be forthright and honest in all activities and transactions
3. Respect and safeguard the well being, safety and security of patients, visitors and co-workers.
4. Work without the influence of drugs and alcohol.
5. Respect and safeguard the property and resources of patients, visitors, co-workers.
6. Respect and maintain the integrity of confidential information.
7. Have a professional appearance that enhances the confidence of patients and their families.
8. Observe policies, regulations and directives established by LifeBridge Health, its affiliates and management.
9. Perform assigned duties promptly, completely, efficiently and to the best of ability.

**CELL PHONE/BLUETOOTH USE**

The use of Cell Phones/Bluetooth is restricted to ensure that the use of such devices does not disrupt patient care or violate the comfort or privacy of our residents/patients. Their use is **prohibited** in all patient care areas. This also includes resident/patient rooms and dining rooms, open space on each unit, the main lobby, corridors, hallways, and treatment areas such as the gyms and meeting rooms. This includes the wearing of Bluetooth and other ear phone devices in resident/patient areas. Use of cell phones and Bluetooth devices are allowed in the cafeteria and employee break room.

**Facility Quick Links**

[Jump to Sinai Hospital](#)

[Jump to Northwest Hospital](#)
STUDENT NURSING ORIENTATION FOR: SINAI HOSPITAL

Mission Statement

Sinai Hospital of Baltimore provides a broad array of high-quality, cost-effective health and health-related services to the people of Greater Baltimore. Central to its role is the provision of undergraduate and graduate medical education and educational programs to other health professionals, employees and the community at large.

Vision Statement

Building upon its Jewish heritage, exceptional clinical strengths and its history of service; Sinai will emerge as a unique institution in the Maryland health care marketplace and will be a model for the nation as a comprehensive health care provider.

Sinai Hospital was founded in 1866 as the Hebrew Hospital and Asylum and has evolved into a Jewish-sponsored health care organization providing care for all people. Sinai is a nonprofit institution with a mission of providing quality patient care, teaching and research. Sinai Hospital is an agency of The Associated: Jewish Community Federation of Baltimore. Sinai has 467 acute beds and 35 newborn bassinets.

Magnet Designation

Magnet status is an award given by the American Nurses' Credentialing Center to hospitals that satisfy a demanding set of criteria measuring the strength and quality of their nursing. In a Magnet hospital, nursing delivers excellent patient care, nurses have a high level of job satisfaction, low staff nurse turnover rate, and appropriate grievance resolution. There is nursing involvement in data collection and decision-making in patient care delivery. Nursing leaders value staff nurses, involve them in shaping research-based nursing practice, and encourage and reward them for advancing in nursing practice. Magnet hospitals have open communication among all members of the health care team to attain the highest patient outcomes and optimal staff work environment. Sinai received its Magnet re-designation in 2014.

Patient Identification

At Sinai Hospital two forms of identification must be checked prior to any patient care or documentation. The two unique identifiers are: patient name and date of birth.
PATIENT RIGHTS & RESPONSIBILITIES

Patients at Sinai Hospital have the right to:

- Receive considerate and respectful care.
- Know the names and roles of those who are caring for them.
- Be well informed about their illness, possible treatments and likely outcome; and discuss the information with their doctor.
- Consent to, or refuse, any treatment, as permitted by law. If they refuse a recommended treatment, they will receive other needed and available care.
- Have an advance directive such as a living will or health care proxy.
- Privacy: The hospital, doctor and other caregivers will preserve one’s privacy as much as possible.
- Expect that treatment records are confidential unless permission was given to release information or unless reporting is required or permitted by law. When the hospital releases records to others, it emphasizes that records are confidential.
- Review one’s medical records and have the information explained, except when restricted by law.
- Expect that the hospital will give necessary services to the best of its ability. Treatment, referral or transfer to another health care facility may be recommended. If transfer is recommended or requested, the patient will be informed of the risks, benefits and alternatives.
- Know if Sinai Hospital has relationships with outside parties that could influence your treatment and care. These relationships might be with educational institutions, other health care providers or insurers.
- Consent or decline to take part in research affecting care. If one chooses not to take part, one will receive the most effective care the hospital otherwise provides.
- Be advised of realistic alternatives when hospital care is no longer appropriate.
- Be advised of hospital rules that affect treatment and about changes and payment options.
- Be told about hospital resources that can help resolve problems and questions about the patient’s stay and care.
BADGES – THIS SECTION IS MANDATORY INFORMATION

While participating in a clinical rotation or practicum experience at Sinai Hospital each student is expected to and will be responsible for wearing his/her college/university student Picture ID badge and Life Bridge badge. ALL students will need to obtain a Life Bridge Badge and wear it while in clinical. You will not be able to obtain a badge if you have not completed security module first if going to Women and Children’s Services. Students or instructors not displaying a photo ID will be asked to leave the unit.

How to Obtain a New Life Bridge Badge:
Instructors and Students will complete all required paper work, send to ERC as directed above, and wait to receive signed paperwork from the ERC via email. The instructor and students will then take the completed form to the Badging Office to receive a picture ID. Their hours of operation are Monday to Friday from 7:00am to 3:20pm (closed during lunch 1 to 2pm). Please call Badging Office ahead for holiday schedule or with questions, 410-601-6213.

All Badges must be Returned to ERC:
All badges need returned to the ERC at the end of the clinical rotation, or there will be a charge of $15 per non-returned badge.

How to Obtain Previous Life Bridge Student Badge:
If a student has already been at Sinai for clinical, their badge can be picked up in ERC during regular business hours Monday to Friday from 8:00am until 4 pm after they receive an email from ERC they are ready. Either students or instructor can pick up the badge for the ERC, please notify ERC who will be picking up badges via email nursingstudents@lifebridgehealth.org Please place Sinai in subject line.

For Instructors Only: Medication Cabinet Access and Acudose

Instructors who need medication cabinet access for units, once you have received your Sinai Badge, you need to email SinaiPCS_BusinessInformatics@lifebridgehealth.org Email needs to include following information – Your first and last name, Clock number (starts with 8000…), Unit you are doing clinical on, dates of clinical rotation, the last 6 numbers below the barcode on the back of badge (see picture to right). It will take one week to process your request.

To obtain acudose access, please contact Victor Robinson at 410-601-5881 or go to inpatient pharmacy on the first day of the clinical rotation. You must have a valid ID (diver’s license or other state issued ID) and your nursing license with you. Inpatient pharmacy is located the ground floor in the Schoeneman Building.

Only instructors will be given medication cabinet and acudose access.
If you are doing a clinical rotation in Women and Children’s Services, you will need to follow these steps:

- Access the [Sinai Infant and Child Security - What You Need to Know](#) module from Sinai’s Nursing Student website, read the presentation, and follow the link at the end to the post-test.
- Complete the post-test and **print out** the Certificate of Completion.
- This certificate must be given/sent to your clinical coordinator/instructor to email to Sinai prior to the start of your rotation in Women’s and Children’s Services. **You will not have access to the unit until this certificate has been handed in.**
- Sinai will retain the certificates as evidence that you have successfully completed the security training.

To Obtain Access to the Electronic Health Record (EHR)

All clinical groups, instructors, and practicum students are required to complete the Documentation Orientation before their clinical rotation starts if they are going to be documenting in the patient record or administering medications during the rotation.

Documentation Orientation will be completely online. The course consists of a series of online computer modules followed by a competency. Instructors and students must complete this course at least 10 days prior to the start of the clinical rotation. Instructors and students must then print the certificate of completion and get them to their instructor/school. Instructor or school will submit the completion certificates along with the other required forms, to ERC via email [nursingstudents@lifebridgehealth.org](mailto:nursingstudents@lifebridgehealth.org) at least 10 days prior to beginning clinical with Passport and other paperwork.

Policies and Procedures

Policies and Procedures can be accessed through the LifeBridge Health Intranet

1. Click on to the LBH Intranet from any hospital computer
2. Go to “Choose a Facility” and click on Sinai
3. Towards the bottom of the page, under “Documentation”, click on LifeBridge policies and procedures
4. In the search bar, type the policy for which you are searching and underneath the bar, click on “or anywhere in the document” rather than “Title”
5. Select the appropriate Department/Entity
6. Click Search
DIRECTIONS TO SINAI HOSPITAL

Sinai Hospital is located in northwest Baltimore, just three miles south of the Baltimore County line.

When approaching Baltimore...

From the Northwest
From Carroll County, Owings Mills or Reisterstown, take I-795 to I-695 East (Baltimore Beltway, Towson direction). Take exit 23 onto I-83 South (Jones Falls Expressway). Head west on Northern Parkway. At the second traffic signal, take a left onto W. Belvedere Avenue. Sinai Hospital will be on your left.

From the North
From Pennsylvania and northern Baltimore suburbs, take I-83 South. At junction with I-695 (Baltimore Beltway), enter I-695 heading West (Pikesville direction). Re-enter I-83 South at Exit 23. Proceed for about three miles, and take Exit 10, Northern Parkway. Head west on Northern Parkway. At second traffic signal, take a left onto W. Belvedere Avenue. Sinai Hospital will be on your left.

From the West
From Howard County and points west, head east on I-70 or I-95 to I-695 East (Baltimore Beltway, Towson direction). Take exit 23 onto I-83 South (Jones Falls Expressway). Proceed for about three miles, and take Exit 10, Northern Parkway. Head west on Northern Parkway. At second traffic signal, take a left onto W. Belvedere Avenue. Sinai Hospital will be on your left.

From the East and Northeast
From Towson, Harford County and points farther north, take I-95 South to Exit 64, I-695 West (Baltimore Beltway, Towson direction). Take exit 23 onto I-83 South (Jones Falls Expressway). Proceed for about three miles, and take Exit 10, Northern Parkway. Head west on Northern Parkway. At second traffic signal, take a left onto W. Belvedere Avenue. Sinai Hospital will be on your left.

From the South
From downtown Baltimore, take I-83 North (Jones Falls Expressway) to Exit 10, Northern Parkway West. At third traffic signal, take a left onto W. Belvedere Avenue, Sinai Hospital will be on your left.
PARKING AREAS TO BE USED

Parking Hangtag are no longer required. But each person must accurately complete Parking form and send to ERC with other required paperwork. You will need your Sinai ID to get into lot, or student ID first day of clinical.

Pimlico Lot (Preakness Way) DURING THE WEEK between the hours of 5:30am-9:30pm

Directions: from Jones Falls Expressway go west on Northern Parkway. Go to the 4th traffic light. This is Preakness Way. Turn left onto Preakness Way. Make the first right turn into the Pimlico parking lot. (right side is for Sinai, left side is for Levindale)

Besides many employees, this lot is for PRN employees, temporary and agency personnel scheduled for daylight shifts this off-site location will ordinarily be serviced from 5:30am-9:30pm.

Cylburn Garage for Evening and Weekend Shifts

Access during the week starts at 2:00pm every day/night and on the weekends. This is a badge access garage; you will need to scan your badge on the card reader to enter. Please do not enter on the Emergency Room entrance side, this is strictly for patients/visitors. To get to this parking lot you will again go west from Jones Falls Expressway on Northern Parkway. Go to the second light which is Greenspring Avenue and turn left. Follow Greenspring past the Sinai ER to Cylburn Ave and turn right. You will see the garage a short way down on the right.

OTHER INFORMATION

Pastoral Care and Chaplaincy Services
Meeting your spiritual needs is an important part of the healing process. To this end, Sinai Hospital accommodates the spiritual needs of individuals of all faiths. Requests for visits from clergy may be made with the Office of Pastoral Care and Chaplaincy Services at extension 29680. During evenings and weekends, please contact the hospital operations coordinator by calling extension 21652.

The non-denominational Jill Fox Meditation Room is located on the first floor. It is open at all times with Bibles and devotional materials available. There is also a Chapel / Meditation Room located in the Emergency department.

A Jewish chapel, located in the first floor corridor between the main hospital and the Blaustein Building, is used for weekday (Monday through Thursday) Mincha services. It is open at all times for prayer and meditation.
For Observant Jewish Patients:

Sinai Hospital has been in the mainstream of Jewish thought and tradition for more than 130 years. By strict adherence to Jewish law, we assure observant patients that spiritual and medical needs are treated with equal concern.

- Fresh glatt kosher food is prepared daily.
- Sabbath candles, challah, grape juice, Bibles and prayer books are available.
- Manual bells for Shabbat are available to summon nurses.
- Signatures are not required when Jewish law prohibits writing; your word is enough.
- A Shabbat entrance and elevator are available from Friday sunset to Saturday sundown.
- Accommodations can be arranged for family members to stay with you during Shabbat if medical attention and/or space permit.
- Jewish holiday rituals are observed.
- Sinai Hospital is within the eruv.
- Bikur Cholim visitations serve Jewish patients.
- Sinai Hospital’s senior chaplain is a rabbi.

**DINING SERVICES**

**Greenspring Cafe**
This mall-like food court located on the first floor offers a wide array of dining choices.

Open daily from 6:30 a.m. to 8:00 p.m.

**Cafe Shalom**
This kosher restaurant located on the first floor offers an assorted menu of glatt kosher and chalov Israel dairy choices.
Open Sunday through Thursday, 11:00 a.m. to 8:00 p.m., and Friday from 11:00 a.m. to 2:00 p.m.

**Market Place**
Located off the Brown-Crane Lobby, the Market Place is a convenient stop for coffee and dessert, take-home dishes, and basics such as milk and eggs.

Open daily from 8:00 a.m. to 2:00 a.m.
LifeBridge Health Sinai Contacts for Clinical Rotations

Cathy Case, RN-BC, MSN, CPAN, CDE  ccase@lifebridgehealth.org
Team Leader Education Resource Center at Sinai
(410) 601-6740

Carol Zittle, RN, MS  czittle@lifebridgehealth.org
Manager Clinical IT-Learning & Adoption Office 410-601-0992

Kara Ward, RN, MS, CPN  karward@lifebridgehealth.org
Nurse Outcome Educator Women’s & Children’s Security Information
(410) 601-8713

Christina Pibulsiri  cpibulsi@lifebridgehealth.org
Security Badging
(410) 601-6213

Sarah Horn  shorn@lifebridgehealth.org
Admin Cashier Parking
410-601-9767

For Instructors Only:

Access to Medication Cabinets  SinaiPCS_BusinessInformatics@lifebridgehealth.org
Lynne Nielsen
Business Intelligence Analyst
410-601-4916
About Northwest Hospital

Northwest Hospital, located in Randallstown, serves the health care needs of the northwest Baltimore metro area, including Baltimore County, western Baltimore City, Carroll and Howard Counties. It was established in 1962 as Liberty Court Rehabilitation Center, and in 1963 became Baltimore County General Hospital. In June of 1993, the hospital changed its name to Northwest Hospital.

Mission

Northwest Hospital exists to improve the well-being of the community by nurturing relationships between the hospital, medical staff and our patients.

Philosophy

Northwest Hospital, a not-for-profit organization, is committed to creating and maintaining an environment where exceptional quality care and service is achieved and recognized by our patients and their families, members of the medical and allied health staff, employees, volunteers and the communities we serve. Care and service are provided without regard to age, sex, race, religion, disability or financial status.

Vision

Northwest Hospital will be a recognized leader in customer care and clinical quality in the services we choose to offer by exceeding expectations of patients, physicians, employees and the community.

The Friesen Concept

In keeping with Northwest Hospital’s philosophy of patient-centered care, its facilities have been designed around the Friesen concept, with nursing alcoves outside each patient room so nurses can spend more time with their patients. The Friesen design hospital functions differently from the traditional hospital in that it creates an environment conducive to direct patient care through smaller 20-bed units; private patient rooms; elimination of nursing stations; and the
placement of supplies, medications and charts in close proximity to patients. Northwest is an all-private room hospital that has 254 beds.

**Patient Identification**

At Northwest Hospital two forms of identification must be checked prior to any patient care or documentation. The two unique identifiers are: patient name and date of birth.

**PATIENT RIGHTS**

**Patients at Northwest Hospital have the right to:**

- Receive considerate and respectful care.
- Know the names and roles of those who are caring for them.
- Be well informed about their illness, possible treatments and likely outcome; discuss information with their physician.
- Consent to, or refuse, any treatment, as permitted by law. If they refuse a recommended treatment, they will receive other needed and available care.
- Have an advance directive such as a living will or health care proxy.
- Privacy: The hospital, physicians and other caregivers will preserve the privacy of all patients.
- Expect that treatment records are confidential unless permission was given to release information or unless reporting is required or permitted by law. When the hospital releases records to others, it emphasizes that records are confidential.
- Review medical records and have information explained, except when restricted by law.
- Expect that the hospital will give necessary services to the best of its ability. Treatment, referral or transfer to another health care facility may be recommended. If transfer is recommended or requested, the patient will be informed of the risks, benefits and alternatives.
- Know if Northwest Hospital has relationships with outside parties that could influence treatment and care. These relationships might be with educational institutions, other health care providers or insurers.
- Consent or decline to take part in research affecting care. If one chooses not to take part, she/he will receive the most effective care the hospital otherwise provides.
- Be advised of realistic alternatives when hospital care is no longer appropriate.
• Be advised of hospital rules that affect treatment and payment options.
• Be told about hospital resources that can help resolve problems and answer questions about patient’s care.

BADGES - THIS SECTION IS MANDATORY INFORMATION

While participating in a clinical rotation or practicum experience at Northwest Hospital, each student is expected to and will be responsible for wearing his/her college/university student Picture ID badge. Instructors and Practicum Students going to the BHU or 4C unit will obtain a Northwest badge by first downloading the badge form from the website. Complete the Badge ID Form. Then submit the completed form to the Academic Affiliation representative of the hospital, to be signed. Afterwards the instructor and Practicum Student will then take completed forms to the Badging Office to receive a picture ID at Northwest hospital. Name tags are not acceptable, the ID must have the picture on it and it must be in plain sight. Students or instructors not displaying a photo ID will be asked to leave the unit.

To set up a time to obtain Northwest badges call Linda Edwards at 410-521-2100 ext 55217 or Vocera 410-496-7500 and ask for Linda Edwards.

The Badge Office is in the Administration Services Building Room 34 located on the lower level of the hospital. Hours of operation are Monday-Friday 7:00am to 3:30pm (closed for lunch 12pm to1pm).

PARKING AREAS TO BE USED

All students and faculty may park in the K or L Employee lots on Carlson Lane. Carlson Lane is off of Old Court Road.

Instructors or students are not allowed to park in the parking lot directly in front of the hospital that is for visitors only.

To Obtain Access to the Electronic Health Record (EHR)

All clinical groups, instructors, and practicum students are required to complete the Documentation Orientation before their clinical rotation starts if they are going to be documenting in the patient record or administering medications during the rotation. Effective July 1, 2014, the Documentation Orientation will be completely online. The course consists of a series of online computer modules followed by a competency. Instructors and students must complete this course at least 10 days prior to the start of the clinical rotation. Instructors and students must then print the certificate of completion and get them to their instructor. Instructors will submit the completion certificates along with the other required forms, to Karen Lee kylee@lifebridgehealth.org at least 10 days prior to beginning clinical.
**ACCUDOSE ACCESS**

**AcuDose** access: Acudose will be obtained by email. Instructors must send a written request to Karen Lee at kylee@lifebridgehealth.org with the following information:

1. Instructors Name and credentials
2. School Name
3. Unit assigned to at Northwest Hospital
4. Last for digits of SS# or School ID
5. Beginning and end date on Unit

Karen will copy the instructor on the request to the NW Pharmacy Director and the access will be returned via email to the instructors school email address.

**POLICIES AND PROCEDURES**

Policies and Procedures can be accessed through the LifeBridge Health Intranet

1. Click on the LBH Intranet from any hospital computer
2. Go to “Choose a Facility” and click on Northwest
3. Towards the bottom of the page, under “Documentation”, click on LifeBridge policies and procedures
4. In the search bar, type the policy for which you are searching and underneath the bar, click on “or anywhere in the document” rather than “Title”
5. Select the appropriate Department/Entity
6. Click Search

**DINING SERVICES**

7. Cafeteria
8. The cafeteria serves hot meals at the following times:
9. Breakfast – 6:45 AM to 10:30 AM
10. Lunch – 11:30 PM to 2:00 PM
11. Dinner – 4:00 PM to 6:00 PM
12. The cafeteria is open from 6:45 AM to 12:00 Midnight daily. Beverage and snacks are available between meal times. There are also vending machines in the cafeteria and other areas, where beverages and snacks can be purchased.
DIRECTIONS TO NORTHWEST HOSPITAL

Address:

5401 Old Court Road
Randallstown, MD 21133
410-521-2200

From I-695: Take Beltway Exit 18B (Randallstown) to Liberty Road and proceed two miles to Old Court Road. Turn left onto Old Court and go one block to Carlson Lane. The hospital is located on the left.

From I-795: Follow the signs to Baltimore. Take Exit 1B to I-695 West (Glen Burnie). Take Exit 18B (Randallstown) to Liberty Road and proceed two miles to Old Court Road. Turn left onto Old Court and go one block to Carlson Lane. The hospital is located on the left.

From Southern Carroll County: Take Liberty Road (Route 26) toward Baltimore. Turn right onto Old Court Road and go one block to Carlson Lane. The hospital is located on the left.
LifeBridge Health Northwest Contacts for Clinical Rotations

Karen Y. Lee, RN MSN  
Clinical Practice Education Specialist/  
Academic Affiliation Coordinator  
Office-410-701-4454  
kylee@lifebridgehealth.org

Carol Zittle, RN, MS  
Manager Clinical IT-Learning & Adoption  
Office-410-601-0992  
czittle@lifebridgehealth.org

Leslie Welfeld, RN, BSN  
Clinical IT-Learning & Adoption Education  
Specialist  
Office-410-496-7117  
lwelfeld@lifebridgehealth.org

Linda Edwards  
Security Badging  
Office- 410-521-5217  
ledwards@lifebridgehealth.org
Note: Parts of this manual have been adopted from Utah Organization of Nurse Leaders' "Orientation State-wide Student Nurse Passport" (August 2009)
Revised: 9/11; 3/14; 5/14; 12/17