

**Northside Hospital Student Placement Office**  
**Cohort Rotation - Onboarding Checklist**

<b>Northside Adjunct Faculty Full Name (Legal name only)*:</b>	
<b>Rotation ID*:</b>	<b>Semester*:</b>
<b>Clinical Start Date*:</b>	<b>Clinical End Date:</b>
<b>School Name*:</b>	
<b>Course Name*:</b>	<b>Campus/Unit Assigned*:</b>

**\*Required**

Orientation Type	Orientation Items	
<b>Cohort Rotation Orientation</b>	Attend School Orientation Review course content, outline, and schedule, grading criteria Confirm receipt of student names and contact information Confirm receipt of contact information for Course Coordinator Review school-specific expectations for Adjunct Faculty <ul style="list-style-type: none"> <li>○ Active supervision, perform skills, review all documentation, med administration, etc.</li> </ul>	Review school-specific expectations for students <ul style="list-style-type: none"> <li>○ Level of independence, professional behavior, etc.</li> </ul> Location/contact information for unit assignment Unit daily routine Identify space for pre/post-conference Review observation/shadowing assignments (if applicable)
<b>Nursing Student Orientation</b>	Student Badges/Parking Uniforms and Dress Code Student Nurse Scope of Practice Accessing Policies & Procedures via Lucidoc	Accessing Resource materials online (Lippincott, etc.) Service Behaviors & Professionalism EMR Confidentiality & HIPAA Cell Phone Use
<b>Unit Orientation</b>	Patient Assignments Assignment sheet/board Unit/Department's Scope of Services Role Expectations for Students Huddle/Bedside Handoff/Shift Report Accident/Injury Reporting/Incident Reporting Following Unit Chain of Command Use of Equipment <ul style="list-style-type: none"> <li>• Blood pressure monitor</li> <li>• Blood glucose monitor</li> <li>• Pulse oximeter</li> <li>• Use of PPE</li> <li>• Sharps disposal</li> </ul>	Sharps disposal Supply/Storage Clean/Dirty Utility Rooms Waste Disposal Eye wash location Location of Code Cart/AED Infection Prevention (isolation precautions, disinfection) Handwashing

I have reviewed and completed each item on the **Cohort Rotation - Onboarding Checklist**.

Northside Adjunct Faculty Signature: \_\_\_\_\_ Date \_\_\_\_\_

Northside Unit Representative Signature: \_\_\_\_\_ Date \_\_\_\_\_

Please scan/email completed forms to:  
 Patient.carestudents@Northside.com  
 Fax: (404)531-6210