ATRIUM HEALTH FACUTLY/CLINICAL INSTRUCTOR FLASH ORIENTATION FORM

NAME: _____ **DATE:** _____

TITLE: _____ **UNIT:** _____ **FACILITY:** _____

Purpose: To familiarize new faculty instructors/teammate clinical instructors to the unit where temporarily assigned.

Instructions: Arrange a unit orientation date and time with the unit manager and complete this form with the unit manager or orienting designee prior to the start of the clinical rotation. **Initial each task upon review.**

ROLE	RESPONSIBILITIES
Assigned Faculty/Clinical Instructor	• Notify Charge Nurse of arrival • Initial form as items are reviewed • Sign Flash Orientation Form upon completion • Submit completed form to ACEMAPP "Flash Orientation" requirement
Charge Nurse/Orienting Designee	• Review Flash Orientation with instructor • Use N/A if not applicable • Sign form upon completion and return to instructor
Daily Requirements for Clinicals with Students	• Notify Charge Nurse and post student nurse assignment sheet • Review Flash Orientation form with students

WELCOME TO THE UNIT

_____ Assigned resource person
_____ Reviewed assignment for the day, including break process
_____ Reviewed unit routine: bedside report and time/frequency of vital signs
_____ Reviewed unit specific phone numbers, contacts, and facility/unit emergency procedure phone numbers
_____ Reviewed Huddle process
_____ Reviewed Purposeful Rounding process
_____ Reviewed Unit layout and access code to rooms:

- ☐ Supply rooms – clean and dirty
- ☐ Equipment rooms
- ☐ Medication room/area
- ☐ Break room
- ☐ Nutrition rooms
- ☐ Linen supplies

EMERGECNY RESPONSE

_____ Location of crash carts
_____ Fire safety: location of extinguishers, pull boxes, and evacuation route
_____ Operation of patient call system
_____ Location of panic button (if applicable to unit)
_____ Rapid Response Activation

EQUIPMENT & SUPPLIES

_____ Wheelchairs and stretchers
_____ Medication dispensing system and medication refrigerator
_____ Personal Protective Equipment (PPE)
_____ Respiratory Supplies
_____ Vital Sign machine, IV pump, B/P cuffs and stethoscopes, point of care testing
_____ Location of policies and procedures
_____ Patient census board
_____ Telemetry monitor process

Faculty/Clinical Instructor Signature: _____

Charge Nurse or Staff Orienting Designee Signature: _____