

## Welcome to Galichia Heart Hospital

We are pleased that you have chosen to help us to take care of our patients. The experiences and knowledge you will gain while here will make a lasting impression in the care that you deliver. The following is provided to answer any questions that you may have, but please do not ever hesitate to ask questions.

- Phone Numbers: The main number to the hospital is 858-2610. The care areas are:
  - T2 858-2618
  - T3 858-2693
  - T4 858-8904
  - ICU 858-2989
  - Outpatient 858-2625
  - Cath Lab 858-2638
  - EP lab 858-2938
  - Emergency Room 858-2885
  - Endo Recovery 858-2975
  - Surgery 858-2652
  - Clinical Supervisor 858-2965
  - Education Coordinator 858-2626

Make sure that you are aware of your area's phone numbers.

- Dress Code: Please ensure that you are wearing your school's accepted uniform and that you present a professional image:
  - Acrylic nails are not acceptable in any care area
  - Shoes must be appropriate and in good condition
  - Heavy colognes/perfumes are not suggested
  - CELL PHONES are strictly prohibited
- Attendance: It is expected that you arrive to the clinical area in a timely manner (0700 is the start of the shift for day shift and 1900 is the start of the shift for night shift).
- 15 and 5 rule: Everyone is expected to make eye contact at 15 feet and make a greeting at 5 feet.

- Patient Satisfaction:
  - We take very great strides to ensure that we are meeting our patients satisfaction and would like you to do your best to provide outstanding care to all of our patients.
  - Please ensure that the patients are kept comfortable (pain assessments at least every 4 hours). Ask the patient about their pain or comfort every time you see them.
  - Please ensure that the patient is warm/cool.
  - Please make sure that you keep them informed about their care, tests or procedures.
  - Talk with them about their medications.
  - Ambulate your patients, provide them with hygiene (assist them do not just “set it up” for them.
  
- Parking: The parking designated is the farthest north east corner of the hospital parking lot.
  
- Badge: You must wear your schools identification badge at all times when at Galichia Heart Hospital.
  
- SMOKING: Galichia Heart Hospital is a TOBACCO FREE environment and does not permit smoking or chewing of tobacco on the property or in your cars.
  
- Safety Codes that you may hear and what they mean:
  - CODE RED
    - INITIATED FOR A FIRE OR SUSPECTED FIRE
  - CODE BLUE
    - INITIATED FOR IMMEDIATE MEDICAL ATTENTION NEED FOR A PATIENT WHO HAS STOPPED BREATHING OR HAS GONE INTO CARDIAC ARRES
  - CODE GRAY
    - SEVERE WEATHER/TORNADE
  - CODE STRONG
    - SECURITY IMMEDIATE ASSISTANCE NEEDED
  - CODE YELLOW
    - EMERGENCY EVACUATION PLAN
  - CODE ARM
    - STAY OUT OF THE AREA-WEAPON
  - CODE BLACK
    - BOMB THREAT
  
- How to initiate the Rapid Response Team:
  - The rapid response team was designed to assist the urgent care of any patient situation in which is not a code blue, but warrants urgent assistance.

- Examples include: unexplained, uncontrolled hypotension/hypertension, decreased O2 saturation, change in the level of consciousness, or for any questionable patient status.
  - Simply page: 695-9999 and enter either your phone number or the patients room number for the team to respond to or you may call ext. 2965.
- How to initiate a CODE BLUE:
- On any phone push the # sign and then the 0. Speak clearly and in an appropriate tone say “Code Blue” and the room number that you need assistance. Repeat this 3 times.
  - Proceed with emergency care of the patient.
- There are 5 Rights of Medication Administration that must be followed at all times:
- Right patient
  - Right medication
  - Right time
  - Right route
  - Right dose
  - PLEASE ALSO CHECK MEDICATIONS AND SUPPLIES FOR EXPIRATION (notify the resource nurse or unit manager/clinical supervisor of any expired medications or supplies)
  - You are to know the indications, actions and uses, as well as potential side effects of any medication you are to be giving under the direct supervision of the nurse you are working with or your instructor.
- Documentation
- You will work very closely with the nurses to ensure all care that is delivered to our patients is documented.
  - In each chart there is a “red” signature validation sheet, please make sure that you sign it prior to providing care for the patient you are assigned.
  - Routine vitals are 0800, 1400 and 2000 for telemetry. Routine vitals for ICU are at a minimum of hourly. These vitals may be done more frequently based on the patients condition.
  - You must do a minimum of every 2 hour documentation
  - You must check/round on your patients every 1 hour
  - Patients who can ambulate must be ambulated at least 3 times on day shift and 1 time on night shift
  - We do not accept “verbal orders”. When nurses receive orders they are via Phone orders (P.O.).
- Policies and Procedures
- You may review and become familiar with all policies and procedures by reviewing them on the intranet on the “policies” link.

- If you are unclear on the policies or need further education you may contact your resource nurse, the unit manager, the clinical supervisor or the education coordinator.

Example of signing off on orders:

1/1/08 MOM 30ml daily prn constipation  
0900 p.o Dr. Smith/N. Nurse, RN  
\_\_\_\_\_ noted B. Smith, RN 01/01/08 1000

Example of signing off shift orders (RED INK)

1/2/08 1845pm 12 Hour chart and MAR review\_\_\_\_\_B. Smith, RN \_\_\_\_\_

Please do not hesitate to ask questions. We want this hospital experience to be a positive experience for you and an opportunity to grow personally and professionally.



## Acknowledgement of Galichia Heart Hospital Orientation Packet

I, \_\_\_\_\_(printed name), acknowledge receipt of the written orientation to Galichia Heart Hospital. I have been provided contact numbers and an opportunity to clarify or have my questions answered. I understand that my failure to adhere to the expectations as established can lead to my status of “Do Not Return” to Galichia Heart Hospital.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date