Student Experience

Orientation Information
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Welcome to PeaceHealth

The need for healthcare providers in the future continues to grow. New technologies and medical breakthroughs are broadening the skills needed in the workforce. It is an exciting time to pursue a career in healthcare!!

Thank you for considering PeaceHealth as part of your educational experience. We appreciate the opportunity to serve our community by encouraging and supporting the development of future healthcare workers!

Heather Schoonover MN, RN, PHCNS-BC
Regional Director
Learning and Development

The following material is to assist in orienting you to our organization prior to participating in a clinical experience. If you have any questions as a result of reviewing this information, please contact your placement coordinator or call 360-414-7560 for assistance. Again...Welcome!
Directions: **St. John Medical Center** is located at **1615 Delaware** between Kessler Boulevard and 15th Avenue in Longview, Washington. From Interstate 5, north or south, take exit 36 (Longview/Long Beach Exit) over the Cowlitz River to Hwy. 432, which becomes Tennant Way. At the intersection of Tennant Way and 15th Avenue, turn right onto 15th. Turn left on Delaware for parking.

Also located at 1615 Delaware Street

**PeaceHealth Medical Group**

- Family Practice A
- Family Practice B
- Family Practice C
- InMotion Clinic
- Internal Medicine Clinic A
- Specialty Clinic

Want more directions? Visit [Mapquest](http://www.mapquest.com).
The **Workplace Wellness Services** office is at **1405 Delaware Street**, Longview, Washington.

Want more directions? Visit [Mapquest](https://www.mapquest.com).

**Directions:** The **Broadway Campus** is located at **600 Broadway**, Longview, Washington.

You will find the following services located there:

- **A Child’s Place**
- Behavioral Health Outpatient
- Center for Behavioral Solutions
- **Diabetes & Nutrition**
- Dialysis
- **LifeQuest Wellness Programs**
- Patient Financial Services

Want more directions? Visit [Mapquest](https://www.mapquest.com).

The **Women’s Health Pavilion** is located at **1660 Delaware** (17th & Delaware), Longview, WA 98632.

Want more directions? Visit [Mapquest](https://www.mapquest.com).
Mission

We carry on the healing mission of Jesus Christ by promoting personal and community health, relieving pain and suffering, and treating each person in a loving and caring way.

Core Values

Respecting Individual Human Dignity and Worth
We respect the dignity and appreciate the worth of each person as demonstrated by our compassion, caring, and acceptance of individual differences.

Stewardship
We choose to serve the community and hold ourselves accountable to exercise ethical and responsible stewardship in the allocation and utilization of human, financial and environmental resources.

Collaboration
We value the involvement, cooperation and creativity of all who work together to promote the health of the community.

Social Justice
We build and evaluate the structures of our organization and those of society to promote the just distribution of health care resources.
Our Vision

Every PeaceHealth patient will receive safe, evidence-based, compassionate care; every time, every touch

Vision Elements 2012

To achieve this vision, we agreed on five strategic priorities or areas where we wish to focus our combined efforts to become ...

One System Serving Many Communities

- Mission, Culture and People: As a team of inspired caregivers, we will deliver high value exceptional medicine and compassionate care
- Safe and Clinically Effective Care: We will do no harm and deliver the best possible outcomes.
- Clinician Partnership and Planned Care: We will promote clinician partnership and coordinated care in the delivery of patient-centered team medicine across the continuum.
- Growth and Innovation: We will assure our continuity through growth, innovation, and financial strength.
- High Value: We will deliver our Promise of Exceptional Medicine and Compassionate Care at a reasonable cost.

Safe, effective care must be number one.
Our History

Margaret Anna Cusack

"A Christian must have a very vocal political character, seek out justice, make peace...feed the hungry to live out the Gospel of Jesus Christ."

Sister Margaret Anna Cusack was born to an aristocratic family of English origin in Coolak, County Dublin, Ireland. Her father was a doctor who was dedicated to the service of the poor.

She was raised under the precepts of the Church of England and viewed social justice through Christian concepts. In 1853 she joined the Anglican Sisterhood. She quickly became disillusioned with the petty concerns of the group. Upon leaving five years later she wrote, "I do not believe in offering the gospel of talk to starving people."

In 1858 she became a convert to the Roman Catholic Church. One year later she entered the Order of Poor Clare nuns and took the name Mother Francis Clare.

The year 1861 brought Mother Clare to Kenmare in Ireland where she founded the first convent of the Poor Clares in the west of Ireland. A talented writer, she published on the issues of social injustice. Her writings and actions focused on advocacy of women's rights including equal pay, equal opportunity for education and legal reform to give women control of their own property.

The Irish Famine of 1879 plunged the country into crisis. Margaret Anna responded by raising great sums of money to feed the poor. By now her outspoken ways and success at feeding the poor made her the target of government and church leadership. Church and public resistance forced her to shut down her Famine Relief Fund and look to England for support of her vision.

Her next effort was to establish another convent and to propose development of an industrial school for women...complete with a day center for their children.

In 1884 Margaret Anna founded the Sisters of St. Joseph of Peace. Seeking funds to support her sisters' work with women and children, in 1885 she set off for America. Soon after arriving, she established a home for migrant women who, upon arrival in New York, often found themselves to be homeless and jobless.

The success of the Sisters of St. Joseph of Peace spread. By 1890 the Sisters were being asked to go west to serve the needs of frontier settlements springing up in the Pacific Northwest. It was in August of this year that four Sisters set off from Jersey City, New Jersey on what was to be the beginning of PeaceHealth, and the continuation of the vision of Margaret Anna Cusack.
The Sisters of St. Joseph of Peace

A rich heritage and mission dating back to the late 1800’s stands behind PeaceHealth. The timeline below summarizes the evolution of the health care ministry of the Sisters of St. Joseph of Peace in the Pacific Northwest.

### Historical Timeline

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1884</td>
<td>Margaret Anna Cusack founds the Sisters of St. Joseph of Peace in Nottingham England</td>
</tr>
<tr>
<td>1885</td>
<td>Sisters come to America (New Jersey) committed to alleviating injustices, providing health care to the sick and injured, and educating young women</td>
</tr>
<tr>
<td>1890</td>
<td>Two sisters go west to Fairhaven, Washington (now Bellingham)</td>
</tr>
<tr>
<td>1891</td>
<td>St. Joseph Hospital opened in Fairhaven, Washington (now Bellingham)</td>
</tr>
<tr>
<td>1896</td>
<td>Mater Misericordiae Hospital founded in Rossland, British Columbia (closed 1969)</td>
</tr>
<tr>
<td>1901</td>
<td>Sacred Heart Hospital founded in Greenwood, British Columbia (closed 1918)</td>
</tr>
<tr>
<td>1916</td>
<td>Seward General Hospital established in Seward, Alaska (closed 1919)</td>
</tr>
<tr>
<td>1916</td>
<td>St. Anthony’s Hospital established in Wenatchee, Washington (Sold in 1974 to Central Washington Deaconess and is now Central Washington Hospital)</td>
</tr>
<tr>
<td>1922</td>
<td>Little Flower Hospital founded in Ketchikan, Alaska</td>
</tr>
<tr>
<td>1936</td>
<td>Sacred Heart General Hospital established in Eugene, Oregon</td>
</tr>
<tr>
<td>1943</td>
<td>St. John’s Hospital established in Longview, Washington</td>
</tr>
<tr>
<td>1963</td>
<td>Ketchikan General Hospital leased from the City of Ketchikan, Alaska</td>
</tr>
<tr>
<td>1976</td>
<td>Hospitals incorporated under the Sisters of St. Joseph of Peace, Health and Hospital Services Corporation- later to be renamed PeaceHealth System.</td>
</tr>
<tr>
<td>1984</td>
<td>St. Helen’s Hospital, St. Helen’s Oregon (discontinued in 1990)</td>
</tr>
<tr>
<td>1984</td>
<td>Snoqualmie Valley Hospital, Snoqualmie, Washington (discontinued in 1991)</td>
</tr>
<tr>
<td>1986</td>
<td>Marianwood established, Issaquah, WA. (transferred to the Sisters of Providence Health System in 1996)</td>
</tr>
<tr>
<td>1989</td>
<td>Peace Harbor Hospital, Florence Oregon</td>
</tr>
<tr>
<td>1999</td>
<td>Cottage Grove Community Hospital, Cottage Grove, OR</td>
</tr>
<tr>
<td>2000</td>
<td>El Salvador Health Mission</td>
</tr>
<tr>
<td>2005</td>
<td>Building began at RiverBend, Springfield, Oregon</td>
</tr>
<tr>
<td>2008</td>
<td>Sacred Heart Medical Center at RiverBend opened in Springfield, Oregon</td>
</tr>
<tr>
<td>2009</td>
<td>PeaceHealth officials announce plan to build a new Integrated Medical Center and Critical Access Hospital, scheduled to open in the summer of 2012</td>
</tr>
</tbody>
</table>
Behavioral Expectations

A clinical experience with PeaceHealth assumes individual commitment to our standards of Behavioral Expectations that are based on our Mission and Core Values at all levels of organizational activity. Therefore, I make a personal commitment to:

**Respecting Individual Dignity and Worth**
- Treat all persons with respect
- Expect high level of performance; encourage and exercise highest professional potential
- Resolve conflicts openly and directly
- Take a positive approach to problem-solving, avoid placing blame and acknowledge mistakes
- Support an environment that fosters development of the individual
- Give positive and constructive feedback to others
- Listen and respond
- Speak with sensitivity about the needs and feelings of others
- Handle unanticipated events and crisis situations in a constructive manner
- Participate in orientation and educational opportunities
- Respect confidentiality of information

**Stewardship**
- Make strategic decisions consistent with the PeaceHealth Mission and Core Values
- Work to minimize duplicating services within the community
- Respect the natural environment by conserving and recycling materials where possible
- Work together to provide quality, cost effective services
- Encourage responsible use of the resources needed to achieve the organization’s goals

**Collaboration**
- Work to improve the quality of life in our community
- Support organizational and community needs
- Encourage a team approach in accomplishing objectives
- Keep communication open, inviting criticism and new ideas from all sources
- Involve all those affected in decision-making

**Social Justice**
- Consider the needs of the individual, as well as the organization, when making decisions
- Promote an environment which values opportunities for reflection on ethical behavior
- Work to remove barriers to access for underserved and uninsured persons
- Focus advocacy especially on those who are vulnerable and disadvantaged
- Identify and address social causes of illness, such as poverty and unemployment
Dress Code

Minimum Standards for dress and appearance:

- All caregivers must be neatly groomed at all times.
- Clothing must be clean, neat, and in good repair.
- Clothing must be of appropriate size and length. Shirts and skirts must be long enough to be appropriate at the work setting. Excessively baggy or tight clothing is inappropriate.
- All shoes must be professional, appropriate to attire worn and the type of work being performed, with appropriate socks or hosiery depending on department needs. Patient care staff shall wear non-skid, closed-toe shoes.
- Hair must be clean and combed, if colored must be in the range of natural hair colors with hats (unless part of scrub or dietary attire) or other inappropriate adornments. Facial hair must be closely groomed (no long beards) and neat. In some areas hair must be appropriately confined.
- Nails must be clean and short. Artificial nails may not be work when assigned to direct patient care positions.
- Jewelry must be appropriate for the work setting, and such that it does not present risk to the patient or the caregiver.
- Visible body adornments including, but not limited to, body piercings, tattoos, and excessive jewelry, are not acceptable if the adornments detract from the comfort level of our patients and guests, or the safety or professionalism of the staff. Jewelry worn in visible body piercing(s), other than earrings of appropriate size, will be removed during work hours.
- Use of fragrances is strongly discouraged and may be prohibited in some areas.
- Name badges must be worn at all times.

Dress and appearance that does not meet minimum standards:

- Blue or casual denim
- Sweat pants or sweat shirts, running attire
- Tights or leggings worn as pants
- Tank tops or camisoles that are low-cut (unless sufficiently modest, covered with a jacket, shirt, or sweater)
- Spandex / Lycra clothing
- Visible undergarments
- T-shirts / sweatshirts with slogans or logos other than PeaceHealth logo.
General Security and Safety

Objectives

- Verbalize how to locate security and safety policies and procedures.
- Describe the procedure for documenting incidents or accidents.
- Understand your role in identifying security and safety hazards.

Security

Participants should make sure to secure all personal valuable (purses, etc.) while on site. Leave valuables not required for the performance of duties at home. If you have a security issue, contact our Communications Center who will connect you with security.

<table>
<thead>
<tr>
<th>Emergency (all codes)</th>
<th>4199 - Medical Center Campus</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>911- All other locations</td>
</tr>
<tr>
<td></td>
<td>(call 4199 after calling 911 to alert security)</td>
</tr>
<tr>
<td>Non-emergency</td>
<td>7480</td>
</tr>
</tbody>
</table>

Role of Security Officers

- Personal Protection
- Property Protection
- Parking and Traffic Control
- Facility Protection

Availability

All campuses 24 / 7

Important Points:

- Contact Security whenever you have a security concern
- Wear Identification Badge at all time while working
- Do not leave badge unattended
- Wear Badge in plain sight above belt
- Notify Security immediately if lost or stolen
Workplace Violence

Prevention Plan
- The Workplace Violence Prevention Plan is located in the each department’s Environment of Care manual
- PeaceHealth has zero tolerance for violence against or by its staff, patients, or visitors
- PeaceHealth has a “no-weapons policy”
- Security Alerts - electronic
- There is mandatory training for at risk / high risk areas

Role of Security
- Use reasonable non-lethal force to control offender.
- Investigate event
- Compile data and submit report

Role of Staff
- Keep yourself safe
- Move out of the way
- Get help (call security at 4199 / 911)
- Fill out EIR and Violent Act form
- Participate in debriefing
- Be familiar with Crisis Intervention / Code Gray policy
- Report to Security the presence or suspicion of weapons in the facility or on the grounds
Emergency Codes

It is important that you learn the following codes. All codes are initiated by dialing the emergency number 4199. If you work at a satellite location dial "9-911" first, then call 4199. The Switchboard announces codes over the loud speaker 3 times unless otherwise stated.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>External Triage Internal Triage</td>
<td>External/Internal Disaster Levels 1, 2, 3</td>
</tr>
<tr>
<td>CODE BLACK</td>
<td>Bomb Threat</td>
</tr>
<tr>
<td>CODE GRAY</td>
<td>Combative Person</td>
</tr>
<tr>
<td>CODE SILVER</td>
<td>Hostage Situation</td>
</tr>
<tr>
<td>CODE RED</td>
<td>Fire</td>
</tr>
<tr>
<td>AMBER ALERT</td>
<td>Infant/Child Abduction</td>
</tr>
<tr>
<td>CODE BLUE</td>
<td>Cardiopulmonary Arrest in SJMC Hospital/Clinic Areas</td>
</tr>
<tr>
<td>CODE BLUE PALS</td>
<td>Cardiopulmonary Arrest in SJMC Hospital/Clinic Areas &lt;12 Years</td>
</tr>
</tbody>
</table>

The on-line Incident Report should be used to report any safety related incident. The completed form will automatically be sent to Risk Management and then forwarded to the appropriate person(s) for follow-up. **These reports are not to be printed or copied!**

To report a safety hazard, contact the Safety Coordinator at x7468 or the Customer Service Center at x7480

Safety Programs

PeaceHealth has a safety program in place to ensure a safe environment for patients, visitors and caregivers. This program is in compliance with federal and state laws in addition to our national accrediting organization – the Joint Commission on Accreditation of Healthcare Organizations (Joint Commission). Our Employee Safety & Health Department oversees these safety programs.

Each unit/department has a safety representative and a safety notebook that contains all region-wide and unit specific safety policies and procedures. Check with your unit preceptor for the location of this information.
Emergency Preparedness/Disaster Plan

Participant Responsibilities

On Site:

- **Hospitals**
  1. Remain on duty until excused.
  2. Report to person in charge of department for assignment.
  3. Department heads and others with specific HEICS (Hospital Emergency Incident Command System) responsibilities assume roles.

- **Medical Groups and Clinics**
  1. Urgent Care may need to accommodate larger numbers of patients with minor illnesses or injuries.
  2. Physicians may need to report to the hospital if requested by the medical director.
  3. All others will respond as needed. PHMG is **not** designated to receive disaster victims.

During an emergency, remember to:

1. Use stairways.
2. Know where exits are and what the posted evacuation plan is for your area.
3. Limit use of phones as much as possible.
4. Wear ID badge.

If not on site:

1. Listen to the Emergency Broadcast System for updates and instructions.
2. Do not come in unless called and instructed to do so.
3. Otherwise, report at the next scheduled time.
Infection Control

**Standard Precautions***

- Used for all patients
- Assumes blood and body fluid of any patient could be infectious
- Consists of:
  - Hand Hygiene
  - Personal Protective Equipment (PPE)

### Hand Hygiene:

**Types:**
- Soap and water – 15 seconds
- Alcohol-based hand rub

**When:**
- Before patient contact
- After patient contact
- After removing gloves
- After sneezing
- After coughing
- After touching contaminated items
- After using the bathroom
- Before eating
- After emptying trash
- Whenever hands are soiled

**Exceptions:**
- Soap and water must be used after going to the bathroom, before eating, when caring for C-diff patients, and whenever hands are visibly soiled

### PPE:

- Gloves
- Gown
- Mask
- Eye protection

Should be appropriate for the type of procedure and anticipated exposure.
Transmission Based Precautions*
Use in addition to Standard Precautions for patients that are documented or suspected to be infected or colonized with a highly transmittable organism.

| Airborne Contact | • Used for chicken pox, disseminated herpes zoster (shingles), localized zoster in immunocompromised individuals, Measles (Rubella), SARS, smallpox  
|                  | • Staff: gown and glove at door, enter only if immune  
|                  | • Patient: private, negative airflow room with door shut, if transported out of room must wear surgical mask. |
| Airborne Respirator | • Used for TB, others are designated  
|                    | • Staff: PAPR or fitted N 95 mask  
|                    | • Patient: private, negative airflow room with door shut, if transported out of room must wear surgical mask. |
| Droplet Contact | • Used for Adenovirus, RSV, respiratory multi-drug resistant organism (MDRO)  
|                 | • Staff: gown, glove, and surgical mask upon entering patient’s room, if contact with secretions likely use eye cover  
|                 | • Patient: private room (if not available, may room with patient with like organism and no other infection), if transported out of room must wear a surgical mask. |
| Droplet | • Used for Influenza, Pneumonia, Meningitis, Pertussis, respiratory viruses  
|         | • Staff: surgical mask upon entering patient’s room, if contact with secretions likely, use gown, glove, and eye cover  
|         | • Patient: private room (if not available, may room with patient with like organism and no other infection), if transported out of room must wear a surgical mask. |
| Contact Enteric | • Used for acute diarrhea with unknown etiology, C. diff, norovirus, rotavirus  
|             | • Staff: gown and glove upon entering patient’s room, use soap and water when leaving the room  
|             | • Patient: private room, use patient dedicated or disposable equipment, clean and disinfect shared equipment, if transported out of room must be covered with clean gown or sheet |
| Contact | • Used for MRSA, VRE, RSV, lice, scabies, wounds or abscesses with uncontained drainage  
|         | • Staff: gown and glove upon entering patient’s room  
|         | • Patient: private room, use patient dedicated or disposable equipment, clean and disinfect shared equipment, if transported out of room must be covered with clean gown or sheet |
Bloodborne Pathogen and Exposure*

HEPATITIS A:
- Transmission: fecal-oral
- Incubation: 28-30 days
- Vaccine available

HEPATITIS B:
- Transmission: blood and body fluids, very infectious
- Incubation: 45-180 days
- Vaccine available

HEPATITIS C:
- Transmission: blood and body fluids
- Incubation: 14-180 days
- No vaccine available

HIV:
- Transmission: blood and body fluids
- Incubation: 30-90 days
- No vaccine available
- May not develop AIDS, treatment aimed at keeping T-cell count high

WASTE SEGREGATION:
- GENERAL WASTE - if there is no blood on it, it goes in regular trash
- INFECTIOUS WASTE - if there is visible blood on it, it goes in red bag
- SHARPS – dispose of in sharps container and do not recap needles
- HAZARDOUS WASTE – toxic, carcinogenic, persistent wastes dispose in chemical hazardous waste
Response for Experience Related Injuries and Exposures to Blood and Body Fluids

- Treat the injured area immediately. If eye, irrigate with eyewash bottle.
- If further evaluation and treatment is needed, report to Workplace Wellness within 2 hours (ext. 2332). If closed go to the Emergency Department. (Services from these departments will be delivered at established facility charges.)
- Report the incident immediately to your direct supervisor of the clinical area you are assigned and to your instructor, whether or not medical attention is required.
- Complete an electronic incident report whether or not medical attention is required.

Instructors: Notify the Department of Learning and Development at 360-636-4130 of any injuries or incidents as soon as possible. Leave your name, school affiliation, students name, type of injury and any treatment needed. Clinical placement coordinators will follow-up with you and the student.

Follow-up will be directed by the Department of Learning and Development in collaboration with the student, instructor, affiliate and others as necessary.
What Else Should I know?*

MOST IMPORTANT:
- Hand Hygiene

NEUTROGENIA PRECAUTIONS:
- Exclude visitors & staff with active infections
- Used for immunocompromised patients
- Staff: hand hygiene & surgical mask
- Patient: private room

FINGERNAILS AND ARTIFICIAL NAILS:
- Natural nails must be clean and short
- Nail polish free from chips
- Artificial nails may not be worn when assigned to direct patient care positions including: OR, PACU, SSS, Central Processing, Nursing, Imaging, Lab, Therapy Services, Pharmacy, Housekeeping

COLONIZED VS. INFECTED:
- People who carry bacteria without evidence of infection are colonized
- Colonized bacteria can be transmitted from one patient to another

*Not all-inclusive. See Infection Control Policies for all information. These are only highlights and most common to our facility/FAQ’s.

Prevention is Primary!
Hazard Communications and (MSDS) Material Safety Data Sheets

Objectives

- Know how to locate information on hazardous substances in your work area
- Know what specific information you need to review and remember from the MSDS
- Know what OSHA requires regarding container labeling

MSDS

Information provided on the MSDS includes:
- Product name
- Hazardous ingredients
- Physical & chemical data
- Health hazard data
- Fire, reactivity & explosive data
- Primary routes of entry
- Permissible exposure limits
- Cancer hazards
- Precautions, spill/leak procedures
- Personal Protective Equipment (PPE)
- First aid & emergency procedures

Participant Responsibilities

- Required to read unit appropriate MSDS policies when necessary
- Remember information that is pertinent to materials handled frequently
- Know how to locate MSDS database
Electrical Safety

Bio-Med/PHMG Engineer Inspection
All electrical equipment brought into the facility by staff or patients (radios, hair dryers, fans, heaters, etc.) must be checked out by the unit Safety Representative prior to its use. When it has been approved for use, a dated and signed sticker is affixed.
Any electrical equipment purchased for patient care use must be checked out by Bio-Med or PHMG Engineering Staff.

Lock-Out Tag
If any electrical equipment malfunctions or shocks someone, Bio-Med or the PHMG Engineers will place a LOCK-OUT/tag out label on it. Do not remove a LOCK-OUT/tag out label or use any equipment that has been tagged as a LOCK-OUT.

Medical Safety Device Act (MSDA)
A medical device is broadly defined to include nearly everything that we use to care for or treat patients, for example, gauze pads, lasers, and CAT scanners.

Participant responsibilities in the event of an injury caused by a medical device:
- Remove faulty equipment from service and send it for repair before it can cause an injury.
- In the event of an injury, notify your immediate supervisor and instructor.
- Keep the involved device set up for further review (keep the item set up exactly as it was when the event occurred).

Participant responsibilities in the event you discover an unsafe medical device?
- Immediately discontinue use of the equipment.
- Save all equipment and packaging, which may include lot numbers, involved in the event.
- Clearly mark the device and equipment as defective with a red tag.
- Complete an electronic work order on Crossroads.
- If immediate replacement is needed, contact the Customer Service Center at 7480.
Fire Procedures

General Instructions

- “Code Red” is the code used for a fire, smoke, or the smell of something burning.
- All persons must be familiar with the location of fire alarm pull boxes, indicator panels, firefighting equipment, and medical gas control valves in their working area.
- Participants should also be aware of the evacuation route in their work area.
- All persons are expected to participate in monthly fire drills by closing all doors that enter corridors and familiarizing themselves with the fire procedures at their facility. Doors are to remain closed until the “ALL CLEAR” is given.
- The senior person takes charge until Fire Response Team or Longview Fire Department personnel arrive.
- Avoid use of telephone and elevators.
- Do not use elevators in building where fire is suspected under any circumstance until the “ALL CLEAR” is given.
- Send one person with an extinguisher to assist if the fire is in a patient care area in an adjacent unit or department. If you have only one extinguisher in your department you are exempt from this support requirement. “Adjacent” includes the floors above, below, and on either side. Personnel sent should remain on the scene until the “ALL CLEAR” is given or the person in charge releases personnel.
- Personnel not assisting at the scene of a fire should remain in the work areas until the “ALL CLEAR” is announced.
- The fire alarm system will automatically page the location of an alarm. The page will contain a dual announcement tone, repeated three times, followed by a location announcement, repeated three times. The page will emanate from both the red fire alarm speaker/strobe units and the hospital paging system volume controls will affect the volume of that part of the fire announcement.

Scavenger Hunt
Know where the following items are in your assigned clinical area:

- Red fire alarm pull station
- Firefighting equipment
- Indicator Panels
- Medical gas control valves
- Your unit or department’s evacuation route
## Fire Safety

If you discover a fire, initiate the following RACE procedure:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Rescue</strong></td>
<td>...patients in immediate danger. If entering an area filled with smoke, remember to stay low. Close any doors and windows in the fire room and <strong>DO NOT</strong> reopen.</td>
</tr>
</tbody>
</table>
| **Alarm (3 steps)** | Pull the alarm located near the exits.  
Call the Switchboard using emergency Number **4199**. Specify the location and size of the fire. If you are at an offsite building or other Hospital related location, call 911 and then notify the Switchboard.  
Alert co-workers in areas unable to hear overhead pages using the term “Code Red.” |
| **Contain** | Close all **other** doors & windows and shut off medical gasses (i.e. oxygen, nitrogen, and nitrous oxide) |
| **Extinguish** | Use the proper extinguisher for the fire. If the fire is out of control, **DO NOT** attempt to fight it. |

### Use of a Fire Extinguisher

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>P</strong></td>
<td>Pull</td>
</tr>
<tr>
<td><strong>A</strong></td>
<td>Aim the nozzle at the base of the fire</td>
</tr>
<tr>
<td><strong>S</strong></td>
<td>Squeeze the trigger</td>
</tr>
<tr>
<td><strong>S</strong></td>
<td>Sweep from side to side</td>
</tr>
</tbody>
</table>
Spiritual Care

Hospital chaplains are members of the healthcare team who provide spiritual and emotional support to patients, their families, and to the SJMC staff.

Areas where chaplains may assist are, but are not limited to:

- Preparation of Advance Directives
- Family support during crisis events, codes, traumas, family conferences, and deaths
- Spiritual/emotional support for a new diagnosis
- Patient/family requests for a chaplain visit or prayer
- Staff referrals for spiritual/emotional support to patients and families
- Palliative care for patients and families when death is anticipated
- Sacramental support
- Guest house placement and reservations
- Support for patient and family’s ethnic and cultural traditions
- Facilitation of ethics consults
- SJMC staff support

Spiritual Care staff are available workdays, Monday – Friday, at 7575 and on-call evenings and weekends by contacting the House Supervisor.

Interpreter Services Program

The Interpreter Services Program provides for interpreter services free of charge to patients and families receiving services at any PeaceHealth location in the Lower Columbia Region.

Components of the Interpreter Services Program are:

- Over-the-telephone spoken language interpreters for non-English speaking persons; provided by Language Line Services.
- Face-to-face interpreters for spoken languages; provided by a contracted agency.
- Face-to-face interpreters for sign language for the deaf and hearing impaired; provided by a contracted agency.

Each unit/clinic has information on accessing these services and unit/clinic staff is responsible for making arrangements for interpreters as needed. For more information, please contact your unit manager or clinic team leader, or you can access the policy on the intranet at http://crossroads/sc_interpreterservices_lcr/

To obtain telephone Interpreter Services, through the Language Line, call 5555.
### Risk Management

<table>
<thead>
<tr>
<th>Patient Advocate:</th>
<th>7578, cell 430-7438</th>
</tr>
</thead>
<tbody>
<tr>
<td>Risk Management Consultant:</td>
<td>7882, cell 431-0264</td>
</tr>
<tr>
<td>Patient Concern / Complaint Line:</td>
<td>4894</td>
</tr>
</tbody>
</table>

### Electronic Incident Report (EIR)

Access through Crossroads / QuickLinks / Incident Reporting Form  

**Indication for an EIR**
- All Falls
- Med Errors
- Adverse Drug Reactions
- Unanticipated Outcomes
- AMA’s
- Pt Injuries related to treatment or care
- Assault Behavior (Note: include the patient’s name on the EIR for tracking purposes)
- Pt/Family Grievance
- Anything out of the ordinary

Responsibility for completing an EIR rests with any staff member who witness, discovers, or has direct knowledge of an incident.

**Remember**: Do not document in the Medical Record that an incident report (EIR) was filed or that Risk Management was notified.

*EIR Golden Rule: When in doubt, fill it out.*
Employee / Volunteer Injury Reporting

To promptly and accurately document and investigate all incidents occur in, or on, PeaceHealth Lower Columbia Region property involving students, volunteers, or employees.

**REQUIREMENTS:**

**Incident Reporting:**
1. Employee/volunteer incident/accident occurs.
2. Immediately report incident to Manager or Supervisor & the Lower Columbia Region’s Claims Manager. If immediate supervisor is not available, report to House Supervisor. An Employee Injury form must be filled out immediately and provided to their Manager or House Supervisor.
3. If employee/volunteer does not need to see a physician, the Employee Injury form is forwarded to the Employee Health Nurse for review, who then sends it to the Department Manager or Nurse Manager for their follow-up. The Employee Health Nurse also forwards incident reports of a significant nature to the Risk Management Nurse for review and follow-up.

**Incident Follow-up:**
1. Injured employees or volunteers must report to Workplace Wellness within 24 hours or the next business day to complete the self-insured form #2 (workman’s compensation claim form).
2. The claims manager will forward copies of the Employee Injury form to the Safety Officer. The Safety Officer then:
   a. Assists Department Manager/Nurse Manager with incident follow-up.
   b. Prepares monthly summary.
   c. Reports on employee accident costs and makes recommendations to the Safety Committee and hospital Quality Assurance Committee on a quarterly basis. This report will also be presented to the Governing Board.
3. If an injury or illness has occurred to the extent that a physician is seen, a physician’s initial report (PIR) form is completed at the treating facility. This form should be forwarded to the PeaceHealth Workman’s Compensation Claims Manager and maintained on file. Employees will report to Workplace Wellness to complete a workman’s compensation claim form (that are only located at Workplace Wellness). The claims manager will work directly with the treating physician to establish modified duty status, follow up care and so forth.
4. All employees will need to contact the LCR’s claims manager on a weekly basis to update injury/illness status.
Workplace Wellness

Workplace Wellness is the occupational medical department for St. John Medical Center. It provides injured worker care and employer related occupational health services to companies, business, and organizations located in the Lower Columbia Region. Workplace Wellness is located at 1405 Delaware Street, and can be reached at 2332.

How to Lift

Follow these tips to avoid compressing the spinal discs or straining your lower back when lifting:

- **Keep a wide base of support.** Your feet should be shoulder-width apart, with one foot slightly ahead of the other (karate stance).
- **Squat** down, bending at the hips and knees only. If necessary, put one knee to the floor and your other knee in front of you, bent at a right angle (half kneeling).
- **Maintain good posture.** Look straight ahead, and keep your back straight, your chest out, and your shoulders back. This helps keep your upper back straight while maintaining a slight arch in your lower back.
- **Slowly lift** by straightening your hips and knees (not your back). Keep your back straight, and don't twist as you lift.
- **Hold** the load as close to your body as possible, at the level of your belly button.
- **Use your feet** to change direction, taking small steps.
- **Lead with your hips** as you change direction. Keep your shoulders in line with your hips as you move.
- **Set down** your load carefully, squatting with the knees and hips only.

Keep in mind:
- Do not attempt to lift by bending forward. Bend your hips and knees to squat down to your load, keep it close to your body, and straighten your legs to lift.
- Never lift a heavy object above shoulder level.
- Avoid turning or twisting your body while lifting or holding a heavy object.
Patient Care Policies

For information about safety policies and procedures or clinical policies and procedures, visit the hospital intranet site “Crossroads.” In addition, some departments have unit-based policy and procedure. See Policies here:
Surveys

As a healthcare organization, St. John Medical Center as whole or individual departments may be surveyed to ensure that the organization or department is meeting the appropriate standard of care.

⚠️ **No departments, employees, or shifts are automatically excluded from the survey!**

The surveyors may ask you about or observe the safety and quality as related to your work providing patient care, treatment and/or services.

### Tips for talking to a surveyor

**Remain calm**
- Surveyors are generally friendly, courteous and helpful
- They are just asking you a question about your work
- Be ready, willing and confident in providing answers
- Take time to think before answering
- Accuracy is more important than promptness in your responses
- Don’t need to memorize policies/procedures but do know where they are located
- Make sure you understand the question so you can give an accurate response
- Ask the surveyor to repeat the question (gives you time to think)
- Ask for clarification. Paraphrase what you heard and check for understanding
- If you know the answer:
  - Answer to the best of your abilities
- Don’t elaborate or offer too much information- just answer the question
- If you don’t know the answer:
  - Don’t guess or give an answer just to say something
  - Say where and how you would find the answer. Elaborate and explain who would be able to provide the information or where specifically the answer can be found
  - Examples:
    - “Let me show you the policy”
    - “I’d ask my charge nurse”
    - “I’ll show you where we document that in Carecast”
- Use the buddy system. Help each other answer questions
Notice of Privacy Practices

Click here to access the Joint Commission National Patient Safety Goals

The Notice of Privacy Practices (NPP) describes for patients how we use and/or disclose their health information.

All PeaceHealth workforce members (employees, volunteers, students, etc.) with access to patient information must read this information.

Joint Notice of Privacy Practices Link

Our Responsibilities Regarding Patient Health Information

We are required by law to: maintain the privacy and security of patient health information; give patients this Notice of our legal duties and privacy practices with respect to the information we collect and maintain about them; and follow the terms of the Notice that is currently in effect.

Students: To ensure privacy and security of patient health information, do not include any of the following patient identifiers in any paperwork you submit to your instructor or share in class:
- Names (initial are acceptable)
- Street address and/or city
- Birth date (age is acceptable)
- Admission and/or discharge dates, as well as date of death
- Telephone numbers
- Electronic mail addresses
- Social Security numbers
- Medical Record numbers
- Account numbers
- Full face photographic images or any comparable images
Organizational Integrity

New EHI users are required to read the privacy and security information below.

Need to know, minimum necessary: You are to access patient information only when you have a valid clinical or business need. You must limit your access to those patients’ records that you are working with and only those portions of the record that are necessary for your work. For example, a biller in an orthopedic practice probably has no need to know about a patient's care in the hospital’s inpatient behavioral health unit, and so should not access any records relevant to that episode of care.

Simple mistakes and minor errors may result in a breach of patient confidentiality: A simple mistake resulting in inappropriate use or disclosure of patient health information, may result in a Level 1 Breach. All breaches of confidentiality are followed up on, and may result in disciplinary action, so take the extra moment to ensure that you are not improperly disclosing patient information. A Level 1 breach is defined as unintentional or careless access to, review of, or disclosure of patient information. Examples of level 1 breach include:

- Faxing protected health information to the wrong location;
- Applying the wrong patient label to a test requisition;
- Leaving patient information lying in plain view in a public place;
- Sending patient health information to the wrong location via interoffice mail;
- Failing to establish the identity of a caller before disclosing patient information;
- Failing to lock or log off your computer when stepping away. General rule is if you can’t see your computer, lock it or log off before you leave.

Password standards: You are responsible for taking reasonable precautions to prevent the unauthorized use of computer passwords that could compromise confidential information. Comply with the following password standards to prevent such a compromise:

- Select a password that is difficult for others to guess:
  - Minimum of 6-8 characters where possible
  - Mix the use of numeric and alphabetic characters including upper and lowercase letters
  - Avoid words from the dictionary; names of pets, children, parents, friends; birthdates; SSN; ATM pins; phone numbers; expired or old passwords; your user name
- Change your password every 90 days
- Protect your password. Do not share it with others or write it down.
- Do not automate the entry of a specific username or password
- Report any circumstance where your password may have been compromised
- Immediately change your password if it may have been compromised
Workstation and work area standards: Continually assess the risk to patient information as you are working with it and as conditions change (e.g., as people come and go, when moving to a new location or remodeling, etc.). Workstation and work area standards include:

- Position computer monitors, whenever possible, so that unauthorized individuals cannot view them
- Log off or lock your computer upon leaving the immediate vicinity (within eyesight) of your workstation
- Cover confidential papers with a blank sheet of paper if unauthorized individuals enter your work area
- Do not allow unauthorized individuals to use your computer
- Do not store confidential information on the C or D drives of the computer or on USB memory sticks without prior authorization from the PeaceHealth Technical Security Manager.

Access to your own electronic medical record: If you are a PeaceHealth patient you may access your own electronic medical record. You may access only the type of information for which you already have access rights. Your access is read-only – you may not change or add any information to your own medical record. Your organization’s policy may be more stringent, please check with your manager.

Access to your minor child’s electronic medical record: If your child is under age 13 (12 and under) and is a PeaceHealth patient, you may access your child’s electronic medical record, but only if you have a legal authority to do so. You may access only the type of information for which you already have access rights. Your access is read-only – you may not change or add any information to your child’s medical record. The day your child becomes 13 years old, you may no longer access his/her electronic medical record. Your organization’s policy may be more stringent, please check with your manager.

Access to electronic records of friends and relatives: Access to electronic patient information relevant to friends or relatives (including your own children over the age of 12) is prohibited unless you have a valid clinical or business need.

- If a friend or relative provides you with written authorization to access their health records, you may NOT do so electronically. You must present the authorization to the Medical Records department where the patient received care and they will provide you with paper copies.

- If access to a friend’s or relative’s electronic health record comes up in your work, it is recommended that you ask a coworker to handle the task in order to avoid the appearance of conflict of interest and of improperly accessing the information. If no coworker is available, and access to your friend’s or relative’s record is a legitimate part of your work, you may access the information. However, document the circumstances of your access in case you are asked for an explanation later on.
**Internet use**

PeaceHealth provides Internet access as a business tool to connect users to the most current work-related information, to facilitate access to knowledge resources, and to improve job performance. Internet access and use shall be consistent with PeaceHealth’s mission and values, and comply with regional and system-wide policies.

**Unacceptable Internet Use**

Internet access shall not be used in a manner that is inconsistent with PeaceHealth’s mission and values, or violates PeaceHealth policy. Unacceptable use of PeaceHealth access to the Internet includes, but is not limited to:

a. Messages, documents and images from Internet sites that may contain, but are not limited to, sexually suggestive or explicit material, racial slurs, or content that may be harassing, or offensive to a person’s gender, age, sexual orientation, religious beliefs, political affiliation, national origin, disability, veteran’s status and any other basis prohibited by local, state, or federal law.

b. Sending (uploading) or receiving (downloading) confidential information, copyrighted materials, trade secrets, proprietary financial information, or similar materials without prior authorization by department Manager or Director.

c. Sending protected health information (PHI) that is not encrypted. Until encryption is commonly available for transmission of information sent outside the PeaceHealth system, confidential information shall not be sent over the Internet. Communications sent to the Centers for Medicare and Medicaid Services shall be encrypted in accordance with “HCFA Internet Security Policy.”

d. Any use for personal benefit or gain, sales purposes, or the advancement of individual views including partisan political views, using your PeaceHealth affiliation. An example is running a private business using PeaceHealth resources including time.

e. Use that interferes with work performance or the operations of a department.

f. Unauthorized downloading of software.

**Violations**

Students, who access Internet sites in a manner that is inconsistent with limited personal use, or contrary to PeaceHealth’s mission, values, and policies, or productivity expectations, will be subject to corrective/disciplinary action, up to and including dismissal from clinical experience.
Confidential Information

The delivery of high quality patient care and the maintenance of an efficient healthcare organization requires the accumulation, transmission, and reporting of a wide variety of information. PeaceHealth's core values direct us to safeguard the confidentiality of this information. Information related to patients, employees, providers, financial data, and /or any other information pertaining to PeaceHealth business or proprietary information is to be considered strictly confidential unless specified otherwise. Access to confidential information is permitted only on a need-to-know basis and as permitted by law.

1. Access to clinical patient information shall be limited to the time period during which the user is directly involved in the patient’s care, or as otherwise or necessary for their job duties.

2. When accessing confidential information, access should be limited to the minimum necessary to perform the intended task.

3. Special considerations and/or precautions may be required related to certain types of protected information as defined by state and federal law. These include, but are not limited to: HIV, mental health, chemical dependency, and genetic testing.

4. Confidential information released to third parties should be limited to the minimum necessary to accomplish the intended purpose.

5. All students whom have access to PeaceHealth confidential information are required to comply with all applicable procedures and related policies of PeaceHealth that support, implement and enforce this policy.

6. Even with written authorization, access to any person’s online health information, except your own, is prohibited other than for purposes related to legitimate work-related tasks. This applies to family members’ or friends’ information and that “surfing” online health records for supposedly educational purposes are prohibited.

PeaceHealth confidential information is contained in different media including, but not limited to:

- Paper records
- Microfilm/microfiche
- Verbal communications
- Audio or video recordings
- Electronic Displays and electronically-generated report
Statement and Agreement Regarding PeaceHealth Information

(Confidentiality Agreement)

During the course of your work with PeaceHealth, you may develop, use, maintain, or have incidental contact with or access to patient information, employee information and/or business information that is confidential (“PeaceHealth Information”). PeaceHealth Information from any source in any form (including paper records, oral communication, audio recordings, and electronic displays) shall be kept strictly confidential. You may access PeaceHealth Information only if you need to know the specific PeaceHealth Information to perform your job responsibilities.

You agree to comply with the notice of privacy practices adopted by PeaceHealth (“Joint Notice of Privacy Practices”) as well as PeaceHealth’s policies and procedures to respect and preserve the privacy, security, and confidentiality of PeaceHealth Information. You agree and recognize that you are solely responsible for your own actions relating to protecting the privacy, security, and confidentiality of PeaceHealth Information. This agreement is valid for all positions with access to PeaceHealth information, whether internal or external.

Violations of PeaceHealth’s policies and procedures may include, but are not limited to:

- Accessing PeaceHealth Information that is not within the scope of your job or responsibilities to PeaceHealth or otherwise permitted by written policy.
- Leaving confidential information including but not limited to confidential business information, employee records, patient medical records or charts in an unsecured place or leaving a secured application unattended while signed on to the computer system.
- Misusing, disclosing without proper authorization, or improperly altering PeaceHealth Information.
- Disclosing your sign-on code and/or password or using another person’s sign-on code and/or password for accessing electronic or computerized records.
- Discussing PeaceHealth Information in a public place (e.g., elevator or cafeteria) or with persons not authorized to receive such information.
- Using the incorrect sign-on code and password for a given position, when different sign-on codes exist for multiple positions and/or employers.

Violation of PeaceHealth policies and procedures by any user of PeaceHealth Information may constitute grounds for corrective action, up to and including termination of employment or loss of medical staff privileges, in accordance with applicable Medical Staff Bylaws, Rules, and Regulations. Violation of PeaceHealth policies and procedures by volunteers or interns/students may constitute grounds for corrective action in accordance with applicable PeaceHealth or educational institution procedures. Violation of PeaceHealth policies and procedures by third parties, such as temporary staff or vendors, may constitute grounds for corrective action, termination of the user’s access, or termination of the contract or other terms of affiliation. Violation of PeaceHealth policies and procedures also may result in civil and/or criminal liabilities and penalties.

If you use or disclose a “limited data set,” which is PeaceHealth Information that has had some but not all identifiers removed, then you specifically agree to only use or disclose the limited data set for research, public health, or health care operations and to comply with PeaceHealth’s policy on De-identification of Protected Health Information and Limited Data Sets.

Certain federal and state laws provide you with the right to request access to your personal health information, under specific circumstances. Some users have been provided the right to access their personal health information.
electronically because of their job responsibilities. If you are one of these users, your right to access your personal health information is subject to the following conditions:

- You will review only the level of information for which you have electronic information systems access. PeaceHealth will not grant you higher levels of authorization for your review of your personal health information. You may access your remaining health information through your regional health information or medical records department, according to PeaceHealth policy.
- You will review only your own personal health information or that of your minor child under the age of 13 when legally permitted. You understand that you are not authorized to review the personal health information of your spouse, children age 13 and above, friends, or any other person. Authorization from the patient, written or otherwise, does not permit you to access electronic health information for personal reasons except through means established for that purpose, such as PatientConnection®, or through the facility HIM department.
- Your review will take place under your sign-on password. You will not share or access another person’s password to gain greater access.
- It is your responsibility to talk with your medical provider who may have ordered any diagnostic testing for results interpretation.
- The information that you review is to be read only, and you cannot and will not alter or delete the information.
- If you find what you believe to be an error in the electronic medical record, you will submit your request for an amendment to the Health Information Management/Medical Records Department, for review, following PeaceHealth procedures for requesting an amendment to your personal health information.
- If you have access authorization to any financial data as part of your job responsibilities and you have concerns regarding your financial information, you will not alter or delete any financial data. You will direct all of your inquiries to Patient Financial Services.
- If you elect to print one or more pages/screens from your personal health information, you will then be responsible for handling your information in a confidential manner.
- The opportunity to access your personal health information is subject to state and federal laws and PeaceHealth policies and procedures. PeaceHealth retains the right to modify and change this access at any time.

I understand that I am responsible for knowing and adhering to the terms of the above statement and agreement as well as PeaceHealth Privacy and Security Policies and the Joint Notice of Privacy Practices adopted by PeaceHealth. I further understand that the obligations set forth in this statement and agreement as well as applicable policies continue beyond the end of my relationship with PeaceHealth.

First Name               MI               Last Name (please print)               SSN

Affiliation with PeaceHealth:

☐ Employee ☐ Medical Staff ☐ Clinic/Physician Office  ☐ Volunteer
☐ Intern or  ☐ Vendor or  ☐ Other
             Member                Contractor

_____________________________  _________________________  
Signature                                      Date

_____________________________  _________________________  
Signature of Legally Responsible Person  Date
(Required if above individual is under age 18)

_____________________________  Effective: 4/09
Relationship of Legally Responsible Person to above individual
Validation Of Completion

By signing below, I am validating that I have read the Student Experience Orientation Information. I understand that I am responsible for the material within.

Signature: ________________________________ Date:___________________