

## TRAINING UPDATE

**Lab Location:** GEC, SGMC & WAH  
**Department:** Mgmt

**Date Distributed:** 1/26/2016  
**Due Date:** 2/29/2016  
**Implementation:** 3/1/2016

### DESCRIPTION OF PROCEDURE REVISION

<b>Name of procedure:</b>
<b>New Employee Orientation and On-Boarding Process GEC.L46, SGAH.L53, WAH.L51 v2 Safety Review List AG.F276.2</b>
<b>Description of change(s):</b>
<p>SOP:</p> <p>Section 5: remove ES and NEOP compliance, add processes for testing via COE and requesting attestations via HRSC, update badge process</p> <p>Section 9: add appendices</p> <p>FORM:</p> <ul style="list-style-type: none"><li>• Add safety cabinet info</li><li>• Add eyewash demonstration</li><li>• Add color blindness response sheet (<i>test is performed on IntelliQuest</i>)</li></ul> <p><b>This revised SOP and Form will be implemented on March 1, 2016</b></p>

**Document your compliance with this training update by taking the quiz in the MTS system.**

**Approved revision for training (version 2)**

Non-Technical SOP

<b>Title</b>	<b>New Employee Orientation and On-Boarding Process</b>	
<b>Prepared by</b>	Stephanie Codina	Date: 3/5/2013
<b>Owner</b>	Lori Loffredo, Robert SanLuis	Date: 3/5/2013

<b>Laboratory Approval</b>		
<b>Print Name and Title</b>	<b>Signature</b>	<b>Date</b>
<i>Refer to the electronic signature page for approval and approval dates.</i>		
Local Issue Date:		Local Effective Date:

<b>Review:</b>		
<b>Print Name</b>	<b>Signature</b>	<b>Date</b>

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### **1. PURPOSE**

To provide a guideline for supervisors/managers/directors who are orienting new employees in the laboratory.

### **2. SCOPE**

This procedure outlines the steps that should be taken to orient a new employee to the hospital environment.

### **3. RESPONSIBILITY**

All members of the laboratory leadership team must understand and complete the tasks required to on-board a new employee.

### **4. DEFINITIONS**

**Onboarding:** Also known as organizational socialization or orientation. Refers to the mechanism through which new employees acquire the necessary knowledge, skills, and behaviors to become effective organizational members and insiders.

### **5. PROCEDURE**

**A.** Tasks that should be started after an employee is hired, but before the employee starts. The employee's supervisor/manager/director is responsible for performing tasks with the new employee unless otherwise specified.

- a. Once an offer is made, the recruiter will establish the new employee's start date and contact the supervisor for the training schedule.
  - i. The supervisor/manager/director will notify the new employee of the training schedule and provide instructions for the first day of work (time to report, to whom to report, phone number for emergencies, etc).
  - ii. The supervisor/manager/director should add the new employee to the schedule once a start date is established. It is recommended that the

supervisor e-mail a copy of the schedule to the new employee or send an e-mail to activate an account in the online scheduler.

- b. The talent acquisition recruiter will schedule the employee for a pre-employment drug screen. Employees will not be allowed to report to work until all results have been received and the employee has been cleared for duty by EHS COE staff members.
- c. Inform the QA department of the new employee's start date, work location, facility, and training location. The QA department will ensure training documents are prepared for the employee.
- d. Complete the Computer Password Request Form (AG.F167) and forward the form to the LIS department to obtain Sunquest access for the employee.
- e. Notify the administrative assistant that a new employee is starting. The administrative assistant will set up an employee file for the employee.
- f. Request a locker assignment. Note: Some SGAH lockers will require that the employee provide a lock. Notify the employee if his/her locker needs a lock.
- g. Print and save all e-mails you receive with employee access and temporary passwords printed on them. You will need them when the employee starts.
- h. When the employee ID has been created, forward the employee name and ID to the EHS COE (Center of Excellence) via e-mail, and request that pre-employment testing be ordered. The following information should be included:
  - i. Employee name
  - ii. Employee ID
  - iii. Email address to which the requisition should be sent (this will be the supervisor's e-mail unless the employee has a Quest e-mail account).
  - iv. The required tests:
    1. Quantiferon-TB Gold (Documentation of a chest x-ray within the previous 6 months is required for staff who test positive for TB).
    2. Varicella-Zoster Virus IgG Ab
    3. Hepatitis B Surface Antibody, Quantitative
    4. MMR (IgG) Panel (Measles, Mumps, Rubella)
    5. Tdap vaccine (unless employee provides proof of vaccine)
    6. Flu shot during flu season (unless the employee provides proof of vaccine).Note: A valid declination or exemption must be provided if the employee cannot get the flu shot for medical or religious reasons.
  - v. The EHS COE will order testing and forward the requisition (or a code to access the requisition) to the e-mail address that was provided.

- vi. The employee will be required to go to a Quest PSC draw station to have the lab work performed.
- vii. If the employee lacks immunity to any of the infectious agents, he/she should be offered the corresponding vaccine. Some vaccines can be obtained from the hospital employee health department. The vaccine may also be requested by e-mailing EHS COE using the above procedure.
- i. For phlebotomy staff only, the manager/supervisor will schedule FIT testing for the employee via the hospital program.
- j. Forward the ID to the Laboratory QA department. A Lab QA staff member will add the new employee to the MTS system.

**B. Tasks that should be performed during the employee's first few days of work at the hospitals. The employee's supervisor/manager/director is responsible for performing tasks with the new employee unless otherwise specified.**

- a. Request Quest badge, WFC prox card, and access to the labcoat machine for the employee.
  - i. Take a clear picture of the employee against a white background for the Quest ID badge.
  - ii. Complete the following forms:
    - 1. ID Badge, Building Access, and Kronos Registration
    - 2. Request for Replacement Proxy Card
  - iii. E-mail the forms and the photo to the security office ([ana.x.lescano@questdiagnostics.com](mailto:ana.x.lescano@questdiagnostics.com)).
    - 1. Request that the new badges be sent via interoffice mail to the supervisor/manager/director.
    - 2. Request that the new employee be added to the labcoat machine.
      - a) Provide the employee location and labcoat size.
      - b) If the employee will travel between WAH and SGMC, request that the employee be given 2 labcoat credits, so he/she may have 1 labcoat at each site.
- b. Complete the I-9 form verification. I-9 verification must be completed within 3 business days or the employee will not legally be allowed to work.
  - i. The employee must complete his/her portion of the form prior to the initial start date.
  - ii. The online verification will instruct the employee to bring his/her official identification document(s) to his/her first work day.
  - iii. Once the employee completes his/her portion, the system will forward a verification e-mail to the supervisor.
  - iv. The supervisor/manager/director must click onto the link provided in the e-mail and verify and scan the documents into the online verification program.

- v. The supervisor/manager/director can delegate this task to another supervisor/manager/director by logging in and following the online delegation instructions. Simply forwarding the e-mail will not allow the delegate to complete the verification.
- c. Walk the employee to the hospital security department to request a hospital identification badge.
- d. Request a locker from the administrative assistant if an assignment was not made prior to employment. Provide the employee his/her locker assignment and allow him/her to place personal items in the locker.
- e. Show the employee where the Kronos clock is located and how to use his/her badge to clock in and how to request TOP.
- f. Show the employee where the labcoat machine is located and help the employee obtain a lab coat.
- g. Introduce the new employee to the department and give a brief tour of the lab.
- h. Register the employee for Employee Self Service (ESS) system.
  - i. You will receive 2 e-mails with account information for the new employee. These will be used to establish access to the Quest systems.
    - 1. One will contain a PeopleSoft ID which is the same as the employee ID.
    - 2. One will contain the employee's username, temporary password, and SAM PIN number.
  - ii. Access the registration page.
    - 1. Access the ourQuest online main screen.
    - 2. Click the "Employee Center" tab.
    - 3. Click on "Employee Self Service."
  - iii. Establish a password for ESS.
    - 1. Click on "About Passwords."
    - 2. In the "UserID" field, the employee must type his/her username that was provided. Generally, this is the firstname.middleinitial.lastname (up to 20 characters total).
    - 3. In the "Old Password" field, the employee will type the temporary password that was provided. This password is case sensitive.
    - 4. In the "New Password" and "Confirm New Password" fields, the employee will type a password that he/she chooses.
      - a) Password must be at least 8 characters.
      - b) Password must contain at least one lower-case letter, upper-case letter, number, and special character.
    - 5. Click the "Submit" button. If the password meets specifications, it will change. The employee should write this password down if he/she won't remember it.
    - 6. Instruct the employee to log into ESS at least every 3 months to avoid deactivation.

- i. Provide the employee with a copy of his/her remote access card (RAC) (Also known as egrid card).  
The supervisor/manager/director will receive an e-mail with a PDF copy of the employee's RAC.
  - i. Print one copy of the RAC and give it to the employee.
  - ii. Forward an electronic copy of the RAC to the employee so it can be saved for future use.
  - iii. Explain to the employee that the RAC is used to access the Quest site from home.
  
- j. Complete credentialing documentation in ESS (technical staff only).
  - i. Scan the employee's degrees, transcripts, and certifications. Scan transcripts and certificates for the same degree program together into the same document.
  - ii. Access ESS and have the employee sign in using his/her newly created password.
  - iii. Click on "Main Menu."
  - iv. Click on "Self Service."
  - v. Click on "Licensure Qualifications."
  - vi. Click on "My Current Profile."
  - vii. Complete tabs for licensure, certification, and academic education per corporate policy, "Policy for the Documentation of Testing Personnel Qualifications in PeopleSoft™."
  
- k. Complete the online "New Employee Orientation" modules.
  - i. Have the employee log onto a computer and access IntelliQuest.
  - ii. The new employee orientation modules will be pre-assigned to the employee.
  - iii. The employee must complete all modules assigned.
  
- l. Complete New Employee Overview and safety training documentation with the new employee.
  - i. Forms will be contained in the training documents received from the QA department.
  - ii. Give the employee a tour of the hospital and laboratory areas.
  - iii. Instruct the employee to read all safety, LIS, and departmental procedures.
  - iv. Walk the employee to the point where laboratory employees will meet following an emergency evacuation.
    1. At SGAH this is the tunnel between the hospital and the 9715 building.
    2. At WAH this is the physician parking lot outside the back door by the lab.
    3. At GEC, this is the main parking lot.
  - v. Return the completed forms to the QA department to be filed in the employee's training file.

- m. SGAH employees only: Assign the hospital orientation module in MTS and ensure the employee completes the attestation statements after completing the module.
- n. Have the employee register for Learning Suite using the attached instructions (Appendix B).
- o. Complete the “Access Control Request Form” found in the Information Services section of the Adventist intranet to obtain Citrix, Outlook, and Cerner access for the employee. Note: The employee **MUST** register for Learning Suite and complete the Cerner module before requesting access. The Cerner module should auto assign when the employee registers for Learning Suite. However, the following modules are mandatory before a Cerner account will be created:
  - i. Introduction to Learning and Performance Suite for End User
  - ii. Windows Essentials
  - iii. Care Excellence View Only Orientation
  - iv. Care Excellence: Providers View Only Part 1
  - v. Care Excellence: Providers View Only Part 2
- p. Provide the employee his/her Sunquest password and logon information.
  - i. Have the employee sign the LIS Security Agreement form.
  - ii. Place the signed agreement in the employee’s personnel file.
  - iii. Give a copy of the LIS username to the employee and instruct the employee to keep the paperwork until requested by his/her trainer.
- q. Have the employee complete the information sheet provided by the administrative assistant. This will be used to add the employee to laboratory rosters. Return the completed form to the administrative assistant.
- r. Give the employee his/her training documents and introduce the employee to the primary trainer. Training documents are a measure of competency and ***must be completed before the employee works independently.***
- s. For new BB staff members **ONLY**, instruct the employee on how to obtain fingerprints.
  - i. Fingerprint cards and vendor information are available in blood bank.
  - ii. The employee must make an appointment in advance to have fingerprints made.
  - iii. The employee must pay to have fingerprints made. Quest Diagnostics will reimburse the employee via the Finance Concur system when the employee presents a receipt for fingerprinting.
  - iv. The supervisor/manager must request a check for fingerprint submission via Check Requests using the e-mail.
- t. The supervisor/manager/director will be required to submit a ticket with the HR Service Center (HRSC) to obtain an attestation statement for the hospitals stating the following been completed.



- i. Drug screening with the past 30 days.
- ii. Tdap (Tetanus/Diphtheria/Pertussis) vaccine
- iii. Flu vaccine
- iv. TB skin test or Quantiferon TB blood test (or chest x-ray within 6 months for staff who test positive for TB)
- v. Lab results of positive vaccine titers for:
  - 1. Hepatitis B
  - 2. Mumps
  - 3. Rubella
  - 4. Rubeola
  - 5. Varicella Zoster
- vi. Background check

The attestation form will be forwarded to the hospital's human resource department when received. At that time, WAH staff members will receive a link to access the online hospital orientation module which must be completed.

- u. For BB staff members, the supervisor/manager must submit a ticket with the HR Service Center to obtain an attestation statement indicating the elements of the background check performed in order to provide security access. The required elements are:
  - i. County Criminal Record Check
  - ii. Locator-State Validator
  - iii. National Criminal Access File
  - iv. Basic Employment Reference
  - v. Education Verification
  - vi. National Sex Offender Registry Check
  - vii. FACIS
  - viii. TRUSST-SSN Trace
- v. The New Employee Onboarding Checklist is a tool that may be used by the supervisor/manager/director as a reminder of tasks to be completed.
- w. An employee quick start guide is available on the Quest intranet under HRSC / My Onboarding and may provide useful information for the new hire.  
[http://questnet1.qdx.com/Business\\_Groups/hr/tac/employees/employee\\_quick\\_start\\_guide\\_-\\_REVISED\\_10.2.15.doc](http://questnet1.qdx.com/Business_Groups/hr/tac/employees/employee_quick_start_guide_-_REVISED_10.2.15.doc)

### **C. Tasks to be performed during the employee's first year of employment.**

- a. During the first few weeks/months of employment, meet with the employee frequently to answer questions and provide feedback. Ensure the employee is on track with training goals. Review training documents for progress and proper completion.
- b. Written evaluations are completed after 6 months and will be coordinated via the Employee Services department.

- c. Competency will be assessed at 6 months from the start of training on module(s) completed to that point and annually thereafter. The training database is utilized as a reference for calculating when the 6-month competency is due. Quality Assurance staff members monitor the database and notify the supervisor/manager/director when competencies are due.

**6. RELATED DOCUMENTS**

- 1. Policy: QDMED717 “Policy for the Documentation of Testing Personnel Qualifications in PeopleSoft™,”
- 2. Specimen Processing Procedure: FES Password
- 3. Form: Employee Information Form (AG.F238)
- 4. Form: ID Badge, Building Access, and Kronos Registration
- 5. Form: Request for Replacement Proxy Card
- 6. Form: New Employee Overview Training (AG.F275)
- 7. Form: Safety Review List (AG.F276)

**7. REFERENCES**

None

**8. REVISION HISTORY**

Version	Date	Reason for Revision	Revised By	Approved By
		Supersedes GEC.L32,SGAH.L35,WAH.L34 v002		
000	9.24.2014	Section 5: Updated process for notifying the employee of the training schedule. Deleted process for in-person NEOP and replaced with online instructions. Added instructions for I-9 verification, ID badge request, and prox card request. Updated NEOP compliance requirements. Section 6: add forms Section 9: form moved to section 6 Footer: version # leading zero's dropped due to new EDCS in use as of 10/7/13.	S Codina	L Loffredo, R SanLuis
1	2.12.2016	Section 5: remove ES and NEOP compliance, add processes for testing via COE and requesting attestations via HRSC, update badge process Section 9: add appendices	S Codina	L Loffredo, R SanLuis

**9. ADDENDA AND APPENDICES**

- Appendix A: New Employee Onboarding Checklist
- Appendix B: Adventist HealthCare Learning Suite Registration
- Appendix C: Color Blindness Testing Key

Form revised 3/31/00

## Appendix A

### New Employee Onboarding Checklist

\*\*\*Optional: This checklist may be used by the supervisor as a guide for the onboarding process. This checklist should be discarded and does not become part of the employee file.

#### Tasks to be completed after hire, but before the employees start date.

Initial When Completed	Task to be Completed
	Add employee to shift planner. Enter training schedule. Notify employee via e-mail.
	Notify QA department of employees name, start date, work location, facility, and training location.
	Complete the "Computer Password Request Form" (AG.F167) and forward to the LIS department to obtain Sunquest access.
	Notify the administrative assistant of employee name and start date.
	Request a locker assignment for the employee.
	When an employee ID is created, e-mail "EHS COE" that titers must be ordered for the employee. Order vaccinations as needed.
	Forward the employee ID to the QA department.
	Phlebotomy only, schedule FIT testing for employee.

#### Tasks to be completed on the employee's first few days of work

Initial When Completed	Task to be Completed
	Request a Quest ID badge, prox card, and access to the lab coat machine(s) for employee.
	Complete the I-9 verification.
	Request a hospital ID badge for the employee.
	Show the employee the Kronos clock and demonstrate use.
	Show the employee the lab coat machine and demonstrate use.
	Provide the employee a brief tour of the laboratory.
	Reset the employee password in Employee Self Service using the e-mail received prior to start.
	Provide the employee a copy of his/her remote access (RAC) card and explain use.

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Initial When Completed	Task to be Completed
	Technical staff only: Enter credentialing information into Employee Self Service.
	Demonstrate the use of IntelliQuest for the employee. Have the employee complete the New Employee Orientation modules. Provide the employee a copy of the color blind form on which to record responses. The supervisor will grade the color blind test and file results in the employee file.
	Complete the New Employee Overview and safety training documentation (including fire drill) with the employee. Give the completed documents to QA for the employee training file.
	SGMC employees only: Complete the hospital orientation in MTS.
	Instruct the employee to register for Learning Suite and complete assigned training.
	Complete the Adventist online Access Control Form to obtain Citrix, Outlook and Cerner access as indicated for the job duties. This step should not be done until the employee has completed the required Learning Suite modules.
	Provide the employee his/her Sunquest login and password. Have the employee sign the "LIS Security Agreement." The signed agreement gets filed in the employee file.
	Have the employee complete the employee information sheet. Give the completed information sheet to the administrative assistant.
	For blood bank employees only: Have the employee obtain fingerprints using a third party vendor.
	Provide training documents to the employee and begin training.
	Submit a ticket with the HRSC to obtain an attestation statement stating the pre-employment screenings have been completed. Forward a copy of the attestation to the hospital's HR department.
	WAH only: Instruct staff member to complete the online orientation module after the link is sent.
	Blood bank only: Submit a ticket with the HRSC to obtain an attestation statement stating a complete employee background check has been completed.

## Appendix B

### Adventist HealthCare Learning Suite Registration



**Extended Enterprise: WAH or SGAH Quest**

**Quick Reference Guide**

Any issues, please email: [Learningsuite2@ahm.com](mailto:Learningsuite2@ahm.com)

	<ul style="list-style-type: none"> <li>• Users create their own accounts.</li> <li>• There is a specific web address for each self-registration group.</li> <li>• Email is required and will serve as the user login for future login attempts</li> <li>• All future login attempts can be made at: <a href="https://adventist.csod.com/">https://adventist.csod.com/</a></li> <li>• Any required training will appear once an account is created</li> </ul>	
<p>1</p>	<p><b>Go to the self-registration website:</b></p> <p><a href="https://adventist.csod.com/selfreg/register.aspx?c=wah_quest">https://adventist.csod.com/selfreg/register.aspx?c=wah_quest</a></p> <p>OR</p> <p><a href="https://adventist.csod.com/selfreg/register.aspx?c=sgah_quest">https://adventist.csod.com/selfreg/register.aspx?c=sgah_quest</a></p>	
<p>2</p>	<p><b>Enter required information.</b></p> <p><i>(anything with a red asterisk)</i></p>	
<p>3</p>	<p><b>Look Up Position</b></p> <p>Some fields require the user to interface by looking up information. These fields have a link which looks like an arrow pointing to a small box:</p> <p>* Position: </p> <p>The search pop-up window will open. Expand the section below by clicking on the  sign to locate your specific Position:</p>	

Technical help: [Learningsuite2@ahm.com](mailto:Learningsuite2@ahm.com)



Click on a selection to choose it.

Title	ID	Name	Selected
LaboratoryAdmin/Manager	HC_Lab_Admin	Cred. Lab Policies	
LaboratoryAnal/Manager/Staff	HC_Lab_Anal/MS/ST	Cred. Lab Policies	
LaboratoryTechnical Staff	HC_Lab_TechStaff	Cred. Lab Policies	

**4** **Pre-selected choices: Manager**  
 Your Manager has been pre-selected for you.

**5** **Strong Password:**  
 Password must contain:

- 6 – 20 characters
- Combination of letters and numbers
- At least one special character – for example: @ # \$ ! %
- Cannot be same as email, username or user ID
- Cannot have more than 3 of the same characters in a row
- Must have both upper and lower case letters
- Cannot have leading or trailing spaces

**6** **LOGIN (Create Account)**  
 Clicking on LOGIN creates the user account. User will only be stopped if any required information is incorrect or missing.

**7** **Required Training:**  
 When you log into, you will see your required training in Your Assigned Training. Click the Add button to access the training.

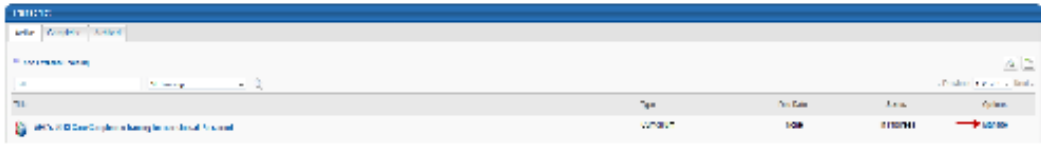
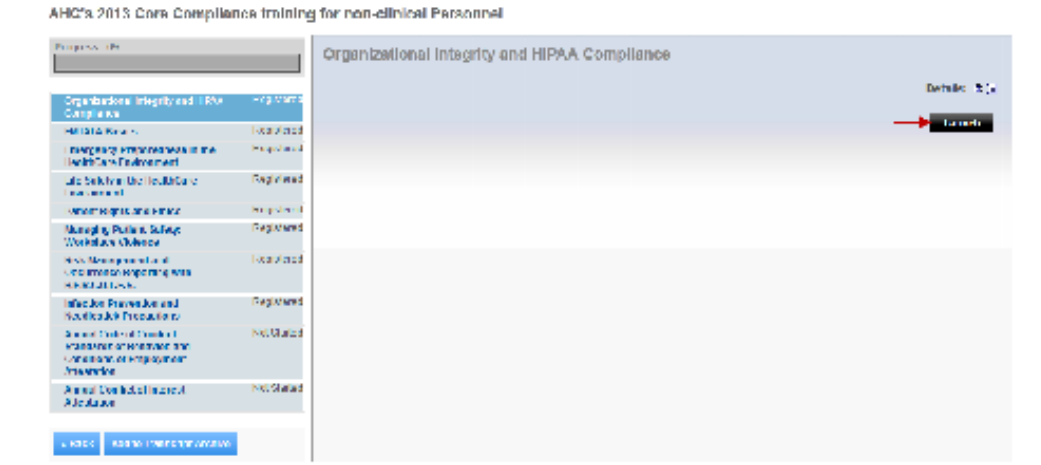
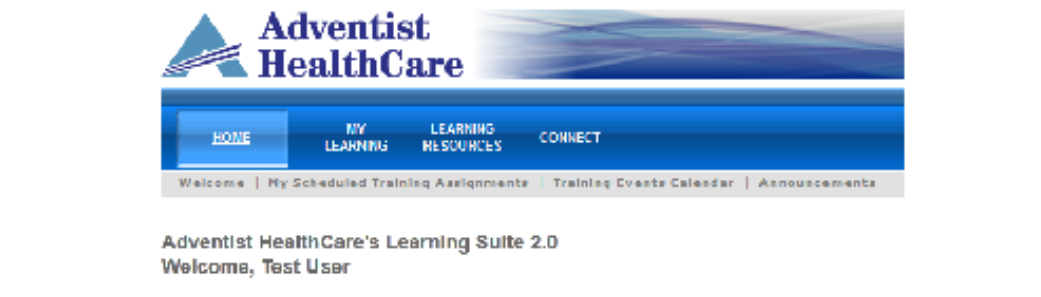
Adventist HealthCare's Learning Suite 2.0  
 Welcome, User Name

Your Assigned Training

	Due Date	Action
AHC's 2019 Core Compliance training for non-clinical Personnel	None	

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<p>8</p>	<p><b>Manage to Add Training</b></p> <p>Click the Manage button to open the required training.</p> 
<p>9</p>	<p><b>Launch the Training</b></p> <p>Click the Launch button to open the first Online Course in your required training.</p> 
<p>10</p>	<p><b>Returning to website:</b></p> <ul style="list-style-type: none"> <li>To go back to the site, go to <a href="https://adventist.csod.com">https://adventist.csod.com</a></li> <li>Use your email to login</li> <li>Once in, you should see the Adventist Healthcare Logo</li> </ul> 

Technical help: [Learningsuite2@ahm.com](mailto:Learningsuite2@ahm.com)

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## Appendix C

### Color Blindness Testing Key

Plate #	Answer
1	12
2	8
3	5
4	29
5	74
6	7
7	45
8	6
9	16
10	26
11	42

#### RESULTS:

<b>Normal</b>	10 or more plates read normally.
<b>Deficient</b>	7 or less plates read normally. Supervisor & QA should establish and document a remediation plan.
<b>Abnormal</b>	On Plate 9 read the numeral 2 and read it easier than Plate 8. Supervisor & QA should establish and document a remediation plan.



### Instructions

Review the following safety related information with the employee during his/her initial hire and/or annual review. Add any departmental specific items at the end of the form. Sign with the employee at the bottom and keep completed form in the employee's training file.

- \_\_\_ Location of the Department's Safety Manual, including the Chemical Hygiene Plan and the Exposure Control Plan
- \_\_\_ Reads and reviews the Department's Safety Manual
- \_\_\_ Location of the Safety Data Sheets (SDS), including understanding the requirement that the SDS must be read before the person works with the chemical.
- \_\_\_ **Location of the acid and flammable cabinets, including inventory log and appropriate contents**
- \_\_\_ Location of the Bulletin Board for safety items; Emergency telephone numbers posted:
  1. SDS 1-800-704-9215
  2. Hospital Safety Officer: ext. 6201 at SGMC; ext. 5551 at WAH
  3. Emergency Code Alert Information ext. 4164
- \_\_\_ Location of the nearest eyewashes and safety showers, including instructions for use.
- \_\_\_ **Trainee correctly demonstrates use of eyewash.**
- \_\_\_ Location of the nearest fire alarms switches, and how to use them (i.e. pull them down).  
 When a fire occurs:
 

<b>R</b>	Rescue anyone in immediate danger
<b>A</b>	Pull the Alarm, call 4444
<b>C</b>	Confine – Close all doors
<b>E</b>	Extinguish (use good judgment when deciding to fight a fire)
- \_\_\_ Location of the nearest fire extinguisher; Steps to use extinguisher:
 

<b>P</b>	Pull the pin
<b>A</b>	Aim the extinguisher
<b>S</b>	Squeeze the handle
<b>S</b>	Sweep
- \_\_\_ Two (2) nearest exit routes from the department to the outside of the building
- \_\_\_ Perform a fire drill with trainee. Describe evacuation process at the other sites
- \_\_\_ Location the department is to meet outside of the building during building evacuations.
- \_\_\_ Location of the nearest first aid kit
- \_\_\_ Location of the nearest chemical spill materials, and review instructions
- \_\_\_ Response to Mercury spill – contact Hospital Safety Officer.
- \_\_\_ Location of personal protective equipment (PPE) in the department, how to obtain PPE and when to use:
  1. Gloves
  2. Body Protection (Lab coat)
  3. Face/Eye protection
- \_\_\_ Process to clean counters and bench tops before, during and after each shift
- \_\_\_ Description of types of waste streams (all lab locations):
  1. Sharps: Sharps to be placed into approved sharps containers, not to be overfilled, closed and placed in medical waste for disposal.
  2. Chemical: Review department's chemical waste disposal procedures.
  3. Confidential and white paper recycling (only for non-contaminated paper)
- \_\_\_ **SGMC Specific Descriptions:**
  1. Medical (infectious) waste: red bags. Anything containing or contaminated with biological material (gloves, old specimens, etc.).
  2. Regular trash: NO GLOVES.

## Safety Review List

- Germantown Emergency Center
- Shady Grove Medical Center
- Washington Adventist Hospital

\_\_\_ **WAH Specific Descriptions:**

1. Medical (infectious) waste, Special or Other Potentially Infectious Medical (OPIM) waste:  
Dispose of in red bags. Anything containing or grossly contaminated with biological material; waste that may carry potentially contagious body waste, hazardous or biohazardous material. Special medical waste or OPIM includes all blood and blood grossly contaminated products or items. Grossly contaminated means that blood is dripping or flaking off in significantly visible quantity.
2. Regular trash: includes gloves, pipette tips, empty urine container (stripped of patient info) and other laboratory waste that is **not** significantly contaminated with blood or body fluids.

\_\_\_ Process to remove biohazard trash (2/3 full) and location

\_\_\_ Location of empty biohazard boxes / sharps containers

\_\_\_ SGMC Trash room door combination 421#

\_\_\_ Code alerts:

CODE	Description	SGMC Response	WAH Response
Blue "adult"	Cardiac arrest for adult (8 yrs of age & >35kg)	Call ext 4444	Call ext 5555
Blue "child"	Cardiac arrest for child (3m - 8 yrs of age & <35kg)	Call ext 4444	Call ext 5555
Blue "infant"	Cardiac arrest for infant (birth to 3 months)	Call ext 4444	Call ext 5555
Gold	Bomb threat	Report suspicious packages to Security	
Gray	Elopement	Information only	
Green	Combative Patient	Available males report to unit	
Orange	Haz-Mat Spill or Release	Isolate area to prevent spread. Notify Supervisor and Security.	
Pink	Infant or Child Abduction	Search Lab areas and restrooms, monitor hallways near lab and glass tunnel, <b>stop anyone with infant/child</b>	Search Lab areas and restrooms, guard doors at Lisner exit and Stairwell H, <b>stop anyone with infant/child</b>
Purple	Security Only response	Information only	
Red 4444	Fire Emergency	Call ext 4444	
Stork	Birth outside of L&D	Information only	
White	Tornado Warning	Information only	
Yellow	Emergency / Disaster	Mgr/Supvr reports to Command Center, Phlebotomists report to ERD, BB takes blood inventory	
Code 4164	Hospital Alert	Call ext 4161 for detail	
Yellow Surge	Bed capacity	n/a	Information only
Indigo	Pre-diversion / Diversion	n/a	None required
Code 99	Hostage Situation	n/a	Information only

\_\_\_ Use of the chemical fume hood (if applicable)

\_\_\_ Use of the biological safety cabinet (if applicable)

## Safety Review List

- Germantown Emergency Center
- Shady Grove Medical Center
- Washington Adventist Hospital

### SGMC Departmental Specific for OPL Lab:

- \_\_\_ Location of EXIT signs
- \_\_\_ Location of the closest Fire alarm pull station (at the hospital registration desk on the same floor)
- \_\_\_ Location and Operation of the Eye wash station
- \_\_\_ Location and Response to the Emergency Call buttons/buzzers in all patient rooms
- \_\_\_ Location of key to the patient's restroom and response to the call button
- \_\_\_ Location of volume button for overhead speakers, set volume and listen to announcements.

### WAH Departmental specific safety items:

- \_\_\_ Location of stairwells D & H & elevators A, B & C adjacent to the Laboratory
- \_\_\_ Knows to close front desk shutter when code red is announced, including writing a note on the shutter stating: **'Lab window closed due to Code Red. Please knock on shutter or press door bell for service'**
- \_\_\_ Knows to assist Lab patients that are waiting in the Lab waiting lounge into the dept/ out of the dept (rescue/evacuate if fire is within the lab) when code red is announced. Patients must not remain in the Waiting Lounge when Hospital is under Code Red, they must be escorted into the Outpatient Phlebotomy area or within the Front Desk area and escorted out when Code Red is cleared.
- \_\_\_ Do NOT use elevators during a Code Red situation
- \_\_\_ Doors to the Department must be kept closed at all times. Do NOT share number lock information with unauthorized personnel.
- \_\_\_ Specimen Processing drop-off window must be kept closed at all times.
- \_\_\_ Knows to assist WAH Security / Safety staff when buzzer in the Lab patient rest room is sounded by a patient needing help, including operation of opening lab rest room door.
- \_\_\_ Knows purpose & operation of emergency push buttons located within Outpatient blood drawing rooms.
- \_\_\_ Review location of flashlights & use during power outages;  
Flashlights must always be located in the Out Patient Phlebotomy Center, in the middle bottom -most drawers labeled: FLASHLIGHTS.

### Other Departmental specific safety items

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\_\_\_\_\_  
Employee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor

\_\_\_\_\_  
Date

- Germantown Emergency Center
- Shady Grove Medical Center
- Washington Adventist Hospital

## COLOR-BLINDNESS TESTING RESPONSE SHEET

<b>Date:</b>		<b>Department:</b>	
<b>Employee Name:</b>		<b>Employee ID#:</b>	

**Instructions:** Review the slides in the “Ishihara’s Test for Color Blindness” PowerPoint. Identify the numerals in the circles of each page for Plates 1-11. Record your answer in the Answer column.

Plate #	Answer	Correct	Incorrect
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			

<b>Reviewer Name &amp; Title:</b>		<b>Date:</b>	
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Please score the responses recorded above using the Color-Blindness Testing Answer Key. Identify the rating below and follow-up with QA as needed. Retain this in the employee’s department competency/training file.

Comments: \_\_\_\_\_

	<b>Normal</b>	10 or more plates read normally.
	<b>Deficient</b>	7 or less plates read normally. Supervisor & QA should establish and document a remediation plan.
	<b>Abnormal</b>	On Plate 9 read the numeral 2 and read it easier than Plate 8. Supervisor & QA should establish and document a remediation plan.