



Imaging Services Contingent Worker

ORIENTATION, EDUCATION, AND COMPETENCY ASSESSMENT

Welcome, we are excited to have you come support our team. The following document lists self-learning and on-line activities to help prepare you for our hands-on training and transition to caring for patients in our patient care areas.

The learning materials are found on our website [Clinical Facility Temp Worker \(intermountainhealthcare.org\)](https://intermountainhealthcare.org/careers/nonintermountain-workforce/contingent-workforce/temporary-worker/contracted-labor/clinical-facility/) URL: <https://intermountainhealthcare.org/careers/nonintermountain-workforce/contingent-workforce/temporary-worker/contracted-labor/clinical-facility/>.

We recommend that you bookmark the website for reference during your stay. The website will have additional resources that you will find helpful during your stay in Utah if you are coming to us from outside the area.

Initial orientation day/ On-boarding class

- ☐ Complete hands-on skills and have instructors sign your competency assessment document.
- ☐ ID badge
 - Attending a central Contingent worker orientation class, pick up your badge before you leave.
 - Not attending a class, you will need to obtain your badge at your facility.
 - Badge access may take a day or two to be activated. If access is not working after two days, contact the local security department.
- ☐ Start the on-line modules. These need to be **completed within 2 weeks** of your start date or you will be pulled from the schedule. You will need to sign-yourself off on these modules on your competency assessment.
 - QR code will link you to the Non-Intermountain Clinical worker site.



Unit Orientation

- ☐ Have your “buddy” or Manager complete your [Department Orientation Tour](#) (DOT) when you arrive on the unit.
 - NOTE: You need to have a new DOT completed and signed every time you first arrive on any unit/facility.
- ☐ You will be scheduled for one orientation shift to shadow another caregiver/buddy. Your buddy must sign-off your competency assessment documentation.
 - Note: Make sure to bring your competency assessment document with you for your shifts during orientation.
- ☐ After your orientation shifts you will be receiving your schedules from your dedicated unit manager.
 - Note: For nursing only: If you do not have a dedicated unit, your schedule will come from rusty.carlson@imail.org.

NOTE: Return all paperwork within 2 weeks.

Contingent Workers return to intermountainCWM@rightsourcingusa.com

NURSA nurses should return to Chyna.Walker@imail2.org

Find information on how to [Activate your Intermountain Account](#) on the Website using the above QR code.

- Initial where indicated.
 - Key to abbreviations in the table: CW =Contingent Worker and Ed/TL=Educator/Team Lead.

Name:

Primary Units

Supervisor:

COURSE REFERENCE NUMBER	COURSE NAME	MODALITY	DATE	CW INITIALS	CC INITIALS	N/A
SELF GUIDED General Information and “E-Learning” modules to review. Contingent Worker to initial & date upon completion of e-learning. Manager/Educator/Designated Leader to mark any non-applicable modules.						
PREREQUISTE	Ensure Intermountain Account is activated. This is performed on the Intermountain Contingent Worker Page.					
	COVID-19 Resources for Caregivers; PPE-Masking Toolkit (multiple resources on this website) <ul style="list-style-type: none"> How to wear a mask How to keep safe in the break room Cleaning your workspace 					
	<ul style="list-style-type: none"> Standard Precautions: Hand hygiene and PPE Standard Work Isolation Cleaning Imaging Exam Rooms Standard Work: Isolation Cleaning: Imaging Portable Procedures 					
	<ul style="list-style-type: none"> N95 and PAPR for Bio Aerosol Protection Prerequisite: Complete OSHA Medical Questionnaire located on the Contingent Worker Website <ul style="list-style-type: none"> N95 fit test/SPO PAPR SPO 					
	<ul style="list-style-type: none"> Vocera User Training Videos Learn a name and a command Phone integration – calling an outside number Vocera Documents for Central Hospitals Vocera 3000 command pocket card Vocera 3000 reference card 					
COURSE REFERENCE NUMBER	COURSE NAME	MODALITY	DATE	CW INITIALS	CC INITIALS	N/A
SELF GUIDED Imaging Specific Protocols and “E-Learning” modules to review. Contingent Worker to initial & date upon completion of e-learning. Manager/Educator/Designated Leader to mark any non-applicable modules.						
	<ul style="list-style-type: none"> Preventing Wrong Site Wrong Procedure Standard Work 					
	<ul style="list-style-type: none"> Intravascular Contrast Media Administration and Supervision 					
	<ul style="list-style-type: none"> Prevention of Contrast-Induced Nephropathy (CIN) in Adult Patients Receiving Iodinated Contrast (IoC) 					

	<ul style="list-style-type: none"> Pregnancy Screening Imaging and Cardiovascular Services Procedure 					
	<ul style="list-style-type: none"> MRI Level I Safety: Non-MRI personnel (all except MRI assigned workers) 					
	<ul style="list-style-type: none"> MRI Safety for Level II Personnel (MRI assigned workers only) 					

PRACTICE RESOURCE: The contingent employees can access the **Lippincott Advisor and Procedure** resources by opening Lippincott Procedures at: <https://procedures.lww.com/lnp/home.do>, select login and then the self-enroll option (highlighted in red below). The self-enroll feature is good for 90 days.

COURSE REFERENCE NUMBER	COURSE NAME	DATE	CW INITIALS	CC INITIALS	N/A
-------------------------	-------------	------	-------------	-------------	-----

SKILLS OR MODULES TARGETING ELECTRONIC HEALTH RECORD (Cerner = iCentra) FOR REVIEW

	<ul style="list-style-type: none"> Review the Imaging Services Image Verification Workflow 				
	Medicalis Training Videos <ul style="list-style-type: none"> Medicalis Overview Training (All Roles) 1.02 Medicalis Explorer Pane-Using Filters Training Video (All Roles) 1.03 Medicalis Explorer Pane-Filtering Filters Training Video (All Roles) 1.04 Medicalis Explorer Pane-Performing a Manual Search (All Roles) 1.05 Medicalis Patient Summary Training Video (All Roles) 1.06 Medicalis Patient Summary-Problem Workflow (All Roles) 1.07 Medicalis Patient Summary-Tech Feedback (QA Technologists) 1.08 Medicalis Chat Training Video (All Roles) 				
	Visage Training Videos <ul style="list-style-type: none"> 1.11 Visage Overview Training Video (All Roles) 1.12 Visage Study Browser Training Video (All Roles) 1.13 Visage Study Browser-Creating a Preset Query Training Video (All Roles) 1.15 Visage View Window Training Video (All Roles) 1.16 Visage View Window-Mouse Functionality Training Video (All Roles) 1.17 Visage View Window-Tool Customization Training Video (All Roles) 1.18 Visage DICOM Send and Export Window Training Video (All Roles) 1.19 Visage Quality Assurance Window Overview Training (QA Technologists, Managers, & Technologist) 1.20 Visage Quality Assurance Window - 1 Training (QA Technologists, Managers, & Technologists) 1.21 Visage Quality Assurance Window - 2 Training (QA Technologists, Managers, & Technologists) 1.22 Visage Quality Assurance Window - 3 Training (QA Technologist, Managers, & Technologists) 1.23 Visage Quality Assurance Window - 4 Training (QA Technologists, Managers, & Technologists) 1.24 Visage Quality Assurance Window - 5 Training (QA Technologists, Managers, & Technologists) 1.25 Visage Image Quality Mod Perm Labels - 6 Training (QA 				

	Technologists, Managers, & Technologists) • 1.26 Visage Image Quality Mod-Anno & Pres - 7 Training (QA Technologists, Managers, & Technologists)				
	iCentra- Watch these videos <ul style="list-style-type: none"> • Using Department Order Entry • Setting up your Appbar • Setting Up Department Order Entry • Setting Up and Using Scheduling Appt. Book • Setting Up Your Online Worklist • Correct set up of online worklist <ul style="list-style-type: none"> ○ Resource: Online Worklist Set Up Requirements and Best Practice Recommendations • Verification of valid order in PowerChart • Incorrect order replacement <ul style="list-style-type: none"> ○ Incorrect Order Valid Replacement Process • G Code Order Replacement <ul style="list-style-type: none"> ○ (G) Code Order Valid Replacement Process • Start and Complete a Patient • Standing Order Protocols • Documenting medication administration • Ad-Hoc medication administration documentation • Modality or facility specific functions • Periprocedural process (pre-procedure checklist, time-out, post-procedure checklist) <ul style="list-style-type: none"> ○ Periprocedural Verification for Imaging Invasive Procedures • Documenting allergies and medications 				

UNIT ORIENTATION / SKILL CONFIRMATION

ESSENTIAL SKILLS EVALUATION

Observed skills in the clinical setting (**peer-to-peer evaluation**). Educator/Manager to initial & date upon contingent worker completion of skill.

	Modality specific exam protocol location and selection					
	Appropriate use and correct selection of technical factors for all Imaging equipment applicable to assignment.					
	Proper Usage of Power Injector					
	Reaction box location Review: Tip Sheet for Contrast Reaction Boxes					
	Demonstrate imaging exam competency as applicable to modality					

I have completed all the above-listed items and have had the opportunity to ask questions and clarify my understanding. All questions have been answered to my satisfaction. I understand the information presented in the above listed materials and understand that I am accountable for complying with these and with all Intermountain policies, procedures, and guidelines. I will not perform any treatment or use any type of equipment with which I am unfamiliar or uncertain. If I need further assistance with performance of my job, I will request assistance from my manager(s), educator(s), or appointed ambassador.

Once completed send completed document to Margaret Stocking mstocking@rightsourcingusa.com

NURSA nurses should return skills assessments and other orientation documents to Chyna Walker (imail2) Chyna.Walker@imail2.org

Contingent Worker Signature: _____ Date: _____

Printed Name: _____ Initials: _____

Intermountain Representative Signature: _____ Date: _____

Printed Name: _____ Initials: _____

Intermountain Representative Signature: _____ Date: _____

Printed Name: _____ Initials: _____

Intermountain Representative Signature: _____ Date: _____

Printed Name: _____ Initials: _____

Intermountain Representative Signature: _____ Date: _____

Printed Name: _____ Initials: _____