



Surgical Services Surgical Tech Contingent Worker

CLINICAL ORIENTATION, EDUCATION, AND SKILLS 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 can be on our website [Clinical Facility Temp Worker \(intermountainhealthcare.org\)](https://intermountainhealthcare.org/careers/nonintermountain-workforce/contingent-workforce/temporary-worker/contracted-labor/clinical-facility/) <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.

Department Orientation: (Print out and give to manager/educator to fill out)

A [department orientation](#) must be completed within two weeks of the worker's start date.

Account Activation:

Workers, participating in patient charting or requiring access to Intermountain systems, should receive an Intermountain account or user ID. This account is temporary and must be activated by the worker prior to their first day. Instructions for [activating an Intermountain account](#).

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

Name: _____ Primary Units _____ Buddy: _____

Assigned Hire Date: _____

All educators/team leads must sign at bottom of form as Intermountain representative.

Once completed the caregiver needs to send completed document to:

Margaret Stocking intermountaincwm@rightsourcingusa.com. **Must be completed within 2 weeks of starting.**

QR code to contingent worker website:



COURSE NUMBER	COURSE NAME	TIME	DATE	CW INITIALS	CC INITIALS
16329	N95 and PAPR for Bio Aerosol Protection	16 min			
PREREQUISITE	OSHA Medical Questionnaire.pdf – complete in preparation for N95 and PAPR training	5 min			
Website	Defibrillator Resources: Access the following modules via Zoll website R Series Videos (Software Version 14) <ul style="list-style-type: none"> • R series ALS: Brief Overview - Software v 14 • Introduction to R Series • Basic Operation • Patient Preparation • Monitoring • Advanced Monitoring Capabilities • Defibrillation • Real CPR Help and See-Thru CPR • Support Functions • Pediatric Patients 	20 mins			
Resource	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	3:26 min 1 min 5 min 5 min			
JOB AID	<ul style="list-style-type: none"> • Using the Time Clock • Punching on the Web • UKG App Tip Sheet • Checking my Schedule in the Mobile App 	10 min			
Resource	COVID-19 Resources for caregivers: PPE-Masking Toolkit (multiple resources on this website) <ul style="list-style-type: none"> • Standard Precautions: Hand hygiene and PPE • How to wear a mask • How to keep safe in the breakroom • Cleaning your workspace 	6 min 5 min 5 min 5 min			
148069	Surgicount Training Video CBT	10 min			
14029	Preventing Burns and other patient injury in the OR CBT	10 min			

284185	Surgical Specimen Labeling, Handling, and Transport CBT	10 min			
277363	Basic Aseptic Technique: Universal Protocol	10 min			
36254	Handling Human Cells, Tissues, and Cellular Based Products	10 min			
COURSE NUMBER	Items to be passed off on unit		DATE	CW INITIALS	CC INITIALS
4242	Communication Device -Vocera SPO (set-up for unit)	10 min			
3011	Defibrillator – Zoll R-Series quick review	15 min			
20792	N95 SPO – 3M mask types 8210, 1860, 1860S Please make sure to bring your completed OSHA Medical Questionnaire	15 min			
7042	PAPR (powered Air Purifying Respirator SPO	15 min			
8709	Complete DOT (department orientation and tour) for each unit where you will be working.	15 min			
Unit Based	Medication labeling	10 min			
Unit Based	Surgical Safety Checklist (Universal Protocol/Fire and Sharps Safety)	10 min			
Unit Based	Surgical Infection Prevention Bundles	10 min			
Unit Based	Unit workflow	10 min			
138224	Surgicount Skill Pass off	10 min			
3998	Counting Surgical Items SPO	10 min			
Unit Based	Identify Resources	10 min			
151187	Flexible Scope Bedside Cleaning SPO	10 min			
3170	Surgical Scrub, Gowning, Gloving SPO	10 min			
Unit based	Appropriate surgical attire and use of PPE	10 min			
181128	Cleaning and transport of soiled instruments for reprocessing	10 min			
Unit based	Specimen labeling and handling	10 min			
Unit based	Immediate use sterilization	10 min			
3169	Aseptic Technique SPO	10 min			
BELOW: OTHER SPECIALTY SKILLS/EQUIPMENT AS IDENTIFIED BY MANAGER/EDUCTOR ON UNIT.					

I have completed all the above items and have had the opportunity to ask questions and clarify my understanding. Any and 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 being in compliance 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 leader.

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

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: _____