

Summer Hospital Operations IPPE - Orientation Checklist

<p>Introductions</p> <ul style="list-style-type: none"><input type="checkbox"/> Preceptor: Discuss background and training and visions for the profession and hospital pharmacy practice<input type="checkbox"/> Student: Discuss previous experience, personal goals for the experience, specific interest, and career goals<input type="checkbox"/> Staff: Discuss organizational structure
<ul style="list-style-type: none"><input type="checkbox"/> Review goals and objectives of the rotation
<p>Discuss schedule:</p> <ul style="list-style-type: none"><input type="checkbox"/> Monday – Friday 8-5<input type="checkbox"/> If not above, please note schedule: _____
<ul style="list-style-type: none"><input type="checkbox"/> Conduct a tour of the area in which you will be located
<ul style="list-style-type: none"><input type="checkbox"/> Review legal/regulatory issues: Patient confidentiality, HIPAA, OSHA, required immunizations
<ul style="list-style-type: none"><input type="checkbox"/> Review computer access for site / hospital
<ul style="list-style-type: none"><input type="checkbox"/> Discuss daily activities or special projects for the rotation
<ul style="list-style-type: none"><input type="checkbox"/> Review preceptor expectations of student
<ul style="list-style-type: none"><input type="checkbox"/> Review student expectations of the experience