UNDERGRADUATE STUDENT NURSE

1. PURPOSE:

To define the scope of practice of an undergraduate student nurse caring for patients at an Aurora facility.

2. SCOPE:

This policy applies to Aurora Health Care, Inc. and any entity of facility owned or controlled by Aurora Health Care.

3. DEFINITIONS:

3.1 Student Nurse is defined as an undergraduate student that provides direct patient care during a semester clinical rotation and is currently enrolled in a Nursing program.

3.2 Student Nurse can refer to a clinical group of students under the direction of an instructor, or a precepted experience, which consists of one student practicing under the direction of a Registered Nurse caring for the patient.

4. POLICY:

4.1 A current contract between the educational institution and Aurora Health Care must be in place prior to any student nurse experience in an Aurora facility. Affiliation agreements are available from the Aurora Legal Department.

4.2 The RN caring for the patient has ultimate responsibility for patient care, but is not responsible for the actions of the student.

4.3 Student nurses may not carry out clinical procedures that are considered out of scope for their role. Clinical procedures that are out of scope include the following:

   i. Administration of blood products
   ii. Administration of chemotherapy
   iii. Obtaining informed consent
   iv. Accepting verbal or telephone orders from a physician or their designee
   v. Administration of emergency drugs
   vi. Interpretation of cardiac rhythms
   vii. Programming of IV pumps, PCA pumps, or epidural infusions unless the student is under the direct supervision of the nursing instructor
   viii. Any clinical procedure that is identified as out of scope by the clinical site.
5. GENERAL PRACTICES:

5.1 Student nurses are responsible for adhering to all relevant policies of the clinical site.

5.2 The system website for student nurses must be read, reviewed and completed each semester by the instructor and students prior to providing direct patient care. Failure to do so will require the faculty to remove the students from the unit until regulatory requirements are met.

5.3 Students may have limited access to select patients or experiences dependent upon site needs.
   i. Patients may request cares to exclude student experiences
   ii. Department managers will communicate any limitations regarding patient assignments to the clinical instructors

5.4 Students are required to strictly adhere to patient confidentiality and protect the security of patient records and patient data.

5.5 Students are only allowed to access the records of patients involved in their care experience.

5.6 The instructor or RN caring for the patient must be present if the student has not attained clinical competency in a procedure or technical skill. The instructor and/or RN caring for the patient will provide guidance about which skills may be performed independently. Students repeating a clinical course must be identified by the instructor and monitored closely.

5.7 Instructors and students will adhere to site specific guidelines for documentation of signatures including the student/instructor name, student/instructor status and school facility name.

5.8 Students must have their documentation reviewed for content and accuracy by their instructor. Under special circumstances, i.e. outpatient areas, the RN taking care of the patient may be asked to review student nurse documentation. In the case of preceptorships, the preceptor will review documentation.

5.9 Caregivers having any concerns with a student or instructor’s activities should report these to the unit or facility manager. Once assessed by the manager, it will be determined if it is necessary to further speak with the school’s academic affairs office or if the issues identified can be resolved within the unit setting.

5.10 Students or instructors having concerns regarding a patient’s care or a caregiver issue should report these to the unit or facility manager. Unresolved issues should be directed to the nursing director or administrator.

6. MEDICATION ADMINISTRATION GUIDELINES:

6.1 Safe medication practice includes knowledge of the rights for medication administration including medication action, safe dosages for adults, seniors, or children, side effects and special considerations for administration. Students are expected to follow Aurora Health Care’s policies regarding Medication Administration.

6.2 Access codes for medication rooms and unit-based cabinets will only be issued to instructors.

6.3 Instructors or the RN caring for the patient will check ALL medications prior to student administration. Students must verify the patient’s identification according to policy and verify medications against the electronic medication record.
6.4 All intravenous medications are to be prepared and administered under the direct supervision of the instructor or the RN caring for the patient. Intravenous medication preparation includes reconstitution, aspirating medication from vials, confirming premixed pharmacy doses and all infusions. Volume and rate changes are made while under the direct supervision of the instructor or the RN caring for the patient.

6.5 The RN caring for the patient will administer or program any Patient Controlled Analgesia or Epidural infusion. Students may monitor a patient with this type of analgesia according to policy.

6.6 Students caring for patients receiving blood products are allowed to monitor vital signs during the transfusion and sign the Blood Transfusion Record Tag as the second person to verify the blood component.

6.7 Students will adhere to site-specific guidelines related to point of care testing (e.g., blood glucose monitoring).

Cross References: Clinical Documentation (Hospital Nursing) (#1008)
Medication Administration Times (#2013)
Medication Administration and Use of Technology (#2022)

Owner: System Nursing Practice Council

References:

Review Dates:
12/28/10 Nursing Policy Subcommittee
9/16/2011 Human Resources