During the clinical rotation, students may, with the clinical faculty member’s and facility staff’s consent and supervision, assume responsibility for all nursing activities within the college course guidelines/within the preceptors’ roles. The following are exceptions to this rule.

Students may not do the following:

1. Witness any consent forms.
2. Take physician orders, verbal or phone orders.
3. Transcribe chart orders.
4. Give any intravenous medication (IV Push) without direct supervision by clinical instructor/facility Registered Nurse. Note: Students may only administer appropriately diluted IV narcotic.
5. Perform any task that requires certification or advanced “instruction” (e.g., arterial blood gas [ABG] puncture, chemotherapy, removes PICC lines, interpret/monitor EKG).
6. Initiate or discontinue invasive monitoring, regulated epidural analgesia, or solely monitor patient following conscious sedation.
7. Verify blood administration and/or witness blood administration forms.
8. Co-sign insulin. Two licensed nurses must cosign for insulin although the student may participate in the verification process.
9. Witness or sign out controlled drugs in Pyxis delivery system unless co signed by clinical instructor/facility preceptor.
10. Complete the end of shift controlled drug count without instructor or RN supervision.
11. May not have controlled drug keys in their possession.
12. Any policy and/or procedure that facility restricts student from performing.
13. Any skill/procedure that has not been covered in a nursing lab.
14. Any task outside RN scope of practice as identified by facility.

This is not all inclusive. Additional limitations may be enforced per clinical faculty discretion, the academic institution or the Colorado Department of Regulatory Agency recommendations. Any questions regarding specific procedures or responsibilities should be directed to The School of Nursing at Platt College faculty. Students are expected to maintain standards of care and function within the scope of their knowledge, skills, and abilities at all times.

Student Signature ________________________________ Date: ________________