Guidelines for Nurse Interns having a “Precepted” Experience

1. The Nurse Intern practices under the direct supervision of the preceptor and follows the registered nurses’ scope of practice. Nurse Interns:
   a. Insert angiocaths, Foleys, NGs, and fecal management systems
   b. Perform wound care and sterile dressing changes
   c. Cannot perform certain competencies such as: IABP, Impella, CRRT, Defibrillation, VADs, EVDs, etc.
   d. Perform the verification for transfusion process with the preceptor but they cannot be the first or second signature on the form prior to administration. The student can perform all VS associated with blood administration
   e. Cannot administer chemotherapy

2. Students must be compliant with ACE-Passport and complete a safety review prior to the start of the clinical.

3. Students must complete EMR and non-employee compliance training prior to the start of clinical. The students receive the link to the online training prior to the start of clinical.

4. Attendance:
   a. Nurse Interns cannot be on the unit without a preceptor being present.
   b. Nurse Interns who have one incident of “no show/no call” or “late/no call” meet with the Nurse Manager and discuss the situation. The NM can terminate the Nurse Intern based on this discussion or coach the student to improved attendance. The Nurse Intern follows HR policies for calling off.
   c. Nurse Managers will inform the professional development specialist for your area if they notice problems in attendance or the student has more than one incident of “no show/no call” or “late/no call.” The Professional development specialist notifies the clinical faculty.

5. Nurse Interns cannot take a verbal or telephone order or clarifying/modifying provider orders.

6. All medications administered by the Nurse Intern are under direct supervision of the preceptor and co-signed by the preceptor. Nurse Interns do not get access to the automated medication dispensing cabinets or medication carts.

7. Students cannot be the first or second signature on high alert medications that require an independent double check. Students ARE permitted to administer high alert double check medications. However, high alert double check meds require two licensed people to do the independent double check. This means that the preceptor and another licensed individual must complete and document the independent double check. The student should participate in the process and understand the purpose of the independent double check. The student may administer the medication, but there is nowhere in the UHCare EMR for the student to document the med administration since the 2 licensed people are required to sign. The preceptor must document in a comment that the “medication was administered by nursing student, ________, under my direct supervision.”