

## Credentialing Course Catalog

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### **National Patient Safety Goals**

Authors: Susan K. Poole, BSN, CRNI, CNSN, CIC; Anna Nowobilski, PharmD, MBA, FASHP, BCNSP; James A. Willobee BS, CSA, CCEP

#### **Course Description**

The purpose of the National Patient Safety Goals is to improve patient safety. Each year, the goals focus on the most current problems in healthcare safety and how to solve them. In succeeding years, certain goals may be continued, while others may be replaced due to emerging priorities. Goals which do not appear in a given year are not “removed”, but become regular standards to be upheld for Joint Commission Accreditation. To ensure a greater focus on priority-safe practices, the number of released “goals” for a given year by The Joint Commission will be limited. Each year, these goals are reviewed by the Joint Commission's Patient Safety Advisory Group. The findings of this panel are commented upon by healthcare practitioners, healthcare organizations, consumers, and other stakeholders. Each year, highest priority issues are included in program-specific NPSGs, and addressed during accreditation surveys. Elements of performance (EPs) within each NPSG address the most currently accepted clinical practice guidelines. The Joint Commission (TJC) is a non-for-profit independent organization which accredits hospitals and other healthcare organizations. Its standards are program-specific, and address hospitals, office-based surgery centers, ambulatory care centers, home care organizations, laboratories and long-term care facilities.

#### **Course Objectives**

- Describe why National Patient Safety Goals were established and how they are prioritized.
- List patient identifiers appropriate for use within each health care setting.
- Describe the single most effective intervention to decrease healthcare associated infections.
- Discuss processes required to prevent surgical errors and surgical site infections.

## **Chapters**

- i. Introduction
- ii. Identify Patients Correctly (Goal 1)
- iii. Improve Staff Communication (Goal 2)
- iv. Use Medications Safely (Goal 3)
- v. Use Alarms Safely (Goal 6)
- vi. Prevent Infection (Goal 7)
- vii. Prevent Falls (Goal 9)
- viii. Prevent Bed Sores (Goal 14)
- ix. Identify Patient Safety Risks (Goal 15)
- x. Prevent Mistakes in Surgery (UP.01)
- xi. Summary
- xii. Glossary

## **Advamed Code of Conduct**

Authors: Susan K. Poole, BSN, CRNI, CNSN, CIC and Anna Nowobilski, PharmD, MBA, FASHP, BCNSP, James A. Willobee, BS, CSA, CCEP

### **Course Description**

A code of conduct is a document issued by an organization's leadership which binds its employees (and/or agents) to comply with applicable law, organizational policy, professional standards, and ethical behavior. To be of value, the code of conduct must be brief, easily understood, and communicated to all within the organization. It must specify the consequences of violation, and protect "whistle blowers" from retribution by policy. A code of conduct is a key element of every organization's overall compliance program. It constitutes the organization's commitment to ethical behavior and defines its culture. Once implemented, the larger compliance program should serve to protect the organization against regulatory non-compliance and industry fraud and abuse by assuring that each employee (and/or agent) remain vigilant in recognizing actions which might place the organization in regulatory or ethical jeopardy. With the volume of legal regulations taking entire libraries, the organization's code of conduct, compliance program, and supportive policies summarize applicable law in a way that guides employees (and/or agents) to conduct the organization's business in a manner that is lawful, and thereby fulfilling the leaders' obligation to organizational oversight.

### **Course Objectives**

- Recognize a general interdependence of ethics, law, and policy.
- Describe the role of a code of conduct within an organization's overall compliance program.
- List the seven elements of an effective compliance program and the highest risk areas in the health care industry.
- Recognize the Advamed organization as an advocate of medical innovation and discern its many benefits to the medical technology industry.
- Differentiate appropriate and inappropriate business conduct between a medical technology company, its representatives, and health care professionals.
- Distinguish between medical technology and pharmaceutical company codes of conduct, citing the rationale for the difference between the two.

## **Chapters**

- i. Introduction
- ii. The Code of Conduct in Health Care
- iii. Medical Technology Code of Ethics
- iv. Code of Ethics Purpose
- v. Training Education
- vi. Consulting Agreements
- vii. Meals and Entertainment
- viii. Providing Economic Information
- ix. Grants and Donations
- x. Product Evaluation
- xi. Compliance
- xii. Violation
- xiii. Summary
- xiv. References

## **Bloodborne Pathogens**

Authors: Susan K. Poole, BSN, CRNI, CNSN, CIC and Anna Nowobilski, PharmD, MBA, FASHP, BCNSP

### **Course Description**

The mission of the Occupational Health and Safety Administration (OSHA) is to save lives, prevent injuries, and protect the health of U.S. workers. As part of the Department of Labor, OSHA promotes worker safety and health in every workplace in the United States. OSHA'S bloodborne pathogens standard protects employees who work in occupations where they are at risk of exposure to blood or other potentially infectious materials. In 1991, OSHA issued the Bloodborne Pathogens Standard (29 CFR 1910.1030) to protect workers from this risk.

### **Course Objectives**

- Discuss OSHA responsibility in relation to the Federal Regulation for exposure to bloodborne pathogens.
- Describe occupational exposure to blood and relative risk for acquiring HIV, HBV, or HCV.
- List components of an exposure control plan.
- Describe required steps following an occupational exposure of hepatitis B pathogen.
- Discuss methods of prevention or risk reduction of occupational blood exposure.

## **Chapters**

- i. Background
- ii. Implementation Methods
- iii. Methods of Implementation and Control
- iv. Housekeeping
- v. Hepatitis B
- vi. Employee Training
- vii. Record Keeping
- viii. Definition
- ix. Appendix
- x. References

## **Electrical Safety**

Authors: Susan K. Poole, BSN, CRNI, CNSN, CIC and Anna Nowobilski, PharmD, MBA, FASHP, BCNSP

### **Course Description**

Electricity has long been recognized as a serious workplace hazard. Employees may be exposed to electrical shock, which can result in electrocution, serious burns, or create falls that result in more injuries.

### **Course Objectives**

- Describe the most common causes of electrical injury.
- Define electrical shock, electrical arc flash, and electrical arc blast.
- Identify procedures that promote electrical safety.

### **Chapters**

- i. Overview
- ii. Electrical Hazards
- iii. Prevention of Electrical Injury
- iv. Tips and Procedures for Electrical Safety in The Work Place
- v. Health Care Facilities
- vi. Glossary
- vii. References

## **Fire Safety**

Authors: Susan K. Poole, BSN, CRNI, CNSN, CIC and Anna Nowobilski, PharmD, MBA, FASHP, BCNSP

### **Course Description**

Since emergency situations can happen at any time and without warning, health care organizations must plan for and be prepared to protect their patients and staff during various likely emergencies, including blizzards, earthquakes, chemical spills, civil disturbances, explosions, fires, floods, hurricanes, radiological accidents, tornadoes, and workplace violence. This module will address emergency preparedness specifically related to fire safety.

### **Course Objectives**

- Describe potential fire hazards and how they can be avoided or minimized
- Describe what to do in the event of a fire
- Determine the correct fire extinguisher for each type of fire
- Describe the common elements of an emergency action plan

### **Chapters**

- i. Introduction
- ii. Regulations and Planning
- iii. Fire Detections
- iv. Fire Exits
- v. Types of Fires and the Fire Triangle
- vi. Fire Extinguishers
- vii. Surgical Fires
- viii. Evacuation
- ix. Fire Suppression Systems
- x. References
- xi. Glossary

## **Infection Control and Aseptic Practices**

Authors: Susan K. Poole, BSN, CRNI, CNSN, CIC and Anna Nowobilski, PharmD, MBA, FASHP, BCNSP

### **Course Description**

Healthcare-associated infections (HAI) are infections that patients acquire related to treatment for medical or surgical conditions. HAIs occur in all settings of care, including acute care within hospitals and outpatient surgical centers, ambulatory clinics, outpatient and long-term care facilities. These infections are associated with a variety of causes, including medical devices, complications following a surgical procedure, transmission between patients and healthcare workers, or the result of antibiotic overuse.

### **Course Objectives**

- Discuss the impact of healthcare associated infections in lives and cost.
- State the goals of an infection prevention and control program.
- Describe specific tasks to minimize or eliminate risk of infection in health care settings.
- Describe transmission based precautions to prevent infection in health-care workers and patients.
- List the steps in using an alcohol based hand rub for hand hygiene.
- Discuss the steps in a surgical scrub procedure.

### **Chapters**

- i. Introduction
- ii. Hand Hygiene
- iii. Standard Precautions
- iv. Surveillance
- v. Summary
- vi. Definitions
- vii. References

## **Informed Consent**

Authors: Susan K. Poole, BSN, CRNI, CNSN, CIC and Anna Nowobilski, PharmD, MBA, FASHP, BCNSP

### **Course Description**

Informed consent is a concept with broad application. It may apply to medical treatment and procedures, surgical procedures and medical research. Informed consent has application in medical ethics, physician responsibility, patient rights and litigation. This concept is more than just getting a patient to sign a written consent form. It is a process of a communication with a patient that results in their agreement (consent) to undergo a specific medical intervention.

### **Course Objectives**

- Describe the concept of informed consent including medical and legal definitions.
- Discuss the history and background of informed consent.
- List two case examples of litigation regarding informed consent.
- Describe the Centers for Medicare and Medicaid Services conditions of participation related to informed consent including patient's rights, medical records and surgical procedure.
- Discuss the importance of documentation and information contained in consent forms.

## **Chapters**

- i. Introduction
- ii. Definitions
- iii. Historical Perspective
- iv. CMS Conditions of Participation
- v. Informed Consent Forms
- vi. Example of a Well-Designed Informed Consent Process
- vii. Summary
- viii. References

## **Medical Device Reporting**

Authors: Susan K. Poole, BSN, CRNI, CNSN, CIC and Anna Nowobilski, PharmD, MBA, FASHP, BCNSP

### **Course Description**

The FDA's Medical Device Reporting (MDR) regulations mandate the reporting of serious injury and death from device malfunctions to the FDA by device manufacturers to assure a mechanism that expeditiously identifies and corrects device-related problems. The Safe Medical Devices Act (SMDA) of 1990 strengthened the Medical Device Act of 1976 and required post-market product monitoring and the tracking of certain devices (see Medical Device Tracking) to the level of the patient.

### **Course Objectives**

- State the mission of the Food and Drug Administration's Center for Devices and Radiological Health (CDRH).
- Describe medical device reporting requirements for manufacturers, distributors, and user facilities.
- Identify medical devices that require tracking through the distribution channel.
- Describe the consequences of failing to comply with medical device reporting requirements.

## **Chapters**

- i. Introduction
- ii. Manufacturer Reporting
- iii. Distributor Reporting
- iv. Facility Reporting
- v. Report Submission
- vi. Medical Device Tracking
- vii. Public Disclosure
- viii. Violation
- ix. Summary
- x. Definitions
- xi. Forms
- xii. References

## **Operating Room Protocols**

Authors: Susan K. Poole, BSN, CRNI, CNSN, CIC, Anna Nowobilski, PharmD, MBA, FASHP, BCNSP, Crystal Warner, CST, CSA, James A. Willobee, CSA, CCEP

### **Course Description**

Many healthcare industry representatives visit operating rooms at healthcare facilities. These representatives have highly specialized knowledge on a specific product that requires essential training for operating room personnel. The most critical elements for healthcare industry representatives entering operating rooms are: 1) protecting patient's confidential information, 2) protecting the patient and representative from infection and 3) maintaining safety for healthcare workers and the patient in the operating room. Regulatory bodies and professional organizations are examining the role of healthcare industry representatives in the perioperative setting.

## **Course Objectives**

- Requirements for surgical attire and drape.
- The principles of asepsis and surgical technique.
- Operating Room infection prevention.
- Caring for an operative incision.
- Hazards of the operating room and how they can be minimized.

## **Chapters**

- i. Introduction
- ii. Surgical Attire
- iii. Asepsis and Surgical Technique
- iv. OR Infection Prevention
- v. Post-operative Issues
- vi. Hazards of the OR
- vii. Minimizing OR Hazards
- viii. The AORN
- ix. Non-employee Dependent Healthcare Professionals (DHPs)
- x. Universal Precautions
- xi. Blood Borne Exposure Incidents
- xii. Maintaining a Sterile Field
- xiii. General Established Precautions
- xiv. Maintaining a Clean Environment
- xv. Summary
- xvi. References

## **Patient Rights, Confidentiality, and HIPAA**

Authors: Susan K. Poole, BSN, CRNI, CNSN, CIC; Anna Nowobilski, PharmD, MBA, FASHP, BCNSP; James A. Willobee BS, CSA, CCEP, Bridget M. White, MA

## **Course Description**

This module will provide the learner with an overview of HIPAA Privacy and Security Regulations and Patient Rights and Responsibilities. This introduction is intended to increase health care professionals, and all individuals working in a health care setting, awareness and compliance with organizational policy and procedures and accreditation requirements related to HIPAA and patient rights.

## **Course Objectives**

- Define patient rights that are assured by regulation and accreditation.
- Define patient responsibilities within the context of their health care.
- Understand the scope of HIPAA Privacy and Security regulations.
- Understand individual responsibilities for compliance with HIPAA and HITECH rules.
- Define protected health information and its appropriate use and disclosure
- Describe the consequences of a HIPAA breach.

## **Chapters**

- i. Introduction
- ii. Patient Rights and Responsibilities
- iii. Patient Rights
- iv. Patient Responsibilities
- v. Health Insurance Portability and Accountability Act (HIPAA)
- vi. A Brief History and Summary
- vii. Business Associate
- viii. Privacy Rules
- ix. Protected Health Information
- x. Use and Disclosure
- xi. Patients Notice of Privacy Practices
- xii. Use and Disclosure Rights
- xiii. Security Rules
- xiv. Technical Safeguards
- xv. Physical Safeguards
- xvi. Administrative Safeguards
- xvii. Violations and Penalties
- xviii. HIPAA Complaints
- xix. Health Information Technology for Economic and Clinical Health Act (HITECH)
- xx. Omnibus Rule
- xxi. Summary
- xxii. References

## **Radiation Safety**

Authors: Susan K. Poole, BSN, CRNI, CNSN, CIC and Anna Nowobilski, PharmD, MBA, FASHP, BCNSP

### **Course Description**

The use of radiation in medicine has led to major improvements in the diagnosis and treatment of human diseases. Annually, worldwide, more than 3,600 million x-ray examinations are performed, 37 million nuclear medicine procedures are carried out, and 7.5 million radiotherapy treatments are given. This module will address medical preparedness specifically related to radiation safety for both patients and staff.

### **Course Objectives**

- Describe the electromagnetic spectrum, including both non-ionizing and ionizing radiation.
- Identify medical applications for non-ionizing and ionizing radiation.
- Differentiate between the risks of exposure to non-ionizing and ionizing radiation.
- Discuss precautions required when visiting patients who have received radioisotope therapy.
- Discuss the importance of appropriate use and techniques for medical imaging.

## **Chapters**

- i. Introduction
- ii. Radiation Basics
- iii. Medical Use of Non-Ionizing Radiation
- iv. MRI and Medical Lasers
- v. Medical Use of Ionizing Radiation
- vi. Medical X-Rays
- vii. Mammography and CTs
- viii. Fluoroscopy and Radiation Therapy
- ix. Nuclear Medicine and PET
- x. Things to Watch Out For
- xi. Clinical Radiation Safety Procedures
- xii. Laws and Regulations
- xiii. Preparing for the Future
- xiv. Glossary



## The Sunshine Act

Authors: Debra Gordan, MS, James Willobee, BS, CCEP

### Course Description

The Patient Protection and Affordable Care Act (PPACA) of 2010 received enormous attention for its wide-spread political fallout, and for its great impact on health insurance for US citizens. One specific element of the legislation included an anti-corruption and anti-abuse “transparency” mandate known as the Open Payments program, a.k.a. The Physician Payment Sunshine Act. In its final form, for which the start date collection was August 1, 2013, the legislation required US manufacturers of drugs, devices, biologicals, and medical supplies to publicly report payments or ownership relationships with physicians and teaching hospitals. This online module will provide the learner with an overview of the Physician Payment Sunshine Act to promote compliance with its policies.

### Course Objectives

- Describe the key components of the Sunshine Act, including reporting requirements, covered entities, and penalties
- Define key terms related to the Sunshine Act
- List nature and type of value transfers to physicians which require reporting
- Be familiar with potential penalties for non-compliance.
- Recognize physician responsibilities
- Become updated on any additional reporting now required by state-level Sunshine legislation

### Chapters

- i. Potential Sunshine Act Impact on Healthcare Entities' Relationships With Physicians
- ii. Overview of the Sunshine Act
- iii. Entities Affected by the Rule
- iv. Applicable Manufacturers
- v. Covered Products
- vi. Covered Recipients
- vii. What to Report
- viii. Types of Payments and Transfers of Value
- ix. Research Payments (Clinical and Preclinical)
- x. Continuing Medical Education
- xi. Ownership and Investment Interests
- xii. Excluded From Reporting
- xiii. Data Collection Templates
- xiv. Audits and Federal Penalties
- xv. Physician Responsibilities and Dispute Resolution
- xvi. State Transparency Laws as of January 2015

## Novel Coronavirus Primer for Medical Professionals in a Hospital Setting

Authors: Jacqueline Havelka B.S. Biomedical Engineering. AMWA, IAPWE Biological Research Scientist – NASA

### Course Description

This course is specifically designed to provide medical professionals who visit a hospital setting with information on the virus.

### Course Objectives

- Background on Coronavirus and COVID-19
- Signs and symptoms
- Prevention & how to avoid exposure
- What to do if exposed?
- Testing options

- Isolation Procedure
- Professional Associate Recommendations

## **Chapters**

- i. Novel Coronavirus (COVID-19) Primer for Medical Professionals in a Hospital Setting
- ii. Introduction
- iii. Learning Objectives
- iv. Novel Coronavirus
- v. Origins
- vi. How Does COVID-19 Spread?
- vii. Who is most susceptible?
- viii. COVID-19 and Health Professionals
- ix. Close Contact
- x. Monitoring
- xi. Active Monitoring in Hospitals
- xii. Risk Exposure Levels
- xiii. Medium and Low Risk
- xiv. No Identifiable Risk
- xv. Infection Control Measure
- xvi. Protecting Yourself and Others in a Hospital Setting
- xvii. Additional Precautions: When You Must Go Into a Hospital
- xviii. Contact Precautions
- xix. Airborne Precautions
- xx. Control Exposure Hierarchy
- xxi. Personal Protective Equipment (PPE)
- xxii. N95 Respirators
- xxiii. Surgical Masks Vs. N95 Respirators
- xxiv. Fit Test
- xxv. N95 Respirator Frequently Asked Questions
- xxvi. Short Supply Alternate Strategies
- xxvii. Gloves
- xxviii. Gowns
- xxix. Current Coronavirus testing
- xxx. If You Think You've Been Exposed
- xxxi. When to Self-Quarantine
- xxxii. Alternatives for Engaging Outside of the Hospital
- xxxiii. Professional Association Recommendations
- xxxiv. How Long Will This Last?
- xxxv. Pandemics Are Multi-Year Events