

## Covid-19 RN Orientation Checklist

For the purpose of surge planning, it is my responsibility to review the skills listed below with my preceptor during unit training.

Orientee Name: \_\_\_\_\_ (Circle) Critical Care      Medical Surgical

Skills	Date:	Date:	Date:
	Unit:	Unit:	Unit:
	Preceptor:	Preceptor:	Preceptor:
Test Access:	(Preceptor initials below for each task completed during unit training)		
Orientation to:			
EPIC:			
Skills:			

I confirm that I have been educated to the items signed off on this checklist.

Orientee Signature: \_\_\_\_\_

Date: \_\_\_\_\_