

California State University, Stanislaus
School of Nursing
Simulation Confidentiality Agreement

As a participant in the Simulation Lab, operated by California State University, Stanislaus School of Nursing, I understand the significance of confidentiality with respect to information concerning patients, real or simulated, and other participants including, but not limited to, California State University, Stanislaus School of Nursing students, instructors, and staff. I will uphold the Health Insurance Portability and Accountability Act (HIPPA) and all other federal or state laws regarding confidentiality. Further, I agree to adhere to the stipulations stated below, and I agree to report any violations of confidentiality that I become aware of to my facilitator or instructor.

- All patient and student information is confidential regardless of format- electronic, written, overheard, or observed- and any inappropriate viewing, discussion, or disclosure of this information is a violation of CSU Stanislaus School of Nursing policy.
- The Simulation Lab is a learning environment. All scenarios, regardless of outcome, should be treated in a professional manner. Situations simulated in the lab are to be used as a learning tool and everyone will be treated with respect.
- No students are allowed in the Simulation Lab without Faculty/ Instructor present.
- Students should dress in the same attire they would wear for clinical day including uniform and name badge.
- Students are not permitted to touch any equipment in the Simulation Lab except for equipment with which they are directly working.
- Students will be held responsible for damage to the equipment as a result of not following Simulation Lab policy and procedure.
- Misuse of any equipment by any student will result in dismissal of that student from the Simulation Lab.
- Students are not permitted in the computer control area.
- Students will maintain confidentiality regarding the performance of other students in the Simulation Lab.
- Students must sign two (2) forms prior to participation in simulation.
 - Confidentiality Agreement
 - Audio/ Visual Consent

Name (Please print)

Date

Signature

California State University, Stanislaus

School of Nursing

Audio Visual Consent

I grant permission to California State University, Stanislaus, its employees and agents, to take and use visual/ audio images of me. Visual/ audio images are any type of recording, including but not limited to photographs, digital images, drawings, renderings, voices, sounds, video recordings, audio clips, or accompanying written descriptions. CSU Stanislaus will not materially alter the original images. I agree that CSU Stanislaus owns the images and all rights related to them. The images may be used in any manner or media without notifying me, such as university-sponsored websites, publications, promotions, broadcasts, advertisements, posters, and theatre slides, as well as for non-university use. I waive any right to inspect or approve the finished images or any printed or electronic matter that may be used with them, or to be compensated for them.

I release CSU Stanislaus and its employees and agents, including any firm authorized to publish and/or distribute a finished product containing the images, from any claims, damages or liability which I may ever have in connection with the taking of use of the images or printed material used with the images.

I am at least 18 years of age and competent to sign this release. I have read this release before signing, I understand its contents, meaning, and impact, and I freely accept the terms.

Name (Please print)

Date

Signature