



**KAISER PERMANENTE®  
Baldwin Park Medical Center**

**Education Attestation**

I, \_\_\_\_\_ [print name], attest that I have reviewed the following information related to MCW 2837 High Alert Medication Safety Practices.

- Regional high-alert medications are defined as those drugs which are involved in a higher percentage of medication incidents and/or sentinel events, or that carry an increased risk for error or other adverse outcomes. These medications are identified from KP facility data, literature, and regulatory agency standards.
- Independent Double Check is performed independently by two qualified health care practitioners (physician/ RN/ pharmacist) against the current medication order, before each high-alert medication is administered.
- Medications that require independent double check are identified in KP HealthConnect eMAR administration instructions “DOUBLE CHECK REQUIRED”  
**(Highlighted in Red Box below.)**

fentaNYL (PF) In NS 10 mcg/mL Premix : Dose 25 mcg/hr : 2.5 mL/hr : intraVENOUS : CONTINUOUS



Admin Instructions:

**\*DOUBLE CHECK REQUIRED\***

- As a Student Nurse, I will inform patient’s primary RN that I cannot perform double check for High Alert medications. Another licensed RN will need to be requested to perform independent double check for high alert medication(s) with patient’s Primary RN and complete the “Dual Sign Off” process in KP HealthConnect.

I understand the content as it pertains to my clinical rotation/preceptorship, role, and responsibilities. I will review associated policies for further clarification. I will also communicate with my preceptor, charge nurse, department manager, house supervisor, or clinical nurse educator for any assistance or clarifications to provide safe patient care.

**Student Information:**

School Name: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Sign Name: \_\_\_\_\_

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

NUID #: \_\_\_\_\_

Department Assigned: \_\_\_\_\_