Facility-Specific Documents Check-Off Sheet

For: __________________________________________________________________________________

Saddleback Memorial Medical Center (SMMC)

Important Note: Carefully read over the information below. Once you have completed all of the steps, print this check-off sheet, sign & date, and email to nursingdocs@fullerton.edu with your facility required documents by the given deadline.

1. Read & Review the following:
   - SMMC EPIC Training Instructions for Student Nurses (1 pg)
   - Contact Staff and Student Hospital Orientation (31 pages pages) (SON website)
     Important!: This contains the password you will need to log-in to the EPIC training mentioned below.

2. Complete the following:
   - Hepatitis B CORE (HBCORE) antibody titer test
     NOTE: SON requires a HepB surface antibody test, this is a separate titer required by SMMC
   - Student Agreements (6 in total)
   - Orientation Acknowledgment Form
   - Saddleback EPIC and HIPAA Web-Based Training:
     Log-In through: https://apps.memorialcare.org/studentNursing/

Please note that we will provide you with a Memorial Care ID to complete the training once the facility has generated it. Use the password provided in the EPIC training instructions provided above.

Once you are able to log-in to EPIC, please complete the required training (“WBT for Nursing Students”). When you have completed your training, a certificate will be generated and sent electronically to the facility.

   - RETURNING STUDENTS (please note): If you have already completed the EPIC training modules, you are not required to complete them again. However, it is mandatory that you keep your HIPAA training up-to-date. So if you are beginning another semester at Saddleback, please log-in to your account and make sure to complete any new HIPAA module(s).
   - Castle Branch:
     Please make sure that all of your SON Required Documents are up-to-date in your Castle Branch account at all times. Failure to do so could prevent you from participating in your clinical rotation or preceptorship.

3. Once the items above have been completed, please submit your signed Check-Off Sheet, HepB CORE titer, Orientation Acknowledgement Form, and Student Agreements to nursingdocs@fullerton.edu.

I have reviewed all instructions and materials, as well as verified and completed all requirements listed above, that are specified by the facility I will be attending.

Name (print): __________________________________________________________

Signature: ___________________________________________ Date Submitted: ________________

Last updated August 24, 2021