

## **Nurse Science Student Handbook Attestation**

I understand that the Oklahoma State University - Oklahoma City Nurse Science Student Handbook is available to me on the Oklahoma State University - Oklahoma City website. I understand that I have the responsibility to read and adhere to the policies contained in this handbook and any updated policies posted on the Oklahoma State University - Oklahoma City web page during my nursing education at Oklahoma State University - Oklahoma City.

Web resource for Nurse Science Policy updates: https://osuokc.edu/nursing/policies.

STUDENT NAME (print): \_\_\_\_\_\_ DATE: \_\_\_\_\_ STUDENT SIGNATURE: \_\_\_\_\_ **Oath of Confidentiality** I understand that any patient/family/simulation information to which I have access, either through records, direct client contact, or caregiver/student conferences, is privileged and shall be held in strict confidence. I will not access information concerning any patient in whose care I am not directly involved. I will ensure the privacy of all information by documenting only on appropriate procedural forms which will be kept secure according to agency policy. When such information is included in written assignments, I will ensure that the information is written in such a way as to prevent any connection with specific patients/families. I further agree to abide by all policies and procedures of the agency to which I am assigned, with utmost concern for the privacy, security, and well-being of the patients/families I am privileged to visit. If I am found to be in violation of the above confidentiality requirements, disciplinary action by the facility and/or the Oklahoma State University - Oklahoma City Nurse Science Department may result. I certify by my signature below that I have read and agree to the above requirements regarding client/family information. STUDENT NAME (print): \_\_\_\_\_\_ DATE: \_\_\_\_\_ STUDENT SIGNATURE: \_\_\_\_\_