

JEFFERSON STATE COMMUNITY COLLEGE  
STUDENT AGREEMENT FOR SIMULATION

As a student in the Simulation Lab, I understand the significance of confidentiality with respect to information concerning simulated patients, scenarios and fellow students. I will uphold the requirements of the Academic Honesty Code. This code requires that all students act with integrity in the performance of their academic work.

I agree to adhere to the following guidelines:

1. All patient information is confidential and any inappropriate viewing, discussion, or disclosure of this information is a violation of the Academic Honesty Code and the Simulation Laboratory Policy. \_\_\_\_\_
2. This information is privileged and confidential regardless of format: electronic, written, overheard or observed. \_\_\_\_\_
3. I understand that there is a continuous audiovisual digital recording in the Simulation Laboratories and debriefing rooms. I consent to audiovisual digital recording while I am present in the lab and debriefing rooms. I understand that the recordings will be shown only for educational, research or administration purposes. No commercial use of the audiovisual recording will be made without my written permission. \_\_\_\_\_
4. I may view, use, disclose, or copy information only as it relates to the performance of my educational duties. Any inappropriate viewing, discussion, or disclosure of this information is a violation of institutional policy. \_\_\_\_\_
5. The simulation lab is a learning environment. All scenarios, regardless of their outcome, should be treated in a professional manner. The faculty and students participating in the scenario should have everyone's respect and attention. Situations simulated in the lab are to be used as a learning tool and not to be used for humiliation of fellow students. \_\_\_\_\_
6. The simulation manikins are to be used with respect and be treated as if they were live patients. \_\_\_\_\_

Signature below states that you have read and agree to the Student Agreement for Simulation.

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

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

Instructor: \_\_\_\_\_

Course Name: \_\_\_\_\_

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