



Instructions for Completing Required Documentation for Clinical Rotations at Del Sol Medical Center

**Please submit all Del Sol clinical requests
to sherry.quintanilla@hcahealthcare.com.**

1. Make sure that a current affiliation agreement exists between your school and Del Sol Medical Center and that it includes your field of study. Click on the School Affiliation Agreement Status icon to check.
2. Follow these instructions to save time and frustration. *Students should not submit their own documentation.* It will be the instructor/faculty's responsibility to contact the Del Sol Medical Center representative in the Training and Development Department and **submit the complete packet- No partial packets will be accepted.**
3. Instructor/Faculty: Print a copy of the Faculty and Student Placement Guidelines and use as a checklist when gathering students' information. Please do not submit your packet to the Del Sol representative if you have not completely reviewed this list and obtained all information for both the students and instructor/faculty. This checklist is used by the Del Sol representative when reviewing the submitted documentation.
4. Instructor/Faculty: Provide a copy of the Faculty and Student Placement Guidelines to each student and instructor/faculty.
5. Instructor/Faculty: Print a copy of the Armband Identifiers form. Provide a copy to all students.
6. Instructor/Faculty: Print the Clinical Group Information form. This will be the introduction letter to the hospital from the school. Please completely fill in all spaces.

7. Instructor/Faculty: Print the Pre-Clinical Clearance form dated 2015. The name and information for each student and clinical instructor/faculty that is responsible for the student(s) while they are in their clinical rotations needs to be on this form. Completely fill in all spaces as guided by the title of every column. Every school needs to name an instructor/faculty that is ultimately responsible for grading the student, even if the student has a preceptor at Del Sol.
8. The Pre-Clinical Clearance form needs to be signed by the educational institution's authorized representative before submitting the packet to the Del Sol representative.
9. Instructor/Faculty: Print the Faculty Credentialing Form. Please completely fill in all spaces. The instructor/faculty's immediate supervisor will need to sign this form. This form also requires the instructor/faculty to submit their professional license/certification and CPR card for review by the Del Sol representative. The Del Sol representative will fill in the boxes labeled "Primary Source" and "CPR Status" and will sign in the box labeled "License and CPR status verified by:" at the very bottom.
10. Instructor/Faculty: Print the Protected Health Information, Confidentiality, and Security Agreement form. All students and instructors/faculty will need to sign this form and submit as part of the packet submitted to the Del Sol representative.
11. Instructor/Faculty: Print the Statement of Responsibility form. All students and instructors/faculty will need to sign this form and submit as part of the packet submitted to the Del Sol representative.
12. Instructor/Faculty: Print a copy of the HIPAA power point presentation. The information to successfully complete the next form, the HIPAA quiz, will be found here.
13. Instructor/Faculty: Print the HIPAA quiz. All students and instructors/faculty will need to complete this quiz and submit to the Del Sol representative as part of the packet. A score of 80% or better is required for successful completion.
14. Instructor/Faculty: **Submit the complete packets at least two weeks before the start date of the clinical rotation.** (submissions can be emailed, faxed, or hand delivered) No partial packets will be accepted. The Del Sol representative will contact the instructor/faculty when the whole group has been cleared by either telephone or email. No

clinical rotations will be allowed to start until after being given clearance forms by the Del Sol representative.
Contact information for the Del Sol Medical Center representative:

Nursing Clinical Rotations:

Scott Flaming (915) 621-6511
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Non-Nursing Clinical Rotations:

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