



## Simulation Lab Student Consent Form

I, \_\_\_\_\_, agree to the following terms regarding usage of the nursing/healthcare simulation lab:

### Safe Medication Practices

- I will treat all simulated medications, supplies, and equipment as if they were real items; except, however, I will never use simulated medications on humans or animals for any purpose.
- I understand that simulated medications are for lab purposes only and must never be taken out of the lab environment.
- I will practice safe usage, transport, labeling, scanning, documentation, and wasting procedures using replica items.
- I will report any actual medication found in the lab immediately.
- I will not use simulated medications on humans or animals for any purpose.

### Simulation Lab Etiquette

- I will demonstrate professional integrity in preparing for and participating in simulation activities.
- I will treat the lab setting, manikins, equipment, and fellow lab members with respect.
- I will not record video, photograph, or distribute simulation content outside the lab.
- Because of the unique nature of simulated clinical experiences, including the element of surprise and the need to create a safe space for experiential learning, I agree to maintain the strictest confidentiality about the events, procedures, and information obtained during the simulation, including observations made about the performance of individuals during the simulation experience or any debriefing that occurs after.
- I will participate fully and provide constructive feedback to promote a culture of safety and learning.
- I will immediately raise any concerns about safety or violation of any of the usage terms set forth in this Consent to my instructor.

By signing below, I agree to adhere to the above guidelines regarding safe medication handling procedures, professional behaviors, and maintaining the confidentiality of simulation activities. I understand violations will result in disciplinary action.

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

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