

Edward Hospital and Health Services

PASSWORD VERIFICATION CONFIDENTIALITY STATEMENT / SIGNATURE ID

I understand that in combination with my User Code, my Pyxis password will be my electronic signature for all transactions to the Pyxis Medstation System. It will be used to track all of my transactions with a time and date stamp. These records will be maintained and archived in accordance with the policies of this hospital, and be available for inspection by the Drug Enforcement Agency (DEA) and the State Board of Pharmacy.

Employees will treat their computer passwords as confidential and understand that unauthorized disclosures of passwords will make them personally responsible for all the unauthorized disclosures of hospital or patient information obtained by others using the password. Employees will be subject to disciplinary action up to and including termination for violations of Information System Policies related to Pyxis.

Name of New User (PLEASE PRINT) & Department

Signature of New User

New User Epic ID:: _____

New User Authorized by: _____

Put an X in the appropriate box for title and privileges:

- | | |
|--|--|
| <input type="checkbox"/> Agency RN | <input type="checkbox"/> Endo RN (Endoscopy) |
| <input type="checkbox"/> Anesthesia | <input type="checkbox"/> Endo Tech |
| <input type="checkbox"/> Bolingbrook | <input type="checkbox"/> ER Tech |
| <input type="checkbox"/> Central Supply | <input type="checkbox"/> NICU/LD Staff RN |
| <input type="checkbox"/> Clinical Educator | <input type="checkbox"/> Oswego RN |
| <input type="checkbox"/> Corporate Health RN | <input type="checkbox"/> PACU/SDS RN |
| <input type="checkbox"/> CST (Surgical Tech) | <input type="checkbox"/> Plainfield ED RN |
| <input type="checkbox"/> Diagnostics RN | <input type="checkbox"/> Radiology Tech |
| <input type="checkbox"/> ED RN (Emergency) | <input type="checkbox"/> Respiratory Therapist |
| <input type="checkbox"/> EMS | <input type="checkbox"/> Staff RN |
| | <input type="checkbox"/> Surgery RN |

If Agency Staff please specify start and finish dates:

Start date: _____ Finish date: _____

Authorized Locations:

- BBIMC
- Cancer Center
- Cath Lab
- CCU/ICU
- CTU 2 (Cardiac Tele 2)
- CTU 7 (Cardiac Tele 7)
- CTU 8 (Cardiac Tele 8)
- CVOR
- Diagnostics
- ED (Emergency)
- EMS
- Endo (GI Lab)
- L&D
- Med-Surg (MSU)
- Med-Onc
- Mother-Baby
- NICU
- EMS
- Ortho
- Oswego
- Peds
- Peds ER
- Plainfield
- Radiology
- Recovery (PACU)
- SDS (ASCC)
- SSU (SCU)
- SSU-2 (Overflow Ground Fl)
- Surgery (OR)

Pharmacy Use Only

Date Activated in Pyxis: _____

By: _____

Revised: 5-14