

## Specializing in You

## Job Shadowing Statement of Confidentiality, Attire & Conduct

As a participant in this job shadowing agreement with Iowa Specialty Hospital, I pledge to keep all hospital information that directly or indirectly involves the patients strictly confidential. I will comply with all applicable confidentiality regulations and policies both during and after my job shadowing. Further, I will be careful not to have confidential discussions in places where I may be unintentionally overheard.

I also recognize that engaging in gossip can be damaging and will pledge to do my best not to hurt others with my words or actions.

Finally, I understand that what I say or do is my responsibility and with that responsibility comes accountability. Therefore, I pledge to be confidential and recognize that if I intentionally or blatantly breech the confidentiality policy of Iowa Specialty Hospital I can be held responsible for my actions. I understand that violation of the confidentiality policy would subject me to immediate termination of my job shadow experience.

I will dress (business casual) and conduct myself appropriately while job shadowing at loware Specialty Hospital on (date of event)	
Job Shadow Participant's Signature	Date
Parent or Guardian (If job shadow participant is under 18)	Date
Department Leader (area being observed)	 Date