

# Omnicell Automated Dispensing Cabinet (ADC) User Access Form

This form is to request or change access to Omnicell Automated Dispensing Cabinets (ADC).

New access, or Additional sites	Name	Mnemonic	Facility	Position	Special Instructions	i-Learn or Competency Validation completed
<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change						<input type="checkbox"/> Y <input type="checkbox"/> N
<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change						<input type="checkbox"/> Y <input type="checkbox"/> N
<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change						<input type="checkbox"/> Y <input type="checkbox"/> N
<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change						<input type="checkbox"/> Y <input type="checkbox"/> N
<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change						<input type="checkbox"/> Y <input type="checkbox"/> N
<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change						<input type="checkbox"/> Y <input type="checkbox"/> N
<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change						<input type="checkbox"/> Y <input type="checkbox"/> N
<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change						<input type="checkbox"/> Y <input type="checkbox"/> N
<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change						<input type="checkbox"/> Y <input type="checkbox"/> N

**Mnemonic** - Your Meditech mnemonic is your ADC user ID.

**Facility** – the facility where Omnicell ADC access is needed.

**Position** – ADC access approved for RN, RPN, LPN, Nurse Manager, Nurse Educator, RN Student, HART RN, LPN Student, Nurse Instructor, Physician, Respiratory Tech (RT), and EMT/Paramedic.

**Special Instructions** –start date/end date (if student), any special restrictions for the user, e.g. no narcotics, HART access to multiple sites

New Users: Require completion of training as per table 1 (page 2)

*By signing this form I confirm that I am authorizing the above stated additions or changes to the ADC access for the employee(s) named above.*

**Authorized by:** \_\_\_\_\_

**Position** \_\_\_\_\_

**Print name:** \_\_\_\_\_

**Date** \_\_\_\_\_

**\*\*\*Requests must be submitted by Unit Manager or Designate\*\*\***

**Table 1 – Training Requirements**

USER type	Training requirements
Anaesthesia Assistant	Completion of: <ul style="list-style-type: none"> <li>• i-Learns – 1398 (non-profiled environment); 1799 (OmniceLL ADC Competency Validation), OR</li> <li>• in-person training with an Omnicell super-user or competent peer following the <a href="#">OmniceLL ADC Skills Checklist</a></li> </ul>
Nurse - Assistant – Peri-op Aide	Completion of: <ul style="list-style-type: none"> <li>• i-Learns – 1398 (non-profiled environment); 1799 (OmniceLL ADC Competency Validation), OR</li> <li>• in-person training with an Omnicell super-user or competent peer following the <a href="#">OmniceLL ADC Skills Checklist</a></li> </ul>
Nurse – RN, LPN, RN Students & LPN Student	Completion of: <ul style="list-style-type: none"> <li>• i-Learns – 1392 or 1505 (profiled environment); 1397 (anywhere RN); 1799 (OmniceLL ADC competency validation), OR</li> <li>• i-Learns – 1398 (non-profiled environment); 1397 (anywhere RN); 1799 (OmniceLL ADC competency validation), OR</li> <li>• in-person training with an Omnicell super-user or competent peer following the <a href="#">OmniceLL ADC Skills Checklist</a></li> </ul>
Nurse Practitioner	Completion of: <ul style="list-style-type: none"> <li>• i-Learns – 1398 (non-profiled environment); 1397 (anywhere RN); 1799 (OmniceLL ADC Competency validation), OR</li> <li>• in-person training with an Omnicell super-user or competent peer following the <a href="#">OmniceLL ADC Skills Checklist</a></li> </ul>
Pharmacist	Completion of: <ul style="list-style-type: none"> <li>• i-Learns – 1392 or 1505 (profiled environment); 1397 (anywhere RN); 1396 (Restock); 1799 (OmniceLL ADC Competency Validation), OR</li> <li>• in-person training with an Omnicell super-user or competent peer following the <a href="#">OmniceLL ADC Skills Checklist</a></li> </ul>
Pharmacy Assistant	Completion of: <ul style="list-style-type: none"> <li>• 1396 (Restock); 1799 (OmniceLL ADC Competency Validation), OR</li> <li>• in-person training with an Omnicell super-user or competent peer following the <a href="#">OmniceLL ADC Skills Checklist</a></li> </ul>
Pharmacy Technician	Completion of: <ul style="list-style-type: none"> <li>• i-Learns – 1396 (Restock); 1799 (OmniceLL ADC Competency Validation), OR</li> <li>• in-person training with an Omnicell super-user or competent peer following the <a href="#">OmniceLL ADC Skills Checklist</a></li> </ul>
Pharmacy Technician Student	Completion of: <ul style="list-style-type: none"> <li>• 1396 (Restock); 1799 (OmniceLL ADC Competency Validation), OR</li> <li>• in-person training with an Omnicell super-user or competent peer following the <a href="#">OmniceLL ADC Skills Checklist</a></li> </ul>
Physician & Physician Resident	Completion of: <ul style="list-style-type: none"> <li>• i-Learns – 1398 (non-profiled environment); 1397 (anywhere RN); 1799 (OmniceLL ADC Competency Validation), OR</li> <li>• in-person training with an Omnicell super-user or competent peer following the <a href="#">OmniceLL Skills Checklist-Physician Access</a></li> </ul>
Respiratory Therapist	Completion of i-Learn 1395 (training for RTs)
Restock (IHSOG only)	Completion of i-Learn 1396 (Restock)