

Vendormate Requirements

Duke University Health System

Competency	Optional Bundle	All Representatives	Onsite Representatives	Reps at Point of Care	RN's with Patient Contact
Badge Photo			x		
Confidentiality Agreement/HIPAA sheet: Read & Acknowledge		x			
Attestation: Read & understand Code of Conduct/Compliance		x			
Environmental Safety Statement (follow staff instructions in the event of an emergency): Read & Acknowledge				x	
Infection Control: read and acknowledge				x	
Attestation: Read & adhere to Vendor Policy: Read & Acknowledge		x			
Product Service Competency				x	
Annual TB Screening			x		
MMR			x		
Tdap (Tetanus, Diphtheria, Pertussis)			x		
Varicella Vaccine or proof of immunity (Chicken Pox)			x		
Hepatitis B Vaccination	x				
Influenza 2014-2015		x			
Attestation: Sex Offender Registry - Annual			x		
Attestation: Criminal Background Check			x		
Aseptic Technique (AORN Certificate OK)				x	
Laser Safety- if applicable--must attest it is not applicable				x	
Blood Borne Pathogen Training				x	
Acknowledgement: Fire Safety for OR				x	
Acknowledgement: Container Management				x	
Proof of Compliance through Duke's Nurse Credentialing					x