



As an important member of the dialysis healthcare team

## 1 Pledge

to protect myself and my patients by doing the following:

	<ul> <li>Washing or sanitizing my hands per CDC protocol</li> <li>Following facility policies and procedures regarding infection prevention</li> <li>Adhering to the CDC guidelines for Dialysis Station Routine Disinfection</li> <li>Making it "OK for patients to ask!"</li> <li>Working together to ensure all staff follows infection prevention protocols</li> </ul>	
Print Nam	e:	
Signature: Date:		

To file a grievance please contact the Florida ESRD Network (Network 7) 3000 Bayport Drive, Suite 300, Tampa, FL 33607

Phone: 1.800.826.3773; Email: Grievances@nw7.esrd.net