

Confidentiality Statement
De Anza College Nursing Program

I understand and agree that in the performance of my duties as a student in the nursing program at De Anza College I have both a legal and ethical responsibility to protect the privacy of clients. All information that I see or hear regarding clients, directly or indirectly, is completely confidential and must not be discussed or released in any form, except when required in the performance of my duties. This information must remain confidential while I am a student in the program, and after exiting the program.

If I have access to employee information or financial information or any other proprietary information, I am expected to treat the confidentiality of such information in the same manner as client information.

Medical Information System (MIS) codes and other system passwords must be kept strictly confidential. Under no circumstances will I give my code to someone else or use someone else's code.

I understand that any violation of confidentiality may result in disciplinary action, and that I may be held personally liable for damages resulting from such a violation.

Signature _____ Date _____

Name (please print) _____