## **UR Medicine Finger Lakes Health Career Insights Shadowing Program Overview**

The Career Insights Shadowing Program at UR Medicine Finger Lakes Health provides individuals with the opportunity to gain firsthand insight into the daily operations of a healthcare environment through observational experiences. This program is designed for individuals considering a future career in healthcare and seeking to better understand the roles and responsibilities within a clinical or non-clinical department.

## **Program Structure and Guidelines**

- Duration: The shadowing experience is limited to a minimum of 2 and a maximum of 40 hours, which must be completed within a consecutive four (4) week period. Recommended shifts of 2-4 hrs.
- Nature of Experience: This is a strictly observational program. Participants will observe the routine activities of a designated department but will not perform any hands-on tasks or procedures.
- Patient Care Areas: In areas involving direct patient care, shadows are not permitted to have any exposure to:
  - o Blood or body fluids
  - Respiratory or infectious diseases
- Shadowing is not permitted in the Operating Room.
- Eligibility: Participants must be at least sixteen (16) years of age at the time of the experience.
- Compensation: This is an unpaid educational opportunity and does not include any form of financial compensation or educational credit.

## **Purpose**

This program is intended to:

- Provide exposure to the healthcare field in a real-world setting
- Help students make informed decisions about potential career paths in health care
- Support the development of future healthcare professionals by offering meaningful observational opportunities

UR Medicine Finger Lakes Health is committed to ensuring that all shadowing experiences are conducted in a safe, respectful, and educational environment, in compliance with privacy, safety, and infection control standards.

This is a career exploration program only and not intended to be used for educational credits or as an internship opportunity.

For more information, contact Flh Shadowing@urmc.rochester.edu or call 315-787-4053



## **Shadower/Observer Information**

\*Must be 40 hours or less over a time period not to exceed four (4) weeks. The shadow will observe the activities of a department. The shadower may not perform any tasks and the experience is to be that of shadowing and observing only. In patient care areas, the shadow may not expose the shadower to any contact with blood or body fluid, or any respiratory or infectious disease. The shadowing participant must be sixteen (16) or older. There is no financial compensation for this experience. Submit application to: Flh\_Shadowing@urmc.rochester.edu.

Name:			
(La	st)	(First)	(Middle Initial)
Address:			
(Sti	reet)	(City/State)	(Zip)
Phone #:		Cell Phone #	<b>:</b>
Email Address:			
School Affiliation (if			
Desired departmen Have you contacted		already? If so, provide nar	ne of contact:
Beginning date and	number of hours	requested are required a	nd can be an estimate if unsure.
Beginning Date:		Ending Date:	Number of Hours:
Please share why yo	ou are interested	in this shadowing opportu	nity:
Emergency Contact Person to Notify in		cy:	
Relationship: #:		Phone	
Finger Lakes Health limited to the habit may alter your beh	or that may inter uation or addiction avior?  \( \square\) Yes	rfere with your shadowing, on to depressants, stimular   No	
	•	-	the matter may have to be explored
further on a confide By submitting this a	•	fy that I am 16 years of ag	e or older.
Signature of Studer	t and date	Signature of Pa	rent/Guardian (if participant is 16 or 17) and date
FOR OFFICE USE	. Accepted and de	epartment	

Not accepted at this time and reason