DESCRIPTION/OVERVIEW
The University of New Mexico Hospitals (UNMH) will control access to its facilities, grounds, and information systems to help assure a secure environment for all patients, visitors, staff, physicians, and assets. UNMH must appropriately limit physical access to the information systems contained within its facilities while ensuring that properly authorized workforce members can physically access such systems. UNMH will prevent unauthorized physical access to its facilities and to all UNMH information systems containing Electronic Protected Health Information.

AREAS OF RESPONSIBILITY
- UNMH Security Department is responsible for the daily operation of issuing vendor badges, documenting vendor visits, verifying vendor appointments, issuing and receiving returns of vendor yellow scrubs.
- UNMH Materials Management Department is responsible for initial vendor credentialing, ensuring all related vendor forms are completed, registering vendors on an annual basis, maintaining vendor database/files.
- The Value Analysis Facilitators are responsible for approval of all new equipment or products to be used at UNMH.
- OR Director or OR Value Analysis Facilitator is responsible for scheduling off-hour drop offs of instruments/implants.
- Director of Security has the responsibility for aspects of daily control and coordination of the procedure, authority to approve exceptions to the procedure (if applicable), and procedural implementation, including responsibility for any required electronic or written forms produced by the Security Department.

PROCEDURE
1. **HOW WE BUY SURGICAL PRODUCTS AND SERVICES**
   1.1 University of New Mexico Hospitals (UNMH) uses a combination of methods to seek the best value for products and services. We are members of the University Health System Consortium (UHC); therefore, our primary group purchasing organization (GPO) is Novation. Purchasing is responsible for contracting for items not on a GPO contract, which UNMH accomplishes through the competitive bid process in compliance with State of New Mexico regulations. As allowed within state regulations, we may negotiate directly for pricing, terms, and conditions.
   1.2 Materials Management is responsible to assist you in determining whether your product is a stock or non-stock item. If it is a contracted item, we may be in a long-term contract and not able to switch until the end of the contract. Just as you would want us to honor any contract with you, we work diligently at honoring our contracts with your competitor(s). However, we do understand that the rapid change in technology, regulatory requirements, and methods of delivering healthcare may require us to prematurely change products or services during a contract period.
   1.3 Only those goods and services ordered by UNMH Purchasing and covered by a valid purchase order will be recognized as a valid encumbrance by UNMH. Physicians are not authorized to enter the Hospital into any binding financial commitment(s). In the absence of a valid purchase order, the vendor will not be paid.
   1.4 The shipping of goods or provision of services to UNMH without a valid purchase order will be done at your own risk and without expectation of payment or return.
2. **VENDOR REGISTRATION**

2.1 All vendors and/or their designees must register annually with Vendormate. It is the responsibility of the vendor to keep track of their annual registration date (for example, if a vendor registers in February then they must register by February 1st of the following year). Privileges are not transferable between company representatives. All representatives entering UNMH need to be registered. For questions on applying for access, please call (505) 272-2257.

2.2 To register, you and/or your designees will be required to provide proof of knowledge or certification of the following (Vendors not entering into surgical services may not require all of the items listed):

   2.2.1 Proof of clinical competency – Any vendor that interacts with any of UNMH’s invasive procedural areas must provide proof of clinical competency and any current certification/licenses regarding your product line. Further, this proof must be detailed as to what specifically was involved with the competencies and certification/licenses. Based on your company’s policies for renewals it is the vendor’s responsibility to update Vendormate.

   2.2.2 Surgical Attire and Traffic Patterns

   2.2.3 Aseptic Principles and Sterile Technique

   2.2.4 Perioperative Safety Concerns (Fire, Electrical, X-Ray, etc)

   2.2.5 Infection Control and Bloodborne Pathogens

   2.2.6 Proof of Current Tuberculosis (PPD) test, Measles/Mumps/Rubella (MMR), Influenza, and Varicella.

   2.2.7 Electronically sign in Vendormate acknowledgement that you have read and (if applicable) will abide by the UNM Hospitals Vendor Access Protocols.

2.3 It is the vendor’s responsibility to ensure that all information supplied to UNMH through Vendormate is correct and all protocols are complied with. Failure to provide accurate information and/or comply will result in loss of vendor privileges.

3. **VENDOR CHECK-IN**

All vendor visits require appointments. Vendors are not allowed soliciting privileges on property without an appointment. Security will verify vendor registration before issuing an UNMH vendor badge. **Loitering in UNMH corridors, cafeterias, and other areas is prohibited. Meetings must be held in designated areas only (i.e., conference rooms, offices), not in public areas.**

3.1 **FOR ALL VISITS, UPON ARRIVAL AT UNMH:**

   3.1.1 Check in with Security between 6:30am and 4:00pm to sign in. During the hours there is no security officer assigned to the Vendor Check-in Desk, vendors may use the phone located at the desk to summon assistance from Security (272-2610). Vendors must provide valid identification to obtain a UNMH Vendor ID badge. Valid identification includes a state or federal issued driver’s license or identification card. You will also be asked to read and acknowledge the vendor guidelines. The badge will be valid for the day and valid only for the specific area you have been authorized to access. The badge must be visible at all times while conducting business at UNMH. At the conclusion of your appointment, you are required to sign out.

   3.1.2 Vendors whom have specific appointments for attendance in the Main Operating Room, Pediatric Operating Room, Labor and Delivery, Endoscopy Center, and Interventional Radiology are required to wear UNMH assigned vendor scrubs. Vendor scrubs will be issued at the Vendor Check-in Desk for all areas **except the Operating rooms where disposable scrubs will be issued by the Inventory Coordinators.** You will be required to leave a valid driver’s license in exchange for the vendor scrubs. You must return the vendor scrubs to the Vendor Check-in Desk to retrieve your driver’s license. There will be a $250.00 cash only replacement fee for scrubs not returned to Security.

   *Note: Offsite Hospitals (UPC, CPC, CTH, OSIS) will have badges to distribute.*
Offsite Clinics will manage vendors due to minimal vendor access needed. OSIS will provide vendors with the appropriate vendor scrubs.

3.2 FOR SURGICAL SERVICES APPOINTMENTS at the Main Hospital or Outpatient Surgical and Imaging Services (OSIS):

<table>
<thead>
<tr>
<th>Note: vendors assigned to a case by a surgeon must arrive at the OR 30 minutes before the case starts.</th>
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<tbody>
<tr>
<td>3.2.1 Exceptions to the Monday-Friday, 7:00am – 5:00pm appointment times listed above include those times when an approved vendor must be in attendance for a specific surgical procedure; this must be approved in advance by the OR Director or designee.</td>
</tr>
<tr>
<td>3.2.2 Vendors or their company must be indicated as needed for a surgical procedure on the surgery schedule to gain access to the Operative suites.</td>
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<td>3.2.3 Once the need for their presence is verified vendors will be issued disposable scrubs and allowed into the OR.</td>
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<tr>
<td>3.2.4 Per the OR Attire policy, all persons who enter the OR will wear UNMH provided scrubs. Scrubs will be donned in the OR dressing areas and can be obtained from the Inventory Coordinators (see 3.2.3 above).</td>
</tr>
<tr>
<td>3.2.5 Upon arrival at the operating room, check in with the OR Director or Charge Nurse at the front desk of the Main OR and/or OSIS, sign and complete the “Vendor Log Book”.</td>
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<tr>
<td>3.2.6 The OR Inventory Coordinator may be contacted and may escort you to and from the OR and/or Sterile Processing.</td>
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<tr>
<td>3.2.7 If the OR Inventory Coordinator is not available, or a procedure is delayed, you will be asked to wait in a designated non-patient care area. It is inappropriate for a vendor to wait in the physician or employee lounges or cafeteria, or to use hospital phones, phone lines, or computers for business purposes.</td>
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<tr>
<td>3.2.8 When a physician requires the presence of the vendor in the OR, the physician or physician’s office staff should make that request at the time of scheduling or no later than two business days prior to the scheduled procedure.</td>
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<td>3.2.9 Vendors are to be in the Surgical Services Department for the following purposes only:</td>
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<tr>
<td>3.2.9.1 In-service instruction regarding a product/equipment that has been scheduled with the OR Educators or Coordinators.</td>
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<td>3.2.9.2 Invited to provide technical assistance to the surgical team as indicated on the surgery schedule.</td>
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<tr>
<td>3.2.9.3 Vendor will restrict activities to observation and verbal consultation to the physician/healthcare provider, vendors are prohibited from opening sterile products onto the surgical field or back table.</td>
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<tr>
<td>3.2.10 The patient must be informed of the presence and purpose of the vendor in the operating room and give written consent prior to the patient’s sedation.</td>
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<tr>
<td>3.2.11 Vendors provide education, training and introduction of procedures, techniques, technology, and equipment to the perioperative health care professionals.</td>
</tr>
<tr>
<td>3.2.11.1 Vendors provide technical assistance to the surgical team during procedures.</td>
</tr>
<tr>
<td>3.2.11.2 Vendors shall not provide direct patient care or be allowed to scrub into any procedure.</td>
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</tbody>
</table>
| 3.2.11.3 Vendors and/or contracted clinicians with specialized training and credentials verified by UNMH may perform calibrations/synchronization to adjust/program devices within the scope
of their credentials under the supervision of the physician (for example, neuro monitoring, laser technician, pacemaker representative).

3.2.12 Solicitation of physicians and staff in or around the UNMH Main Operating Room, UNMH Day Surgery and UNMH Pediatric Operating Room departments is strictly prohibited.

3.2.13 The use of cell phones in the OR is strictly prohibited. Bags and briefcases are prohibited from being left outside the surgical suites or brought into surgical suites. Please do not bring any non-essential items into the Surgical Areas.

3.2.14 In the event of an emergency (for example: fire, chemical spill, code blue), the vendor must exit the OR and report to the OR Front Desk and/or wait for instructions from the Circulating Nurse.

3.2.15 Vendors are guests of UNMH and may be asked to leave at any time at the discretion of the management team, staff, and/or the physician performing the procedure. The OR management team has final authority.

3.2.16 Vendors must follow infection control practices, aseptic techniques, and perioperative occupational and fire safety protocols. They must be knowledgeable about bloodborne pathogens and exposure protocol. When entering the OR, vendors must:

- Wear proper scrub attire, scrubs are not to be worn in from other locations. You must change into hospital issued scrubs prior to proceeding into any sterile procedure area and personal protective barriers which include hair coverage, surgical mask, protective eyewear (as applicable), and shoe covers (as applicable);
- Wash hands before entering the OR;
- Stay clear (at least 2 feet) of sterile fields or setups.
- Upon completion of case participation, vendor must change out of UNMH scrubs and into their own clothing. This is an infection control policy as well as financially important.

3.2.17.1 The Circulating Nurse is responsible for managing the activities of the vendor in the OR. Vendors must function under the direction of the Circulating Nurse and adhere to the following:

- Enter the OR only AFTER the patient has been prepped and draped.
- Assist staff in acquisition of specific instrument/implant sets prior to the start of the surgical procedures.
- Obtain implants for surgical procedures base on the surgeon’s request and verify implants with the surgeon and Circulating Nurse.
- Assist the circulator in the proper identification of implants documented on the implant log.
- Revisions and/or additional charges made to implant logs after completion of a case will not be recognized or reimbursed.
- Give technical advice to the surgical team regarding their equipment or devices.

3.2.18 Vendor must not participate in the following:

- Positioning, prepping or transferring of patients.
- Operating any equipment used for direct patient care unless the vendor has received specialized training and credentials for that purpose which have been verified by UNMH.
- Participating in surgical counts.
- Placing or removing any items from autoclaves.
- Placing instruments/implants onto the sterile field.
3.2.18.6 Documenting any data on the implant log.

3.2.19 Vendors must represent a new procedure, technique, technology, product, or equipment being used for:
3.2.19.1 Scheduled case and pre-approved in order to be present in the OR.
3.2.19.2 Only one representative per product/equipment shall be present in the OR.
3.2.19.3 Vendors shall not use the OR for purposes of training/teaching of their employees.

3.2.20 Vendors are responsible for verifying the inventory of their instrument/implant set(s) with an UNMH employee after the procedure. There will be no reimbursement for any lost instrumentation unless this verification process was completed. The instrument/implant set(s) must be retrieved by the next business day.
3.2.20.1 Authority/Penalty: Failure to comply with the above guidelines will result in the initiation of the Vendor non-compliance policy.

3.3 FOR PHARMACY APPOINTMENTS (for vendors marketing pharmaceuticals or providing clinical information regarding pharmaceuticals):
3.3.1 Vendors with appointments in the Main Hospital, Barbara and Bill Richardson Pavilion (BBRP), Mental Health Hospital, Child Psychiatric Hospital and Ambulatory Care Clinics (ACC) must check in at Pharmacy Administration. They will provide information regarding the person they are visiting with, where and what medication they are discussing.
3.3.2 Medications must be marketed consistent with FDA labeled indications and UNMH Formulary Guidelines. If UNMH Formulary Guidelines are more restrictive, only use for UNMH approved indications can be detailed.
3.3.3 A copy of all detail pieces used at UNMH must be provided and left on file in the Pharmacy Department. Detail pieces that promote a drug outside UNMH formulary guidelines may be prohibited from use at UNMH.
3.3.4 Vendors can not make false or misleading statement regarding competitor’s products.
3.3.5 Any promotional materials for products not on the UNMH formulary must be clearly designated as Non-formulary at UNMH both during presentations and on any detail pieces left with providers. Vendors must inform providers that UNMH Pharmacy will not fill prescriptions or orders for Non-formulary products until they have been reviewed and approved by the Pharmacy and Therapeutics Committee.
3.3.6 Providers wishing to request a medication be added to the UNMH formulary should be directed to the Director of Clinical Pharmacy Services. Providers requesting the drug will need to complete a formal written request and submit this request for review by the Pharmacy and Therapeutics Committee. Requests for additions to the UNMH Formulary must come from a UNMH provider and not the vendor.
3.3.7 The Executive Director for Pharmacy, Director of Clinical Pharmacy Services, or Director of Pharmacy Operation will evaluate the new medications requested for addition to the formulary, schedule the product for review and provide recommendations to the Pharmacy and Therapeutics Committee.

3.4 FOR APPOINTMENTS WITH ACTIVE CLINICAL STAFF, RESIDENTS, FELLOWS, AND MEDICAL STUDENTS:
3.4.1 The clinical staff member’s department may be contacted and may escort you to and from your appointment.
3.4.2 If a staff member is not available, you will be asked to wait in a designated non-patient care area. It is inappropriate for a vendor to wait in the physician or employee lounges or cafeteria, or to use hospital phones, phone lines, or computers for business purposes.

3.4.3 Upon arrival at your appointment, check in with the Department designee.

4. PARKING
Vendors must park in designated parking areas and are responsible for obtaining parking permits from the UNMH Parking and Transportation Department. Permits will be issued on a daily, monthly, or yearly basis. For questions on parking permits, please refer to the Parking Policy or call (505) 272-4074.

5. EVALUATION POLICY

5.1 Equipment or products will not be purchased without first undergoing an evaluation. Product/equipment and technology is evaluated through UNMH’s Value Analysis Program, which includes the committee process (i.e., Technology Assessment Committee, Product Standards Committee, Surgical Services Product Standards Committee).

5.2 All new equipment or products must be introduced to the organization through the Value Analysis Facilitators. To present equipment or products for evaluation, contact the Value Analysis Facilitators to schedule an appointment.

5.3 All equipment and/or products to be evaluated for use in a patient care area must be approved by the Value Analysis Facilitators prior to the beginning of the evaluation period.

5.4 Should any faculty, physician, or staff member practicing or working at the Hospital have any financial or other interest in the equipment, product, and/or service being evaluated, the vendor must disclose the specific relationship to Purchasing and the Value Analysis Facilitators during the initial request for evaluation.

5.5 Purchasing will not issue a purchase order for any sample product or technology for use in an evaluation unless approved prior to evaluation.

5.6 All products and equipment must be FDA-approved or have IRB, IND, or IDE numbers for clinical use.

5.7 Products unauthorized by Purchasing or the Value Analysis Facilitators and left by the vendor with a physician or Hospital staff member for patient use will not be paid for.

5.8 Equipment: UNMH may not pay for equipment used during an evaluation. This includes, but is not limited to, rental fees, leasing fees, and evaluation fees.

5.9 Products: As a general rule, UNMH may not pay for products used during an evaluation. At UNMH’s sole discretion, it may pay for disposable items used during an evaluation.

6. SURGEON REQUESTS FOR SUPPLIES, INSTRUMENTATION, OR EQUIPMENT

6.1 When a surgeon or assistant/employee of a surgeon requests supplies, instrumentation, or equipment for a scheduled procedure, the vendor is required to contact the OR Business Manager or OR Director. If the order needs to be shipped to the hospital, a purchase order needs to be obtained in advance. Please include a complete inventory of all instruments delivered to the facility. A designated UNMH employee and a healthcare industry representative must check inventory lists. If a company representative is unavailable, a complete inventory list must still accompany all instrument sets. Invoices for all implants must be presented to the facility within 24 hours of the scheduled surgery time.

6.2 Physicians are not authorized to enter the Hospital into any binding financial commitment(s). In the absence of a valid purchase order, the vendor will not be paid.

7. SAMPLES/DemonSTRATIONS/IN-SERVICES FOR SUPPLIES OR EQUIPMENT
All samples of supplies and/or equipment must be coordinated through the Value Analysis Facilitators and the appropriate clinical Nurse Educator before distribution to any clinical area(s). Medication samples should be formulary medications only. Medication samples can only be
provided to clinics and providers that are approved for samples and follow the Ambulatory Sample-Clinic Procedure. The vendor needs to confirm with Pharmacy that samples can be provided for a clinic or providers prior to leaving samples. All samples for inpatient use need to be supplied to the Inpatient Pharmacy.

8. ITEMS BROUGHT INTO UNMH AS CONSIGNMENT
   8.1 UNMH will work with you to come to a written agreement on all consignment inventory programs. Each situation will be reviewed and determined based on mutual agreement.
   8.2 Items placed on consignment at UNMH may not be loaned or removed without written approval from the appropriate Unit or OR Director or designee.

9. IMPLANTS, EQUIPMENT, OR INSTRUMENTS USED BY SURGICAL SERVICES THAT BELONG TO THE VENDOR
   9.1 UNMH recognizes that there will be times when it is necessary for the vendor to provide instruments or equipment to complete patient procedures. In those instances, the vendor representative bringing products (implants, etc), instruments, or equipment to be used for a procedure must check in with the OR Director or designee and then deliver the products and instruments to Sterile Processing in Surgical Services.
   9.2 Signatures from both a vendor representative and a hospital employee will be required on the “Vendor Instrument Sign-In Sheet/Sign-Out,” and to reclaim your products and instruments after use and sterilization. UNMH will not be responsible for the replacement of lost instruments or products if the counts are not completed as stated. UNMH will not be responsible for instruments not picked up within 48 hours after terminal cleaning and sterilization. UNMH is not responsible for the product or any subsequent use of the product once it has been removed from UNMH property.
   9.3 Each instrument/implant set brought in for a procedure must not weigh over 25 pounds, as stated in AORN guidelines.

10. VENDOR INSTRUMENT DROP-OFF/PICK-UP
   10.1 If you are dropping off an instrument, the OR Inventory Coordinator must be notified no later than 24 hours in advance of the scheduled case.
   10.2 All instruments and sets must be delivered at least 24 hours before a scheduled procedure to allow for sterilization. Trays not in house 24 hours PRIOR TO THE SCHEDULED CASE TIME will incur a $50.00 per tray sterilization processing fee. This fee will be deducted from the invoiced amount for the case in which the instrumentation was used.
   10.3 During regular working hours (Monday-Friday, 7:00am-5:00pm):
       10.3.1 Upon arrival at UNMH, the instrumentation/implants will be taken to the Sterile Processing Department where the Sterile Processing Technician will check them in and have all vendors fill out the “Vendor Instrument Sign-In/Sign-Out Sheet.”
       10.3.2 A full inventory sheet of all instrumentation/implants must be available at the time of check-in.
       10.3.3 All instruments brought into UNMH will be accompanied with a Manufacturers Written Recommendations (MWI) for processing requirements including decontamination, preparation, and sterilization (exposure times and temperatures).
       10.3.4 The company name, surgeon’s name, date of surgery, and the number of trays per systems should be labeled on the outside of the wrap. All trays must be properly sterilized through Sterile Processing prior to use.
   10.4 During off-hours:
       10.4.1 Off-hours drop offs must be scheduled in advance with the OR Sterile Processing Director or designee. The Charge Nurse will verify completeness of sets and assist vendors in filling out appropriate paperwork before sending instruments/implants to Sterile Processing.
10.4.2 After use and sterilization, trays should not be wrapped (unless otherwise stated) and will be returned to the vendor pick-up cart in the OR.

10.5 Vendors must retrieve their instrumentation/implants no later than next business day after terminal cleaning and sterilization. The hospital will not be responsible for the replacement of lost instruments or products if counts are not completed.

10.6 **Instrumentation that is consigned at UNMH and requires restocking must be completely restocked prior to sterile processing taking place. Sets missing instruments or implants will not be put into use until they are complete.**

11. **BONE OR TISSUE PRODUCT REQUESTS**

11.1. Notify the Tissue Bank coordinator and the UH Value Analysis Facilitator of any new product requests by physicians. All new bone or tissue product requests will be approved by the Product Standards/Surgical Services committees.

11.2. Notify requesting physician they must contact Tissue Bank with new or special product request. Product orders requested by the vendor on behalf of a physician will not be honored by the Tissue Bank.

11.3. Under no circumstances will a vendor begin a search for a special product or place a bone or tissue product order with a company on behalf of a physician and UNM Hospitals. The Tissue Bank will initiate all product orders. Violation of this will result in disciplinary action (See Section 16. Violation of Policies).

11.4. Assure that sources of bone and tissue products they represent have been appropriately tested and are licensed by state and federal regulatory agencies.

11.5. Provide the Tissue Bank with updated FDA and AATB registrations and/or certificates of companies they represent as necessary.

11.6. Assure the transport of products they represent follow appropriate storage and temperature requirements.

11.7. If products are on consignment with the hospital, regularly check usage and inventory levels. Rotate out any short dated consigned products with longer dated products.

11.8. Never hand deliver products to the Tissue Bank. All products must be shipped directly from the distributing company (Exceptions require letter from company represented).

11.9. Confirm the company represented has an updated contract or consignment in place with the UNM Hospitals Purchasing department.

12. **ACCESS TO PATIENT CARE AREAS**

12.1 Vendors of medical/surgical supplies and equipment are prohibited from entering direct patient care areas unless the presence of the representative is essential to the operation of the equipment/supply that has already been purchased. A patient care area is defined as any area in which an UNMH patient may receive care. The vendor shall be allowed in the procedure room to observe only, and only with the consent of the patient (as obtained through the consent form) and the permission of UNMH. The patient’s procedure team (physician, surgeon, and/or anesthesiologist) may provide permission on behalf of UNMH.

12.2 **Sales representatives and/or vendors shall not perform or assist in any part of direct patient care including the operation of equipment (except pacemakers and/or lasers by nationally certified technicians) during a procedure. They may serve as technical advisors only.**

12.2.1 Representatives and/or vendors are not to operate any UNMH equipment.

12.2.2 Representatives and/or vendors are not to touch patients at any time.

12.2.3 Representatives and/or vendors may not scrub on any procedure.

12.3 The representative and/or vendor will observe all sterile, safety, and OR techniques to maintain patient integrity, and abide by all confidentiality and HIPAA requirements.

13. **CONTRACT/PRICE NEGOTIATION**

13.1 Purchasing is the only agent authorized by UNMH to approve pricing or a contract with a
vendor or product sales representative.

13.2 All contracts, voluntary agreements, price agreements, lease/rent agreements, or product evaluation agreements must be reviewed and approved by Purchasing. Contracts and agreements negotiated with a representative of the Hospital or School of Medicine faculty or staff, but without prior authorization by Purchasing will not be honored.

13.3 Any products left by a vendor under an arrangement without prior approval by Purchasing are considered donations, and no further obligation will be assumed by the System or any of its facilities or departments.

14. GIFTS, GRATUITIES, AND ENTERTAINMENT

14.1 In order to maintain compliance with federal and state law and to avoid any potential conflicts of interest, all UNMH employees are prohibited from accepting anything of value (including gifts, gratuities, or entertainment) offered by a supplier intending to induce, or given in return for patient referrals, the purchase, lease, or rental of any item or service, or to otherwise influence the decision-making process.

14.2 To help eliminate the possibility of conflict of interest:

14.2.1 Departments and Units may not accept anything of value from potential or current suppliers except promotional or advertising items of nominal value (pens, pads, etc) or modest food that is given as part of a legitimate educational session sponsored by a supplier on campus.

14.2.2 Donations cannot, in any way, be tied to patient referrals, the purchase, lease, or rental of any item or service, or to otherwise influence the decision-making process. If reasonable questions regarding the supplier’s intent to influence the decision-making process exist, appropriate action will be taken, including the return of the donation to the supplier.

14.2.3 Hospital Administration must approve education sessions, in-servicing opportunities, and other issues not expressly addressed in this procedure, but which might conflict with these guidelines.

14.2.4 Should any faculty, physician, or staff member practicing or working at UNMH, whether employed by UNMH or not, have a financial or other interest in any product, equipment, and/or service represented by a vendor, the vendor must disclose the relationship and specific interest to be derived by the faculty, physician, or staff member.

15. UNMH EMPLOYEE RESPONSIBILITIES

15.1 Each member of UNMH’s staff and all other members of UNMH patients’ medical teams (physicians, surgeons, anesthesiologists, etc) must report violations of these policies to the Executive Director of Materials Management. The staff member/member of the patient medical team should also instruct the product sales representative in violation of this policy to immediately report to the Executive Director of Materials Management.

15.2 If the Executive Director of Materials Management finds the alleged violation to be valid, they will warn the vendor in writing that their conduct violates UNMH policy. Violations of policy could result in the cancellation of the vendor’s privileges to visit UNMH and the notification of the vendor’s company.

16. VIOLATION OF POLICIES

16.1 These policies and regulations for healthcare industry representatives are to be followed rigidly. All UNMH staff will assist in monitoring the level of compliance. In the event that a member of UNMH’s staff observes a vendor in a UNMH work area without an approved UNMH Vendor Badge, the staff member should do the following:

16.1.1 Ask the vendor if they are aware of the Vendor Access Policy. If not, they should immediately be directed to Materials Management.
16.1.2 Ask the vendor for his/her name and company and either escort them off of the premises or call Security and wait with the vendor until Security arrives to escort him/her off the premises.

16.1.3 Notify Materials Management with the vendor information.

16.2 Vendors who violate UNMH’s Vendor Access policy, or who are reported to not comply with the policy shall be notified and the following actions will be taken for misconduct.

16.2.1 First offense: Vendor and Vendor’s manager notified. Comment will be filed in Vendormate that a first offense has occurred.

16.2.2 Second offense: Temporary restriction on hospital visitation privileges, up to 30 days. A phone call will be placed to the Vendor and Vendormate score will be demoted by 10 points. Vendor will be required to notify Supply Chain in advance of any planned visits to UNMH. A comment will be filed in Vendormate indicating the date/time and nature of the offense/complaint.

16.2.3 Third offense: Vendormate access will be revoked and termination of future business relationship. Vendor will be reminded of the three-strike policy. UNMH will request a new vendor representative from the company and will require business review and approved meeting prior to first visit to UNMH.

16.3 Examples of misconduct: Aggressive selling with any UNMH staff, visiting areas without appointments, bringing in samples or new product with supply chain review, repeated errors on implant records or invoices.

17. Continuing the Relationship

By following the guidelines addressed above, you can develop a solid relationship with UNMH. However, if you feel that you cannot abide by our guidelines, then we simply ask that you do not pursue business with us. We have the right to control with whom we do business and when we will see you. If you have any question about our guidelines, please contact Materials Management or the Value Analysis Facilitators.

Definitions

1. Vendor:
   1.1 Healthcare Industry Representative is any medical industry representative visiting UNM Hospitals for the purpose of performing a legitimate commercial or business activity.
   1.2 Pharmacy Industry Representatives
   1.3 Any other type of visitor performing commercial or business activity authorized work within UNM Facilities

2. Contractor: any commercial contractor performing authorized work at any UNMH Facility.

3. UNM/HSC: University of New Mexico Health Sciences Center, which is comprised of the School of Medicine (SOM), College of Nursing (CON), College of Pharmacy, Cancer Research and Treatment Center (CRTC), Cancer Research Facility (CRF), Biological Research Facility (BRF), Health Sciences Services Building (HSSB), and any other medical or education facility located on the North Campus of the University of New Mexico

4. UNM Staff: any Physician, House Staff (Resident), Faculty Member or any other person in the employ of the UNM Hospitals

5. HSC Student: any person attending any UNM/HSC Facility for educational purposes. This also includes any UNMH Employees or UNM/HSC Staff members attending any UNM or UNM/HSC Facility for educational purpose.

6. Items: Supplies, equipment, devices, instruments, and/or related products

Summary of Changes

Update for Vendormate (vendor credentialing service) and bone or tissue product requests. 4/2015; Deleted attachments (registration forms).

Revised “UNM Hospitals Vendor Access”, 2/2012.
RESOURCES/TRAINING

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DOCUMENT APPROVAL & TRACKING

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<td>Yvonne Tanuz-Trujillo, Value Analysis Facilitator, Administration, April Jaglo, Executive Director, Surgical Services. Lisa Anselma, Director, Pharmacy, Debra Luther, Supervisor, Food &amp; Nutrition Services, Joann Woolwich, Executive Director, Compliance, Jeffery Wiggins, Director, HSC Compliance Office, Martha Garcia, Administrative Assistant, Materials Management</td>
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<td>Erin Doles, Administrator, Professional &amp; Support Services</td>
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