



FOR EXTRAORDINARY NURSES
HONORING NURSES INTERNATIONALLY
IN MEMORY OF J. PATRICK BARNES

NOMINATION FORM

I would like to nominate _____ from the _____ department/facility as a deserving recipient of **The DAISY Award**. This nurse's clinical skill, and especially their compassionate care, exemplify the kind of nurse that patients, their families, and staff recognize as an outstanding role model. This nurse constantly meets all of the following criteria:

Compassionate | Nurturing | Passionate | Inspirational | Collaborative | Embraces Diversity

Please describe a situation involving the nurse you are nominating that clearly demonstrates how this nurse meets the criteria for **The DAISY Award**:

Thank you for taking the time to nominate an extraordinary nurse for this award. Please tell us about yourself so that we may include you in the celebration of this award should the nurse you nominated be chosen.

Your Name _____ Date of Service _____
Phone _____ Email _____

I am (please circle one): Patient | Family/Visitor | MD | Staff | RN | Volunteer

Date of Nomination: _____

How to Submit Nominations at CVH:

- By Mail: 301 Cedar, Attn: Cata Granger
Orofino, ID 83544
- By Email: cata.granger@kh.org
- Or hand in to Nurse's Station/Front Desk

How to Submit Nominations at SMH:

- By Mail: 701 Lewiston Street, Attn: Tracy Williams
Cottonwood, ID 83522
- By Email: tracy.williams@kh.org
- Or hand in to Nurse's Station/Front Desk



Clearwater Valley
Health



St. Mary's Health

