

تجمع الرياض الصحي الثاني
Riyadh Second Health Cluster
شركة الصحة القابضة



2026 PEQ PASSPORT GUIDE



Your Fast-Track to Day One



Welcome to the PEQ Passport

Congratulations on being accepted into a Riyadh Second Health Cluster training program! The PEQ Passport is a mandatory onboarding process designed to ensure you are fully prepared for your clinical rotation.

Timeline: You must begin this process one week before your official start date.





1. Getting Started

Before you begin, download these essential resources from the introductory page:

Checklist: A step-by-step guide to your entire training journey.

Health Sciences Library Guide: Instructions for accessing library resources at King Fahad Medical City and other facilities.

Specialty Training Guidelines: Specific frameworks and academic requirements for Medical, Nursing, and Allied Health programs.

After downloading the resources click on “Start your orientation”





2. Orientation Forms

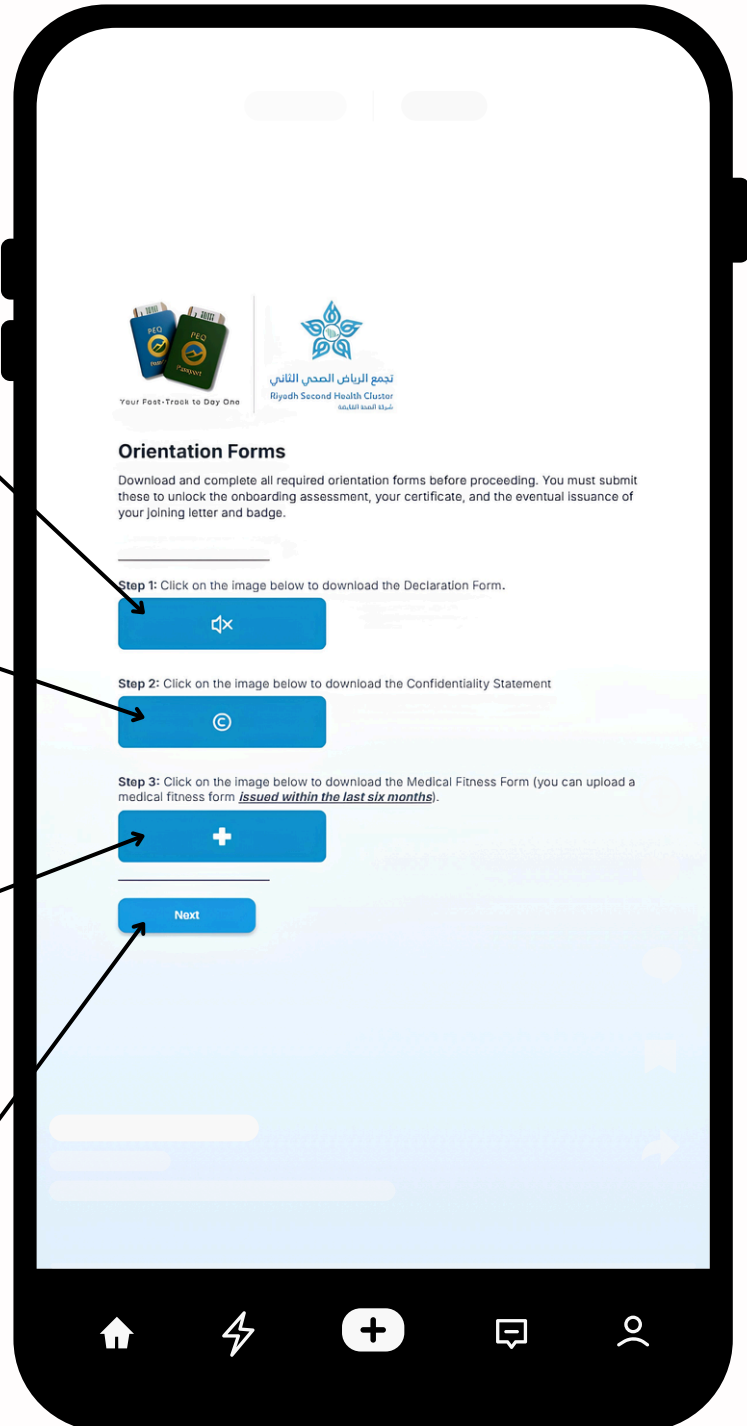
To unlock your assessment and final certificate, you must download, complete, and upload the following:

Declaration Form

Confidentiality Statement

Medical Fit Test (must be dated within the last 6 months)

Tip: Prepare these documents in advance to ensure a smooth process before clicking “next”.





3. Registration

Passport Control: Enter your information and your unique Trainee ID (e.g., R2ID0000) found in your acceptance email.

Fill out your information

Unique trainee ID provided in acceptance email

Select your training site and the date of starting the orientation.

After completing the PEQ Passport Control click the tab "next".

PEQ Passport Control
For verification purposes, please provide your name exactly as it appears in the PEQ Registration portal to ensure a seamless record update.

First Name

Last Name

Email*

Mobile

National ID
Enter your National ID number or iqama

Trainee ID
Enter your unique trainee ID number provided in email (use capital letters R2ID0000).

Select Training Site
Select*

Date of Orientation
Select date*

I agree to the processing of personal data*

Next



4. Upload Documents

Submit your completed orientation forms in the designated boxes.

Declaration Form

Confidentiality Statement

Medical Fitness Form

After completing the upload click the tab "next".

Upload Documents
You're almost there Reem! Use the boxes below to upload your onboarding documents.

Declaration Form
Upload your filled and signed document

Drop file here or click to upload

Confidentiality Statement
Upload your filled and signed document

Drop file here or click to upload

Medical Fitness Form
Upload your completed Medical Fitness Form (issued within the last six months).

Drop file here or click to upload

Next



5. Checkpoint

Let us know your anxiety level regarding your first day on a scale of 1–5. We use this to provide the support you need for a comfortable stay.

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PEQ Passport Checkpoint

Let's prepare you for a successful and confident start to your training

On a scale of 1 to 5, how anxious do you feel about your first day?

1 Star: Very Anxious / Uncertain

5 Stars: Very Confident / Ready to Start

☆☆☆☆☆

Next

Determine anxiety level by clicking on stars

After completing the checkpoint click the tab "next".



6. Confidentiality & Clearance

Submit your completed orientation forms in the designated boxes.

Read Carefully

Sign Agreement

Print Agreement for submission

After completing the agreement click the tab "next".

Confidentiality & Supervision Clearance
This document outlines the strict protocols regarding patient care and data access during your training period. Please read this carefully before signing.

1. Scope of Clinical Practice
As a trainee, your primary role is to observe and learn under direct guidance.

- **No Independent Treatment:** You are strictly prohibited from performing any medical procedures, administering medication, or providing clinical advice to patients without the direct, physical supervision of your assigned Training Officer.
- **Supervision Requirement:** "Direct supervision" means your Training Officer is present in the room or immediate area and is actively overseeing the task being performed.

2. Access to Patient Information
Patient privacy is protected by law and institutional policy.

- **Authorized Access Only:** You may only access patient files (electronic or physical) that are directly relevant to your current training module.
- **Supervised Review:** You are not permitted to open, read, or download any information from a patient's medical record unless your Training Officer has granted permission and is supervising the review.
- **Prohibited Actions:** Copying, photographing, or removing any part of a patient's file from the department is strictly forbidden.

3. Use of Mobile Devices and Photography
To maintain professional standards and patient privacy, the following rules apply to personal mobile phones, tablets, and cameras:

- **Photography & Recording Prohibited:** You are strictly forbidden from taking photos or videos of patients, medical records, monitors, or clinical procedures, even if the patient is not identifiable.
- **Patient Privacy Areas:** Mobile phone usage should be restricted to designated staff areas. Using personal devices in patient rooms or clinical zones for non-training purposes is discouraged.
- **Social Media:** Posting any information, photos, or descriptions related to clinical cases or hospital operations on social media is a violation of hospital policy and may lead to legal consequences.

4. Consequences of Non-Compliance
Failure to adhere to these guidelines constitutes a breach of professional ethics and institutional policy. Unauthorized access, unsupervised treatment, or privacy violations via mobile devices may lead to:

- Immediate suspension or dismissal from the training program.
- Formal reporting to your educational institution.
- Potential legal action regarding patient privacy violations.

Acknowledgment & Agreement
I Room Al-Dhakaan hereby acknowledge that I have read and understood the requirements for direct supervision, patient privacy and device usage.

I agree to refrain from providing any treatment, accessing any patient records, or taking any unauthorized photographs without the express authorization and presence of my Training Officer.

I understand that protecting patient confidentiality and safety is my highest priority.

Date: 2/8/2020

Enter Acknowledgment

Next



7. Training Module

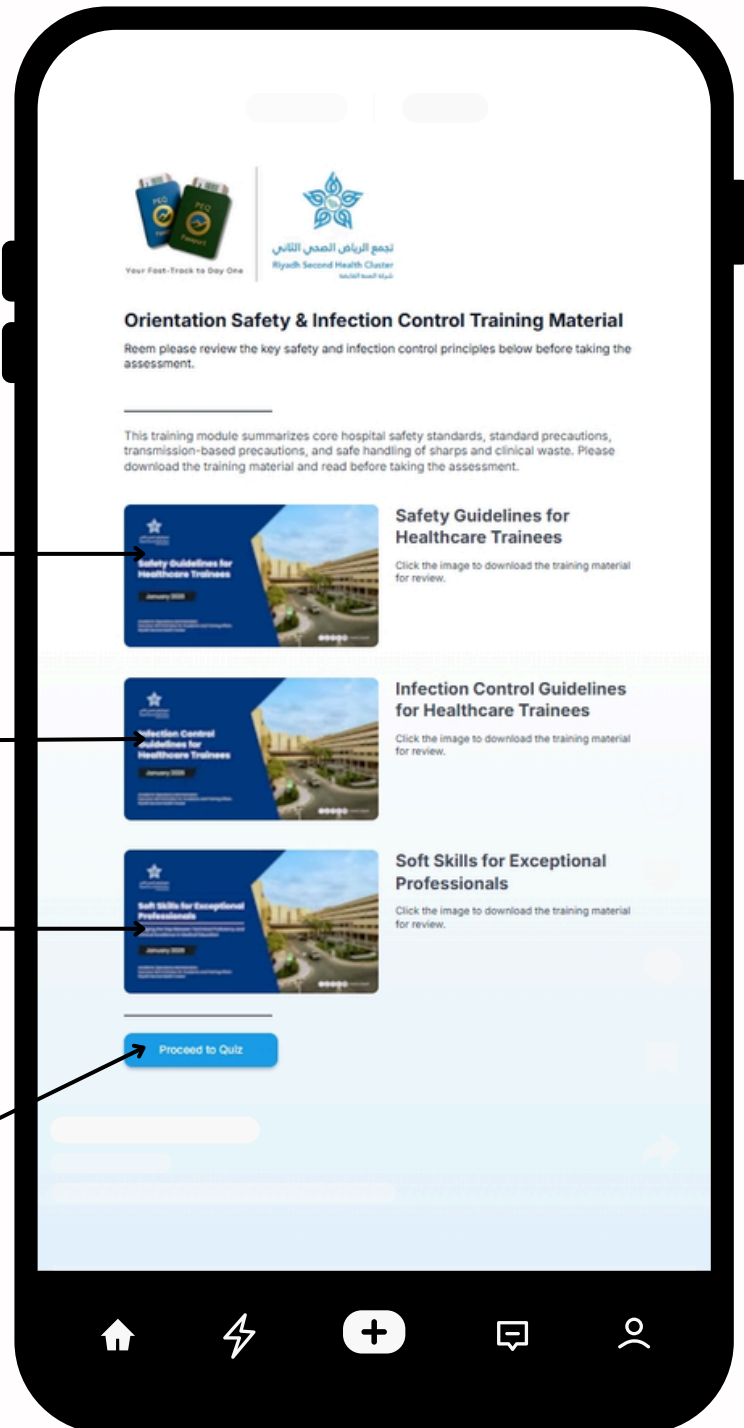
This module covers critical protocols, including infection control, standard precautions, and the safe handling of clinical waste.

Safety Guidelines

Infection Control

Soft Skills

After downloading and reviewing the training material click the tab "proceed to quiz".



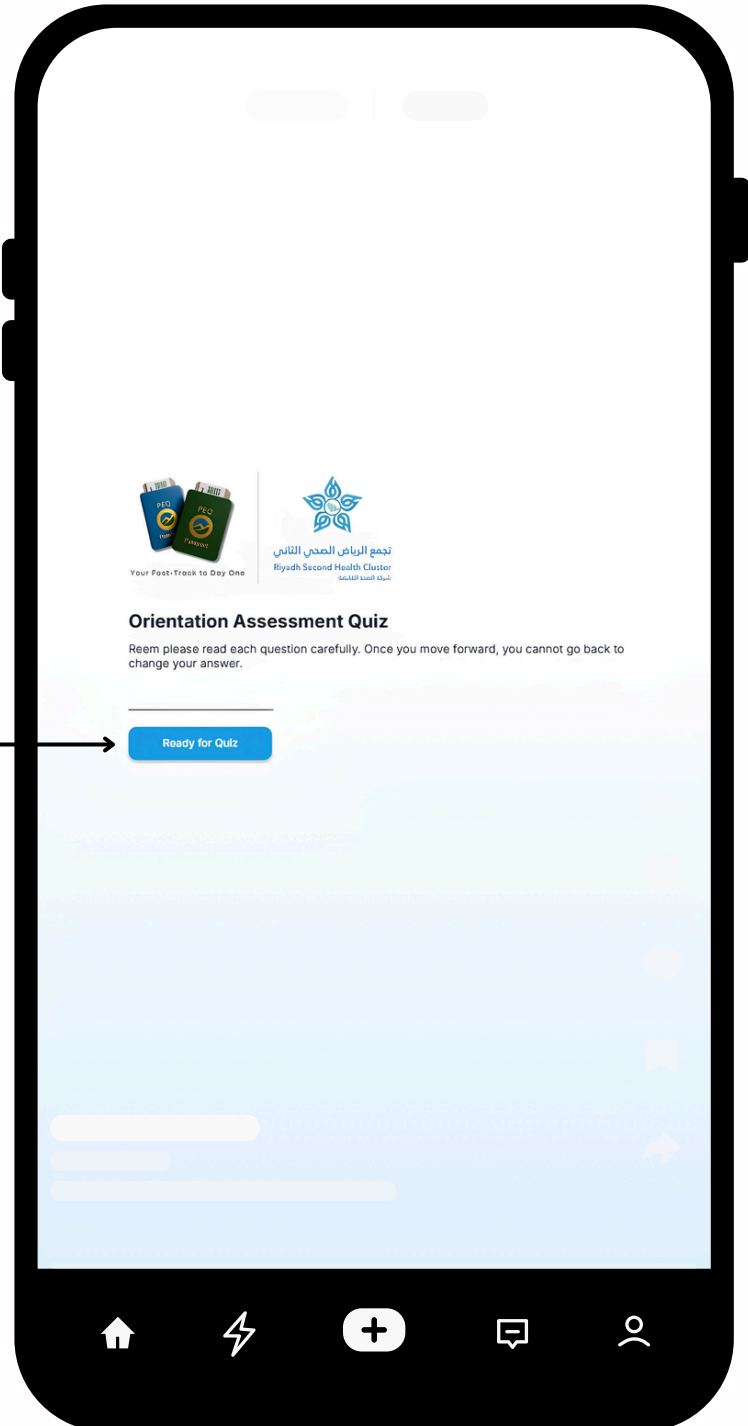


8. Orientation Assessment Quiz

Test your knowledge with a 10-question multiple-choice quiz.

- **Format:** Once you answer a question, you cannot go back.
- **Passing Score:** You must achieve at least 70%.

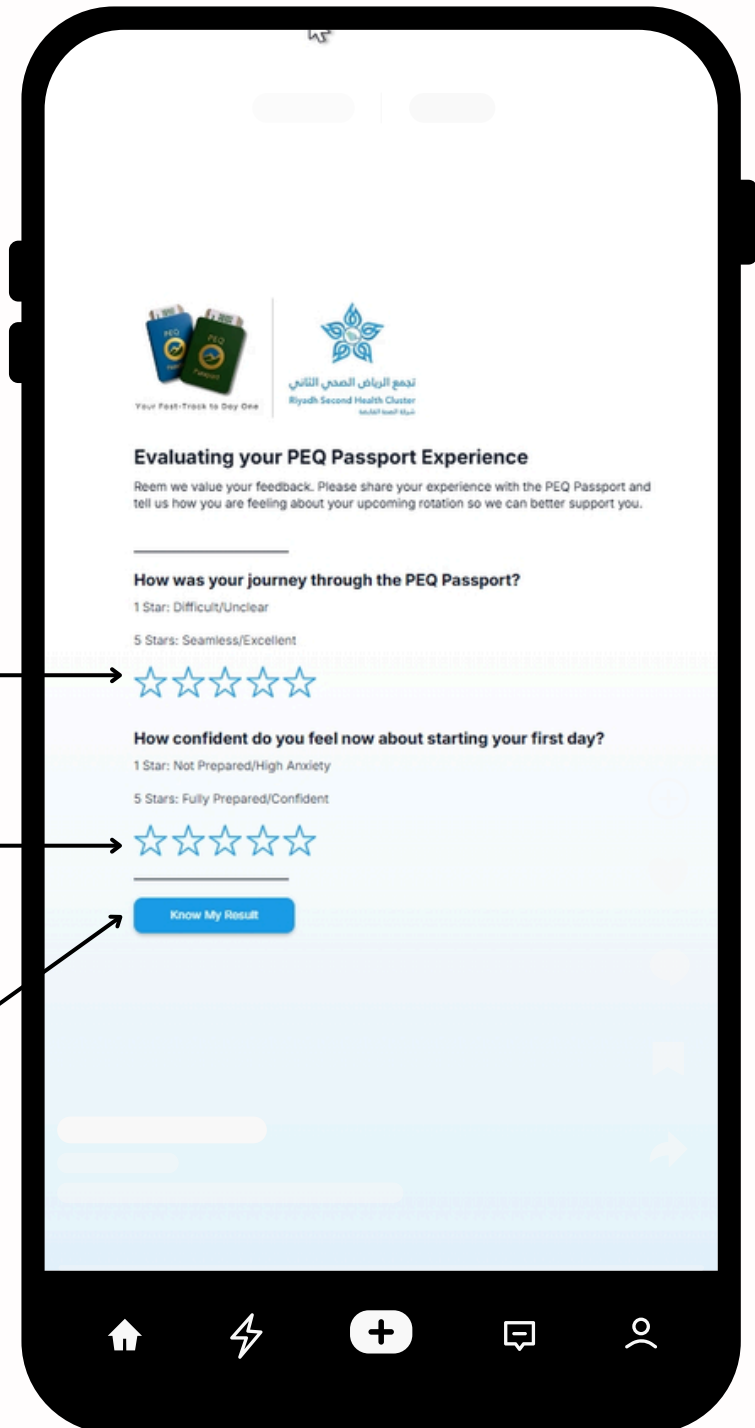
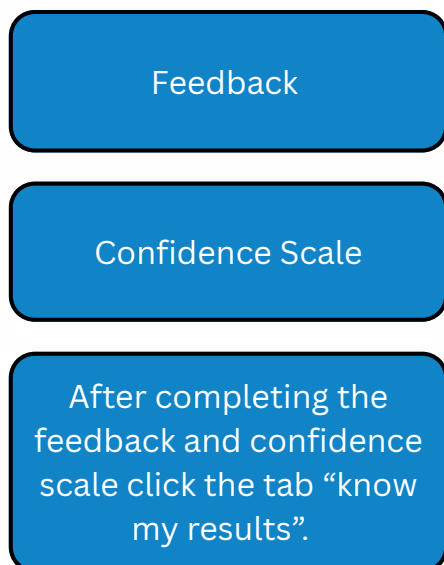
Once you are ready to proceed to the quiz click the tab “ready for quiz”.





9. Feedback

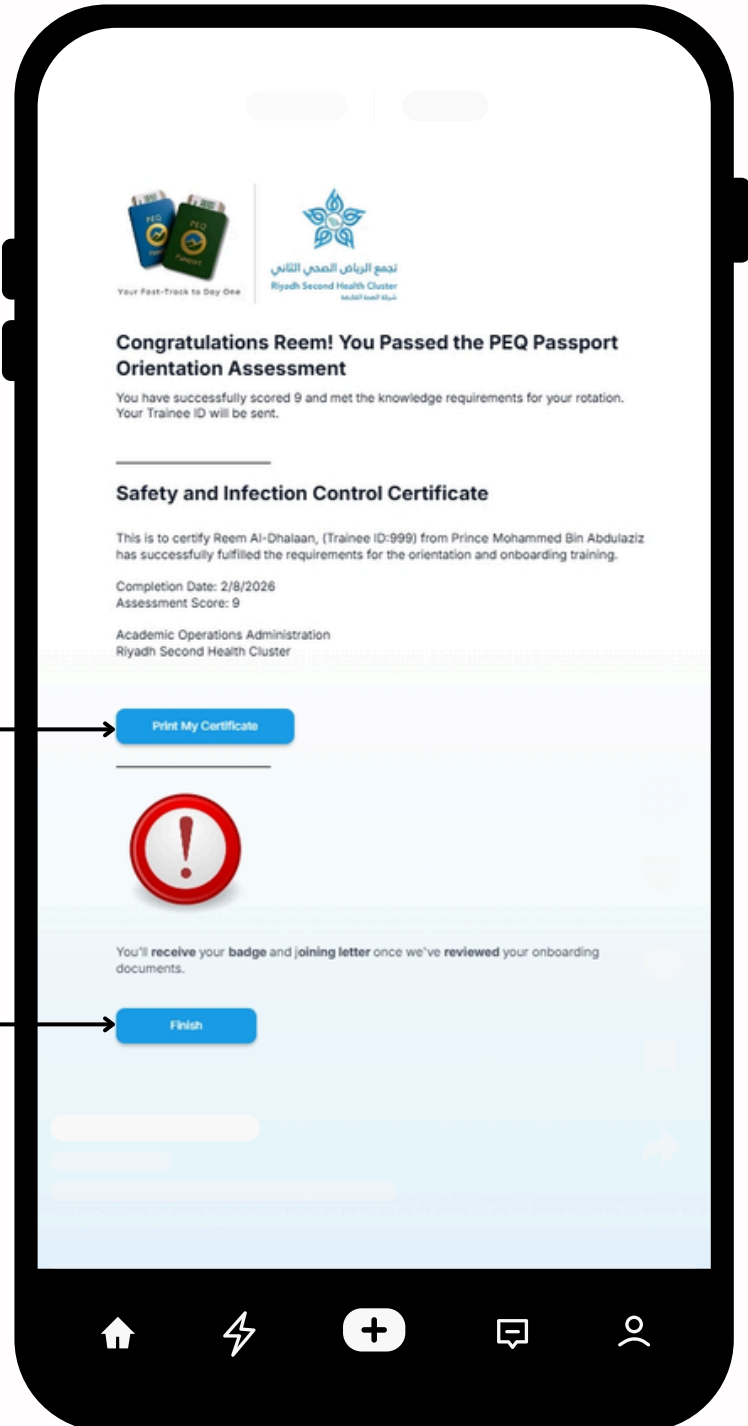
Once finished, please complete the PEQ Passport evaluation. Your feedback helps us improve the onboarding experience and better support your upcoming rotation.





10. Successful Outcome

Successful results are 70%+. You can print your completion certificate. Your official joining letter and ID will be sent via email.



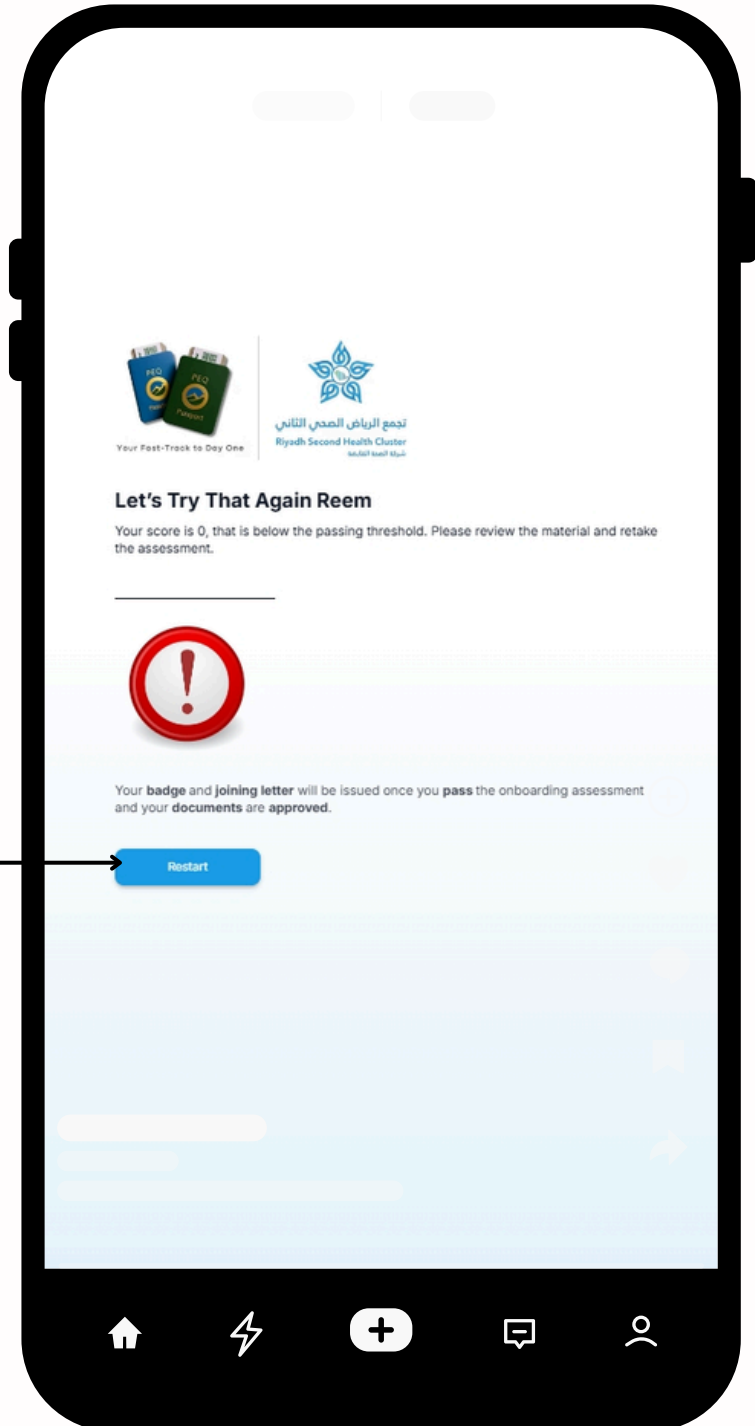
Print your completion certificate for reference.

After completing the download of your certificate click the tab "finish".



11. Unsuccessful Outcome

Successful results are less than 70%. You must review the training materials and retake the quiz.



Click the tab “restart” to retake quiz but before that review training resources.



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For Enquires:

 support@peq.app