## **Training Feedback Form**

Training Course Complet	tea:			
Date:	Time/Length:	Trainer:		
Content		Yes	No	Unsure
Was the course content presented in a logical manner?				
Was the course content and material complete and comprehensive?				
Will this information be use role?	eful to you in your job			
Relevance		Yes	No	Unsure
Do you feel you now have the product/procedure/train				
Did the course challenge y understanding of the produ	our thinking and			
area*?  Do you feel the training is I	peneficial to your team?			
Trainer		Yes	No	Unsure
Did the trainer communicate and explain the material clearly?		res	NO	Unsure
Did you feel the instructor was knowledgeable in the area covered?				
Did the trainer encourage discussions and questions?				
Comments				
Do you require any further	training in this area?			
If so, what would you like t	his training to cover?			
Further comments:				
<u> </u>				
Name:				
Date:			*DI	4

## **Temperature Probes Basic Competency Questions** *Please use your PCs as reference*

1. What are the names of the connectors of the Temperature Probes we provide:
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•
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2. What is a brief description of a Temperature Probe and which department is it used in?
3. What area and which patient type can part number 0212016 be used on?
4. Can the Temperature Probes to be reused?
5. Where can you find marketing materials?
6. If you searched the online Temperature selection guide for the following, which part
number would you get?
Application: Skin, Connector: HP/Philips, Patient: Neonatal
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7. Do the temperature probes contain Latex?
8. Find a part number and Euro € Distributor price for Temperature Probe Skin Contact Adult
for Hewlett Packard (HP).
Part number: Price:
9. On Intrastats, where can you find the Cross Reference?
10. What date and part number is on the Temperature Probe leaflet?
Part number: Part number: