

# Training Feedback Form

<b>Training Course Completed:</b> Posey Products Introduction			
<b>Date:</b> 12/08/37	<b>Time/Length:</b>	<b>Trainer:</b> Catrin Hollings	
<b>Content</b>	<b>Yes</b>	<b>No</b>	<b>Unsure</b>
Was the course content presented in a logical manner?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was the course content and material complete and comprehensive?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will this information be useful to you in your job role?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Relevance</b>	<b>Yes</b>	<b>No</b>	<b>Unsure</b>
Do you feel you now have a better understanding of the product/procedure/training area*?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the course challenge your thinking and understanding of the product/procedure/training area*?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you feel the training is beneficial to your team?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Trainer</b>	<b>Yes</b>	<b>No</b>	<b>Unsure</b>
Did the trainer communicate and explain the material clearly?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did you feel the instructor was knowledgeable in the area covered?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the trainer encourage discussions and questions?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Comments</b>			
Do you require any further training in this area?			
If so, what would you like this training to cover?			
Further comments:			
Name: [Signature]			
Date: [Signature]			

\*Please delete as applicable

## Posey Products Introduction Competency Questions

Please use your PCs as reference

1. What box sizes can the 6554 Pulse Oximetry Wraps sold in and what are the part numbers?

- 12 0021013
- 48 boxes 0021014
- 96 boxes 0021015

2. Why would you use a Posey I.D. bracelet?

if there is a problem to move the ID bracelet for IV drip sites

when the perm id interferes with IV site

3. Can the I.V. armboards be reused?

no



4. How many SecureSleeve Clips are included in each box?

12



5. What do we suggest if a customer asks for the 6554P Paediatric version?

we suggest the 6554 as it can be cut down to size

6. How much would carriage be for the following to mainland UK:

6 x 0021013 Posey Sensor Wraps (Box of 12)

free for GBP orders



7. Do any of the Posey products contain Latex?

no



8. Find a part number and USD \$ Distributor price for 8170P.

Part number: 3810034 Price: £ 29.70 X

9. On Intrastats, where can you find the Instruction Manuals for the Posey Products?

(i) against stock code

10. What date and part number is on the Posey Products Leaflet?

Part number: 3820000 Date: 01/20



Is this available to be provided to customers? Yes

