

Medical Devices Opt Out Application Form

This form is to assist Managers to inform us of changes to training needs with their staff.

This opt out form may be filled in to list staff that require opt out of any specific medical devices. Please state whether the opt is due to non use in department, this way we can apply opt out to all staff in dept. or specifically due to staff grade, or other.

Examples: (1) there was a member of trained staff working on a ward, but had no direct contact with patient care as they are a discharge co-ordinator, they could reasonably 'opt out' of all IV pump training, whilst still requiring Beds and mattresses as they assist with movement of beds. (2) Nursing staff, all require beds and mattresses whilst Receptionists/Secretaries/Ward clerks do not. (3) Or trained nursing staff on an area where you never nurse patients in beds would not require beds and mattress training.

Your request will then be reviewed by the medical devices team. Conversely, please also advise if a member of staff is required to opt back into training.

Please complete form, and date and sign the declaration below.

Please email form to: carol.frape@gwh.nhs.uk and MichelleL.bennett@gwh.nhs.uk

Medical Devices	Opt out – staff Names	Reasons
medical Bevices		
Alaris Asena Pump		
GH/CC		
GH/CC		
Volumat MC		
Volumet in C	-	
Beds/Mattresses		
Nutricia Feed Pump		
PCA Omnifuse Pump		
PCA Offifficase Pullip		
		1
Deducated Enidered		
Bodyguard Epidural Pump		
rump		



Flowtron Pump			
Blood Glucose Meter			
Blood Gas Analyser			
DI 114 (114 (
Blood Ketone Meter			
Serres Suction (wall			
mounted)			
•	nes to be opted out of training listed. Should th	compliance chasing you have sent mentioneir job role change I will review the m	
• .	ents and access the training required.	eat listed have been informed of require	amont to
update their training, and	entified on Compliance chasing list which are n	iot listed have been informed of require	ement to
	Job Title		
	Ext Numb		
	Site/Area_		
_	Site/Aitea		
Academy use only			
Assessed by		Date	
		Date	
		Date	
Further information so	ught from manager by	Date	
Approved by		Date	
Declined by		Dato	
		Date	••••