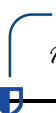




Training and Education Sheet

no.: _____ year: 2025

REFERENCES


Title:	Electronic Case Report Form for clinical trials: LiMeS Clinical Database V3.0		
Objectives:	Knowledge of Limes database.		
Subjects:	<ul style="list-style-type: none"> - System overview and settings - Account settings - Monitor access: study-specific access, data view, monitoring notes - Investigator access: data upload (add new patient, fill in forms and sections, validation and saving, x-rays upload, add adverse events, add reoperation, print CRF) - Administrator access rights 		
Operating Procedures / Instructions of ref.:	NA		
Start/End Date:	12Jun2025/12Jun2025	Duration [hours]:	0.5
Teacher/s:	Last Name and First Name: Ilaria Ciani		
	Signature:  Signed by: <i>Ilaria Ciani</i> Signer Name: Ilaria Ciani Signing Reason: I approve this document Signing Time: 13-Jun-2025 11:04 CEST 706777279D5145EDAE32B5EC3D9FCFFA		

EFFECTIVENESS ASSESSMENT METHOD

<input type="checkbox"/> Pratical Test (attach) ⁽¹⁾
<input type="checkbox"/> Observation on the job ⁽¹⁾
<input type="checkbox"/> Written Test (attach)
<input type="checkbox"/> Interview
<input checked="" type="checkbox"/> Not required ⁽²⁾
⁽¹⁾ Describe the pratical test or the observation in the appropriate "Note" section
⁽²⁾ Exclusively for interventions of an informational nature or awareness interventions.

	Training and Education Sheet
	no.: _____ year: 2025

Key: E=Effective; NE: Non-Effective; PE: Partially Effective.

PARTICIPANTS					
LAST NAME and First Name	Date	Signature	Effectiveness assessment		
			E	NE	PE
Bartosz Mikolajczak		<div>Signed by:  <div>Signer Name: Bartosz Mikolajczak Signing Reason: Zatwierdzam ten dokument Signing Time: 16-cze-2025 08:37 EDT CCDBD8DFFA2F4D37A5D2AC0C0AAD9D81</div></div>	E		

EFFECTIVENESS ASSESSMENT	
Notes:	
Corrective Actions (mandatory in case of NE or PE training)	
LAST NAME and First Name:	
Date:	Signature:

Certificate Of Completion

Envelope Id: E19BE6A9-9954-4DEA-B135-937EE6DFC40B		Status: Completed
Subject: Complete with Docusign: H34- Limes Training Log-Bartosz Mikolajczak IC.pdf		
Source Envelope:		
Document Pages: 2	Signatures: 2	Envelope Originator:
Certificate Pages: 4	Initials: 0	Aissa Benyattou
AutoNav: Enabled		abenyattou@namsa.com
Envelopeld Stamping: Enabled		IP Address: 2a01:e0a:b46:fb
Time Zone: (UTC-05:00) Eastern Time (US & Canada)		

Record Tracking

Status: Original 6/13/2025 10:45:07 AM	Holder: Aissa Benyattou abenyattou@namsa.com	Location: DocuSign
Status: Original 6/16/2025 8:37:33 AM	Holder: NAMSA Archivist DocuSign docusignarchive@namsa.com	Location: DocuSign

Signer Events

Signer Events	Signature	Timestamp
Bartosz Mikolajczak bmikolajczak@namsa.com Security Level: Email, Account Authentication (Required)	 Signature Adoption: Pre-selected Style Signature ID: CCDBD8DF-FA2F-4D37-A5D2-AC0C0AAD9D81 Using IP Address: 78.30.98.141 With Signing Authentication via Docusign password With Signing Reasons (on each tab): Zatwierdzam ten dokument	Sent: 6/13/2025 10:46:47 AM Viewed: 6/16/2025 8:36:57 AM Signed: 6/16/2025 8:37:29 AM

Electronic Record and Signature Disclosure:
Accepted: 6/16/2025 7:47:38 AM
ID: d64a220b-64a7-4f82-8096-ed7035f7e117

Ilaria Ciani Ilaria.Ciani@enovis.com Security Level: Email, Account Authentication (Required)	 Signed by: Ilaria Ciani Signer Name: Ilaria Ciani Signing Reason: I approve this document Signing Time: 13-Jun-2025 17:04 CEST 706777279D5145EDAE32B5EC3D9FCFFA Signature Adoption: Pre-selected Style Signature ID: 70677727-9D51-45ED-AE32-B5EC3D9FCFFA Using IP Address: 151.9.193.234 With Signing Authentication via Docusign password With Signing Reasons (on each tab): I approve this document	Sent: 6/13/2025 10:46:48 AM Viewed: 6/13/2025 11:03:50 AM Signed: 6/13/2025 11:04:57 AM
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Electronic Record and Signature Disclosure:
Accepted: 6/13/2025 11:03:50 AM
ID: b0a8b5bc-acb3-4356-bf28-da4c0aca7fef

In Person Signer Events

Editor Delivery Events

Agent Delivery Events

Signature

Status

Status

Timestamp

Timestamp

Timestamp

Intermediary Delivery Events	Status	Timestamp
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Certified Delivery Events	Status	Timestamp
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Carbon Copy Events	Status	Timestamp
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Aissa Benyattou abenyattou@namsa.com Clinical Study Mgr. NAMSA Security Level: Email, Account Authentication (Required) Electronic Record and Signature Disclosure: Not Offered via DocuSign	<div>COPIED</div>	Sent: 6/16/2025 8:37:33 AM Viewed: 6/16/2025 8:37:33 AM Signed: 6/16/2025 8:37:33 AM
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Witness Events	Signature	Timestamp
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Notary Events	Signature	Timestamp
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Envelope Summary Events	Status	Timestamps
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Envelope Sent	Hashed/Encrypted	6/13/2025 10:46:48 AM
Certified Delivered	Security Checked	6/13/2025 11:03:50 AM
Signing Complete	Security Checked	6/13/2025 11:04:57 AM
Completed	Security Checked	6/16/2025 8:37:29 AM

Payment Events	Status	Timestamps
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Electronic Record and Signature Disclosure
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