



Certificate of Completion
IS HEREBY GRANTED TO

NAME Janice Davis

HAS SUCCESSFULLY COMPLETED THE FOLLOWING COURSE OF TRAINING TO SATISFACTION:

Medical Training

TYPE OF TRAINING

DATE COMPLETED 2/25/2020

Kaitlin TEACHER SIGNATURE

Janice
DANS

Hands on Medical Training for all new DCS

Vital Signs: Pulse, respirations, blood pressure, temperature, pulse oximeter, weight-Licensing requirements

Hand washing

Proper gloving

Universal precautions

Prevention of communicable diseases (MRSA, Influenza, respiratory infections)

Transferring: Gait belt use, wheelchair, shower chair, in or out of vehicles

Fall prevention: walker use, no throw rugs, hand rails, well lit hallways

Eating disorders: dysphasia and choking, positioning, special feeding equipment

Special Diets: pureed, thickit, mechanical soft

Staff Signature Janice Davis Date 2/25/2020

Nurse Signature Kate Date 2/25/2020