

# Certificate of Completion

THIS HEREBY CERTIFIES THAT

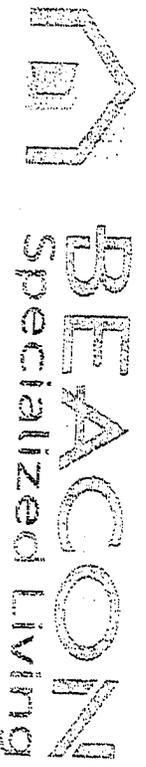
Nicole Logan

HAS SUCCESSFULLY MET ALL REQUIREMENTS OF  
**DMA CERTIFICATION**

INCLUDING: GLUCOSE MONITORING, SIX RIGHTS AND INSULIN ADMINISTRATION

David Schwartz  
SIGNED

01/14/2020



# Certificate of Completion

Is hereby granted to:

Nicole Lagan

To certify that they have complete to satisfaction in

"DMA, Medical, & Blood Borne Pathogens Training"

Date: 1-27-20

[Signature]  
Trainer Signature RN