

## TDP BASIC STAFF DOCUMENTATION OF TRAINING

School Name: \_\_\_\_\_

Building Nurse (please print): \_\_\_\_\_

Trained Diabetes Personnel (please print): \_\_\_\_\_

Topic(s) Discussed: Diabetes basics; hypoglycemia; blood glucose monitor/ testing; insulin; glucagon; confidentiality

Viewed ADA Safe @ School CD and DVD segments                      NO    YES

Assisted/ observed nurse in giving care to student                      NO    YES    Date:

Additional information covered:    Hands- on practice with training equipment

The above-mentioned TDP has participated in this training and demonstrates a satisfactory understanding of the topics discussed (please sign and date):

\_\_\_\_\_

\_\_\_\_\_

Nurse

Date

TDP

Date