D&S DIVERSIFIED TECHNOLOGIES

MAILING ADDRESS - P.O. BOX 418, FINDLAY, OH 45839-0418

TOLL FREE 877-851-2355 - LOCAL 419-420-1605 - FAX 419-422-8367- www.hdmaster.com

PROVIDING STNA TESTING SOLUTIONS THROUGHOUT OHIO TESTING SITE EQUIPMENT LIST AND AFFIDAVIT form 1503-3/2017

The Testing Site must include all of the materials necessary to properly administer any of the randomly selected skill tests. The Evaluator is required to review all of the Skill Tests they receive prior to administration and ensure that the appropriate laboratory equipment is available prior to testing. Please refer to the following list for equipment requirements.

Equipment Provided by Testing Site

- Working Long-term care bed with side rails, working bed brakes, Laundry hamper
- Bedside stand -- Over bed stand
- Wheelchair with working brakes
- Standard Scale or Analog Scale
- Hand washing sink with running water, liquid soap, & paper towels all in close proximity to skill test room
- Wash Basin Emesis Basin, bedpan, gloves
- Bedpan, output measurement container/graduate
- Wastebasket, Wall Clock with second hand
- Call light-doesn't have to be a working call light (attached to bed)
- Gait belt/transfer belt -
- Food tray, plate, silverware
- Linens including: pillows and top linens, blanket, water proof pad, resident gowns, towels, washcloth, Bath blankets, clothing protector
- Dentures, Denture container
- Anti embolic/Elastic Stocking
- Mannequin (peri area and anatomically correct for . cather insersion), walker
- Urinary Drainage bag with tubing and antiseptic wipes
- Privacy Curtain (Must be overhead rail, pull type with minimum 4' of rail) (FOLDING CURTAINS ARE NOT PERMITED

Additional Equipment Provided by **Evaluator or Flexible Test Site**

- A tape player/Walkman with working stereo headphones. The Evaluator must ensure that the tape player either has an AC adapter to plug into an available outlet, or has fresh batteries. (Used for Oral Test administration)
- Toothbrush, toothpaste, and cup •
- Lotion •
- Nail file, orange stick •
- Hair brush, comb and hand mirror
- Intake and output record sheets (D&S Provided) •
- Liquid Soap Tissues •
- Sheaths for oral thermometer •
- Oversized Pants and shirt .
- Digital timer (that does not tick out loud) X2
- Travel clock with second hand •
- Oral digital thermometer-Alcohol-Alcohol pads •
- Slippers
- #2 Pencils for written test administration & recoding measurements
- Sample food items, napkin, diet card, 240 cc cup, 120 cc cup, (snack cups of applesauce, pudding or jello etc for solid food item.)
- Standard calculator-(no cell phones) 7/2013
- Travel clock with second hand x 2
- Sharps container

Gloves, Cath tubing, Adult briefs •

Testing Sites and Evaluators/Observers may mutually agree to a different mix of equipment distribution and a Test Evaluator/Observers may use their consumable supplies reimbursement to purchase consumables from the Site, depending on mutual agreement with the Site. Please call D&S DIVERSIFIED TECHNOLOGIES. This list MUST be

accompanied by Form 1502 OH TO APPLY AS A TESTING SITE FOR ASSISTANCE IN COMPLETING THESE FORMS CONTACT D&S DIVERSIFIED TECHNOLOGIES toll free at 1-877-851-2355. Site Affidavit:

I the facility hereby certify that I have a completely enclosed skill and written room that meet the specs listed on form 1502 which must accompany this form for submission.

Phone:	Ext:	Fax Numb	er:			
Contact Person's Name:		Email:				
Address:	City:		State:	Zip:		
Address:	ractors) for the pur	pose of adminis	stering STNA writte	SIFIED TEC en and skill	HNOLOGIES	
Title:	Email	Address:				
Test Observer Signature:	Print	Printed Test Observer Name:				
Date Signed:						
D&S DIVERSIEIED TECHNOLOGIES Form 1503 OF	Update	ed: 03/2017	Printed November	·9 2017		