**SimNewb Equipment Checklist**

Please complete this equipment checklist no more than 24 hours prior to the use of equipment in the DNAMER Simulation Room/s. A DNAMER representative will complete the post session checklist.

If a fault/malfunction is identified please complete the DNAMER Equipment Fault/Malfunction Form.

It is the responsibility of the session organisers to bring equipment not available in the demonstration room. The demonstration room has a limited number of consumables, it is the responsibility of the session organisers to replace any consumables used. Stock lists are available to assist with restocking.

Please note: Alternative arrangements may need to be arranged if the fault cannot be rectified in time for the booked activity.

**Ensure you are familiar with the operating instructions of the simulation equipment.**

Return completed form to the DNAMER Secretary.

|  |  |
| --- | --- |
| **Name:** |  |
| **Details of alternative contact:** |  |
| **Department:** |  |
| **Contact phone:** |  |
| **Email address:** |  |
|  |  |
| **Title of activity:** |  |
| **Date:** |  |

|  |
| --- |
| **General** |
| Item | Pre– check🗸 | Post– check🗸 | Additional comments | N/A🗸 |
| **Walkie talkies: 2x headsets, 2 charging stands - functioning**Charging = solid red lightCharged = green light |  |  |  |  |
| **Demo room**  |  |  |  |  |
| **Linen** |  |  |  |  |
| **Stock** |  |  |  |  |
| **Other:** |  |  |  |  |
|  |  |  |  |  |
| Equipment | Pre– check🗸 | Post– check🗸 | Additional comments | N/A🗸 |
| **Computers** |  |
| **SimNewb laptop** |  |  |  |  |
| **SimNewb software** |  |  |  |  |
| **Video server connected** |  |  |  |  |
| **SimViewer software** |  |  |  |  |
| **Camera views** (+monitors) |  |  |  |  |
| **Audio functioning** |  |  |  |  |
| **Projector display** |  |  |  |  |
| **Sound functioning** |  |  |  |  |
| **AV touchscreens x3** |  |  |  |  |
| **Manikin** |
| **SimNewb overall clean and intact** |  |  |  |  |
| **Compressor**  |  |  |  |  |
| **Vital sim**  |  |  |  |  |
| **Connected to software** (green icon) |  |  |  |  |
| **Breathing and Pulses** (palpable/audible pulses, heart sounds, cyanosis)  |  |  |  |  |
| **Voice and Movement Functions** (crying, grunting, seizures, normal movement) |  |  |  |  |
| **ELO functioning**  |  |  |  |  |

**Additional comments:**

|  |  |  |
| --- | --- | --- |
| **DNAMER equipment fault notification required:** | Yes | No |
| **Pre- check signature:** | Date: |
| **Print name:** |
| **Post check signature:** | Date: |
| **Print name:** |