

Abbott i-STAT Alinity Analyser Training Register

Hospital and Ward:

Date of Training:

Name of Trainer:

Forename	Surname	Ward/ Department	Site(s) access required for	Operator ID (7/8 DIGIT NO.)	E-mail address	Observational Assessment Complete
<i>e.g. JOE</i>	<i>BLOGGS</i>	<i>LGI Radiology</i>	<i>LGI/SJUH/ Cross site</i>	<i>Barcode from ID Badge MUST be provided</i>	<i>Joe.bloggs1234@nhs.net</i>	✓