

Student _____
Dates of Rotation _____

Biomedical Technology Rotation Task Sheet

OBJECTIVES

OBSERVED/ASSISTED

- | | |
|---------------------------------------|---------------|
| 1. Orientation to Biomedical services | _____ / _____ |
| a. equipment assessment/analyzers | _____ / _____ |
| b. emergency procedures | _____ / _____ |
| 2. Equipment | |
| a. x-ray machines | _____ / _____ |
| b. IV infusion pumps | _____ / _____ |
| c. telemetry monitors | _____ / _____ |
| d. electronic thermometers | _____ / _____ |
| e. pulse oximeters | _____ / _____ |
| f. ventilators/respirators | _____ / _____ |
| g. CT scans | _____ / _____ |
| h. MRI | _____ / _____ |
| i. ultrasound | _____ / _____ |
| j. echocardiograph | _____ / _____ |
| k. dopplers | _____ / _____ |
| l. fetal monitors | _____ / _____ |
| m. electrocardiograph | _____ / _____ |
| n. Holter monitors | _____ / _____ |
| o. defibrillators | _____ / _____ |
| p. lasers | _____ / _____ |
| q. telecommunication equipment | _____ / _____ |
| r. computers | _____ / _____ |
| s. electroencephalograph | _____ / _____ |
| 3. Routine Maintenance | _____ / _____ |
| 4. Quality Assurance | _____ / _____ |

Mentor Signature

Date