



## **ACKNOWLEDGEMENT FORM** ANNUAL MANDATED TOPICS

I hereby acknowledge receipt and understanding of the following Mandated Topics in the "All Medical OSHA and HIPAA Training Guide." To access the Training Guide, please use the first link below, or read the PDF file provided to you upon hire.

To access the All Medical OSHA and HIPAA Training Guide, go to:  
<https://cdn.allmedstaffing.com/AllMedical/Documents/Healthcare/allmedstaffing-oshahipaa-booklet.pdf>

Topics Included:

- ❖ Fire Safety
- ❖ Electrical Safety
- ❖ Infection Control/Universal Precautions
- ❖ Hepatitis C
- ❖ Hepatitis B
- ❖ HIV Testing and Related Information
- ❖ Age Specific Care
- ❖ Sexual Harassment
- ❖ Pain Management
- ❖ Patient Abuse
- ❖ Multi-Cultural Aspects and Spiritual Diversity of Patient Care
- ❖ HIPAA Privacy Regulations
- ❖ National Patient Safety Goals
- ❖ Patient Rights
- ❖ Domestic Violence
- ❖ Restraints
- ❖ Blood Glucose Monitoring & Management
- ❖ Advance Directives
- ❖ Agency Administrative Policies and Procedures
- ❖ Emergency Preparedness Plan
- ❖ Prevention of Medical Errors
- ❖ Back Safety
- ❖ Workplace Violence

I hereby attest that I received, reviewed, and fully understand the basics of hazard recognition in the workplace, bloodborne and airborne pathogens, safeguards to protect against health hazards when handling blood and other potentially infectious body fluids, hygiene and the necessary precautions that must be taken to minimize the risk of exposure to infection, workplace ergonomics, fire safety, confidentiality and the protection of the privacy of individuals' health care records and information (PHI). This training guide, provided by All Medical Personnel, does not address any state-specific



regulations or replace any workplace-specific policies and procedures of the use of sound clinical judgement.

I understand that as an employee of Gateway Healthcare Professionals, at any client facility, it is my responsibility to protect the confidentiality of the patients' medical information. Failure to maintain patient confidentiality may lead to discharge or other disciplinary action.

I have read and understand the above policies and the All Medical OSHA and HIPAA Training Guide.

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Social Security #: \_\_\_\_\_

The All Medical OSHA and HIPAA Training Guide was developed in accordance with the Training Requirements in OSHA Standards published by the U.S. Department of Labor: <https://www.osha.gov/Publications/osh2254.pdf>