

## NTEC Point-of-Care Glucose Testing – Link Nurse Nomination Form

To be completed by Ward Manager / Unit In-Charge:

|   | Name | Rank | 331 User Code | Tel / Fax | HA Email Address |
|---|------|------|---------------|-----------|------------------|
| 1 |      |      |               |           |                  |
| 2 |      |      |               |           |                  |
| 3 |      |      |               |           |                  |
| 4 |      |      |               |           |                  |
| 5 |      |      |               |           |                  |

Please use a separate sheet for more names

Name: \_\_\_\_\_  
 Hospital / Ward / Ext.: \_\_\_\_\_  
 Signature and Date: \_\_\_\_\_

Note:

**Please complete the form and fax it to Mr. Frankie WONG (2648 4262).**

Successful Enrolment will be confirmed by HA Email.

To be completed by Chemical Pathology:

Application processed by: \_\_\_\_\_ Date: \_\_\_\_\_

| Job Description  | Date | Name | Signature |
|--|------|------|-----------|
| 1. NTEC-EQAP ( <a href="http://ntec.app/eqaps">http://ntec.app/eqaps</a> ) |      |      |           |
| create BGA link nurse  |      |      |           |
| create new location  |      |      |           |
| create analyzer type as required   |      |      |           |
| 2. Sonnet EQAP   |      |      |           |
| create new location as required  |      |      |           |
| create analyzer type as required   |      |      |           |
| 3. Participant list: add new location as required                          |      |      |           |
| 4. Enrolment confirmation by HA Email                                      |      |      |           |

Last modified on 14/12/2020