

Certification of Delivery Form

(To be completed by Contractor)

Veteran's Name: _____
Address: _____
City & State: _____

SS #: _____
Telephone: _____
Zip Code: _____

Describe equipment delivered; including manufacturer's name, model number, serial number, and general description:

☐ Equipment was NEW. ☐ Equipment was REFURBISHED*

*Was refurbished equipment cleaned in accordance with VA Infection Control Standards?

☐ Yes ☐ No (Explain: _____)

Briefly describe instructions given to the patient/caregiver on use, handling and required maintenance.

Safety Check List:

	YES	NO
1. Was the equipment operation in accordance with the manufacturer's guideline upon delivery?	<input type="checkbox"/>	<input type="checkbox"/>
2. Were the electrical outlets to be used with the equipment checked for safety?	<input type="checkbox"/>	<input type="checkbox"/>
3. If two-prong outlets were encountered, were three-prong, grounded adapters provided/installed?	<input type="checkbox"/>	<input type="checkbox"/>
4. Was the equipment properly checked for electrical leakage?	<input type="checkbox"/>	<input type="checkbox"/>
5. Were any unsafe conditions reported to the VA?	<input type="checkbox"/>	<input type="checkbox"/>
6. Was the patient/caregiver instructed how to handle a total power failure, including telephone service?	<input type="checkbox"/>	<input type="checkbox"/>
7. Did you inform the family/caregiver to notify VA if equipment needs to be returned?	<input type="checkbox"/>	<input type="checkbox"/>

(Signature of Delivery Person)

(Date)

The above instructions regarding use, handling, maintenance, and electrical safety were clearly explained. I understand that I can call the VA Prosthetic Treatment Center for repairs during normal business hours at (612) 725-2001. After normal hours I can call the VA Medical Center at (612) 725-2000 and ask for a person from the Prosthetic Treatment Center to contract me.

(Signature of Veteran/Caregiver)

(Date)

(All equipment delivered by this contractor is property of the Department of Veterans Affairs)