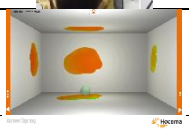
Checklist for User Education

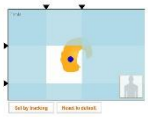
Armeo®Spring User Requirements Checklist

In order to ensure safe, effective and efficient use of the ArmeoSpring, the clinicians that are certified as users must have a certain level of practical knowhow before using the device on their own. This checklist serves as a support for you as a Trainer when you educate new users on the ArmeoSpring to check if they are ready to work with the device. Before certifying a user, he/she should fulfil the criteria below:

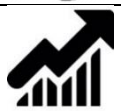
1. Prepare the Patient and the ArmeoSpring and Setup

		Description	Name of the Candidate: _____
1		Candidate knows **indications and contraindications**	poor — needs improvement — sufficient — excellent
2		Candidate knows the criteria for **proper setup** of the patient in the device	poor — needs improvement — sufficient — excellent
4		Candidate performs and instructs the initial Assessments (**A-ROM and A-MOVE**) correctly	poor — needs improvement — sufficient — excellent
5		Candidate knows how to **manage the therapy plan**	poor — needs improvement — sufficient — excellent

2. Training procedure: Adjustments

1		Candidate knows the different **exercises and assessments** and their goals	poor — needs improvement — sufficient — excellent
2		Candidate knows how to **adjust** the exercises to the **patients' abilities** (training region editor and re-do initial assessments, arm weight support, visual detail, difficulty level, autogrip etc.)	poor — needs improvement — sufficient — excellent

3. General Aspects

1		Candidate can **handle the patient in the device safely**	poor — needs improvement — sufficient — excellent
2		Candidate knows different options how to **challenge a patient**	poor — needs improvement — sufficient — excellent
3		Candidate knows how to use the **ExtraTime** feature and the **report**	poor — needs improvement — sufficient — excellent

	To become a User, all ratings should at least be 'sufficient'
Candidate passed the User Education:	**No** ☐ **Yes** ☐

Name and Signature of ArmeoSpring Trainer

Name	Signature

Name and Signature of ArmeoSpring User

Name	Signature

Date/Place: _____ / _____