



Starship Child Health Transport Equipment Loan Record

Please make sure this form is completed and copied before
issuing any equipment

Child's Name:		NHI	
Family Name:		DOB	
Name of team/service borrowing equipment:		Name of DHB / organisation:	
Contact person from team borrowing equipment (who will be accountable in ensuring equipment returned):			
Mobile phone:		Email:	
Postal address:			
<p>Please make two copies. One copy with ADHB transit service, second copy for team borrowing transport equipment.</p>			

Loan Details

Date issued:	Expected return date:
Equipment identification number / description	
Arrangement for return:	

Borrowing team member completes this section: **YES**

I have read and agree with the loan conditions on the reverse of this page

Signature:

Date:

Transit team to complete this section:

<u>Name of staff member</u> <u>Issuing equipment:</u>	Please print name:	Ward /Dept:
Reason the loan equipment is required – please circle all that apply Transport home Transport to another DHB Transport to airport Inpatient transport		
<u>Staff member</u> <u>accepting returned</u> <u>equipment</u>	Please print name:	Date:

Loan Conditions

This transport equipment is Starship Hospital / ADHB property and is available for short term loan by Transport teams and Starship Child Health services to safely secure children / infants for transport purposes.

This equipment is loaned for use only by the Service named on the form, who are assuming care of an infant or child who is/or has been a patient at Starship Child Health. Loan equipment is not to be loaned to anyone else, or passed on for use by another service. Always use equipment according to the manufacturer's instructions.

This transport equipment is the property of Starship Hospital / ADHB and must be returned by the expected return date and in the same condition in which it had been loaned. Please confirm your return arrangements at the time you take receipt of the transport equipment.

If arrangements change, please contact the Transit Care Nursing team on Ph 09 307 4949 x 25500.

If unable to return the loan equipment yourself please courier it back to the Transit Care Nursing team. This will be at your own cost.

Send to:

The Transit Care Services,
Auckland City Hospital.

Park Road

Grafton

Private Bag 92024

Auckland 1142

The courier company frequently used by ADHB is as follows:

SUB60 – Phone (09) 526 3670.

Quote “ADHB30” for special rates to apply.

Payment to SUB60 will be required on pickup.

*There are other courier companies if you choose to use them