

VOLUNTEER HIPAA TRAINING QUIZ

Volunteer Name: _____

Go through the PowerPoint and use this answer sheet to record your answers to the quiz questions.

HIPAA

1. Circle one: Yes No
2. Circle one: Yes No
3. Circle one: Yes No
4. Circle one: Yes No
5. Circle one: Yes No
6. Circle one: Yes No
7. Circle one: Yes No
8. Answer: _____
9. Answer: _____
10. Circle one: Yes No

FACILITY SAFETY:

Please fill in the correct answer below with your location Supervisor as they orient you to the facility:

1. In case of an evacuation, my location's emergency staff and client meeting area is: _____

2. The exit path I should take in case of an emergency is: _____
3. My building's first aid kit is located: _____
4. My building's AED is located: _____
5. My building's fire extinguisher(s) is/are located: _____

The Compliance and Privacy Officer for all above sections for our organization is: _____

I have been shown the specific location of all of the emergency specifics listed above and given appropriate direction in case of emergencies.

Volunteer Name	Signature	Date
_____	_____	_____