



## American Heart Association Emergency Cardiovascular Care Program Course Roster

BLS HCP                     Initial                     Renewal                     Adult    Child    Infant    AED  
 BLS HCP Fundamentals    Initial                     Renewal  
 BLS HS AED                 Initial                     Renewal  
 BLS HS FACTS              Initial                     Renewal  
 BLS CPR for Family & Friends  
 BLS CPR in Schools        Adult    Child    Infant    AED  
 BLS HS CPR                 Initial                     Renewal  
 BLS Instructor             Initial                     Renewal  
 BLS IT                         Initial                     Renewal  
 ACLS Provider              Initial                     Renewal  
 ACLS Instructor            Initial                     Renewal  
 ACLS EP Provider          Initial                     Renewal  
 ACLS EP Instructor        Initial                     Renewal  
 PALS Provider              Initial                     Renewal  
 PALS Instructor            Initial                     Renewal

Training Center Name \_\_\_\_\_  
 Training Site Name \_\_\_\_\_  
 Course Location \_\_\_\_\_  
 Course Director \_\_\_\_\_  
 Lead Instructor \_\_\_\_\_  
 Current AHA PALS/ACLS Physician Instructor Available  
 Physician Name \_\_\_\_\_  
 Manikins Decontaminated by \_\_\_\_\_

Course Start Date/Time \_\_\_\_\_      Course End Date/Time \_\_\_\_\_      Total Hours of Instruction \_\_\_\_\_  
 Student-to-Manikin Ratio \_\_\_\_\_      Number of Cards Issued \_\_\_\_\_

Assisting Instructors/Specially Faculty			
Name	Inst. Card Exp. Date	Module/Station	Name Inst. Card Exp. Date Module/Station
1.			5.
2.			6.
3.			7.
4.			8.

I verify that this information is accurate and truthful and that it may be confirmed. This course was taught in accordance with AHA guidelines.

Signature of Course Director/Lead Instructor \_\_\_\_\_ Date \_\_\_\_\_