



University of Colorado Hospital

UNIVERSITY OF COLORADO HEALTH

ADVANCED CARDIAC LIFE SUPPORT

OR

PEDIATRIC ADVANCED LIFE SUPPORT

(CIRCLE ONE)

COURSE DATE: 6/9/14

PROVIDER COURSE SKILL VERIFICATION: _____ RECERTIFICATION COURSE:

NAME OF COURSE PARTICIPANT: Jill Bravovec

This document confirms that the above student has met and completed the American Heart Association (AHA) guidelines as outlined by the AHA skill verification and learning verification sheets per the Program Administration Manual (PAM).

The checking of the below boxes indicates that the student has completed the exact criteria outlined on the AHA Skill sheets and serves as a single page replacement document. By checking the boxes below, the AHA Instructor is confirming that on the above date, the above student met and completed all of the skill verification and exam (s) necessary to achieve completion in an AHA course on the above date.

Review of core cases:

Review of mandatory skills

Use of AHA format

Passes a proctored written exam (recert)

Completes BLS skills post BLS Heartcode

Passes the AHA online Heartcode

INSTRUCTOR SIGNATURE: Rebecca Davis



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(CIRCLE ONE)

COURSE DATE: 6/9/14

PROVIDER COURSE SKILL VERIFICATION: _____

RECERTIFICATION COURSE: 0

NAME OF COURSE PARTICIPANT: Elizabeth Carrier

This document confirms that the above student has met and completed the American Heart Association (AHA) guidelines as outlined by the AHA skill verification and learning verification sheets per the Program Administration Manual (PAM).

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Review of core cases:



Review of mandatory skills



Use of AHA format



Passes a proctored written exam (recert)



Completes BLS skills post BLS Heartcode



Passes the AHA online Heartcode



INSTRUCTOR SIGNATURE: _____

Lydia M Carlson



University of Colorado Hospital

UNIVERSITY OF COLORADO HEALTH

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(CIRCLE ONE)

COURSE DATE: 6-9-14

PROVIDER COURSE SKILL VERIFICATION: _____

RECERTIFICATION COURSE: Y

NAME OF COURSE PARTICIPANT: Leah Dean

This document confirms that the above student has met and completed the American Heart Association (AHA) guidelines as outlined by the AHA skill verification and learning verification sheets per the Program Administration Manual (PAM).

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Review of core cases:

Review of mandatory skills

Use of AHA format

Passes a proctored written exam (recert)

Completes BLS skills post BLS Heartcode

Passes the AHA online Heartcode

INSTRUCTOR SIGNATURE: *Leah M Carlson*

UNIVERSITY OF COLORADO HOSPITAL

Advanced Cardiac Life Support

Or

Pediatric Advanced Life Support

(circle one)

Course Date 06.09.2014

Provider course _____ Recertification course ACLS/PALS

NAME of class participant: CATHERINE ERIZA, RN, BSN

This document confirms that the above student has met and completed the American Heart Association (AHA) guidelines as outlined by the AHA skill verification sheets. (PROAD, www.ahainstructornetwork.org, instructor manual)

The checking of the below boxes indicates that the student has completed the exact criteria outlined on the AHA skill sheets and serves as a single page replacement document.

Review of Core Cases:



Review of mandatory skills:



Use of AHA format



Passes a proctored written AHA evaluation



Mega-code



Instructor's signature Rebecca Davis Date 6/9/2014

* Signature reflects that the AHA instructor reviews and implements all of the outlined skills and criteria that the AHA has set forth.

UNIVERSITY OF COLORADO HOSPITAL

Advanced Cardiac Life Support

Or

Pediatric Advanced Life Support

(circle one)

Course Date 6/9/14

Provider course _____ Recertification course X

NAME of class participant: Callie Dewbre

This document confirms that the above student has met and completed the American Heart Association (AHA) guidelines as outlined by the AHA skill verification sheets. (PROAD, www.ahainstructornetwork.org, instructor manual)

The checking of the below boxes indicates that the student has completed the exact criteria outlined on the AHA skill sheets and serves as a single page replacement document.

Review of Core Cases:

Review of mandatory skills:

Use of AHA format

Passes a proctored written AHA evaluation

Mega-code

Instructor's signature Sexta M. Carlson Date _____

* Signature reflects that the AHA instructor reviews and implements all of the outlined skills and criteria that the AHA has set forth.



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COURSE DATE: 6-9-14

PROVIDER COURSE SKILL VERIFICATION: _____ RECERTIFICATION COURSE: _____

NAME OF COURSE PARTICIPANT: Shannon Haine

This document confirms that the above student has met and completed the American Heart Association (AHA) guidelines as outlined by the AHA skill verification and learning verification sheets per the Program Administration Manual (PAM).

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- Review of core cases:
- Review of mandatory skills
- Use of AHA format
- Passes a proctored written exam (recert)
- Completes BLS skills post BLS Heartcode
- Passes the AHA online Heartcode

INSTRUCTOR SIGNATURE: Rebecca Dan



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(CIRCLE ONE)

COURSE DATE: 6/9/2014

PROVIDER COURSE SKILL VERIFICATION: _____

RECERTIFICATION COURSE:

NAME OF COURSE PARTICIPANT: Ashley Hander

This document confirms that the above student has met and completed the American Heart Association (AHA) guidelines as outlined by the AHA skill verification and learning verification sheets per the Program Administration Manual (PAM).

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Review of core cases:



Review of mandatory skills



Use of AHA format



Passes a proctored written exam (recert)



Completes BLS skills post BLS Heartcode



Passes the AHA online Heartcode



INSTRUCTOR SIGNATURE: Rebecca Dawson

UNIVERSITY OF COLORADO HOSPITAL

Advanced Cardiac Life Support

Or

Pediatric Advanced Life Support

(circle one)

Course Date 6/9/14

Provider course _____ Recertification course

NAME of class participant: Hannah Harman

This document confirms that the above student has met and completed the American Heart Association (AHA) guidelines as outlined by the AHA skill verification sheets. (PROAD, www.ahainstructornetwork.org, instructor manual)

The checking of the below boxes indicates that the student has completed the exact criteria outlined on the AHA skill sheets and serves as a single page replacement document.

- Review of Core Cases:
- Review of mandatory skills:
- Use of AHA format
- Passes a proctored written AHA evaluation
- Mega-code

Instructor's signature [Signature]

Date June 9th 2014

* Signature reflects that the AHA instructor reviews and implements all of the outlined skills and criteria that the AHA has set forth.



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COURSE DATE: 6/9/14

PROVIDER COURSE SKILL VERIFICATION: _____ RECERTIFICATION COURSE: X

NAME OF COURSE PARTICIPANT: SONI LAURI

This document confirms that the above student has met and completed the American Heart Association (AHA) guidelines as outlined by the AHA skill verification and learning verification sheets per the Program Administration Manual (PAM).

The checking of the below boxes indicates that the student has completed the exact criteria outlined on the AHA Skill sheets and serves as a single page replacement document. By checking the boxes below, the AHA Instructor is confirming that on the above date, the above student met and completed all of the skill verification and exam (s) necessary to achieve completion in an AHA course on the above date.

- Review of core cases:
- Review of mandatory skills
- Use of AHA format
- Passes a proctored written exam (recert)
- Completes BLS skills post BLS Heartcode
- Passes the AHA online Heartcode

INSTRUCTOR SIGNATURE: *Sister M Calver*



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COURSE DATE: 6/9/14

PROVIDER COURSE SKILL VERIFICATION: _____

RECERTIFICATION COURSE:

NAME OF COURSE PARTICIPANT: Laura Petersen

This document confirms that the above student has met and completed the American Heart Association (AHA) guidelines as outlined by the AHA skill verification and learning verification sheets per the Program Administration Manual (PAM).

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Review of core cases:



Review of mandatory skills



Use of AHA format



Passes a proctored written exam (recert)



Completes BLS skills post BLS Heartcode



Passes the AHA online Heartcode



INSTRUCTOR SIGNATURE: Rebecca Davis

UNIVERSITY OF COLORADO HOSPITAL

Advanced Cardiac Life Support

Or

Pediatric Advanced Life Support

(circle one)

Course Date 6-9-2014

Provider course _____ Recertification course

NAME of class participant: Brenda Sutton

This document confirms that the above student has met and completed the American Heart Association (AHA) guidelines as outlined by the AHA skill verification sheets. (PROAD, www.ahainstructornetwork.org, instructor manual)

The checking of the below boxes indicates that the student has completed the exact criteria outlined on the AHA skill sheets and serves as a single page replacement document.

Review of Core Cases:

Review of mandatory skills:

Use of AHA format

Passes a proctored written AHA evaluation

Mega-code

Instructor's signature Julie McCala Date _____

* Signature reflects that the AHA instructor reviews and implements all of the outlined skills and criteria that the AHA has set forth.

UNIVERSITY OF COLORADO HOSPITAL

Advanced Cardiac Life Support

Or

Pediatric Advanced Life Support
(circle one)

Course Date 6/9/14

Provider course _____ Recertification course

NAME of class participant: Miranda Samra

This document confirms that the above student has met and completed the American Heart Association (AHA) guidelines as outlined by the AHA skill verification sheets. (PROAD, www.ahainstructornetwork.org, instructor manual)

The checking of the below boxes indicates that the student has completed the exact criteria outlined on the AHA skill sheets and serves as a single page replacement document.

Review of Core Cases:

Review of mandatory skills:

Use of AHA format

Passes a proctored written AHA evaluation

Mega-code

Instructor's signature

Rebecca Davis

Date

6/9/2014

* Signature reflects that the AHA instructor reviews and implements all of the outlined skills and criteria that the AHA has set forth.



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COURSE DATE: 6/9/14

PROVIDER COURSE SKILL VERIFICATION: _____ RECERTIFICATION COURSE: _____

NAME OF COURSE PARTICIPANT: JESSICA WHEELER

This document confirms that the above student has met and completed the American Heart Association (AHA) guidelines as outlined by the AHA skill verification and learning verification sheets per the Program Administration Manual (PAM).

The checking of the below boxes indicates that the student has completed the exact criteria outlined on the AHA Skill sheets and serves as a single page replacement document. By checking the boxes below, the AHA Instructor is confirming that on the above date, the above student met and completed all of the skill verification and exam (s) necessary to achieve completion in an AHA course on the above date.

- Review of core cases:
- Review of mandatory skills
- Use of AHA format
- Passes a proctored written exam (recert)
- Completes BLS skills post BLS Heartcode
- Passes the AHA online Heartcode

INSTRUCTOR SIGNATURE: Celena Brenden