

CONTINUING EDUCATION FORM

NAME:

Certification No. _____

Expiration Date: _____

DATE AND TIME OF PROGRAM

PLACE	DATE	TIME BEGINNING	TIME ENDING
		0800	1500

CATEGORY I (Mandatory) (As stipulated in Arizona Administrative Code R9-25-406 [01-03-04])

CE HOURS
GRANTED

_____ 1. Cardiopulmonary resuscitation and advanced emergency cardiac life support. (7 Hrs)

CATEGORY II (Electives) (As stipulated in Arizona Administrative Code R9-25-406 [01-03-04])

_____ 2. Completion of the Arizona ALS Refresher. (Maximum 48 hours)

_____ 3. Passing the Arizona ALS refresher challenge examination. (Maximum 12 hours)

_____ 4. Training in single subject for EMT-I, EMT-P course, or the Arizona ALS Refresher.
(Maximum 20 hours)

_____ 5. Teaching in single subject for EMT-I, EMT-P course, or the Arizona ALS Refresher.
(Maximum 20 hours)

_____ 6. Training related to skills, procedures, or treatments authorized under R-9-25 Article 8.
(Maximum 20 hours)

_____ 7. Teaching related to skills, procedures, or treatment authorized under R-9-25 Article 8.
(Maximum 20 hours)

_____ 8. Training in current developments, skills, procedures, or treatments related to the practice
of emergency medicine or the provision of emergency medical services. (Maximum 20 hrs)

_____ 9. Participation in or attendance at meetings, conferences, presentations, seminars or lectures
designed to provide understanding of current developments, skills, procedures, or treatments
related to the practice of emergency medicine or the provision of emergency medical
services. (Maximum 20 hours)

_____ 10. Trauma training. (Maximum 16 hours)

___8___ 11. Training in pediatric emergency care. (Maximum 16 hours)

DESCRIPTION

INSTRUCTOR(S) / COORDINATOR(S)

Mark Barbee, CEP

This is to certify that the information provided above is true to the best of my knowledge.

Mark Barbee