SPENCER HOSPITAL
AMERICAN HEART ASSOCIATION
TRAINING CENTER
POLICY-PROCEDURE MANUAL
JANUARY 2009
CHAPTER 1

Training Center (TC) – Network

Organization

The Spencer Hospital Training Center (further referred to as SHTC) plays an important role in meeting the mission ("to reduce disability and death from cardiovascular disease and stroke") of the American Heart Association (further referred to as AHA). The SHTC is an independent contractor of the AHA designed to provide basic and/or advanced adult and pediatric life support training courses to the communities it serves. It promotes the implementation of the Chain of Survival (early access, early CPR, defibrillation, early advanced life support) through education and training. The SHTC develops its network within the boundaries of the rules and regulations of the AHA and SHTC through the establishment of Training Sites (further referred to as TS). The TS will be responsible to the community and the SHTC, for further training and education efforts. The SHTC and TS's may contain Regional Faculty, Course Directors, Instructor Trainers, Instructors, and Providers.

Definitions

AHA Materials: "AHA Materials" shall mean all ECC materials published by the AHA, including, but not limited to, textbooks, instructor's manuals, tests, keys, evaluation forms, newsletters, course completion cards, and course participation cards.

Emergency Cardiovascular Care (ECC): All aspects of assessment and treatment of victims of respiratory and/or cardiac emergencies and stroke including basic and advanced life support intervention.

Training Center: An organization which signs a contract with the AHA to develop and maintain ECC training networks in one of more of the following AHA ECC programs: ACLS, BLS, and PALS.

Courses: "Course" or "Courses" shall mean the approved ECC courses listed below in which Course Cards will be distributed.

A. Instructor Core Course
   B. Basic Life Support
      Provider Course(s)
         Heartsaver (Combination, Adult only, Infant/child only)
         Healthcare Provider
         Heartsaver AED
         Heartsaver CPR in Schools
         CPR for Family and Friends
         Heartsaver First Aid (may include Adult, child, Infant CPR and AED and Adult First Aid)
         Heartsaver Pediatric First Aid (may include Adult, Child, Infant CPR and AED and Pediatric First
Course Cards: "Course Cards" shall mean those cards bearing the AHA logo which TC distribute to students pursuant to Program Guidelines to indicate that the student participated in or successfully completed a Course.

Geographic Territory: The "Geographic Territory" shall mean including but not limited to North West Iowa.

Instructors: An individual who has received Provider and Instructor training through the AHA and who is qualified to teach Provider Courses to other individuals.

Program Guidelines: "Program Guidelines" shall mean the then current Guidelines 2006 for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care: International consensus on science (Guidelines 2006) and the ECC Program Administration Manual dated October 1, 2008 as they may be amended and/or supplemented by the AHA from time to time.

Training Sites: Organizations engaged or authorized by SHTC to teach AHA ECC Courses and for whom SHTC will process course rosters.

National ECC Committee: Volunteers with expertise in science, education, business and administration; four subcommittees - BLS, ACLS, PEDS, PROAD; prepares scientific and educational guidelines for emergency cardiovascular care.

Regional ECC Committee: Responsible for implementing and overseeing regional ECC training programs and the Chain of Survival in the community as well as ensuring that the ECC Training Network complies with AHA National ECC polices and procedures.

Area Task Force: Responsible for implementing and overseeing the AHA area ECC training programs and the Chain of Survival in the community and for ensuring Training Network compliance with AHA National ECC policies and procedures under the direct supervision of the Regional ECC Committee.

National Faculty: A volunteer ECC Instructor who is a member of the Regional ECC Committee. He/she is responsible for communication between the National ECC Committee and the Regional ECC Committee.

Regional Faculty: An AHA Instructor who, because of exemplary service to the
ECC Program, has been appointed by the Regional ECC Committee to the Regional Faculty. He/she serves as a primary resource for quality assurance in the ECC Program.

*TC Faculty:* Responsible for the quality assurance and educational process of the SHTC. All TCs should have at least one TC Faculty member in each discipline the SHTC teaches. The TC Faculty member must be a Lead Instructor in the SHTC.

**TC Coordinator Responsibilities**

- Serve as a liaison to the AHA.
- Is a representative and staff member of the SHTC.
- Is recommended attain Instructor status in at least one ECC discipline.
- Coordinate Chain of Survival activities within the resources of the SHTC.
- Capable of administrative support to ensure performance or management of all SHTC responsibilities.
- Encourage volunteer activities to support the Chain of Survival activities.
- Monitor all record keeping as required in the SHTC contract with the AHA and submit the appropriate reports to the AHA in a timely fashion.
- Monitor educational activities in the SHTC itself.
- Coordinate Instructor monitoring.
- Responsible for maintenance of educational materials and equipment.
- Serve as a resource and mentor for the TS Coordinators.
- Assist in monitoring of TS's.
- Update the SHTC Network with the latest information on AHA courses, science guidelines, policies and procedures (within 21 days of receipt).
- Submit a completed annual self-review form to the regional office.
- Attend and actively participate in SHTC's initial and subsequent site review(s).
- Attend SHTC coordinator meetings and/or forum as offered.
- Resolve complaints/problems related to SHTC.

**Course Director Responsibilities** (PALS/ACLS) - A course director is an AHA Instructor appointed by a TC to be responsible for course content and faculty assignments.

- The prerequisite for AHA BLS/ACLS/PALS Course Director is current AHA Instructor status with 2 years experience or teaching of eight courses in the discipline he/she will be leading. This Course Director is appointed by the TC or TS coordinator.
- Assist SHTC/TS in adhering to AHA and SHTC guidelines.
- Select course faculty.
- Monitor appropriateness of educational presentations and supplementary materials.
- Supervise student performance.
- Be readily available during the course to answer questions.
- Monitor Instructor performance.
- Monitor Instructor candidates to become Instructors.
- Solve any course disputes regarding course material, Instructor behavior, and completion issues in accordance of AHA and SHTC guidelines.
• Identify and recommend potential Instructors for Instructor Courses.
• Cultivate and mentor SHTC Instructors, new Instructors and potential candidates for future Instructor/Course Director/TCF positions.
• Remediate or oversee remediation of students during the course.
• Serves as an Instructor as needed.

**Lead Instructor/Course Coordinator Responsibilities**

• Must be an Instructor in the discipline in which he/she is coordinating.
• Work with the Course Director and staff of the sponsoring institution to ensure quality, select the faculty and site, assemble necessary equipment, choose course materials, and approve the agenda.
• Register students at the start of the course.
• Be present throughout the course to answer student questions, faculty questions or issues, and resolve logistical issues.
• Serve as a liaison between the Course Director and the students and faculty.
• Monitor Instructor performance in addition to general supervision by the Course Director.
• Monitor educational presentations for quality and adherence to AHA guidelines.
• Monitor student performance and evaluation by Instructors.
• Monitor Instructor candidates after an Instructor Course.
• Remediation of students.
• Cultivate and mentor SHTC Instructors, new Instructors and potential candidates for future Instructor/Course Director/TCF positions.
• Resolve disputes that may arise during a course in accordance with the SHTC resolution policy and the AHA Dispute Resolution Procedure.

**Instructor Responsibilities** (Unless otherwise indicated, the following information applies to all three disciplines) An AHA Instructor teaches provider classes in basic life support (BLS), advanced cardiac life support (ACLS) and pediatric advanced life support (PALS/PEARS). AHA defines the roles and responsibilities of Instructors to ensure consistency and quality but an AHA Instructor is not an employee or agent of the AHA.

• Fulfill all responsibilities stated in the Instructor Manual specific for that Instructor's discipline.
• Have a firm working knowledge of the current provider course materials, which is maintained by teaching on a regular basis, attending Instructor updates, and reading the informational materials published by the SHTC.
• Instruct students concerning the objectives of the particular course and evaluate students' progress toward those objectives.
• Assist with Instructor courses, if applicable.
• Transmit data regarding training activities to the primary TC, if teaching for more than one TC.
• Purchase materials from designated AHA materials supplier (if class is not sponsored by SHTC)
• Attend one Instructor retraining every two years to remain current as an instructor.
• Promote the Chain of Survival.
• Teach at least four courses in two years - ACLS, PALS, PEARS, and BLS.
• Provide SHTC with all information required to align with SHTC.
• Remain current with the latest information on AHA courses, science guidelines, and policies and procedures.
• Mail a completed SHTC participant roster to the SHTC or affiliated Training Site (TS) within two weeks of completion of the course.
• Attend Instructor meetings and/or updates as required by the AHA, Iowa ECC, SHTC or affiliated TS.
• Follow SHTC guidelines for cleaning and decontamination of manikins.
• Inform SHTC of status changes (i.e. name, address, telephone number). Failure to comply will jeopardize the Instructor’s affiliation with the SHTC.
• Use complete Instructor identification on all correspondence and rosters.

Training Center Faculty Responsibilities – Training Center Faculty are appointed by the SHTC and serve only in the TC from which they are appointed. A TCF member’s status is not transferable between TCs. A TCF moving from one TC to another must reapply for TCF status in their new TC.

• Serve as an expert resource on ECC issues and protocols to SHTC, Instructors and staff.
• Conduct Instructor Course for SHTC while adhering to AHA guidelines. (1 in 2 years)
• Cannot serve as Regional Faculty member for his/her own TC.
• Act as change agent to facilitate transitions in the ECC Program.
• Support Chain of Survival initiatives in the community.
• Responsible for TCF development by conducting updates/training for TC.
• Oversee quality assurance at the TC level.
• Monitor ‘Instructors’ teaching abilities and completed required documentation in our area.
• Teach at least one Instructor or Instructor Renewal Course every two years.
• Monitor Course Directors, Lead Instructors, and Instructors.
• Cultivate and mentor SHTC Instructors, new Instructors and potential candidates for future Instructor/TFC positions.
• Promote the Chain of Survival.
• May act as mentor to TC Coordinator.

Instructor Termination

The SHTC holds the right to terminate the privileges of any Instructor, Course director, Lead Instructor/Course Coordinator, Regional Faculty, Training Center Faculty, Training Site Coordinator, or Affiliate Training Site, at this TC, if any of the following situations develop:

• Any infraction of AHA guidelines.
• Falsification of AHA or TC documentation (i.e. illegal issuance of cards).
• Inappropriate or unprofessional behavior during an AHA course or function.
• Two poor evaluation ratings in a two-year period.
- Lapse of recognition period.
- Failure to meet the qualifications for renewing of Instructor, Training Center Faculty, Course Director, Lead Instructor/Course Coordinator.

**Responsibilities of the Spencer Hospital TC Advisory Committee (Future Oriented)**

The SHTC Advisory Committee shall be comprised of one representative from each TS, plus one representative from BLS, ACLS, and PALS from the Spencer Hospital Training Center. Each individual will have one vote.

**Sub-Committees (Future Oriented)**

Once the network is in place, standing committees will be created. They will include at least the following: Grievance Committee, Communications Committee, and the Community Outreach Committee. Others may be created on an as needed basis. There will also be a BLS Subcommittee, ACLS Subcommittee, and a PALS Subcommittee to deal with issues specific to that discipline.

Ad hoc committees will be initiated at any time necessary for any reason. Consisting of volunteers and or appointed people as necessary. The length of time the ad hoc committee will meet will be determined by the requirements of the committee and will continue until their objectives are complete.

**Spencer Hospital TC Staff Responsibilities**

Spencer Hospital ACLS/PALS Coordinator:
- Assist in monitoring TS’s.
- Assist in monitoring timely return of correspondence, including cards.
- Assist in maintenance of educational materials and equipment.
- Serve as a resource concerning ACLS and PALS issues/concerns.
- Assist in OA activities of the TC.

Spencer Hospital BLS Coordinator:
- Assist in monitoring TS’s.
- Assist in monitoring timely return of correspondence, including cards.
- Assist in maintenance of educational materials and equipment.
- Serve as a resource concerning BLS issues/concerns.
- Assist in OA activities of the TC.

Spencer Hospital Secretarial Support:
- Receive program applications.
- Set up course files.
- Input class/instructor data.
• Process cards.
• Reserve/check in/check out equipment.
• Maintain instructor files.
Chapter 2

Training Center Administration

Instructor Records

The following information must be submitted for every instructor aligned with the SHTC:

- Name and title
- Level of education (RN, MD, EMT, RRT, LPN, etc.) if applicable
- Mailing address at home and/or work
- Telephone numbers at home and/or work
- E-mail address, if applicable Instructor/TCF Candidate Application
- Date of initial recognition (training, course, appointment, etc.)
- Date of last renewal
- Copy of current Instructor card, front and back with signature
- Documentation of Instructor activity
- Instructor/TCF Renewal Checklist
- Monitor Evaluation Form completed by a Training Center Faculty, ACLS/PALS
- Course Director, appropriate Regional Faculty or a person designated by the TC since last renewal
- Documentation of administrative actions taken (when applicable)
- Instructor/TCF Record Transfer Request (if applicable)

Course Records

The following information must be submitted to the SHTC for course file maintenance for every course conducted:

1. Provider Courses
   - Course outline/agenda with faculty assignments.
   - Completed LEGIBLE course roster to include names of all assisting instructors, their TC affiliation, and all student names with appropriate documentation of course completion/not yet completion.
   - Course evaluations or summary.
   - Any and all documentation relating to problem resolution.

2. Instructor Courses
   - Course outline/agenda with facility assignments.
   - Completed LEGIBLE course roster to include names of all assisting instructors, their TC affiliation, and all student names with appropriate documentation of course completion.
   - Any and all documentation relating to problem resolution.
   - For new instructors attending the course:
     - A letter of recommendation from regional or course faculty member recommending the candidate become an instructor. For BLS Instructor, the letter may be written by a person knowledgeable of the candidate’s teaching abilities.
     - Copy of completion of the Core Instructor Course certificate.
     - Monitor/Evaluation Form completed by BLS TCF
     - Need to designate where they will align.
NOTE: The Training Site may submit this information to the SHTC by using the appropriate forms provided or providing a print out from its database.

**Miscellaneous Records**

The SHTC will keep the following documents filed by date, and easily accessible for review:

- Copy of current Training Site Agreement.
- All memos received from the AHA and SHTC.
- Proof that the SHTS provided copies of all appropriately designated memos, information regarding availability of new and revised training materials and most recent ECC materials order form to all Instructors, within 21 days of receipt from the SHTC office.
- All correspondence from local and affiliate ECC committee and AHA Program Office.

**TC Training Course fees**

- The TS or individual Instructor may charge appropriate fees for courses offered.
- Card fee structure will be evaluated on an annual basis and changes will be made at that time.

**Card Issuance Procedures**

- Cards will be issued only with a completed roster and the cards distributed will equal the number of participants on the roster.
- Initially the cards will be sent to the TS Coordinator or Lead Instructor to distribute to the course participants.
- All mutilated cards must be returned to the TC/TS Coordinator for replacement.
- When "duplicate" cards are required, the card will be marked "DUPLICATE" on the front of the card. The roster will be marked to indicate the participant received a duplicate card.
- Course participants will be charged a fee for duplicate cards.
- All AHA course cards are valid for two years through the end of the month in which the card was issued. The AHA does not consider a cardholder's status current beyond the recommended renewal date.

**Training Sites (TS)**

If an instructor, group of instructors, and/or a physical site fits any two of the following description points; it may apply to become a Training Site (TS) of the SHTC.

- Has its own equipment.
- Develops, advertises, and conducts most, if not all, courses as a location separate from the SHTC.
- Is a separate business, organization, etc. from the SHTC.
- Relies on the SHTC primarily for record keeping and/or processing course rosters for issuance of Course Completion/Participation cards.

If the Training Site's need for course roster processing, instructor monitoring, etc. exceeds the level of service which the SHTC can provide with quality, the SHTC might consider encouraging the Training Site to contact the affiliate office for information on becoming a TC.

**TS Criteria**

- The TS may be a for-profit or not-for-profit organization.
• The TS must be in compliance with the AHA standards upon application to be considered as a TS.
• The TS must perform its duties in a manner consistent with the SMH TC and AHA.
• The TS will use and provide current AHA ECC training materials to each participant for use before, during and after the course.
• The TS has sufficient administrative capability to support the training network it services.
• The TS will offer specific AHA resuscitation courses.
• The TS will assist the SMH TC in keeping its training network updated with the latest information on AHA courses, scientific guidelines, policies, procedures, newsletters, and updates.
• The TS must have access to adequate equipment and an adequate number of AHA Instructors to conduct AHA courses independently.

**TS Application** - It is recommended that the TC have a signed letter of agreement/understanding with each of its training sites.

The completed application form will be reviewed by the SHTC:

- If the Application is complete and consistent with the criteria for TS status, potential dates for an initial site review will be confirmed with the applicant. The reviewing team will consist of one to three SHTC staff members. The applicant will be informed of the decision in writing within 30 working days of the review.
- If the Application is not accepted, the applicant will be notified in writing of the SHTC’s decision and rationale. Copies of the documents will be retained with the applicant’s packet in the SHTC’s files for a minimum of two years.
- When the applicant and the SHTC sign a Contractual Agreement, the applicant is designated a Training Site (TS).
- The original agreement, once signed by the TS Coordinator (and any managing authority) and the TC Coordinator will be maintained at the SHTC. A signed copy must be kept on file at the TS.
Adding a program

To add a discipline, a currently designated TS must submit a completed Application and Contract with the appropriate attachments to the SHTC. The Application will be reviewed as above.

Agreement Renewal

- The Agreement must be renewed on an annual basis.
- Once the original site visit is complete and the Agreement has been signed, a review will be conducted once a year for the first two years of the Agreement.
- At the end of two successful annual site reviews without any outstanding concerns, site reviews may be conducted every two years. However, the SHTC reserves the right to conduct an onsite review at any time.

TS Monitoring and On-Site Reviews

The TS review will include at least the following:

- Review of the Instructor records (originals must be forwarded to SHTC).
- Review of all record keeping and documentation related to implementation of ECC course and TS administration.
- Review of course outlines, educational materials, and equipment used for AHA course.
- Review of adherence to all AHA national and local guidelines.
- Review of quality assurance documentation and procedures.
- Review of customer service records and grievances, if any.
- A review must be completed prior to entering into a contractual agreement.
- Once the Agreement has been signed, a review will be repeated every year for two years. At the end of two successful site reviews, the TS may be reviewed every two years, if no significant issues were identified.
- If problems were identified, the TS may require annual or even more frequent reviews.
- Course monitoring may be incorporated into the review, but need not occur at the same time.

TS Coordinator Responsibilities

The TS Coordinator is a representative of the SHTC. Choosing the coordinator is the responsibility of the TS which is obligated to determine personnel requirements. The following is a list of duties often performed by the coordinator:

- Serve as a liaison between community Instructors and the TC and AHA.
- Assist in updating the training network as information becomes available.
- Attend SHTC Committee meetings and/or forums as offered to remain current.
- Coordinate courses provided at the TS.
- Comply with the AHA and SHTC Problem Resolution procedures when working to resolve complaints/problems documented by AHA staff, class participant, instructor regional faculty or SHTC staff.
- Monitor educational activities of the TS.
• Work with the SHTC to plan and participate in Chain of Survival events.
• Involve the SHTC in Instructor performance or other issues for QA purposes.
• Develop and implement QA plan for monitoring Instructors.
• Submit Participant Rosters, agendas, and Post Course Evaluations, and/or completion of biannual Training Activity Report form according to the timeline given by the SHTC.
• Set course fees, if applicable.
• Submit a completed annual self-review form according to the timeline given by the SHTC.
• Attend and participate in the TS’s initial and subsequent site reviews.
• Keep the instructor records and course records easily accessible for review. This information is to be kept for three years.

Quality Assurance

• The TS must follow the guidelines of the AHA.
• The TS will assist in distributing information from the SHTC.
• The TS will use the most current AHA training materials.
• The TS has the staff resources to complete the programs scheduled.
• The TS complies with the grievance policies and procedures outlined in the SHTC Administrative Manual.
• The TS follows the SHTC’s quality assurance plan
• The TS supports Chain of Survival activities in the community.
• The TS may accept and maintain non-employee and volunteer instructors.
• The TS submits all required record information to the TC according to the timeline given by SHTC.
• The TS monitors any equipment used in training for cleanliness and inappropriateness of use.
• The TS monitors/utilizes space requirements in accordance with AHA’s recommendation.
• The TS will have evaluations available for participants for every AHA course offered.

TS Training Course fees

• TS may charge appropriate fees for courses offered.
• Card fee structure will be evaluated on an annual basis and changes will be made at that time.

Activity Reports

• A Training Activity Report will be required from each TS two times per year to provide data for the biannual reports the SHTC must submit to the AHA.
• These reports will be due at the SHTC no later than June 15 and December 15 of each year.
• This report should include figures for the reporting period **only**.
The form may be found in Chapter 5.
Submission of the reports by the "due date" is one of the TS's responsibilities as outlined in the Agreement signed by each TS. Failure to comply will jeopardize the TS's Agreement.

**TS Decision to Close**

- The TS must give 60 days written notice to the SHTC before closing or not renewing its contract.
- All final course reports must be submitted to the SHTC.
- The TS must notify all instructors, in writing, of the plan to close at least 45 days in advance.
- All instructors must be advised to align with another primary SHTC; they must be given a current list of other SHTC's in the area.
- The TS must ensure that its records are updated and complete.
CHAPTER 3

Course Information

AHA ECC Course Criteria

An AHA course in emergency cardiovascular care must meet the following criteria before a course completion/participation card may be issued and the course referred to as an AHA course. The intent of this policy is to ensure consistent quality in AHA courses wherever they are taught.

- The course must be taught in accordance with the guidelines and core curriculum set forth in the most current editions of the AHA course textbook(s) and/or Instructor's manual(s).
- Each student must have the current appropriate course textbook readily available for use before, during, and after the course. Textbooks are designed for individual use and are an integral part of the students' education before, during, and after the course. Students may reuse their textbooks during renewals until new guidelines are published.
- The most current edition of AHA course materials must be used.
- The course Instructor(s) must be a current AHA-recognized Instructor. Specialty faculty with expertise in a particular content area may assist AHA Instructors in advanced life support courses.
- A course evaluation form must be used in each ECC course to solicit feedback from students on course content and instructors. The SHTC can use the AHA Course Evaluation Form or prepare its own form containing the same information. Each form must indicate a mechanism for the student to send the form to the Regional ECC Office and the National Center ECC Department.
- After successful course completion, the appropriate AHA course card must be issued.

Smoking Policy

Smoking is prohibited during all AHA ECC training programs.

Continuing Medical Education/Continuing Education Units

The National Center ECC Department does not issue continuing medical education (CME) or continuing education units (CEUs) for ECC courses or conferences. It is the responsibility of the sponsoring institution to apply to the appropriate professional organization(s) for approval to issue CEUs.

Course Equipment

A required equipment list for each course is included in the course Instructor's manual.

The use of manikins and equipment that allow demonstration of core skills (i.e., airway management, jaw thrust, correct hand placement, etc) is required for all AHA courses.
Manikins and contaminated equipment must be decontaminated according to the manufacturer's recommendations or the most recent CDC recommendations.

The AHA neither endorses nor recommends any particular brand of manikin. The decision on which manikin to use is the responsibility of the TC or Course Director.

All equipment used must be in proper working order and good repair.

**Provider Courses**

Provider Course Descriptions - Please see the AHA ECC Course Matrix 2008 for details.

**Provider Course Faculty**

AHA courses must be taught by AHA Instructors with current Instructor status in their specific discipline. Specialty Faculty (i.e., an anesthesiologist who teaches airway management) may assist in teaching advanced level courses (ACLS, ACLS for Experienced Providers, PALS, PEARS) at the discretion of the SHTC and with prior approval of the Course Director. The Course Director or Lead Instructor is responsible for monitoring Specialty Faculty to ensure that they follow AHA guidelines. An AHA Instructor in the appropriate discipline must perform the formal assessment or testing of students.

Each AHA course must have a Course Director and/or Lead Instructor. If the Course Director is not physically present during the course, a Lead Instructor must be present on-site throughout the course. The Course Director or Lead Instructor is responsible for course logistics and quality assurance.

**Provider Course Length: Agenda/Ratio**

The course educational objectives must be met according to the guidelines in the course Instructor's manual. All core course content must be included. Course Directors can structure courses of different lengths and formats based on the experience and learning needs of the students. (See the Instructor's manual for minimum time requirements and sample agendas for each course).

The focus should be on interactive learning with hands-on skills practice. Maximum time should be allowed for hands-on manikin skills practice and skills evaluation. All students must have an opportunity to practice their skills under the supervision of an Instructor who will provide ongoing feedback.

The course must adhere to the student-to-instructor and student-to-manikin ratios outlined in the Instructor's manual.

Participants must attend all course sessions (lectures and stations) as established by the Course Director.
Provider Course Completion

Successful course completion is achieved when a student meets the course cognitive and skills demonstration requirements. Instructors should use review and remediation techniques to help a student achieve course completion.

Provider Course Student Assessment

Provider Course Written Examination

The most current version of the written examination for an AHA course must be used. Use of another written examination in a course in which AHA course completion cards are issued is not permitted and will jeopardize the AHA SHTC Agreement. The titles and dates of issuance of all current examinations are posted on the AHA Web site.

Written examinations may not be altered in any way. Problems with specific questions should be referred to the Service Center, which will notify the National Center ECC Department.

To accurately measure students' understanding of the course material, the written examination is given individually in a proctored setting. The only reference materials that can be used during an examination are a copy of the algorithms and/or the current edition of the Handbook of Emergency Cardiovascular Care for Healthcare Providers (ACLS and PALS only). Students must score 84% or higher on the Provider Course written examination for course completion.

Some ECC examinations are available in Spanish and other languages. Requests for these examinations should be made to the District or Regional Service Center, which will obtain copies from the National Center ECC Department.

Provider Course Skills Demonstration/Case Scenarios

Each student will be evaluated for skills proficiency and must demonstrate proficiency in all core skills of the particular course. Students in ACLS, PALS, and PEARS Courses are not required to have a current BLS Healthcare Provider (HCP) card, but they are expected to be proficient in BLS HCP skills. Each student will also be evaluated for performance as a team leader in each ACLS, PALS, PEARS evaluation station.

Provider Course Student Remediation

The goal of an AHA course is to prepare students to deliver effective resuscitation. Some students will need remediation in deficient areas both during and after the course.

Remediation may be accomplished by monitoring and mentoring the student to identify and resolve weaknesses, requesting additional skills practice, assigning additional reading, referring the student to other courses, or having the student retake the examination or assessment stations or the entire course. For more information on remediation, see the course Instructor's manual.

If a student scores less than 84% on the first written examination, he or she must take a different version of the entire examination for successful course completion.
Students who cannot be successfully remediated through particular sections of the course (or examination) at the time of the course will not receive a course completion card until those sections of the course have been completed satisfactorily.

Students who require remediation must achieve remediation within 30 days of the last day of the original course. If a student does not achieve remediation within 30 days, the course is considered incomplete, and a course card will not be issued.

**Provider Renewal Procedure**

The recommended renewal interval for all AHA courses is two years. Providers who intend to take a renewal course must show a current Provider card as entrance into a renewal course. Renewal courses may be conducted independent of or attached to a full Provider and/or Instructor Course.

The Course Director/Lead Instructor is responsible for determining the type of course (initial or renewal) a student should take if he or she does not have a current Provider card.

Students who present an expired Provider card or do not possess a Provider card at a renewal course will not be given the option of remediation. They will need to repeat the entire Provider Course if they cannot successfully meet the course completion requirements when initially evaluated.

**Laerdal HeartCode Interactive Learning System**

The Laerdal HeartCode Interactive Learning System has been approved by the AHA, and Laerdal Medical Corporation has been licensed to provide this interactive training.

HeartCode is a CD-ROM-based self-learning system for the AHA ACLS and BLS (Healthcare Provider and Heartsaver AED) Courses. Students review the reference material, and their skills are evaluated by the computer. Upon successful completion of the program, students receive an AHA course completion card.

For more information, contact the Laerdal Medical Corporation HeartCode Support Call Center at 1-877-LAERDAL (523-7325).

**Instructor Courses**

An AHA Instructor Course is designed to teach the methods needed to effectively instruct others in resuscitation courses. The AHA recommends that Instructors be at least 16 years of age.

**Instructor Candidate Selection**

The ideal candidate will:

- Be motivated to teach
- Be motivated to facilitate learning
- Be motivated to ensure that students acquire the skills necessary for successful course completion
- View student assessment as a way to improve individual
knowledge and skills

_Instructor Course Prerequisites_

- **ACLS/PALS:** Current Provider status in the discipline the candidate wishes to teach. (PALS certification is sufficient for PEARS)
- **BLS:** Current Healthcare Provider status
- A minimum score of 84% on the written examination during Provider training without remediation
- A completed Instructor Application must be provided to the Course Director of the Instructor Course
- A letter of recommendation from a current BLS RF or TC Faculty member stating reasons for supporting the candidate's desire to become an Instructor
- Once certified register on Instructor Network

_Instructor Course Faculty_

All AHA Instructor Courses must be directed by Training Center or Regional Faculty. SHTC Faculty teach BLS, ACLS and PALS Instructor Courses. The SHTC or Regional Faculty must be present throughout the entire Instructor Course. Instructor Course Faculty must be current AHA Instructors in the discipline being taught.

Assisting Instructors must be current AHA Instructors in the discipline being taught.

_Instructor Course Content / Materials_

The Instructor manuals contain core course content. To be considered an AHA course, the core curriculum must be followed in accordance with the current course Instructor's manual.

All course Instructor candidates must own the most current edition of the required AHA Provider textbooks and Instructor's manuals for the courses they intend to teach and must have access to the appropriate tool kits.

_Instructor Course Completion_

Candidates must demonstrate satisfactory performance of lectures, scenarios, skills presentations, proper use of video-based learning, and skills in student testing, assessment, and remediation.

Candidates must demonstrate a thorough knowledge of course organization, course content, and Instructor responsibilities as well as AHA guidelines for the specific discipline.

BLS Instructor candidates must achieve a score of 84% or higher on the BLS Instructor Course written examination.

_Instructor Card Issuance Requirements_

- The Instructor candidate must successfully complete the Instructor Course as outlined in the course Instructor's manual.
If the candidate completes a course sponsored by a TC other than his or her primary TC, the primary TC must be notified.

- Within 1 year of successfully completing the Instructor Course, the Instructor candidate must successfully demonstrate his or her teaching skills while being monitored during a Provider or Provider Renewal Course. If monitoring is not accomplished within 1 year, the Instructor candidate must repeat the Instructor Course. For ACLS and PALS Instructor Courses, the Course Director can determine whether to grant an extension for this requirement. Experienced AHA Instructors are encouraged to mentor new Instructors during both the Instructor Course and monitoring.

- A current AHA BLS Regional Faculty or TC Faculty must do monitoring for BLS candidates. TC Faculty, or RF monitor ACLS and PALS Instructor candidates. The person who monitors the candidate must complete the Instructor Monitor Form. If a deficiency is noted during monitoring, the reviewer may conduct remediation by using anyone or a combination of the following:
  - For a deficiency in skills performance, the candidate may be remediated privately and then successfully demonstrate and teach the skill during the same course or a future course.
  - For a deficiency in content knowledge, the candidate may be remediated privately or asked to review the current Provider's manual and then successfully teach the content during the same course or a future course.
  - For a deficiency in teaching ability or quality, the candidate may be mentored by teaching with the Lead Instructor, Course Director, Instructor/IT, or TC Faculty member and then monitored again in a future course. The candidate may also be required to repeat the Instructor Course before being monitored again.
  - For a deficiency in content knowledge and/or skills performance, the Lead Instructor, Course Director, Instructor/IT, or TC Faculty member may require the candidate to take an entire Provider or Provider Renewal Course before being monitored again.

- Within 30 days of receiving the completed monitor form, the primary TC must issue an Instructor card. The issue date of the card is the month and four-digit year in which the Instructor Course was completed.
- The card expires two years from the issue date.

Instructor Renewal Criteria
Instructors may renew their status in one of the following three ways:

1. Meet all of the following criteria:
   a. Maintain current Provider status as evidenced by current Provider card OR demonstration of acceptable Provider skills and successful completion of the Provider written examination. If the second option is chosen, successful completion must be documented on the Instructor or TCF Renewal Checklist. A new Provider card may be issued at the discretion of the TC or upon request of the renewing Instructor but is not required by the AHA.
   b. Teach (be present for) a minimum of four courses in two years. This requirement can only be waived by the Regional ECC Committee or Area Task Force in rural areas in which a limited number of courses are offered. TCF members must also teach one Instructor or Instructor Renewal Course every two years.
   c. Attend updates as required within the previous two years. Updates may address new course content or methodology and/or review TC/local ECC/national ECC information.
   d. Present documentation of successful teaching ability as monitored in the preceding two years. Monitoring after the initial Instructor Course does not satisfy this requirement.
   e. BLS and Heartsaver Instructors shall successfully complete the current BLS Instructor Exam with a score of 84% or higher.

2. Successfully complete an Instructor Renewal Course with the following components:
   a. Demonstration of Provider skills, including successful completion of the written Provider Course examination
   b. Completion of BLS Instructor examination with a score of 84% or higher (BLS Instructors only)
   c. Review of TC/local ECC/national ECC information
   d. Teaching demonstration to satisfy monitoring requirements
   e. Teach (be present for) a minimum of four courses in two years (teaching each day of a two day class counts per day for teaching credit). This requirement can only be waived by the Regional ECC Committee or Area Task Force in rural areas in which a limited number of courses are offered.

3. Successfully complete an entire Instructor Course, including monitoring of teaching performance.

If deficiencies in content knowledge, skills performance, or teaching ability are noted, the Instructor may be remediated.

If renewal criteria are not satisfied within the card expiration period, the Instructor must repeat the initial Instructor recognition process.

Revocation of Instructor Status

The SHTC is authorized to revoke an Instructor's teaching privileges at that SHTC.
CHAPTER 4

Legal Considerations

Each TS will continue as a distinct self-supporting business entity, unless other arrangements are made in writing with the SHTC. The SHTC will not become financially responsible with any of the TS's in any way.

Each TS is responsible to the TC to provide high quality, educational programs.

Americans With Disabilities Act

Each Training Site is responsible for complying with all applicable laws, rules, and regulations. This includes but is not limited to the Americans With Disabilities Act. Anyone who offers a service such as a CPR course in public place such as an office building, school, lecture hall, community center, or other gathering place must comply with the requirements of the Act. The AHA and SHTC cannot provide guidance on the specific requirements for ensuring that a facility properly accommodates the disabled. Each TS should consult with its attorneys, architects, or other professionals to ensure that its facilities meet the requirements of the Act.

In addition, the Act imposes requirements on any person who offers examinations or courses related to applications, licensing, certification, or credentialing for professional or trade purposes. TS's should consult their own attorneys for assistance in applying the Act to their own specific circumstances.

Any changes or deletions to the items set out in the core curriculum of each AHA instructor's manual should be considered fundamental changes to the course and may not be made in a course for which an AHA course completion card is issued.

ECC leadership, through activities such as course monitoring, may be asked to evaluate programs in which AHA accommodations have been made. The core curriculum must be examined to ensure there are no fundamental changes that would negate the SHTCs ability to issue a course completion card.

Individual instructors or TS's must determine on their own what accommodations they must make to comply with the Americans With Disabilities Act. The AHA will not authorize individual instructors, TCs, or TSs to make any core curriculum changes in a course identified as an AHA EGG course.

Copyrights / Copying AHA Materials

AHA textbooks, manuals, and other materials for ECC training are copyrighted by the AHA. They may not be copied, in whole or in part, without prior written consent of the AHA. Permission to reprint, copy, or use portions of ECC textbooks or materials must be obtained in writing from the copyright specialist at the AHA National Center.

These educational materials are published only after they have been thoroughly reviewed and approved by the AHA for scientific content, adherence to current AHA guidelines for CPR and ECC, and consistency with the AHA ECC training curriculum.
In most cases it is inadvisable for the AHA to grant other organization or individuals permission to reprint its materials or copy portions into their own educational materials. Incorporating portions of AHA materials into another party's materials may result in production of materials that purport to be "approved" by the AHA although they do not strictly comply with AHA guidelines or positions.

In order to carry his/her ECC volunteer responsibilities, ECC committee members may copy portions of AHA textbooks, manuals and other materials for review, illustrative, or discussion purposes. Again, this is only for activities directly associated with that individual's area of leadership responsibility to ECC programs and does not apply to activities related to conducting courses, SHTC operations or other activities not assigned as volunteer leadership functions.

**Problem Resolution Procedure**

The following procedures will be used to resolve any complaints raised regarding the American Heart Association (AHA) courses, Instructors, Regional Faculty and/or Community Training Centers.

- Whenever possible, grievances should first be brought to the attention of the responsible Instructor, Regional faculty, TS Coordinator, and/or SHTC Coordinator, and should be resolved or corrected as appropriate. If the Instructor, Regional Faculty, TS Coordinator, and/or SHTC Coordinator is unable or unwilling to resolve the problem, it should be forwarded to the Regional ECC office.

- Grievances may be submitted in writing by the complaining party:
  - A student who attended the course at which the problem arose
  - An Instructor, Regional Faculty or Training Site with information regarding the problem
  - ECC Regional Volunteer or staff person with information regarding the problem.

- Grievances may be submitted on issues regarding compliance with AHA ECC course guidelines, course management, appropriateness of teaching techniques, or instructor qualifications.

- Resolution of the grievance may include one or more the following:
  - Reprimand or letter of counseling, which includes a statement of the correct procedure/action
  - Agreement by the person/entity against which the complaint is made to take specific corrective action
  - A probationary period including monitoring of course(s) Request for additional information
  - Revocation of Instructor or Regional Faculty status or termination of TS status
  - Dismissal of the grievance

- The grievance must be submitted in writing to the SHTC Coordinator. It will then be forwarded to the appropriate committee. This committee
may elect to forward the grievance to the Regional ECC committee for handling.

- Within ten (10) working days of receipt, the person submitting the grievance as well as the person(s) who is the subject of the grievance and the SHTC will be given an acknowledgment of the receipt of the grievance. The subject of the grievance will be invited to submit information regarding the matter in writing to the appropriate committee within 30 days of receipt of notice.

- Following receipt of the grievance, the Regional ECC Review Committee will review the grievance and any additional information submitted.
  - The Review Committee will issue a decision regarding the matter within 60 days after notice to the parties that a Review Committee has been established
  - If the Review Committee decides to dismiss the grievance, they will issue a letter announcing their decision. The grievance may be appealed by sending an appeal in writing to the PROAD Committee within 10 days of receipt of the notification.
  - If the Regional Faculty and the Training Center Coordinator does not dismiss the grievance, they will:
    - Schedule a hearing, within thirty (30) days, inviting the affected parties to appear and provide information.
    - Issue their decision informing the affected parties of their decision and informing them of their right to request a hearing and further determination of the matter.

- Any decision involving probation, monitoring or revocation of status may be appealed to the Regional ECC Program Administration Subcommittee whose decision shall be final.

**Trademarks**

The AHA's stylized name and heart-and-torch logo are service marks of the American Heart Association, Inc., and are registered with the United States Patent and Trademark Office. Only the AHA and its Regions/Affiliates may use these service marks. These service marks symbolize the identity of the AHA and when placed on publications, materials, and other items serve to distinctly identify the materials as having originated from the AHA.

The AHA has a Training Center logo that includes the heart-and-torch logo. Training Centers may use this logo, provided their use of the logo meets the requirements outlined in the Authorized Provider Logo Guidelines. ECC training the AHA stylized name and logo may appear only on training materials, including course completion and participation cards, and other ECC materials issued or authorized by the AHA.

The AHA stylized name and logo may not appear on advertising or announcements for courses conducted through AHA-designated SHTCs and their TSs.
Advertising and announcements may state that a specific course is an AHA course if the AHA course criteria are met.

Advertising and announcements may not suggest or imply that the AHA sponsors, owns, or manages the SHTC and their TSs.

Instructors may not use their AHA instructor title on business cards or other advertising materials.

**Disclaimer**

The following disclaimer must be printed on all TC promotional brochures, announcements, agenda, or other materials distributed to students in courses for which fees are charged:

The AHA strongly promotes knowledge and proficiency in BLS, ACLS, and PALS and has developed instructional materials for this purpose. Use of these materials in an educational course does not represent course sponsorship by the AHA, and any fees charged for such a course do not represent income to the Association.
CHAPTER 5:
Quality Assurance

Instructors

- Current Instructor information must be on file at the SHTC for the Instructor to be able to teach AHA approved courses. See Instructor Records (page 6).
- Instructors are expected to follow the AHA Program Guidelines for all courses taught. All Instructors will be monitored on a regular basis. See Instructor Monitor/Evaluation form (see Chapter 5 - Forms).

Communication

- The SHTC is committed to quality communication with the ECC Training Network. Many resources are available to accomplish this goal. To continually improve service to aligned instructors, the SHTC will be increasingly using electronic systems via the Internet as a means of communication. This will ensure the following:
  1. Enhanced communication and reporting capabilities through e-mail of bulletins, updates, changes, etc. from AHA and the SHTC. It will be an expectation that AHA instructors aligned with SHTC will check SHTC website periodically for any new and relevant information for classes.
  2. Access to SHTC Policy and Procedure Manual, current forms, upcoming classes, new information from the SHTC website. If instructors have an e-mail address and the TC has been made aware of it, information will also be forwarded via e-mail. However, the e-mail list will only be as current as instructors keep the TC informed.
  3. Access to the latest information, updates, and news from the main AHA website (www.americanheart.org). The AHA maintains a presence on the Internet for the public and Instructors. The website is continually updated with the latest information on science, meetings, health, and specifically ECC programs. The ECC section provides general information about ECC programs and services. This section also provides the ability to research for TC courses in a specific city or ZIP code.
  4. A new service from the AHA is the AHA Instructor Network, for ECC Instructors and Training Centers found at (http://www.ahainstructornetwork.org). The Network is a free online "onestop shop" for access to TC and Instructor information, benefits, networking opportunities, and more. You can access the latest news in ECC science, guidelines, training, materials and best practices was well as Instructor Information by discipline. You can access audio and video Web casts and other educational opportunities and download marketing materials and tools. If you have not received notification of your pre-approval, you may go to this web site and register.
5. *Currents in Emergency Cardiovascular Care* is an official publication of the AHA. The SHTC strongly encourages aligned Instructors to read *Currents* to stay updated on useful information from the National Subcommittees and ECC professionals. Instructors can register to receive *Currents* subscriber services, including e-mail notification of each new issue, downloading from the Internet, and hard copy by mail. (There is a charge for hard copies.) Phone 214-706-1692 or visit [www.americanheart.org/currents](http://www.americanheart.org/currents).

**Courses**

- Every AHA course offered will have Student Comment Forms available for the participants. Each Training Site is encouraged to utilize a course evaluation form (either SHTC's or one they have developed). These course evaluations or a summary of the evaluations must be kept in the course file.
- All Instructors participating in the course must have current information on file with the SHTC in order for a course to be approved.
- Manikin/student/instructor ratios, as outlined in AHA instructor manuals will be followed.
- Equipment necessary for AHA courses will be provided and in working order.
- AHA current training materials will be utilized. The SHTC and TS's will be responsible for purchasing ECC textbooks and supplemental materials from an ECC approved distributor. Course completion and participation cards may only be ordered by the SHTC.
- Distribution of Course Completion Cards will be within 14 days of receipt of all appropriate paperwork and funds.

**Written Examinations**

- The SHTC Coordinator will provide all current aligned Instructors with copies of the most current written examinations for AHA course completion when released by the National Center ECC Department. To prevent possible compromise of the examination contents, examinations are issued to TC Coordinators only.
- The SHTC is responsible for providing the current examinations to its instructors, maintaining examinations security, and communicating the importance of maintaining security to Instructors.
- The most current examinations are the only examinations used to determine successful course completion. Use of any other written examination to determine a student's completion of an AHA ECC course will jeopardize the SHTC Agreement.

**Use of AHA Materials**

All students must have the current appropriate AHA course textbook for their individual use before, during and after the course. Students are expected to review the textbook before class and to have immediate access to their own copy afterward as a reference and review tool. Textbooks are designed for individual use and are an integral part of the student's education. The only exception to this policy is the student who is a healthcare professional who will have access to the textbook for individual study reference before, during and after the course at his/her facility(ies). A library/archive for healthcare professionals is acceptable but does not meet the requirements for lay programs.
Course Files

A file with the appropriate course documents (see course records, page 6) will be filed by date and be easily accessible for review. This information is to be kept for three years.

Equipment Cleaning and Decontamination

Infection control standards used are recommended by the Center for Disease Control (CDC) and are effective for Hepatitis B, HIV, herpes, and various upper and lower respiratory infections.

Decontamination guidelines during the course:
- Students and instructors should not participate in hands-on manikin practice if they have:
  1. Lesions on hands, mouth, or around the mouth
  2. Are seropositive for Hepatitis B antigen
  3. Have an upper respiratory infection, AIDS
  4. Have been exposed to or in the active stages of any infectious process
- During practice of two-person CPR when there is no opportunity to disinfect the manikin between students, one student simulates ventilations.
- Preferably assign students to work in pairs and only on one manikin.
- When instructing/practicing the obstructed airway maneuver the finger sweep should be simulated.
- All participants should wash their hands prior to manikin practice; no gum or food around manikins.
- To properly disinfect manikins after each student use:
  1. Encourage use of individual, protective face shields
  2. Vigorously wipe manikin face and inside of the mouth with either 5% hypochlorite solution (1/4 cup household bleach in a gallon of water) Surfaces must be left wet for at least 30 seconds and then wiped dry.

Terminal Cleaning

- Manikins should be cleaned at the end of each class.
- Personnel conducting the manikin disassembly by the manufacturer. WEARGLOVES
  1. Disassemble the manikin as directed by the manufacturer.
  2. Thoroughly wash all external and internal surfaces with warm soapy water and brushes.
  3. Rinse all surfaces with fresh water.
  4. Wet all surfaces with a hypochlorite solution (1/4 cup bleach in one gallon water) for 10 minutes. The bleach solution must be made fresh at each class and discarded after use.
  5. Rinse with fresh water and immediately dry all surfaces. Rinsing with alcohol will aid drying of internal surfaces.
  6. Routinely inspect manikins for tears or cracks in the face and signs of physical deterioration - replace as needed.
  7. Wash clothes and hair periodically.
- Use disposable tubing and lungs when available.
## Emergency Cardiovascular Care Course Matrix

### Healthcare Professionals

<table>
<thead>
<tr>
<th>Course</th>
<th>Delivery Format</th>
<th>Content / Modules</th>
<th>Features &amp; Benefits</th>
<th>Audience</th>
<th>Written Exam / Skills Session</th>
<th>Card Type / AHA Certification</th>
<th>Estimated Time</th>
<th>CME / CE Credit</th>
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</table>
| Basic Life Support (BLS) for Healthcare Providers | Traditional (Instructor and video) | • Basic Life Support for Healthcare Providers  
• Adult and pediatric CPR (including 2-rescuer scenarios and use of the bag mask)  
• Foreign-body airway obstruction  
• Use of automated external defibrillation with CPR | • This course is designed to teach the skills of CPR for victims of all ages, use of an automated external defibrillator and relief of choking.  
• A student CD, included with the text, contains supplemental information for interested students on topics such as stroke, cardiac arrest, and special resuscitation situations.  
• The course is video-based with instructor-led discussion and simulation. Students participate in, practice and complete various skills and learning stations.  
• Ideal for learners who prefer group interaction and feedback from an instructor while learning skills. | For healthcare providers – for example, EMS personnel, physician assistants, physicians, dentists, nurses, respiratory therapists and others who must have a credential (card) documenting successful completion of a CPR course. | Written exam and skills test | BLS for Healthcare Providers Course Completion Card | 4 hours | No | Yes |
| BLS Healthcare Provider Online Part 1 | Blended (Part 1 cognitive learning is completed online; Part 2 is skills practice session with AHA BLS instructor; and Part 3 is skills test with AHA BLS instructor) | • Adult rescue breathing  
• Adult CPR/AED – 1 and 2 rescuers  
• Adult relief of choking  
• Child rescue breathing  
• Child CPR  
• Child relief of choking  
• Infant rescue breathing and choking  
• Series of online modules covering adult, child and infant CPR sequences  
• 10 checkpoints to be completed  
• 21 optional review sections with 17 videos  
• Establishes a standardized training program  
• Self-paced learning, accessible anytime  
• Provides flexible course design, accommodating a range of learning from basic checkpoint review to more extensive learning through optional sections  
• Immediate answer feedback  
• Reinforces learning and ensures competence | For healthcare providers who have previously taken a BLS course and are seeking a flexible training option to obtain a new healthcare provider course certification card. | • Part 1 – Certificate of Completion provided after successful completion of online modules. Must present to complete skills test.  
• Skills practice (Part 2) and successful skills test, Part 3, completes course certification | BLS for Healthcare Providers Course Completion Card | 90 minutes to complete Part 1.  
Additional time required for skills practice session (Part 2) and skills test (Part 3). | No | No |
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| Advanced Cardiovascular Life Support (ACLS) | Traditional | • Defibrillation  
• Airway management  
• Rhythm recognition  
• IV access  
• Use of medications  
• Cardioversion  
• Transcutaneous pacing  
• 1-rescuer CPR, AED  
• Effective resuscitation team dynamics | Healthcare providers will enhance their skills in the treatment of the adult victim of a cardiac arrest or other cardiopulmonary emergencies. ACLS emphasizes the importance of basic life support CPR to patient survival; the integration of effective basic life support with advanced cardiovascular life support interventions; and the importance of effective team interaction and communication during resuscitation. Students engage in simulated clinical scenarios that encourage active, hands-on participation through learning stations where students will practice essential skills individually, as part of a team, and as team leader. Realistic simulations reinforce the following key concepts: proficiency in basic life support care; recognizing and initiating early management of peri-arrest conditions; managing cardiac arrest; identifying and treating ischemic chest pain and acute coronary syndromes; recognizing other life-threatening clinical situations (such as stroke) and providing initial care; ACLS algorithms; and effective resuscitation team dynamics. | For emergency, intensive care, or critical care healthcare providers such as physicians, nurses, paramedics, respiratory therapists, and other professionals who may need to respond to a cardiovascular emergency. | Written exam and skills test | ACLS Provider Course Completion Card | (w/ 6:1 student: instructor ratio) 13.5 hours, including breaks | No | Summer 2008 |

| ACLS EP | Traditional | • Expands on the core ACLS course with the 5 quadrads approach  
• Special resuscitation emergencies (eg, drowning)  
• Toxicology emergencies  
• Metabolic emergencies  
• Deeper knowledge for understanding and treating ACS patients | The course provides a stimulus for expert clinicians and scientists to identify and discuss resuscitation in special circumstances. | Professionals, clinicians, and scientists who must respond to cardiovascular emergencies and special resuscitation situations in the workplace. For seasoned ACLS providers who wish to renew their provider status. | Written exam and skills test | ACLS EP Course Completion Card | 9 -10 hours | No | No |
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<tr>
<td>HeartCode™ ACLS Part 1</td>
<td>Blended (Part 1 is CD-based cognitive learning, followed by skills test with an AHA ACLS instructor)</td>
<td>• Advanced Cardiovascular Life Support for Healthcare Providers</td>
<td>Enhance skills in the treatment of adult cardiac arrest patients or other cardiopulmonary emergency patients. ACLS emphasizes the importance of basic life support CPR to patient survival; the integration of effective basic life support with advanced cardiovascular life support interventions; and the importance of effective team interaction and communication during resuscitation.</td>
<td>For emergency, intensive care, or critical care healthcare providers such as physicians, nurses, emergency medical technicians, paramedics, respiratory therapists, and other professionals who may need to respond to a cardiovascular emergency.</td>
<td>Written exam and skills test</td>
<td>ACLS Provider Course Completion Card</td>
<td>Students are allowed up to 32 hours to complete Part 1. Additional time required for skills test (Part 2).</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Stroke Prehospital Care</td>
<td>Online</td>
<td>• Pathophysiology</td>
<td>• Self-paced learning, accessible anytime • Students improve care giver decision making for stroke victims • Strengthens use of EMS triage and transport protocols • Increases quality of pre-hospital treatment • Improves timely and effective hospital care • Effective interactive cases with instant feedback • Convenient alternative to traditional classroom training • Content based on the latest science</td>
<td>For pre-hospital medical professionals and emergency medical services personnel in acute medical practice (emergency physicians, family physicians, physician assistants, nurses).</td>
<td>Online evaluation and test</td>
<td>Completion Certificate</td>
<td>1 - 2 hours</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Airway Management</td>
<td>Traditional (Instructor and video)</td>
<td>• Bag-mask ventilation and airway adjuncts Optional: • Laryngeal mask airway • Esophageal-tracheal combitube • Endotracheal tube • Impedance threshold device</td>
<td>• Modular format creates course flexibility • Simple course flow: 1) skills demonstration in a short video, 2) students' skills practice, and 3) testing • Computer-generated animation • Web-based access for course tests, Completion Certificate and the Facilitator Certificate • Online, customizable student certificates • Students improve their competency in critical airway skills • Students increase awareness of various airway products • Skills video demonstrations reinforce proper technique</td>
<td>For healthcare providers whose occupation or volunteer activities require airway management skills and For professionals in the field of resuscitation and airway management.</td>
<td>Skills practice and skills testing with Airway Management facilitator during course</td>
<td>Course Completion Certificate</td>
<td>5 hours for all modules</td>
<td>No</td>
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| ECG Pharmacology        | Traditional (Instructor and slide presentation) | **ECG** • Heart anatomy  
• Basic electrophysiology  
• Normal ECG measurements  
• Basic arrhythmias Pharmacology  
• Basic ACLS drugs and usage  
• Drugs, doses and routes of administration during cardiovascular emergencies  
• Integrating basic drug pharmacology into ACLS algorithms | • Two modules via slide presentations – one each for ECG and Pharmacology – which can be taught together or separately  
• Modular format for tailoring on either skill set or both together, depending on students’ needs  
• Open to any Instructor to teach with no requirement to be affiliated with an American Heart Association Training Center  
• Enhances ECG recognition skills competency important to ACLS certification  
• Improves knowledge and more effective use of drugs during peri- or cardiac arrest  
• Improves student success in achieving ACLS certification  
• Strengthens ACLS algorithms competency  
• Only course in market focused on this critical knowledge | For a variety of healthcare providers, including physicians, nurses, paramedics, residents, respiratory therapists, nurse practitioners, physician assistants, clinical pharmacists and ECG technicians. | No                          | ECG Course Completion Certificate | 3.5 hours for ECG module  
2.75 hours for Pharmacology module  
6.25 for both modules | No                           | No                           |
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| Pediatric Advanced Life Support (PALS)          | Traditional     | ▪ Recognition and treatment of infants and children at risk for cardiopulmonary arrest  
▪ The systematic approach to pediatric assessment  
▪ Effective respiratory management  
▪ Defibrillation and synchronized cardioversion  
▪ Intraosseous access and fluid bolus administration  
▪ Effective resuscitation team dynamics | Designed to aid the pediatric healthcare provider in developing the knowledge and skills necessary to efficiently and effectively manage critically ill infants and children, resulting in improved outcomes. | For pediatricians, emergency physicians, family physicians, physician assistants, nurses, nurse practitioners, paramedics, respiratory therapists, and other healthcare providers who initiate and direct advanced life support in pediatric emergencies. | Written exam and skills test | PALS Provider Course Completion Card | 14 hours    | No             | Fall 2008        |
| Pediatric Emergency Assessment, Recognition and Stabilization (PEARS) | Traditional | Help providers recognize cardiopulmonary distress symptoms of pediatric victims, and thus begin stabilization prior to arrest.  
Key topics covered:  
▪ Pediatric assessment  
▪ Respiratory compromise and arrest recognition and management  
▪ Circulatory compromise and arrest recognition and management  
▪ Shock recognition and management  
▪ Resuscitation team concept | This course addresses a gap in the number of healthcare providers who see pediatric patients, and do not require the advanced skills of PALS.  
The main focus of PEARs is prevention, and specifically, the assessment, recognition and stabilization of pediatric victims at risk of severe cardiopulmonary distress. Through unique learning tools, such as video-based simulation, providers can see and hear critically ill children with whom they do not typically come in contact, equipping them to recognize the symptoms of pediatric victims, and thus begin stabilization prior to arrest.  
The course is video-based with instructor-led discussion and simulation. Students participate in, practice and complete various skills and learning stations. | For any healthcare provider who might encounter pediatric patients in their profession.  
Course is not intended for those staff credentialed for advanced pediatric skills that routinely provide pediatric care. | Video-based written exam and skills test | PEARs Course Completion Card | 7 hours        | No             | No              |
# Emergency Cardiovascular Care Course Matrix

## Healthcare Professionals

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<tr>
<th>Course</th>
<th>Delivery Format</th>
<th>Content / Modules</th>
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<tbody>
<tr>
<td>Pediatric Intraosseous Access</td>
<td>Traditional (Instructor and Video)</td>
<td>• Sites for IO infusion &lt;br&gt; • Indications for IO access &lt;br&gt; • Proper technique for placing an IO needle &lt;br&gt; • Appropriate needle placement and immobilization &lt;br&gt; • Complications associated with the technique &lt;br&gt; • Removal of the device</td>
<td>The video is designed to provide consistent information on the indications, methods, and complications of the IO procedure. After practicing the IO insertion technique in the Vascular Access Skills Station, participants will be prepared to perform this procedure on patients. Offers content for HCP instructors responsible for training on the IO skill and/or instructors of the PALS Course as a part of a core skills practice station to achieve consistency in the message delivered to learners, enhancing the safety and efficacy of IO access provided to children.</td>
<td>For healthcare providers who provide pediatric advanced life support, including paramedics, nurses, nurse practitioners, physician assistants, and physicians.</td>
<td>Skills practice with AHA Instructor</td>
<td>None</td>
<td>10 minute video, plus skills practice at Vascular Access Skills Station</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Pediatric Status Epileptics</td>
<td>Traditional (Instructor and Video)</td>
<td>Three cases are presented that lead participants through the assessment and initial treatment of this pediatric emergency.</td>
<td>Healthcare providers learn to recognize the problem, appropriately assess Status Epilepticus, describe initial treatment, and avoid overly aggressive therapies that have potential for harm. This interactive case-based module is designed for use in a small group format and may be presented as an additional module of the PALS course or as an independent offering.</td>
<td>For any healthcare worker who provides pediatric advanced life support, including paramedics, nurses, respiratory therapists, nurse practitioners, physician assistants and physicians.</td>
<td>None</td>
<td>None</td>
<td>1 hour</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Coping With the Death of a Child</td>
<td>Self-Directed Learning (booklet and CD/video based)</td>
<td>Assist all healthcare providers to better deal emotionally with an unsuccessful outcome of pediatric resuscitation.</td>
<td>Provides needed information for healthcare providers to help both the parents AND the providers in dealing with unsuccessful resuscitation and death immediately thereafter. Helps guide providers to self awareness and dealing with their individual emotions.</td>
<td>For any healthcare worker who provides pediatric advanced life support, including paramedics, nurses, respiratory therapists, nurse practitioners, physician assistants and physicians.</td>
<td>Written test</td>
<td>After students submit and CE application and test are process, certification is issued directly to students.</td>
<td>1 hour</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Catastrophic Illnesses in Children</td>
<td>Traditional (Instructor and PowerPoint case study)</td>
<td>Review and study clues for the diagnosis of potentially catastrophic illnesses in children presenting with common chief complaints.</td>
<td>Case study to aid in diagnosis of children with catastrophic illnesses. Cases were chosen based on the lethality of the underlying condition, the ease of being misled by history and physical examination, and the ability to make the correct diagnosis with relatively simple interventions. An interactive case-based module to be taught in a small group format, this module can be used either as a freestanding or as an additional part of the PALS Course.</td>
<td>For the experienced PALS provider, medical students, internists, or emergency medicine physicians</td>
<td>None</td>
<td>None</td>
<td>1 hour</td>
<td>No</td>
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<tr>
<td>Heartsaver,® CPR</td>
<td>Traditional (Instructor and Video)</td>
<td>• Adult/Child CPR • Adult/Child Choking • Optional: Infant CPR and choking • Adult/Child CPR with mask • Infant CPR with mask</td>
<td>• Modular format creates course flexibility • Ideal for learners who prefer group interaction and feedback from an instructor while learning skills • Each student receives the highest quality course materials to supplement their learning • Student CD-ROM (included with student workbook) includes additional information on CPR and AED that students can reference after the course</td>
<td>Designed for employee training at companies, corporations, businesses or other entities. For employees and/or designated first responders who have a duty to respond to a cardiac emergency because of job responsibilities or regulatory requirements.</td>
<td>Skills testing with AHA Instructor during course</td>
<td>Heartsaver CPR course completion card</td>
<td>3 hours 2 hours without infant CPR</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Heartsaver AED</td>
<td>Traditional (Instructor and Video)</td>
<td>• Adult/Child CPR with mask • Adult/Child Choking • Infant CPR with mask • Infant choking</td>
<td>• Modular format creates course flexibility • Ideal for learners who prefer group interaction and feedback from an instructor while learning skills • Each student receives the highest quality course materials to supplement their learning • Student CD-ROM (included with student workbook) includes additional information on CPR and AED that students can reference after the course</td>
<td>Designed for employee training at companies, corporations, businesses or other entities. For employees and/or designated first responders who have a duty to respond to a cardiac emergency because of job responsibilities or regulatory requirements.</td>
<td>Skills testing with AHA Instructor during course</td>
<td>Heartsaver AED course completion card</td>
<td>3.5 hours 2.5 hours without infant CPR</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Heartsaver AED Anytime™</td>
<td>Blended (Part 1 is CD- and DVD-based cognitive learning, followed by Part 2, skills practice with AHA Instructor or Anytime kit components; and Part 3, skills test with an AHA instructor)</td>
<td>• Adult/Child CPR with mask • Adult/Child AED</td>
<td>• Self-directed portion, Part 1, can be completed at home or work • Kit offers 24/7 accessibility • Can be completed in less time than a traditional course • Self-paced learning • Kit provides convenient refresher for CPR and AED skills • CD-ROM teaches AED knowledge through micro-simulation scenarios, video clips, and interactive activities • CD-ROM can be tailored to different workplace environments • Kit can be shared with employees' family members • Includes Heartsaver AED Student Workbook to supplement learning</td>
<td>Designed for employee training at companies, corporations, businesses or other entities. For employees and/or designated first responders who have a duty to respond to a cardiac emergency because of job responsibilities or regulatory requirements.</td>
<td>Skills testing with AHA Instructor during course</td>
<td>Heartsaver AED course completion card</td>
<td>2 hours for Part 1, self-directed learning portion; optional time for skills practice session (Part 2) and 30 minutes for skills test (Part 3)</td>
<td>No</td>
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<tr>
<td>Heartsaver First Aid</td>
<td>Traditional (Instructor and Video)</td>
<td>• Adult first aid (general principles, medical emergencies and injury emergencies)</td>
<td>• Modular format creates course flexibility &lt;br&gt;• Ideal for learners who prefer group interaction and feedback from an instructor while learning skills &lt;br&gt;• Each student receives the highest quality course materials to supplement their learning &lt;br&gt;• Student CD-ROM (included with student workbook) includes additional information on CPR and AED that students can reference after the course</td>
<td>Designed for employee training at companies, corporations, businesses or other entities. For employees and/or designated first responders who have a duty to respond to a first aid emergency because of job responsibilities or regulatory requirements.</td>
<td>Skills testing with AHA Instructor during course</td>
<td>Heartsaver First Aid course completion card</td>
<td>3.5 hours</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Heartsaver First Aid</td>
<td>Blended (Part 1 cognitive learning is completed online; followed by Part 2, skills practice session with AHA Instructor)</td>
<td>• Adult first aid (general principles, medical emergencies and injury emergencies)</td>
<td>• 24/7 accessibility with web-based course &lt;br&gt;• Online portion can be completed at home or at work &lt;br&gt;• Can be completed in less time than a traditional course &lt;br&gt;• Self-paced learning &lt;br&gt;• One-on-one practice with AHA Instructor allows student to maximize comfort with skills &lt;br&gt;• Convenient refresher for up to 6 months &lt;br&gt;• Flexible alternative to traditional classroom training</td>
<td>Designed for employee training at companies, corporations, businesses or other entities. For employees and/or designated first responders who have a duty to respond to a first aid emergency because of job responsibilities or regulatory requirements.</td>
<td>Skills practice with AHA Instructor</td>
<td>Heartsaver First Aid course completion card</td>
<td>1-2 hours (Part 1); 30 minutes for skills practice session (Part 2)</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Heartsaver First Aid</td>
<td>Traditional (Instructor and Video)</td>
<td>• Adult first aid (general principles, medical emergencies and injury emergencies)</td>
<td>• Modular format creates course flexibility &lt;br&gt;• Ideal for learners who prefer group interaction and feedback from an instructor while learning skills &lt;br&gt;• Each student receives the highest quality course materials to supplement their learning &lt;br&gt;• Student CD-ROM (included with student workbook) includes additional information on CPR, AED and first aid content that students can reference after the course</td>
<td>Designed for employee training at companies, corporations, businesses or other entities. For employees and/or designated first responders who have a duty to respond to a first aid or cardiac emergency because of job responsibilities or regulatory requirements.</td>
<td>Skills practice (first aid) and skills testing (CPR &amp; AED) with AHA Instructor during course</td>
<td>Heartsaver First Aid, CPR, AED course completion card</td>
<td>6.5 - 7.5 hours</td>
<td>No</td>
<td>Yes</td>
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<tr>
<td>Heartsaver® First Aid Online With CPR &amp; AED Part 1</td>
<td>Blended (Part 1 cognitive learning is completed online; followed by Part 2, skills practice session with AHA Instructor; and Part 3, skills test with AHA Instructor)</td>
<td>• Adult first aid (general principles, medical emergencies and injury emergencies) • Environmental emergencies • Adult CPR (renewal) • Adult AED (renewal)</td>
<td>• 24/7 accessibility with web-based course • Online portion can be completed at home or at work • Can be completed in less time than a traditional course • Self-paced learning • Interactive questions and video segments • One-on-one practice with AHA Instructor allows student to maximize comfort with skills • Convenient renewal option for CPR &amp; AED • Flexible alternative to traditional classroom training • Convenient refresher for up to 6 months</td>
<td>Designed for employee training at companies, corporations, businesses or other entities. For employees and/or designated first responders who have a duty to respond to a first aid or cardiac emergency because of job responsibilities or regulatory requirements.</td>
<td>Skills practice (first aid) and skills testing (CPR &amp; AED) with AHA Instructor</td>
<td>Heartsaver First Aid, CPR, AED course completion card</td>
<td>2.5 hours for online portion (Part 1); 45 minutes for skills session (Part 2) and skills test (Part 3)</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Heartsaver Pediatric First Aid</td>
<td>Traditional (Instructor and Video)</td>
<td>• Pediatric first aid (first aid basics, medical emergencies, injury emergencies, environmental emergencies) • Asthma care training for child care providers • Adult/Child CPR with mask • Adult/Child AED • Optional: Optional pediatric first aid topics: Infant CPR with mask</td>
<td>Designed to meet the specific needs of child daycare providers in all 50 states • Modular format creates course flexibility • Ideal for learners who prefer group interaction and feedback from an instructor while learning skills • Each student receives the highest quality course materials to supplement their learning • Student CD-ROM (included with student workbook) includes additional information on CPR, AED and first aid content that students can reference after the course</td>
<td>For those involved in child care who have a duty to respond to a first aid emergency because of job responsibilities or regulatory requirements, such as child care workers, teachers, foster care providers, camp counselors, youth organizations, and coaches for children’s sports organizations.</td>
<td>Skills practice (first aid) and skills testing (CPR &amp; AED) with AHA Instructor during course</td>
<td>Heartsaver Pediatric First Aid course completion card</td>
<td>6.5 – 7.5 hours</td>
<td>No</td>
<td>Yes</td>
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<tr>
<td><strong>Family &amp; Friends™ CPR</strong></td>
<td>Traditional (Instructor and Video)</td>
<td>• Adult/Child CPR • Adult/Child choking • Optional: Infant CPR and choking</td>
<td>Course offers the opportunity to learn basic CPR in a dynamic group environment. Designed for those who prefer to learn in a group environment with feedback from an instructor. Uses the research-proven Practice-While-Watching method to provide students with the most hands-on CPR practice time possible during the length of the program.</td>
<td>Family members, friends and members of the general community who want to learn CPR but do not need a course completion card. This course can also be a non-credentialed option for middle- and high-school students.</td>
<td>None</td>
<td>Participation Card</td>
<td>1.25 hours without Infant CPR</td>
<td>Infant CPR only: 1.25 hours</td>
<td>No</td>
</tr>
<tr>
<td><strong>Family &amp; Friends First Aid for Children</strong></td>
<td>Traditional (Instructor and Video)</td>
<td>• Child first aid • Environmental emergencies</td>
<td>The program teaches how to manage illness and injuries in a child for the first few minutes until professional help arrives. This program covers such topics as preventing injuries, recognizing and treating basic first aid emergencies, and relief of choking in infants. Designed for those who prefer to learn in a group environment with feedback from an instructor.</td>
<td>For those caring for infants and children, such as family members, babysitters, and others providing in-home care, who want basic first aid information but do not need a course completion credential.</td>
<td>None</td>
<td>Participation Card</td>
<td>45 minutes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Family &amp; Friends CPR Anytime™</strong></td>
<td>Self-directed Learning through personal Anytime Kit</td>
<td>• Adult/Child CPR</td>
<td>Designed for those who prefer self-paced learning and independent practice. Program uses the research-proven Practice-While-Watching instruction method for CPR. DVD includes additional information on AEDs, choking, child CPR, and barrier devices. Personal learning kit provides for convenient knowledge and skills refresher. Kit can be shared to extend training to all family members and their friends.</td>
<td>Family members, friends and members of the general community who want to learn CPR but do not need a course completion card.</td>
<td>None</td>
<td>None</td>
<td>22 minutes</td>
<td>No</td>
<td>No</td>
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# Emergency Cardiovascular Care Course Matrix

## Community

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<tr>
<td>Infant CPR</td>
<td>Self-directed learning through personal Anytime Kit</td>
<td>• Infant CPR and choking</td>
<td>Designed for those who prefer self-paced learning and independent practice. Program uses the research-proven Practice-While-Watching instruction method for CPR. DVD includes additional information on AEDs, choking, child CPR, and barrier devices. Personal learning kit provides for convenient knowledge and skills refresher. Kit can be shared to extend training to all family members and their friends.</td>
<td>Family members, friends and members of the general community who care for infants and want to learn CPR and do not need a course completion card.</td>
<td>None</td>
<td>None</td>
<td>22 minutes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Heartsaver CPR in Schools</td>
<td>Traditional (Instructor and Video)</td>
<td>• Adult CPR and choking</td>
<td>The course design appeals to students through illustrations of teens and a unique training video featuring interviews with teens and edgy video footage. Modular format provides flexibility to teach the course over several classroom periods. Program uses the research-proven Practice-While-Watching instruction method for CPR to improve learning and retention. Student CD-ROM includes additional information on CPR and AED for ongoing reference after the course.</td>
<td>Specifically designed for middle and high school students. For schools that want to provide CPR and AED training to their students and also want their students to receive a credentialed course completion card.</td>
<td>Skills practice and skills testing with AHA Instructor during course</td>
<td>Heartsaver CPR in Schools course completion card</td>
<td>Length depends on which modules are taught: CPR and AED: 4 hours for all modules 3 hours for all modules, except infant CPR and choking and infant CPR and mask CPR Only: 3 hours for all CPR modules 2 hours for all CPR modules except infant CPR and choking and infant CPR with mask</td>
<td>No</td>
<td>Yes</td>
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