



# PALS Instructor Course

Capital Health EMS Education

## Course Dates

Screening

Tue April 7, 2020 3PM—5PM

Instructor Course

Wed April 15, 2020 9AM—5PM

## PRE-REQUISITES

**EACH PARTICIPANT MUST HAVE SPONSORSHIP BY AN AHA PALS TRAINING CENTER.  
 SUCCESSFUL COMPLETION OF THE AHA PALS INSTRUCTOR ESSENTIALS ONLINE COURSE (NOT INCLUDED).  
 CURRENT AHA PALS CERTIFICATION  
 PARTICIPANTS MUST SUCCESSFULLY COMPLETE AN PALS SKILLS VERIFICATION CONDUCTED PRIOR TO THE COURSE  
 AND MUST PASS THE PALS WRITTEN EXAM WITH A SCORE OF AT LEAST 90%.  
 EACH PARTICIPANT MUST BRING A GUIDELINES 2015 PALS PROVIDER MANUAL TO CLASS (NOT INCLUDED).**

To complete instructor training and receive an instructor certification card, the instructor candidate must complete, in order

- 1) Successfully passing an Instructor Screening of skills verification and written exam with a score of at least 90%
- 2) The AHA PALS Instructor Essentials Online Course
- 3) The PALS Instructor Course (this program)
- 4) Successful monitoring by Training Center Faculty of the first provider course taught.  
 The AHA requires that instructors align with a Training Center.

<u>Course Costs</u> (Includes PALS Instructor Manual)	<u>Non-Capital Health Employees</u>	<u>Capital Health Employees</u>
	\$250	\$100
PALS Provider Manual (available for purchase)	\$39	\$39

**To Register:** This form is designed to be paperless. Fill out the form, save it then e-mail it as an attachment to: [EMSEducation@capitalhealth.org](mailto:EMSEducation@capitalhealth.org)  
 Any applicable payment, checks (payable to: **Capital Health**) or credit card, accepted must be received before registration is finalized.

**Questions?** Contact the EMS Education office at (609) 815-7291 or at the e-mail address above.

The American Heart Association strongly promotes knowledge and proficiency in all AHA courses and has developed instructional materials for this purpose. Use of these materials in an educational course does not represent course sponsorship by the AHA.  
 Any fees charged for such a course, except for a portion of fees needed for AHA course material, do not represent income to the AHA.

P A L S  (I)	NAME: _____ CHS EMP ID #: _____
	EMAIL ADDRESS *REQUIRED BY AHA* _____
	Cell Phone Number *REQUIRED* _____
	APPLICANT SIGNATURE _____ DATE _____
SUBSTITUTIONS INTO AN ALTERNATE CLASS MAY BE ALLOWED, IF THERE ARE SPOTS AVAILABLE. NO REFUNDS WILL BE GIVEN. CLASSES FILL QUICKLY, PLEASE PROVIDE ALTERNATE DATES IN CASE YOUR FIRST CHOICE IS FULL. AHA RULES PROHIBIT ADMITTANCE INTO CLASS 15 MINUTES AFTER SCHEDULED CLASS TIME. FOR EMS EMPLOYEES: ENROLLMENT INTO AHA CLASS CONSTITUTES ACCEPTANCE OF A WORK SHIFT.	
<b>All Listed Courses Will Be Held At:</b> EMS Education, 832 Brunswick Ave., 2 <sup>nd</sup> Floor, Trenton, NJ 08638	