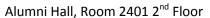


#### 2015 ACLS/BLS/PALS <u>RECERTIFICATION</u> COURSE

SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE

## February 7, 2015 February 8, 2015





# ACLS/BLS/PALS Schedule <u>Course is Repeated on Saturday AND Sunday</u>

06:45-07:15	Registration and Continental Breakfast, Alumni Hall	, 2 <sup>nd</sup> Floor
07:15-07:30	Welcome and Course Orientation	
07:30-08:30 (1 CE Credit)	ACLS 2015 Science Update and Guidelines & ACLS S	cience Overview Video
08:30-09:30 (1 CE Credit)	Management of Respiratory Emergencies & Emerge	ent Patient Oxygenation & Perfusion
09:30-09:45	Break	
09:45-10:15 (0.5 CE Credit)	Megacode and Resuscitation Team & Concept Video	)
10:15-10:45 (0.5 CE Credit)	Anesthesia Related Arrest – Management & Treatm	ent
10:45-11:15 (0.5 CE Credit)	Putting It All Together (Megacode)	
11:15-11:45 (0.5 CE Credit)	ACLS Written Exam and Dysrhythmia Recognition / Remediation	
11:45-12:15 (0.5 CE Credit)	Simulated Resuscitation – MegaCode Test - Remediation	
12:15-12:30	Registration, Welcome, Introduction: BLS and/or PALS Course Challenge	
12:30-13:00 (0.5 CE Credit)	Working Lunch/BLS Refresher Fundamentals of Resuscitation	
13:00-13:30 (0.5 CE Credit)	BLS for Healthcare Provider Written Exam	
13:30-14:00 (0.5 CE Credit)	1 & 2 Rescuer Adult BLS with AED Test	
14:00-14:30 (0.5 CE Credit)	1 & 2 Rescuer Pediatric BLS with AED Test	
14:30-14:45	Remediation and Break	
14:45-16:45 (2.0 CE Credit)	Pediatric Resuscitation for the CRNA	
16:45-17:15	PALS Challenge Course Introduction PALS Written Test	
17:15-17:45	PALS Cardiac Core Cases PALS Respiratory/Shock Core Cases	*American Heart Association Providers
17:45	Adjourn	



#### 2015 WINTER ACLS/BLS/PALS RECERTIFICATION COURSE

#### SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE

#### February 7 OR February 8, 2015

Alumni Hall, Room 2401, 2<sup>nd</sup> Floor



### **ACLS/BLS/PALS Registration Form**

Name:	AANA #:				
Address:					
City, State, Zip:					
Telephone:	Email:				
***All forms of pa	yment for registratio	on will be held until No refunds after J		and deposited on January 16,	
SELECT ONE DATE:	Saturday	, February 7, 2015	<u>OR</u>	Sunday, February 8, 2015	
	CURRENT SIUE ANE	STHESIA STUDENT RE	GISTRATION LIMITE	ED TO 12 EACH DAY	
	Select the desired	Provider Category a	and Needed Recei	rtification Courses:	
		BLS	ACLS	PALS	
	CRNA	\$50.00	\$200.0	0\$200.00	
	SIUE Alumni _	\$50.00	\$175.0	0\$175.00	
	SIUE Student _	\$50.00	\$95.0	0 \$95.00	
	Megacode only** _	\$35.00	\$95.0	0 \$95.00	
COU Checks Payable to: <b>SI</b> I		IP TO 8.5 CE CREDITS:		piration Date: 02/08/2015	
Credit Card Payment:					
	it appears on the credi	t card			
Card Type:MC	Visa	AM EX	_Discover		
Credit Card #		Ехр	iration Date:	CVV#	
	Mail complete	ed ACLS/BLS/PALS Re	gistration Form and	d Payment to:	
		Southern Illinois Univ	•		
		School of	•		
		Attn: Dor	is Davis		
		C D 100	C Al!		

Campus Box 1066, Alumni Hall Edwardsville, IL 62026

For registration information please contact Doris Davis at 618-650-3960 or dordavi@siue.edu.

## **IMPORTANT INFORMATION:**

General information, Initial or Expired ACLS/BLS/PALS Certification Requirements, hotel, SIUE maps, and course materials are available at: http://www.siue.edu/nursing/graduate/na/index.shtml

> Program Coordinator: Paul A. Darr, MSN, CRNA, APN-BC, FAAPM Assistant Director & Clinical Liaison, School of Nursing Anesthesia Specialization