

MASSACHUSETTS
OFFICE OF EMERGENCY MEDICAL SERVICES
 DEPARTMENT OF PUBLIC HEALTH

DPH/OEMS 200-59
 CONED ROSTER
 01/2016

(Continuing Education Roster Continued):

PROGRAM TITLE (Print): ROUNDS: "THE ORIFICE"	OEMS CONED NUMBER: 1819-R5-00023-T1
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EMT NUMBER:	EMT NAME (Print):	EMT SIGNATURE:
13	852981 Craig Winsor	
14	E0905187 Robert Hoven	
15	838962 Richard S. Smith	
16	891024 STEPHEN A. SCIARA	
17	868346 Jeffrey Kelley	
18	0908876 Keith Pontes	
19	872611 Jennifer Gallant	
20	829753 Timothy J. Clary Jr	
21	811632 RONALD D. HOWE	
22	838763 JOSEF KENEALY	
23	862767 PATRICK TRAVES	
24	853808 Kevin McDonnell	
25	825241 Timothy G. Donovan	
26	876642 Andrew Johnson	
27	E0906842 RALPH BECKER	
28	855576 Dawn McGinn	
29	877039 Justin Silva	
30	824295 John Hussey	
31	P0902303 Dag Donovan	
32	840911 DALE CAMPBELL	
33	876090 Anthony Corso	
34	115532 James J. Benfumen	
35	876174 Andrew Kelly	
36	879896 DEREK HAWAIDI	
37	825148 Richard Smith	
38	881325 RYAN ANARDI	
39	0909334 ROBERT NEUMEISTER	
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Under the pains and penalties of perjury, I attest that this is a true and accurate record of the conduct, hours, and actual attendance for this training course.

INSTRUCTOR NAME (Print): Daniel Muse, MD	INSTRUCTOR Signature: 	INSTRUCTOR EMT Number:
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MASSACHUSETTS OFFICE OF EMERGENCY MEDICAL SERVICES

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Program Information: (This roster is for use with training programs that have DPH/OEMS continuing education numbers)

PROGRAM TITLE (Print): ROUNDS "THE ORIFICE"		PROGRAM SPONSOR (Print): Brockton Hospital	
PROGRAM LOCATION (Print): Knights of Columbus, Whitman MA		PROGRAM DATE: MAY 23, 2018	PROGRAM TIMES: 6:30 PM - 8:30 PM
OEMS CONED NUMBER: 1819-R5-00023-T1	<input type="checkbox"/> 30 Hour Paramedic NCCR	<input type="checkbox"/> 20 Hour EMT/AEMT NCCR	<input checked="" type="checkbox"/> ConEd Program Hours: 2 HRS BASIC, ANVANCED AND PARAMEDIC

Instructions:

- LEAD INSTRUCTOR MUST:**
- 1) Sign this roster in the space provided, attesting that you have conducted this training program in accordance with applicable Massachusetts EMS regulations, the course outline, and DPH/OEMS Administrative Requirement (AR) 2-212.
 - 2) Issue course completion documentation to the EMTs once the program is completed. Program sponsors may issue course completion certificates or may provide attendees with a copy of the roster signed by the instructor and student.
 - 3) Ensure an original signed roster is retained by the program sponsor for each session of the program
 - 4) Cross off any unused lines after the last student has signed in at the completion of the course.
- EMTs ATTENDING PROGRAM MUST:**
- 1) Legibly PRINT and SIGN your name after your Massachusetts EMT number (if you have one), attesting that you attended course as described above. Remember to include the letter prefix of your EMT number.
 - 2) Ensure you receive and retain course completion documentation from course sponsor or instructor.
 - 3) Any program lacking an approval number may never receive credit. Attendance is at your own risk!
 - a. Note: regardless of approval, there are limitations to the types of continuing education, such as Distributive Education, that can be used for renewal of EMT certification. Please reference AR 2-212 or the OEMS Renewal Guides found on <http://www.mass.gov/dph/oems>.
 - 4) FAILURE TO SIGN THE ATTENDANCE ROSTER MEANS THAT NO CREDIT CAN BE AWARDED.

#	EMT NUMBER:	EMT NAME (Print):	EMT SIGNATURE:
1	2034817	Robert Pillarella	<i>Robert Pillarella</i>
2	20906642	Low Sullivan	<i>Low Sullivan</i>
3	834805	CRAIG NEDALL	<i>Craig Nedall</i>
4	851754	Matthew Doucet	<i>Matthew Doucet</i>
5	P875727	Gregory Doucette	<i>Gregory Doucette</i>
6	P0902279	Allen R. Hovel	<i>Allen R. Hovel</i>
7	835691	Derek Avery	<i>Derek Avery</i>
8	829761	THOMAS FORD	<i>Thomas Ford</i>
9	836200	John Schlitz	<i>John Schlitz</i>
10	215877	Jonathan Campbell	<i>Jonathan Campbell</i>
11	P0902706	Jerry Thompson	<i>Jerry Thompson</i>
12	861827	KALIN MAZUREK	<i>Kalin Mazurek</i>

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INSTRUCTOR NAME (Print): Daniel Muse, MD	INSTRUCTOR Signature: <i>[Signature]</i>	INSTRUCTOR EMT Number:
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MASSACHUSETTS



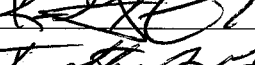
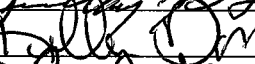
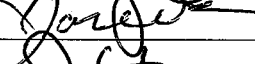
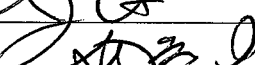
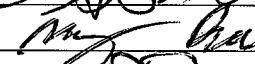

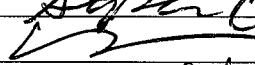
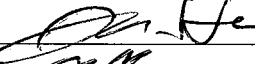




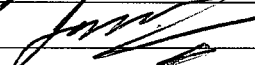
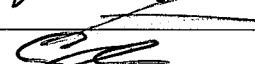
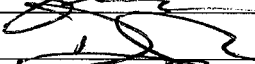


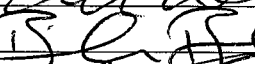

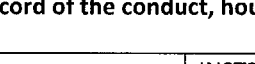

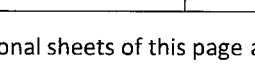



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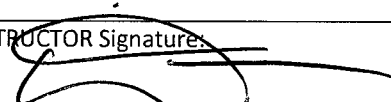
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13	0901600	EMILY ABRAHAM	
14	0902212	Yule Lundy	
15	0901577	KEVIN GONSALES	
16	862054	Timothy Guillette	
17	864304	Nelly Omoran	
18	871584	Jared Murphy	
19	879227	Jamel Custer	
20	818774	STEPHEN M. DUGGAN	
21	0902674	Zachary Baldwin	
22	090524	JOWANAS SIOBLODOW	
23	902156	Stephen Connors	
24	854099	CHAS ATOK	
25	0902463	JON HOLT	
26	090209	Ryan Connally	
27	0902317	David Brubaker	
28	833625	John Norton	
29	856749	Bryan Fogg	
30	862776	Tarrod Driscoll	
31	881970	JOSH NIX	
32	A0900133	Jessa Murphy	
33	881054	David C. Jarsh	
34	884349	Craig Snell	
35	E0906563	DAVID REPETA	
36	849242	JASON MANOJAY	
37	888115	Katherine Kline	
38	870562	Andrew Wilds	
39	887717	Brendan Brewer	
40	853013	Brian Ernst	

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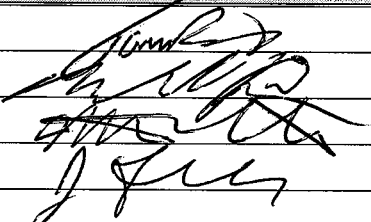
INSTRUCTOR NAME (Print): Daniel Muse, MD	INSTRUCTOR Signature: 	INSTRUCTOR EMT Number:
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	EMT NUMBER:	EMT NAME (Print):	EMT SIGNATURE:
13	867964	James Reidy	
14	874551	Michael Ryan	
15	850579	Matthew Smith	
16	817526	Joseph Feeney	
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