OFFICE OF EMERGENCY MEDICAL SERVICES 01/2016

DPH/OEMS 200-59 CONED ROSTER

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

| PROGRAM TITLE (Print):                      |         | PROGR   | AM SPONSO         | OR (Print): |                       |
|---|---------|---------|-------------------|-------------|-----------------------|
| ROUNDS: EKG'S                               |         | BRO     | BROCKTON HOSPITAL |             |                       |
| PROGRAM LOCATION (Print):                   |         |         | PROGRAM           | 1 DATE:     | PROGRAM TIMES:        |
| WHITMAN KofC; 95 BEDFORD STREET, WHITMAN MA |         | IA      | 3/28/18           |             | 6:30 PM-8:30 PM       |
| OEMS CONED NUMBER:                          | 30 Hour | 20      | Hour              |             |                       |
| 1819-R5-00022-T1 Paramedic NCCR             |         | EMT/AEI | MT NCCR           | ConEd Pro   | ogram Hours:<br>2 HRS |

#### 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 <a href="http://www.mass.gov/dph/oems">http://www.mass.gov/dph/oems</a>.
- 4) FAILURE TO SIGN THE ATTENDANCE ROSTER MEANS THAT NO CREDIT CAN BE AWARDED.

|    | EMT NUMBER: | EMT NAME (Print): | 5MT SIGNATURE: |
|----|-------------|-------------------|----------------|
| 1  | 807588      | ERIC J. ELDER     | 2 1            |
| 2  | E0906642    | Ler Sullivan      | Figh Store     |
| 3  | 840029      | Adam Levine       | 126            |
| 4  | 834199      | John W. Glynn     | Jun            |
| 5  | 800 377     | Alm was letter    | Charles.       |
| 6  | 464214      | Geoffrey Simmons  | Test Lora      |
| 7  | 859477      | Joseph Colanino   | Jae Colan      |
| 8  | 822135      | JAMES BEATTY      | Sour Raidle    |
| 9  | 868480      | James Waterman    | and the        |
| 10 | 855694      | TIMOPHY SPRENCES  | 950            |
| 11 | E0905987    | ROBERT HOVER      | Show The       |
| 12 | 834335      | Mg Hhw Rich       | mest il        |

| Under the pains and penalties of penalties o | erjury, I attest that this is a true and accurate record | of the conduct, hours, and actual |
|--|--|-----------------------------------|
| INSTRUCTOR NAME (Print):   | INSTRUCTOR Signature                                     | INSTRUCTOR EMT Number:            |
| DANIEL MUSE, MD  |  |                                   |
|  | Page of  |                                   |

**OFFICE OF EMERGENCY MEDICAL SERVICES** 

1819-R5-00022-T1

**DPH/OEMS 200-59 CONED ROSTER** 01/2016

-DEPARTMENT OF PUBLIC HEALTH-

(Continuing Education Roster Continued): PROGRAM TITLE (Print): **OEMS CONED NUMBER: ROUNDS: EKG'S** 

|      | EMT NUMBER:   | EMT NAME (Print):  | EMT SIGNATURE;   |
|------|---|--|--|
| 13   | E3138758  | Matthew Charros  | Mich   |
| 14   | 857846  | Michael Nelson   | Marthe   |
| 15   | 847374  | Kovin Donovan  | Kem In   |
| 16   | £0909406  | Keith Batchelder   | Keil Batch   |
| 17   | P6902428  | Cheryl Ouver   | Osing On-  |
| 18   | 836505  | DAVID SANTILL  | D 360 -  |
| 19   | 890245  | Joseph Rose  | Just 16am  |
| 20   | 832766  | Michael A. Peck  | Mala   |
| 21   | 819114  | Scott 6 Bran   | IH A R   |
| 22   | 845207  | Eduard Mc6/45/11/08                                      | Es Maly  |
| 23   | 838763  | Josef Kenealy  |  |
| 24   | 856558  | Dant Ophne   | Dult   |
| 25   | 845815  | DAVIDA. RAMOS  | July 20  |
| 26   | 891024  | STEPHEN A. SCIARA  | Stope Scan   |
| 27   | 861847  | KALIN MAZUREK  | KIM  |
| 28   | 858791  | Nicholas Casso   | 1 min  |
| 29   | 850592  | Scott Machella   | fully  |
| 30   | 894701  | Javrence TALGER  | 77   |
| 31   | 868360  | Chen Patten  | 121/2  |
| 32   | 2085096   | Patrick Honeywell  | Patrac   |
| 33   | 833695  | Aileen Caggiano  | Q Cy   |
| 34   | 856762  | Mike McKas   | Getell   |
| 35   | 42 58 Y   | Conyor Seeley  | 60   |
| 36   | 902081  | 75 NICHOLSON   | of home  |
| 37   | 868346  | Jeffran Kenny  | O Charles of the control of the cont |
| 38   | 861874  | Michael Kabalzie,  |  |
| 39   | 867179  | Matthew Leighton   | Matthew Leggston   |
| 40   | 851794  | Glan Graften   | (de E)   |
| Unde | r the pains and penaltie                            | es of perjury, I attest that this is a true and accurate | record of the conduct, hours, and actual   |
|      | dance for this training outputs UCTOR NAME (Print): | in STRUCTOR Signature:                                   | INSTRUCTOR EMT Number:   |
|      | NIEL MUSE MD  | INCINCTION DISTINGUISCO                                  | INSTRUCTOR EIVIT Number:   |

Note, if you do not have enough space for all students, simply copy and attach additional sheets of this page and number appropriately

### OFFICE OF EMERGENCY MEDICAL SERVICES

--- DEPARTMENT OF PUBLIC HEALTH-

DPH/OEMS 200-59 CONED ROSTER 01/2016

| (Continuing | Education | Roster | Continued | <b>)</b> : |
|-------------|-----------|--------|-----------|------------|
|-------------|-----------|--------|-----------|------------|

| PROGRAM TITLE (Print): | OEMS CONED NUMBER: |
|------------------------|--------------------|
| ROUNDS: EKG'S          | 1819-R5-00022-T1   |

|       | EMT NUMBER:              | EMT NAME (Print):  | EMT,SIGNATURE:   |
|-------|--------------------------|--------------------|--|
| 13    | 852981                   | Craig Werser       | 61/1/1   |
| 14    | 8/3840                   | John & FORCE       | Pola E Fouce   |
| 15    | 881838                   | Peter O'Bries      | Poter open   |
| 16    | 879165                   | Wesley Duger       | hell)  |
| 17    | 86 988                   | Joseph R MessiA    | Joseph Myss  |
| 18    | 881254                   | Clauld C Jardin    | An An  |
| 19    | 2100717                  | Mackenzie Brigg    | M Throng   |
| 20    | 872303                   | Matthew Ryan       | with   |
| 21    | 882868                   | Stavia Mandell     | SMA  |
| 22    | 821802                   | Donald D. Williams | ( Och ) ca -   |
| 23    | 0907674                  | Zachary Baldwin    | Shin Tool  |
| 24    | 825761                   | Thomas Ford        | and fact   |
| 25    | 843334                   | DANE FREMAN        |  |
| 26    | 0902367                  | Kyan Keeley        | Finan Kelley   |
| 27    | 862762                   | PATRICK TANVERS    |  |
| 28    | 874460                   | Matt Creall        | The state of the s |
| 29    | 901797                   | Adam Flaverty      | 08   |
| 30    | 814038                   | DAVED JLEVENSON    | at they  |
| 31    | 808424                   | Todd J. Carmel     | Toold Mend   |
| 32    | 835075                   | Daniel J. Sulljone | Fulf Ll  |
| 33    | 842664                   | JOHN Yrevit        | John French  |
| 34    | E09094/2                 | Brian M Karks      | A De The   |
| 35    | €39386                   | Whichere (W Cox    | Andrew Contraction   |
| 36    | 830416                   | JOHN HOUSE         | The Man was a second   |
| 37    | 87380G                   | BRANDON SMITH      | BOOK   |
| 38    | 846939                   | David Vovis        |  |
| 39    | 8760 95'                 | fat Gbbs           | 1000   |
| 40    | P0902586                 | Kusseu A Lucas     | Thurst A.S.  |
| Llada | r the nains and nonaltic |                    |  |

| 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):  | INSTRUCTOR Signature: | INSTRUCTOR EMT Number: |  |  |
| DANIEL MUSE, MD   |                       | _                      |  |  |

Note, if you do not have enough space for all students, simply copy and attach additional sheets of this page and number appropriately

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### **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: EKG'S

OEMS CONED NUMBER:

1819-R5-00022-T1

|          | EMT NUMBER:       | EMT NAME (Print): | EMT_SIGNATURE: |
|----------|-------------------|-------------------|----------------|
| 13       | P <b>O</b> 902504 | JAMES P. CONNOR   |                |
| 14       | P0902706          | Jerry Thompson    | ann no         |
| 15       | 20906980          | Ceryan Bounnel    | March          |
| 16       | 624194            | TABLE SHUMWAY     | CHI E          |
| 17       | 887829            | Andrew Gurnisa    | Mark           |
| 18       | 870545            | Keri Kelle Ler    | RECO           |
| 19       | 887717            | Brendan Brewer    | 322            |
| 20       | 876090            | Anthony Consu     | 120 625        |
| 21       | 867419            | DOMINIC KURAN     |                |
| 22       | 842039            | John Carley       | gh Cl          |
| 23       | 311684            | Jared Marpy       | M our          |
| 24       | 856749            | BARN FOGG         | Batog          |
| 25       | 883013            | Mychael Mostradio | Manda          |
| 26       | 882601            | 1 Syan Welch      | Buch           |
| 27       |                   |                   |                |
| 28       |                   |                   |                |
| 29       |                   |                   |                |
| 30<br>31 |                   |                   |                |
| 32       |                   |                   |                |
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| لــــــا |                   |                   |                |

| 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):  | INSTRUCTOR Signature: | INSTRUCTOR EMT Number: |  |  |  |
| DANIEL MUSE, MD   |                       |                        |  |  |  |

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