

MASSACHUSETTS OFFICE OF EMERGENCY MEDICAL SERVICES

DEPARTMENT OF PUBLIC HEALTH

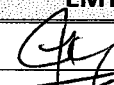
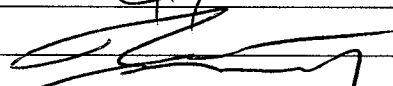

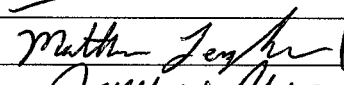
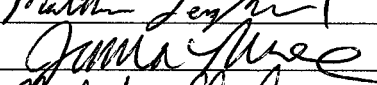
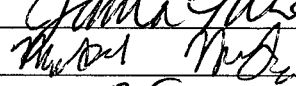
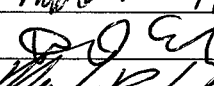
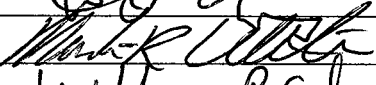
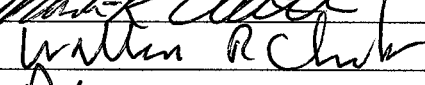
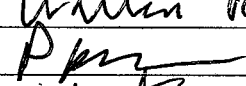
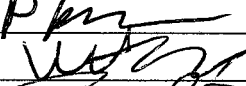
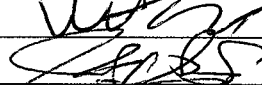
DPH/OEMS 200-59
CONED ROSTER
01/2016

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

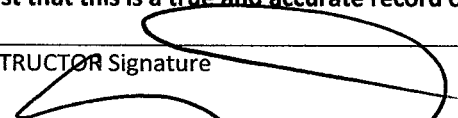
PROGRAM TITLE (Print): M&M Rounds Sports Injury		PROGRAM SPONSOR (Print): CMTI/Brewster Ambulance	
PROGRAM LOCATION (Print): Brewster Ambulance 1555 Main St. Brockton, MA		PROGRAM DATE: 12/11/2019	PROGRAM TIMES: 1800-2000
OEMS CONED NUMBER: #1929-R4-06250-T1	<input type="checkbox"/> 30 Hour Paramedic NCCR	<input type="checkbox"/> 20 Hour EMT/AEMT NCCR	<input checked="" type="checkbox"/> ConEd Program Hours. 4

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	868346	Jeffrey Kelly	
2	862763	Phil Woolf	
3	846779	George Burton Jr.	
4	867179	Matthew Leighton	
5	896569	Jenna Pereira	
6	0900324	Mitchell McGowan	
7	856640	Dan Geary	
8	878196	Mark Whitman	
9	833723	William R. Clarke	
10	0402827	Proston Klem	
11	083470	William McWaters	
12	835691	Dereen Avery	

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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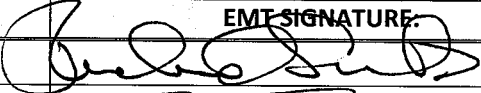
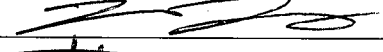

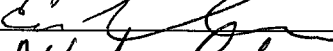

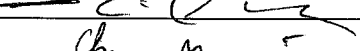

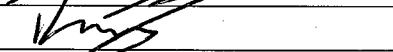
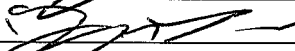
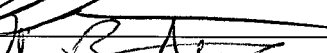
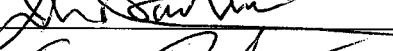
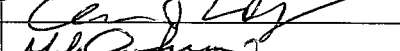
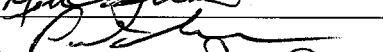
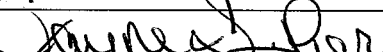
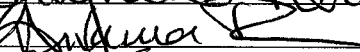
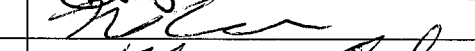

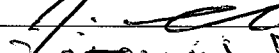


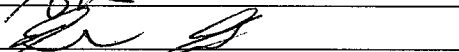
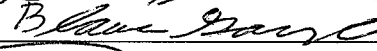


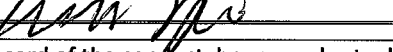

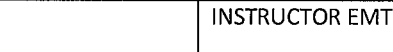

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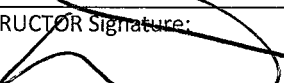
DPH/OEMS 200-59
CONED ROSTER
01/2016

(Continuing Education Roster Continued):

PROGRAM TITLE (Print): TBI AND SPORTS INJURIES	OEMS CONED NUMBER: 1920-R4-06250-T1
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#	EMT NUMBER:	EMT NAME (Print):	EMT SIGNATURE:
13	838962	Richard S. Smith	
14	E0908580	JOSEPH JUDGE	
15	875727	Gregory Dancette	
16	843382	Eric Peterson	
17	801924	Wilson Cho	
18	819677	John HAMBUR	
19	0902696	Chris Macone	
20	872959	Michael Fournier	
21	876931	Kevin Foster Jr	
22	P0902315	JUSTIN DONNA	
23	862482	Chris Lewis	
24	830753	John Bartwell	
25	P0902687	Connor Duffy	
26	E871792	Melissa Greener	
27	E848059	Paul Smyth	
28	825338	JAYNO T. PERCO	
29	828162	Arianna Royer	
30	840636	Mike Tray	
31	848049	Michael D Beal	
32	842667	JAMES SHEPARD	
33	838666	VICTORIA FANO	
34	857846	Michael Nelson	
35	876924	SHANE CAROL	
36	P0903264	Jacob Iny	
37	E 3362340	Blair GOMES	
38	819226	Richard CICCHELLI	
39	890897	Charles Boudreau	
40	849286	Anthony Mirag	

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INSTRUCTOR NAME (Print):	INSTRUCTOR Signature: 	INSTRUCTOR EMT Number:
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Note, if you do not have enough space for all students, simply copy and attach additional sheets of this page and number appropriately

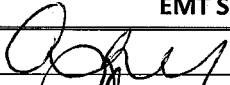
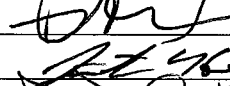
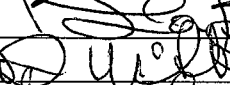
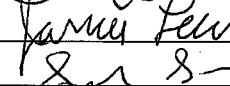
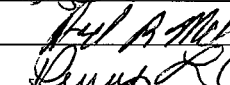
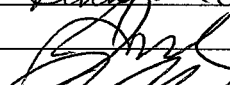


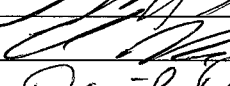
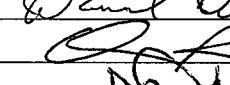
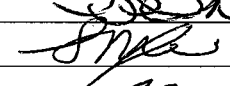
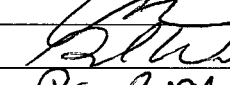
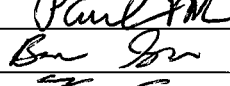
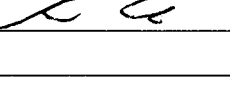
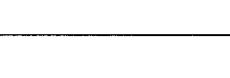
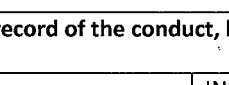

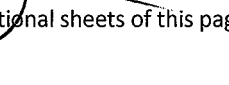



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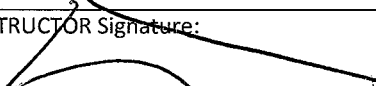
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(Continuing Education Roster Continued):

PROGRAM TITLE (Print): TBI AND SPORTS INJURIES	OEMS CONED NUMBER: 1920-R4-06250-T1
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	EMT NUMBER:	EMT NAME (Print):	EMT SIGNATURE:
13	8880728	Anne dale Cro	
14	865564	Peter T. Weoner	
15	865056	Jonathan Hickey	
16	894969	Shawn O. Palmer	
17	855576	David McGillis	
18	847912	James Laurina	
19	852547	Sharon S Leane	
20	899922	David McKenna	
21	871281	Penny Cirino	
22	0902690	Josh Sproul	
23	856599	JEFF GERMAIN	
24	889560	Matthew A. Gray	
25	883923	David Burke	
26	0903258	Austin Hurley	
27	863937	Michael Prinoia	
28	875216	Chris Hamilton	
29	816276	Daniel DelPrete	
30	0902663	Daniel Preach	
31	831240	Scott Rogers	
32	885868	SHAWN MAURISONE	
33	841001	Greg LaFleur	
34	871073	Daniel Wauhab	
35	0900061	PAUL M COUTNER	
36	873809	Brandon Smith	
37	874469	Kevin O'Hara	
38			
39			
40			

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INSTRUCTOR NAME (Print):	INSTRUCTOR Signature: 	INSTRUCTOR EMT Number:
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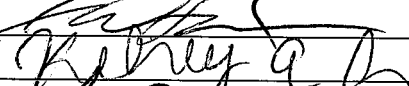
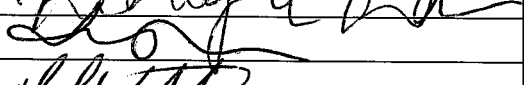
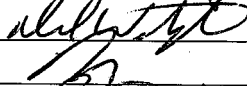
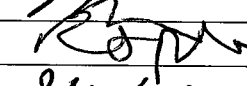
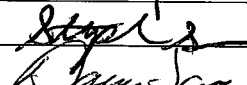
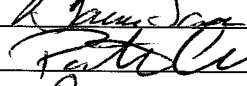
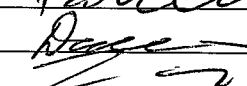
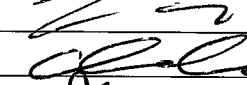
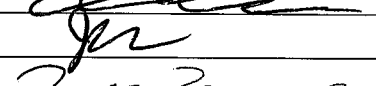
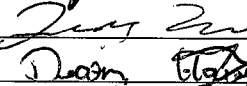
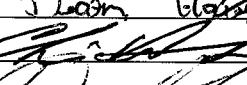
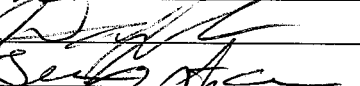
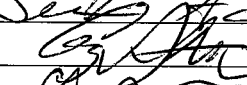
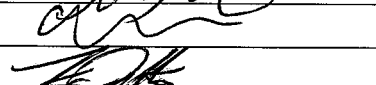

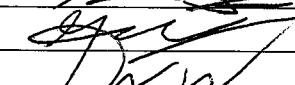
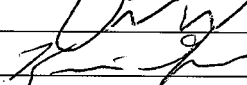
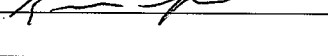
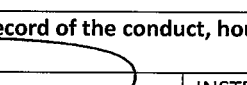
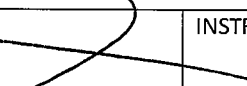
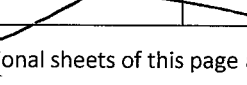
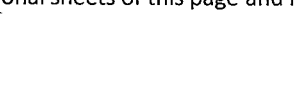



MASSACHUSETTS OFFICE OF EMERGENCY MEDICAL SERVICES

DEPARTMENT OF PUBLIC HEALTH

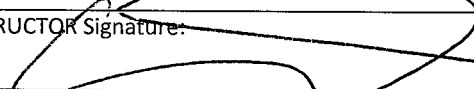
DPH/OEMS 200-59
CONED ROSTER
01/2016

(Continuing Education Roster Continued):

PROGRAM TITLE (Print): TBI AND SPORTS INJURIES	OEMS CONED NUMBER: 1920-R4-06250-T1
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#	EMT NUMBER:	EMT NAME (Print):	EMT SIGNATURE:
13	872673	Elizabeth Kuti	
14	840195	SHEEHAN, TIMOTHY J	
15	0402465	Jonathan Hart	
16	E0911993	Kelsy Anderson	
17	861928	SEAN J PETERS	
18	858434	Daniel Westlake	
19	901987	Michael Sullivan	
20	E892560	ROBERT STAPLES	
21	891024	STEPHEN SCIARA	
22	891025	Dominic Sciara	
23	883780	Patrick Campbell	
24	P0902303	Roniel Pausas	
25	P0902710	Josh Lynch	
26	9102806	Derrin Kelm	
27	870039	Jean F. Jean Louis	
28	P0903482	James McFarlane	
29	60913416	Duam Hagan	
30	849763	CHRISTOPHER A. BARBOUR	
31	P0901844	Daniel Hill	
32	885052	Sean Acee	
33	0906525	GARY A. SMITH	
34	0901555	MOLING, OWEN	
35	862807	Kevin Dardelle	
36	886306	PATRICK SAMMON	
37	—	GREGORY HILLIARD	
38	867085	Matthew Cohen	
39	843624	Kevin Galligan	
40			

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