

Advanced Cardiac Life Support for the Experienced Provider (ACLS EP) Registration Form

Mandatory Prerequisites:	<ul style="list-style-type: none"> ✓ Seasoned ACLS providers who manage complex cardiovascular, respiratory, and other emergencies and need to renew their ACLS course completion requirements ✓ Comprehensive understanding of ACLS algorithms and practice skills ✓ Participants must successfully complete the Heart & Stroke pre-course exam within two attempts ✓ Valid Heart & Stroke BLS certification (within the last 12 months) ✓ Valid Heart & Stroke ACLS certification (within the last 24 months)
Time:	0800-1600 hours
Location:	HSN Simulation Lab, Sudbury Outpatient Centre, 865 Regent Street South

Course Description

This course is designed to help you improve the outcomes of your patients experiencing complex cardiovascular, respiratory and other emergencies. This is accomplished by expanding on core ACLS guidelines and emphasizing a systematic approach to patient care, critical thinking skills and critical decision-making strategies. Through didactic instruction and active participation in case-based scenarios, learners will enhance their skills in the diagnosis and treatment of cardiopulmonary pre-arrest, arrest, and post-arrest patients.

Cancellation Policy

No refunds or transfers will be issued within 7 business days of the course. **If you are feeling unwell, or have any symptoms associated with COVID-19, please contact certifications@hsnsudbury.ca to cancel your registration.**

SELECT A COURSE DATE

☐ June 14, 2021

☐ October 4, 2021

Name: _____

Organization: _____ Unit: _____ Professional Designation: _____

Email: _____ Phone: _____

Food Allergies or Dietary Restrictions: _____

☐ By checking this box, I confirm that I have read and understand the Cancellation Policy which will be strictly enforced.

☐ By checking this box, I confirm that I have met/completed all mandatory prerequisites for this course.

METHOD OF PAYMENT

☐ Visa ☐ Mastercard ☐ AMEX

Card Number: _____

Expiry Date: _____ CVV: _____

Name as it Appears on Card: _____

Cardholder's Signature: _____

REGISTRATION FEES

☐ \$300.00

Submit your registration form and valid Heart & Stroke certificates to certifications@hsnsudbury.ca
Only Heart & Stroke BLS and ACLS certificates will be accepted.