

# Heartsaver® Course Roster

## Emergency Cardiovascular Care Programs



### Course Information

- ☐ Heartsaver CPR AED  
☐ Child CPR AED ☐ Infant CPR ☐ Exam
- ☐ Heartsaver First Aid CPR AED ☐ Child CPR AED ☐ Infant CPR  
☐ Exam ☐ Heartsaver Total ☐ Office ☐ Educator
- ☐ Heartsaver First Aid  
☐ Exam
- ☐ Heartsaver Pediatric First Aid CPR AED ☐ Adult CPR ☐ Exam  
☐ Heartsaver Pediatric Total ☐ Babysitter ☐ Water Safety
- ☐ Heartsaver for K-12 Schools  
☐ Child CPR AED ☐ Infant CPR ☐ First Aid ☐ Exam
- ☐ Heartsaver Instructor
- Additional Course/Path Information

Lead Instructor \_\_\_\_\_

Lead Instructor ID# \_\_\_\_\_

Card Expiration Date \_\_\_\_\_

Training Center \_\_\_\_\_

Training Center ID# \_\_\_\_\_

Training Site Name (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

City, State ZIP \_\_\_\_\_

Course Location \_\_\_\_\_

Course Start Date/Time \_\_\_\_\_ Course End Date/Time \_\_\_\_\_ Total Hours of Instruction \_\_\_\_\_

No. of Cards Issued \_\_\_\_\_ Student-Manikin Ratio \_\_\_\_\_ Issue Date of Cards \_\_\_\_\_

### Assisting Instructor *(Attach copy of instructor aligned with a TC other than the primary TC)*

Name and Instructor ID#	Card Exp. Date	Name and Instructor ID#	Card Exp. Date
1.		5.	
2.		6.	
3.		7.	
4.		8.	

I verify that this information is accurate and truthful and that it may be confirmed. This course was taught in accordance with AHA guidelines.

\_\_\_\_\_  
Signature of Lead Instructor

\_\_\_\_\_  
Date

# Course Participants



Date \_\_\_\_\_ Course \_\_\_\_\_ Lead Instructor \_\_\_\_\_ Lead Instr. ID# \_\_\_\_\_

<i>Name and Email</i> <i>Please PRINT as you wish your name to appear on your card.</i> <i>Please print email address legibly.</i>	<i>Mailing Address/Telephone</i>	<i>Complete/ Incomplete</i>	<i>Remediation/Date Completed (if applicable)</i>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

# Heartsaver Pathways Optional Topics Checklist



**Instructors:** Please complete the checklist below for participants who take the optional topics for the following course paths:

## Adult

- Heartsaver
- Office
- Educator

## Pediatric

- Heartsaver Pediatric
- Babysitter
- Water Safety

Check the tables in Part 4 of your instructor manual to determine whether the topics below are optional for each participant's course path. After completing this checklist, you will also need to select these topics for each participant's certificate. You may want to prepare and print your certificates before class.

## CPR AED

- ☐ How to Help an Adult With a Drug Overdose Emergency (Adult)
- ☐ Drug Overdose (Pediatric)
- ☐ Water Safety/Drowning

## First Aid Medical Emergencies

- ☐ Breathing Problems (Asthma) (Adult)
- ☐ Choking in an Adult, a Child, or an Infant (Adult)
- ☐ Fainting
- ☐ Diabetes and Low Blood Sugar
- ☐ Seizure

## First Aid Injury Emergencies

- ☐ Shock
- ☐ Bleeding From the Nose
- ☐ Bleeding From the Mouth
- ☐ Tooth Injuries
- ☐ Eye Injuries
- ☐ Penetrating and Puncturing Injuries

## First Aid Injury Emergencies (continued)

- ☐ Amputation
- ☐ Internal Bleeding
- ☐ Concussions
- ☐ Head, Neck, and Spine Injuries
- ☐ Broken Bones and Sprains
- ☐ Splinting
- ☐ Burns and Electrical Injuries
- ☐ Bites and Stings
- ☐ Heat-Related Emergencies
- ☐ Cold-Related Emergencies
- ☐ Poison Emergencies

## First Aid Prevention

- ☐ Risks of Smoking and Vaping
- ☐ Benefits of a Healthy Lifestyle
- ☐ Preventing Illness and Injury