

# COMMUNITY SAFETY CONSULTANTS AHA CPR COURSE RECORD SHEET

Instructor(s): \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, ZIP-Code: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_ Total Hours: \_\_\_\_\_ Total Days: \_\_\_\_\_

# of INITIAL students: \_\_\_\_ ; # of RENEWAL students: \_\_\_\_ ; # of INCOMPLETE students: \_\_\_\_ ; Student/Manikin Ratio: \_\_\_\_ (Max = 3:1)

Instructor/Student Ratio: \_\_\_\_ (Max: 1:6); Manikin decontaminated following CSC policy by: \_\_\_\_\_

INSTRUCTOR COMMENTS (include remediations): \_\_\_\_\_

***NOTE: Students need a score of 84% or above on the written test to pass or they MUST be remediated.***

I verify that this information is accurate, and this course was taught in accordance with AHA guidelines.

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

<u>CHECK OFF COURSE TYPE</u>	<u>MARK OFF SKILLS COMPLETED</u>	<u>Equipment Used: ALL INSTRUCTORS MUST FILL IN</u>
<input type="checkbox"/> Family & Friends	<i><u>Heartsaver AED</u></i>	AHA Bag #: _____ AED Trainer(s) #: _____
<input type="checkbox"/> CPR in School	<input type="checkbox"/> Adult CPR / AED	F/A Instructor Box #: _____ F/A Bag #: _____ F/A Box #: _____
<input type="checkbox"/> BLS Healthcare Provider	<input type="checkbox"/> Child CPR / AED	Other Equipment used (type): _____
<input type="checkbox"/> BLS Instructor	<input type="checkbox"/> Infant CPR	Manikins used in class -- Adult: _____
	<i><u>Heartsaver First Aid</u></i>	Child: _____
	<input type="checkbox"/> Adult First Aid	Infant: _____
		Paid \$: _____ PO: _____ Check: _____
		Cards sent on: ____ / ____ / ____ To whom: _____

# PLEASE - NEATLY PRINT INFORMATION

Write grade less than 84. Fill Passing grade later  
 Practical & Final  
 P- Pass, R- Remediate, I- Inc.

COURSE  
 DATES

80  
 82

	BLS	REN	FIRST NAME	LAST NAME	ADDRESS (Street, City, State)	ZIP CODE	COURSE DATES			WRIT.	PRAC	FIN	INC	PU	✓ \$	AMT
						PHONE										
1																
2																
3																
4																
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**INSTRUCTORS: Please be sure the above list is LEGIBLE and COMPLETE before submitting.**

# Heartsaver® CPR AED Skills Sheet

American Heart Association  
Heartsaver CPR AED  
Adult and Child CPR AED  
Side 1 of 2

Student Name: \_\_\_\_\_

Test Date: \_\_\_\_\_

Step	Critical Performance Steps	Adult CPR AED ✓ if done correctly	Child CPR AED ✓ if done correctly
1	Verbalizes that the scene is safe		
2	Checks for response—tap and shout		
3	Yells for help		
4	Tells someone to phone the emergency response number (or 911) and get an AED (for adult only)		
5	Checks for no breathing or only gasping <i>Minimum 5 seconds; maximum 10 seconds</i>		
6	Locates hand placement for compressions <i>Moves clothes out of the way of the chest Lower half of the breastbone; 1 or 2 hands for child</i>		
7	Delivers first set of compressions <i>Gives 30 compressions in 18 seconds or less</i>		
8	<b>ADULT: Gives 2 breaths with a mask</b> <b>CHILD: Gives 2 breaths without a mask</b> <i>At least 1 breath results in visible chest rise Breaths given and compressions started within 10 seconds</i>		
9	Delivers second set of compressions <i>Gives at least 23 of 30 compressions in the correct chest location</i>		
10	<b>ADULT: Gives 2 breaths with a mask</b> <b>CHILD: Gives 2 breaths without a mask</b> <i>At least 1 breath results in visible chest rise Breaths given and compressions started within 10 seconds</i>		
11	Instructor says, <b><i>"You have just completed 5 sets of compressions and breaths."</i></b> Leaves to phone 911 and get an AED (for child only)		
12	Turns on the AED immediately after it arrives		
<p>The next step is done only with a manikin with a feedback device designed to indicate when compressions are 2 inches deep (child) or more (adult) and/or indicate that chest recoil is complete. If no feedback device, STOP THE TEST.</p>			
13	Delivers third set of compressions of adequate depth <i>Acceptable if at least 23 of 30 compressions indicate a depth of at least 2 inches (adult) or about 2 inches (child)</i>		
		<b>STOP THE TEST</b>	<b>STOP THE TEST</b>

# Heartsaver® CPR AED Skills Sheet

American Heart Association  
Heartsaver CPR AED  
Infant CPR  
Side 2 of 2

Student Name: \_\_\_\_\_

Test Date: \_\_\_\_\_

Step	Critical Performance Steps	Infant CPR ✓ if done correctly
1	Verbalizes that the scene is safe	
2	Checks for response—tap and shout	
3	Yells for help	
4	Checks for no breathing or only gasping <i>Minimum 5 seconds; maximum 10 seconds</i>	
5	Locates hand placement for compressions <i>Two fingers just below the nipple line on the breastbone</i>	
6	Delivers first set of compressions <i>Gives 30 compressions in 18 seconds or less</i>	
7	Gives 2 breaths without a mask <i>At least 1 breath results in visible chest rise</i> <i>Breaths given and compressions started within 10 seconds</i>	
8	Delivers second set of compressions <i>Gives at least 23 of 30 compressions in the correct chest location</i>	
9	Gives 2 breaths without a mask <i>At least 1 breath results in visible chest rise</i> <i>Breaths given and compressions started within 10 seconds</i>	
10	Instructor says, <b>“You have just completed 5 sets of compressions and breaths.”</b> Verbalizes the need to leave to phone 911	
<p><i>The next step is done only with a manikin with a feedback device designed to indicate when compressions are about 1½ inches deep or indicate that chest recoil is complete. If no feedback device, STOP THE TEST.</i></p>		
11	Delivers third set of compressions of adequate depth <i>Acceptable if at least 23 of 30 compressions indicate a depth of about 1½ inches</i>	
		<b>STOP THE TEST</b>

**Test age groups taught in this course. Record all test results here. Sign where indicated.**

Test Summary	PASS = above steps all done correctly NR = needs remediation  Circle PASS or NR for each age group tested	Adult CPR AED		Child CPR AED		Infant CPR	
		PASS	NR	PASS	NR	PASS	NR
Instructor signature affirms that skills tests were done according to AHA Guidelines. Save this sheet with the course records.		Instructor Signature: _____ Print Instructor Name: _____ Date: _____					

# Heartsaver® First Aid Skills Sheet

American Heart Association  
Heartsaver First Aid  
Side 1 of 2

Student Name: \_\_\_\_\_

Test Date: \_\_\_\_\_

Step	Critical Performance Steps	✓ if done correctly
<b>Removing Gloves</b>		
Instructor tells student, <i>"EMS has arrived and takes over. You may now remove your gloves."</i>		
1	Removes gloves by gripping one glove on the outside near the cuff and peels it off, inside out	
2	Cups the inside-out glove with the gloved hand	
3	Uses 2 fingers of the bare hand near the cuff to peel the second glove off, with the first glove inside it	
4	Verbalizes the need to dispose of gloves properly	
<b>Finding the Problem</b>		
Instructor tells student, <i>"You will demonstrate finding the problem for a person who is sick or injured. The person will act and respond as a person who is actually sick or injured. You find a coworker lying on the floor. You may begin."</i>		
1	Verbalizes that the scene is safe	
2	Verbalizes putting on gloves	
3	Checks for response—tap and shout <i>If the sick or injured person does not act accordingly, the instructor tells the student, "The person does not move or respond in any way when you tap and shout."</i>	
4	Tells someone to phone the emergency response number (or 911) and get an AED	
5	Checks for no breathing or only gasping <i>Minimum 5 seconds; maximum 10 seconds</i> <i>If the student indicates that the person is not breathing, the instructor corrects the student by saying, "The person is breathing."</i>	
6	Looks for obvious signs of injury	
7	Verbalizes checking for medical identification jewelry	

# Heartsaver® First Aid Skills Sheet

American Heart Association  
Heartsaver First Aid  
Side 2 of 2

Student Name: \_\_\_\_\_

Test Date: \_\_\_\_\_

Step	Critical Performance Steps	✓ if done correctly
<b>Using an Epinephrine Pen</b>		
Instructor tells student, <i>"A coworker is having a severe allergic reaction, has an epinephrine pen, and needs help using it. You have completed all previous steps and are now ready to use the epinephrine pen. Show the steps for using the epinephrine pen."</i>		
1	Holds the epinephrine pen in the fist while not touching either end	
2	Takes off the safety cap	
3	Presses the epinephrine pen firmly against the outer side of the person's thigh, halfway between the hip and knee, and holds in place for about 10 seconds	
4	Removes the epinephrine pen by pulling the pen straight out from the leg	
<b>Stopping Bleeding and Bandaging</b>		
Instructor tells student, <i>"You will demonstrate stopping bleeding and then bandaging a small cut on this person's forearm. You have completed all previous steps and are now ready to begin."</i>		
1	Has the person place pressure over the cut with clean dressings while the student puts on gloves	
2	Verbalizes putting on gloves	
3	Applies pressure to the bleeding area <i>After about 15 seconds, the instructor tells the student, "You can now see blood on the dressing. The bleeding is not stopping."</i>	
4	Adds more dressings and presses harder to stop the bleeding <i>After about 15 seconds, the instructor tells the student, "The bleeding has stopped."</i>	
5	Applies a bandage over the dressings	

**STOP THE TEST**

Test Summary									
PASS = above steps all done correctly NR = needs remediation  Circle PASS or NR for each age group tested	Removing Gloves		Finding Problem		Epinephrine Pen		Bleeding		
	PASS	NR	PASS	NR	PASS	NR	PASS	NR	
Instructor signature affirms that skills tests were done according to AHA Guidelines. Save this sheet with the course records.					Instructor Signature: _____ Print Instructor Name: _____ Date: _____				

# ECC Course Evaluation

for ACLS, BLS for Healthcare Providers  
and PALS Classroom Courses



Date \_\_\_\_\_ Instructor(s) \_\_\_\_\_

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

Please answer the following questions about your **Instructor**.

My Instructor:

1. Provided instruction and help during my skills practice session
  - a. Yes
  - b. No
2. Answered all of my questions before my skills test
  - a. Yes
  - b. No
3. Was professional and courteous to the students
  - a. Yes
  - b. No

Please answer the following questions about the **course content**.

1. The course learning objectives were clear.
  - a. Yes
  - b. No
2. The overall level of difficulty of the course was
  - a. Too hard
  - b. Too easy
  - c. Appropriate
3. The content was presented clearly.
  - a. Yes
  - b. No
4. The quality of videos and written materials was
  - a. Excellent
  - b. Good
  - c. Fair
  - d. Poor
5. The equipment was clean and in good working condition.
  - a. Yes
  - b. No

Please answer the following questions about your **skill mastery**.

1. The course prepared me to successfully pass the skills session.
  - a. Yes
  - b. No
2. I am confident I can use the skills the course taught me.
  - a. Yes
  - b. No
  - c. Not sure

3. I will respond in an emergency because of the skills I learned in this course.

- a. Yes
- b. No
- c. Not sure

4. I took this course to obtain professional education credit or continuing education credit.

- a. Yes
- b. No

### Optional questions:

Have you previously taken this course via another method, such as in a classroom or online?

Which learning method do you prefer and why?

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Were there any strengths or weaknesses of the course that you would like to comment on?

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What would you like to see in future courses developed by the AHA?

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### Upon completion:

Please return to instructor or email this form to

randy@communitysafetyconsultants.com  
Instructor or Training Center

or mail to

American Heart Association  
ECC Training Department  
7272 Greenville Ave.  
Dallas, TX 75231

Scan and email to: [ecctraining@heart.org](mailto:ecctraining@heart.org)