

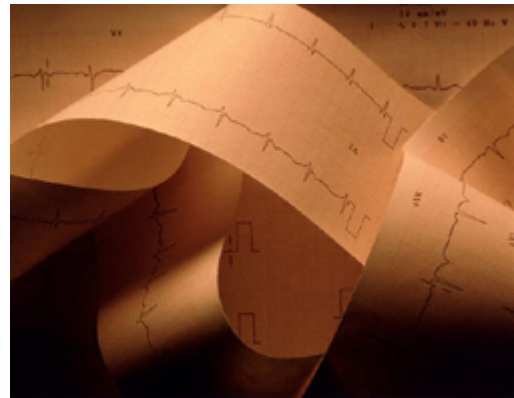


## EMERGENCY MEDICINE LEARNING & RESOURCE CENTER 12 LEAD EKG INTERPRETATION COURSES

**Course Description:** 8 Hour Course designed to help emergency care providers provide clinically sound 12-Lead EKG acquisition and interpretation that is immediately applicable to the emergency care setting

**Course Objectives:**

1. Identify key components of the 12 Lead EKG
2. Recognize the typical EKG patterns of acute coronary syndrome
3. Acquire an accurate 12 Lead EKG
4. Define/list the acute coronary syndromes
5. Identify the clinical presentation of acute coronary syndromes
6. Recall indication for additional leads



**Dates:** September 19, 2008 8:30am – 5:30pm

**Faculty:** Tim Phalen, BS, EMT-P. Tim has provided 12 Lead EKG education to more than 25,000 EMS providers over the last decade. He is the author of "The 12 Lead ECG in Acute Myocardial Infarction" published by Mosby. Tim is nationally renowned for the easy-to-understand manner through which he presents 12 lead EKG education.

**Location:** 3717 South Conway Road, Orlando, Florida

**Registration Fee:** \$160 (includes course manual)

**Continuing Education Accreditation - 8.0 hours:**

Continuing Education Coordinating Board for EMS (CECBEMS)

Florida Department of Health, Bureau of EMS

Florida Board of Nursing



EMLRC



EMERGENCY MEDICINE LEARNING & RESOURCE CENTER  
3717 S. Conway Road · Orlando, FL · 32812 · (800) 766-6335 · www.emlrc.org

## EMERGENCY MEDICINE LEARNING & RESOURCE CENTER 12 LEAD EKG INTERPRETATION COURSES

Name \_\_\_\_\_  
First MI Last

Agency \_\_\_\_\_ Title \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Email \_\_\_\_\_

Type of License \_\_\_\_\_

State License # \_\_\_\_\_ Expiration Date \_\_\_\_\_

National License # \_\_\_\_\_ Expiration Date \_\_\_\_\_

**Basic 12 Lead EKG Interpretation** September 19, 2008

Registration Fee: \$160.00

Total Registration Fee \_\_\_\_\_

PAYMENT METHOD - (Payment must accompany registration form)

MC  Visa  Check # \_\_\_\_\_ Credit Card # \_\_\_\_\_ Exp Date \_\_\_\_\_  
**(EMLRC does not accept American Express)**

Cardholder Name \_\_\_\_\_ Cardholder Signature \_\_\_\_\_

*Credit card number needed to guarantee registration unless check or P.O accompanies registration form.*

Cancellations and refunds will be made **only if requested in writing** to the Registrar greater than 14 days before the start of the course. No refunds will be made 14 or less days prior to start of course. For all cancellations an administrative fee of \$75.00 will be retained.

**Please make checks payable to:**  
**Emergency Medicine Learning & Resource Center**  
3717 S. Conway Road, Orlando, Florida 32812 or Fax to: (407) 281-4407  
Phones: (407) 281-7396 / (800) 766-6335  
Federal Tax ID #59-3001777

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