



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

EMT RECERTIFICATION/CONTINUING EDUCATION COURSE
National Standard EMT-Basic Refresher course adhering to the 1994 DOT EMT Basic Curriculum
Florida Department of Health, Bureau of EMS Accredited
CECBEMS Accredited

August 7 & 8 & 28 & 29, 2010
3717 South Conway Road
Orlando, Florida

Saturday, August 7, 2010

8:00am – 5:00pm

EMS and the Law – 2 hours
Chest Trauma – 2 hours
Abdominal Trauma – 2 hours
Head Trauma – 2 hours

Sunday, August 8, 2010

8:00am – 5:00pm

Start Triage/JumpStart Triage – 2 hours
EMS ICS – 1 hour
Emergency Incident Rehab – 1 hour
Behavioral Emergencies – 2 hours
Cerebral Ischemic Syndromes – 2 hours

Saturday, August 28, 2010

8:00am – 5:00pm

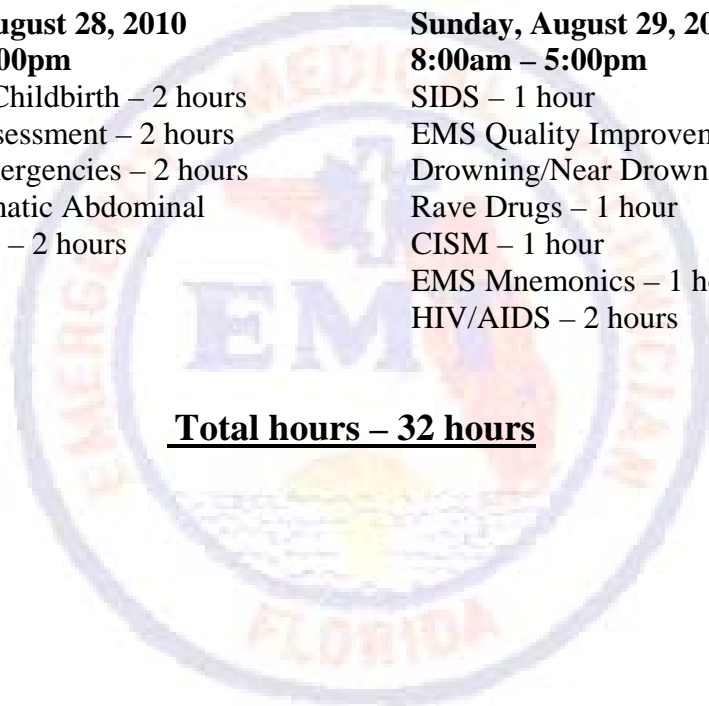
Emergency Childbirth – 2 hours
Pediatric Assessment – 2 hours
Geriatric Emergencies – 2 hours
Non – Traumatic Abdominal
Emergencies – 2 hours

Sunday, August 29, 2010

8:00am – 5:00pm

SIDS – 1 hour
EMS Quality Improvement – 1 hour
Drowning/Near Drowning – 1 hour
Rave Drugs – 1 hour
CISM – 1 hour
EMS Mnemonics – 1 hour
HIV/AIDS – 2 hours

Total hours – 32 hours





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EMT Recertification/Continuing Education Course

August 7 & 8 and 28 & 29, 2010

3717 South Conway Road
Orlando, Florida 32812 (407) 281-7396

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 _____

Registration Fees: (Please circle applicable fee)

EMT Recertification/Con Ed Course (32 hours) \$200.00

One day Continuing Education (8 hours) \$75.00

August 7 ___ August 8 ___ August 28 ___ August 29 ___

AIDS Lecture only (2 hours) January 31 \$30.00

Total Fees Enclosed \$ _____

PAYMENT METHOD - (Payment must accompany registration form) **American Express not accepted**

MC Visa Check # _____ Credit Card # _____ Exp. Date _____

Cardholder Name _____ Cardholder Signature _____

NOTE: Credit card number is needed to guarantee registration unless check or purchase order accompanies registration form.

Checks payable to: Emergency Medicine Learning & Resource Center (EMLRC)

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 WWW.EMLRC.org Cancellation and refunds will be made **only if requested in writing** to the EMT Recertification Registrar. No refunds will be made for requests RECEIVED after July 23, 2010. For all cancellations received on or before July 23, 2010 an administrative fee of \$50.00 will be retained. You may send a substitute from your organization.

