



LIFESAVING SOCIETY

Emergency First Aid/AED (8 h)

☐ Certification

Please print clearly each candidate's information

	Date of birth	General						Resuscitation						Medical		Trauma	Results
		1- Standard first aid principles	2- Legal aspects of intervention	5- Communication with the EMS	6- Anatomy and physiology	7- Prehospital assessment	8- Primary assessment	10- Chain of Survival	11- CPR - Adult and children	12- Airway obstruction - Conscious- Adult and children	13- Airway obstruction - Unconscious - Adult and children	14- Rescue breathing complications	15 & 16- AED/ 1 and 2 rescuer(s)	17- Shock / fainting	19a- Cardiovascular emergencies	19b- Respiratory emergencies	
Name / Last name	Y																
Member # Gender M F																	
Address	M																
City Postal code																	
Phone	D																
E-mail																	
Name / Last name	Y																
Member # Gender M F																	
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Phone	D																
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Member # Gender M F																	
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Member # Gender M F																	
Address	M																
City Postal code																	
Phone	D																
E-mail																	

✓ Satisfactory performance

F Fail

Total Fail

Total Pass

Instructor information

Course information

Name:	Started on: (dd/mm/yy) Ended on: (dd/mm/yy)
Member #:	Course location:
E-mail:	Affiliate: Affiliate #:
Signature:	☐ Exam fees attached ☐ Exam fees not attached, send invoice

Return completed test sheet to Lifesaving Society Branch office promptly after the course (max 2 weeks). Retain one copy for your records Do not send cash by mail

Check box if there are more candidates on other page
This test sheet is page ____ of ____