



**Cardiopulmonary Resuscitation & AED
Health Care Provider**

Please print clearly each candidate's information

		Date of birth	Health Care Provider												Results		
			1 - Standard first aid principles	2 - Legal aspects of an intervention	5 - Communication with the EMS	8 - Primary assessment	10 - Chain of survival	11 - CPR : Adult, child & infant	12- airway obstruction - Conscious adult, child & infant	13- Airway obstruction : Inconscious adult, child & infant	14- Rescue breathing complications	15- AED knowledge: use and operation	16- 2 Rescuers CPR & AED protocol	19a - Cardiovascular emergencies		Rescue breathing	Use of Bag-Valve-Mask
Name / Last name		Y															
Member # Gender M F																	
Address		M															
City Postal code																	
Phone		D															
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☒ Satisfactory performance			Total fail				Total Pass										
Instructor information																	
Name / Last name:		Started on: (dd/mm/yy) Ended on: (dd/mm/yy)															
Member #:		Course location:															
E-mail:		Affiliate:															
Signature:		Affiliate #:															
☐ 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).

Do not send cash by mail

Check box if there are more candidates on other page

This test sheet is page ____ of ____