



Pacific Medical Training
 PO BOX 273
 Spring House, PA 19477
 1-800-417-1748

BLS PROVIDER SKILLS VERIFICATION FORM

After completing Pacific Medical Training's online BLS course, email this completed form with your instructor's BLS instructor credential to support@pacificmedicaltraining.com. The instructor will initial each area that has been successfully completed.

SKILL	PASS	Requires Remediation
Recognize Lack of Normal Breathing and Pulse <ul style="list-style-type: none"> • Activate the EMS or Internal Emergency System • Either get or send someone to get the AED 		
Initiate Compressions at a rate of 100-120/min <ul style="list-style-type: none"> • Correct Depth 2"-2.4" (5-6cm) • Allow complete chest recoil • Change Compressors every 2 minutes 		
Open the Airway Using the Head Tilt/Chin Lift <ul style="list-style-type: none"> • Ventilate successfully using a ration of 30:2 		
Attach and Utilize the AED as soon as it Arrives <ul style="list-style-type: none"> • Initiate compressions immediately following shock 		

The above information is accurate to the best of my knowledge. The INSTRUCTOR holds a valid American Heart Association or other NREMT-recognized BLS instructor credential. The STUDENT has successfully demonstrated the skills listed above.

STUDENT		
_____	_____	_____
Name	Signature	Date
_____	_____	
State and license number	NREMT number (if available)	

INSTRUCTOR		
_____	_____	_____
Name	Signature	Date
_____	_____	
Profession	Specialty	