



INTERIOR REGION EMERGENCY MEDICAL SERVICES COUNCIL, INC.

2503 18th Avenue • Fairbanks, Alaska 99709
Phone (907) 456-3978 • Fax (907) 456-3970

AHA NEW INSTRUCTOR CHECKLIST

Instructor's Name: _____ Date: _____

Please select class this sheet pertains to:

BLS Heartsaver ACLS PALS

All paperwork must be received before issuing a new instructor card

Date of Instructor Course: _____ (MUST be monitored within 6 months of this date)

- Instructor Candidate Application
- Copy of current provider card (front and back)
- Copy of online Instructor and Provider Completion Certificates
- Signed Memorandum of Understanding
- Signed Credit Application
- Joined AHA training network (<http://ahainstructornetwork.americanheart.org>)

IREMSC OFFICE INFO:

- Accept AHA training network application AHA ID: _____
- Enrollware account set up
- New Instructor file created (AAdmin/AHA/Instructors) with scanned copies of all paperwork
- Enrollware updated with copy of all paperwork from Instructor file
- Monitoring Form Entered in Monitoring spreadsheet
- Entered in Sage
- New Instructor card printed (use date of monitoring)
- Issue new Provider card (use date of monitoring)
- First Email: Enrollware login info
How to use Enrollware
- Second Email after monitoring: Appropriate tests (if BLS, include Heartsaver; only course directors get ACLS and PALS tests)