



# ALS CAT 1 Individualized CE Program Worksheet

Instructor Name: \_\_\_\_\_

Program Title: \_\_\_\_\_

Begin Date: \_\_\_\_\_ End Date: \_\_\_\_\_

AREA	BROAD TOPIC DESCRIPTION	HOURS REQUESTED
16	Airway, Ventilation & Respiration	
17	Cardiovascular	
18	Trauma	
19	Medical	
20	Operations	

Broad	Subtopics	AEMT	NRP	HOURS REQUESTED
ARV	Ventilation			
	Capnography	N/A		
	Oxygenation			
	<b>Total ARV Hours</b>	<b>2.5</b>	<b>3.5</b>	
Cardiology	Post-Resuscitation			
	VADs			
	Stroke			
	Cardiac Arrest			
	Pediatric Cardiac Arrest			
	CHF	N/A		
	ACS			
	<b>Total Cardiology Hours</b>	<b>7</b>	<b>8.5</b>	
Trauma	Trauma Triage			
	CNS Injury			
	Hemorrhage Control			
	Fluid Resuscitation			
	<b>Total Trauma Hours</b>	<b>3</b>	<b>3</b>	

**Virginia Office of Emergency Medical Services**

1041 Technology Park Drive

Glen Allen, VA 23059

804-888-9120

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EMS.TR.47

Revised February 2022



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Broad	Subtopics	AEMT	NRP	HOURS REQUESTED
Medical	Special HC Needs			
	OB Emergencies			
	Infectious Disease			
	Medication Delivery			
	Pain Management			
	Psychiatric			
	Toxicological/Opioids			
	Neurological/Seizures			
	Endocrine/Diabetes			
	Immunological			
	<b>Total Medical Hours</b>	<b>7.5</b>	<b>8.5</b>	
Operations	At-Risk Populations			
	Ambulance Safety			
	Field Triage			
	Hygiene/Vaccinations			
	Culture of Safety			
	Pediatric Transport			
	Crew Resource Mgmt			
	Role of Research			
	Evidence Based Guidelines			
	<b>Total Operations Hours</b>	<b>5</b>	<b>6.5</b>	
<b>TOTAL National Component Hours</b>		<b>25</b>	<b>30</b>	

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