

Resuscitation Training

4.5 hours Adult Basic Life Support with Paediatric Modifiers

Who should attend: Those staff that work with children

Content:

Prevention of cardio-respiratory arrest

Overview of BLS and when to use it

Practice of Adult & Paediatric Basic Life Support

Use of Resuscitation adjuncts

Recovery Position

The Choking Adult & Child

Recognition & Management of Life Threatening Anaphylaxis

Date	Time	Venue
3 rd March 2009	09:00 - 13:30	Baird Room, Unipart Centre, Garsington Road, Cowley, Oxford, OX4 2PG
12 th March 2009	09:00 - 13:30	Baird Room Unipart Centre, Garsington Road, Cowley, Oxford, OX4 2PG
16 th March 2009	09:00 - 13:30	Baird Room, Unipart Centre, Garsington Road, Cowley, Oxford, OX4 2PG
25 th March 2009	13:00 - 17:30	Baird Room, Unipart Centre, Garsington Road, Cowley, Oxford, OX4 2PG
27 th March 2009	09:45 - 14:15	Seminar Room, Chipping Norton Hospital, Horsefair, Chipping Norton, OX7 5AJ

To book a place on one of these sessions please complete the attached booking form and return to L & D.

Oxfordshire PCT Learning & Development Team BOOKING FORM	Oxfordshire  Primary Care Trust
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TRAINING DETAILS (Please use block capitals)

Training Title:	Training Date(s):
Time:	Venue:
Surname:	Forename(s)
Assignment No: (Number on the top left hand side of your pay slip)	
Workplace Address:	
Occupation:	
Band:	
Tel:	*Email:
Address for Correspondence if different from above:	
Disability Discrimination Act 1995 – If you have any special needs which require to be taken into consideration please state below:	
To ensure your personal safety it is important that you advise us of any medical history, injury or disability which may affect your participation in this training:	
Medical details:	
If medical details are recorded above please attach a Doctors’ or Occupational Health Certificate stating your fitness to undertake training.	

This section should be completed and signed by the applicant. Incomplete forms will be returned.

Manager’s Name: (please print)

Designation:	Tel. No
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I confirm that I have discussed attending this training with my manager who authorises my attendance and that all the information I have provided is correct to the best of my knowledge and belief.

Signed Date:
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Please return to: Learning & Development Team,
 Jubilee House, 5510 John Smith Drive
 Oxford Business Park South, Cowley, Oxford OX4 2LH
 Email: kaye.hewer@oxfordshirepct.nhs.uk
 Tel: 01865 336815 / Fax: 01865 336822

***A confirmation letter will be sent to you via e-mail where this information has been provided.**