

MASSACHUSETTS

OFFICE OF EMERGENCY MEDICAL SERVICES

DEPARTMENT OF PUBLIC HEALTH

DPH/OEMS 200-59
CONED ROSTER
01/2016

1

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Program Information: (This roster is for use with training programs that have DPH/OEMS continuing education numbers)

PROGRAM TITLE (Print): Patrick Gill Memorial Trauma Symposium Afternoon Session		PROGRAM SPONSOR (Print): Winchester Fire Department	
PROGRAM LOCATION (Print): Boston Marriott Burlington		PROGRAM DATE: 10.1.2019	PROGRAM TIMES: 13:00-15:00
OEMS CONED NUMBER: 1920-R4-07702-T1	<input type="checkbox"/> 30 Hour Paramedic NCCR	<input type="checkbox"/> 20 Hour EMT/AEMT NCCR	<input checked="" type="checkbox"/> ConEd Program Hours: 2 HRS

Instructions:

- LEAD INSTRUCTOR MUST:**
- 1) Sign this roster in the space provided, attesting that you have conducted this training program in accordance with applicable Massachusetts EMS regulations, the course outline, and DPH/OEMS Administrative Requirement (AR) 2-212.
 - 2) Issue course completion documentation to the EMTs once the program is completed. Program sponsors may issue course completion certificates or may provide attendees with a copy of the roster signed by the instructor and student.
 - 3) Ensure an original signed roster is retained by the program sponsor for each session of the program
 - 4) Cross off any unused lines after the last student has signed in at the completion of the course.
- EMTs ATTENDING PROGRAM MUST:**
- 1) Legibly PRINT and SIGN your name after your Massachusetts EMT number (if you have one), attesting that you attended course as described above. Remember to include the letter prefix of your EMT number.
 - 2) Ensure you receive and retain course completion documentation from course sponsor or instructor.
 - 3) Any program lacking an approval number may never receive credit. Attendance is at your own risk!
 - a. Note: regardless of approval, there are limitations to the types of continuing education, such as Distributive Education, that can be used for renewal of EMT certification. Please reference AR 2-212 or the OEMS Renewal Guides found on <http://www.mass.gov/dph/oems>.
 - 4) FAILURE TO SIGN THE ATTENDANCE ROSTER MEANS THAT NO CREDIT CAN BE AWARDED.

#	EMT NUMBER:	EMT NAME (Print):	EMT SIGNATURE:
1	868791	Philip Ciampa	<i>[Signature]</i>
2	130739	Alan J Ferreira	<i>[Signature]</i>
3	130182	Nancy Burns	<i>[Signature]</i>
4	902276	Lawrence Bateman	<i>[Signature]</i>
5	5898668	STEVEN J. MORRIS	<i>[Signature]</i>
6	526610	DAVID WILKEY	<i>[Signature]</i>
7	15848035	Oren D. Hunt, Jr	<i>[Signature]</i>
8	827967	John Surabim	<i>[Signature]</i>
9	811511	JOSEPH NICOSIA	<i>[Signature]</i>
10	5810893	DAVID HUNT	<i>[Signature]</i>
11	015166	Richard F. NASH	<i>[Signature]</i>
12	50902582	DAVID LISCI	<i>[Signature]</i>

Under the pains and penalties of perjury, I attest that this is a true and accurate record of the conduct, hours, and actual attendance for this training course.

INSTRUCTOR NAME (Print): <i>P. Ciampa</i>	INSTRUCTOR Signature <i>[Signature]</i>	INSTRUCTOR EMT Number: <i>868791</i>
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(Continuing Education Roster Continued):

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#	EMT NUMBER:	EMT NAME (Print):	EMT SIGNATURE:
13	816646	Peter M Gore	<i>Peter M Gore</i>
14	P0903161	JACK JOHNSON	<i>Jack Johnson</i>
15	823561	Michael A. Roberto	<i>Michael A. Roberto</i>
16	845922	Richard L. Gerah	<i>Richard L. Gerah</i>
17	0909537	Robert Augart	<i>Robert Augart</i>
18	H5058834	Santina Alancio	<i>Santina Alancio</i>
19	809271	PATRICK WALLACE	<i>Patrick Wallace</i>
20	P880922	Jennifer Nofle	<i>Jennifer Nofle</i>
21	P901852	Ashley Sandler	<i>Ashley Sandler</i>
NH 22	E2037965	DAVID SHAW	<i>David Shaw</i>
23	849404	Keith Wilding	<i>Keith Wilding</i>
24	0903288	Jeanette Cosinstoy	<i>Jeanette Cosinstoy</i>
25	878263	James Tigges	<i>James Tigges</i>
26	830145	Robert J. Jyca	<i>Robert J. Jyca</i>
27	891418	Michael Skrabisa	<i>Michael Skrabisa</i>
28	839041	Steven B. Osborne Jr	<i>Steven B. Osborne Jr</i>
29	851410	Michael Vozzella	<i>Michael Vozzella</i>
30	138124	FREDERICK L. TUSTIN	<i>Frederick L. Tustin</i>
31	809918	LIMOTHY J. COSE	<i>Limothy J. Cose</i>
32	14188	Jozan Sliver	<i>Jozan Sliver</i>
33	833492	Russell Magliozzi	<i>Russell Magliozzi</i>
34	818114	Michael B. Perryman	<i>Michael B. Perryman</i>
35	867162	DAVID DICICCO	<i>David Dicicco</i>
36	0903286	David Quirk	<i>David Quirk</i>
37	E0289721	Juliana Lastowka	<i>Juliana Lastowka</i>
38	E815659	Steven S. Fields	<i>Steven S. Fields</i>
39	811709	Laverne Leduc	<i>Laverne Leduc</i>
40	E3317025	Caitlin Graham	<i>Caitlin Graham</i>

Under the pains and penalties of perjury, I attest that this is a true and accurate record of the conduct, hours, and actual attendance for this training course.

INSTRUCTOR NAME (Print): <i>P. Ciampa</i>	INSTRUCTOR Signature: <i>P. Ci</i>	INSTRUCTOR EMT Number: <i>8605791</i>
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Note, if you do not have enough space for all students, simply copy and attach additional sheets of this page and number appropriately

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------------------------------------------------------------------------------------	----------------------------------------

#	EMT NUMBER:	EMT NAME (Print):	EMT SIGNATURE:
13	902460	Tim Helgesen	<i>[Signature]</i>
14	901954	Patrick Piro	<i>[Signature]</i>
15	E880684	THOMAS H. CASHELL	<i>[Signature]</i>
16	821988	ROBERT A. FRARY	<i>[Signature]</i>
17	882355	Derek Pope	<i>[Signature]</i>
18	886242	Christopher Glenn	<i>[Signature]</i>
19	0903225	Mike Popolo	<i>[Signature]</i>
20	E0902589	Jill Torle	<i>[Signature]</i>
21	80902608	Brandon Shea	<i>[Signature]</i>
22	P0901624	Michael P Tannian	<i>[Signature]</i>
23	880579	LINDA J. HANZA	<i>[Signature]</i>
24	843657	Kimberly Cobbett	<i>[Signature]</i>
25	14166P	ERIC HILDEBRANDT	<i>[Signature]</i>
26	P0903192	Brian Letendre	<i>[Signature]</i>
27	863706	Nicholas LeColst	<i>[Signature]</i>
28	889816	Sean O'Brien	<i>[Signature]</i>
29	P0901430	TYLER SAMOJA	<i>[Signature]</i>
30	882474	Cory Harris	<i>[Signature]</i>
31	E1902772	Jonathan O'Neill	<i>[Signature]</i>
32	P0902082	Jeffrey Carey	<i>[Signature]</i>
33	E876480	Catherine Donaghey	<i>[Signature]</i>
34	883 901131	Therese Shank	<i>[Signature]</i>
35	863188	DIANA JERZYLO	<i>[Signature]</i>
36	8		
37			
38			
39			
40			

Under the pains and penalties of perjury, I attest that this is a true and accurate record of the conduct, hours, and actual attendance for this training course.

INSTRUCTOR NAME (Print): <i>F. Cianci</i>	INSTRUCTOR Signature: <i>F. Ci</i>	INSTRUCTOR EMT Number: 868791
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