

Provider Course Individual Recording Sheet: Sample 2
AAP/AHA Neonatal Resuscitation Program
Provider Course
Individual Recording Sheet

Name _____ Work Phone _____ Home Phone (optional) _____

Address _____

Hospital _____ Dept _____ Credentials: RN MSN NNP RT MD DO PA Other _____

Date Last NRP Card Issued _____ Next NRP Renewal Date _____

Written Evaluation _____ hard copy _____ online format (_____ certificate of completion give to instructor)

Lessons	Minimum Score Required	Scores		Date Completed	Instructor's Initials
		1	2		
Lesson 1: Overview and Principles of Resuscitation	10/13				
Lesson 2: Initial Steps in Resuscitation	8/10				
Lesson 3: Use of Resuscitation Devices for Positive-Pressure Ventilation	12/15				
Lesson 4: Chest Compressions	8/10				
Lesson 9: Ethics and Care at the End of Life	5/7				
Lesson 5: Endotracheal Intubation	10/12				
Lesson 6: Medications	8/10				
Lesson 7: Special Considerations	8/10				
Lesson 8: Resuscitation of Babies Born Preterm	5/7				

Performance Checklist

Lessons	Attempts			Date Passed	Instructor's Initials
	1	2	3		
Lesson 2: Initial Steps in Resuscitation					
Lesson 3: Positive-Pressure Ventilation					
Lesson 4: Chest Compressions					
Lesson 5A: Preparing for Endotracheal Intubation					
Lesson 5B: Performing or Assisting With Endotracheal Intubation					
Lesson 6: Medications Via the Umbilical Vein; Epinephrine Via the Endotracheal Tube					
Megacode					

Instructor's Signature _____