

Electrocardiography (ECG) Academy 2019

Course Information	Course Fee
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| <input type="checkbox"/> ECG Level 1 (Basic Dysrhythmia):
<i>Designed for the learner with minimal to no medical experience.</i> | Health First Associate Fee: \$55
Public Fee: \$65 |
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ECG Academy Level 1 is an online, self-directed course that introduces healthcare providers to normal cardiac rhythms and prepares them to recognize basic cardiac arrhythmias in their clinical practice. This course features a combination of video, animation, interactive activities and self-assessments. It is a self-paced course and delivered completely online including cardiac anatomy and physiology, cardiac cycle, basic normal and abnormal ECG rhythms, arrest and peri-arrest arrhythmias as well as basic heart blocks and recognition of rhythm strips. **This course helps the learner with basic ECG rhythm recognition.**

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| <input type="checkbox"/> ECG Level 2 (Intro to 12 Lead):
<i>Designed for the more advanced learner. (Must Complete ECG Level 1)</i> | Health First Associate Fee: \$55
Public Fee: \$65 |
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ECG Academy Level 2 is an online self-directed course that builds upon a provider's basic dysrhythmia knowledge and helps to prepare the provider to recognize these more intricate electrical abnormalities in the ECG cycle. This course features a combination of video, animation, interactive activities and self-assessments. It is a self-paced course and delivered completely online including axis deviation, hypertrophy, bundle branch blocks, ischemic heart disease and ST abnormalities, recognition of rhythm strips and 12-Lead interpretation. **This course assists the provider with intermediate ECG rhythm & electrical pathophysiology abnormalities recognition.**

Primary Registration

Name: _____ Phone No.: _____

Email (Required): _____

Once enrolled in the course, you will receive an email with your user ID and password, as well as the instructions to access the course. You will have eight weeks, from the time of course activation, to complete each course.

Payment Options	Total Amount Due
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| <input type="checkbox"/> Credit Card # _____ Exp: _____ CVV: _____ | \$ _____ |
| <input type="checkbox"/> Cash or Check (made payable to Health First Training Center) | \$ _____ |
| <input type="checkbox"/> Cost Center Transfer # _____ | |

Manager's Signature (Required): _____ Print Name: _____

Contact Information

Email Registration to Training@Health-First.org
 Fax Registration to 321.254.0795

Health First Training Center
 3470 N. Harbor City Blvd.
 Melbourne, FL 32905
 Phone: 321.434.1960

By signing this form, I acknowledge that once the online course has been activated, no refund will be given.

Student Signature (Required)

Date