

# M A S S A C H U S E T T S

## OFFICE OF EMERGENCY MEDICAL SERVICES

— DEPARTMENT OF PUBLIC HEALTH —

DPH/OEMS 200-59  
CONED ROSTER  
01/2016

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

PROGRAM TITLE (Print): M&M ROUNDS: ENVIRONMENTAL INJURIES		PROGRAM SPONSOR (Print): CMTI / BREWSTER AMBULANCE SERVICE	
PROGRAM LOCATION (Print): 1555 MAIN STREET, BROCKTON		PROGRAM DATE: 2/13/2019	PROGRAM TIMES: 18:00-20:00
OEMS CONED NUMBER: 1819-R4-06246-T1	<input type="checkbox"/> 30 Hour Paramedic NCCR	<input type="checkbox"/> 20 Hour EMT/AEMT NCCR	<input checked="" type="checkbox"/> ConEd Program Hours: 2 HOURS

**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	P839137	STEPHEN P. ALVAREZ	<i>[Signature]</i>
2	E0904848	ZACHARY C. BROWN	<i>[Signature]</i>
3	P0902601	Cory Hatch	<i>[Signature]</i>
4	832727	Eric HUFFMAN	<i>[Signature]</i>
5	865138	Joseph Gallant	<i>[Signature]</i>
6	819751	George W Hogg	<i>[Signature]</i>
7	P0902292	Joseph Borgeatti III	<i>[Signature]</i>
8	E0914022	EDWARD E HOLLAND	<i>[Signature]</i>
9	P0902504	JAMES P. CONNOR	<i>[Signature]</i>
10	834335	Matthew Rich	<i>[Signature]</i>
11	889368	Christopher Enswiler	<i>[Signature]</i>
12	0904189	Krystyna Oles	<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): DAN MUSE, MD	INSTRUCTOR Signature <i>[Signature]</i>	INSTRUCTOR EMT Number:
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# M A S S A C H U S E T T S

## OFFICE OF EMERGENCY MEDICAL SERVICES

DPH/OEMS 200-59  
CONED ROSTER  
01/2016

**(Continuing Education Roster Continued):**

PROGRAM TITLE (Print): M&M ROUNDS: ENVIRONMENTAL INJURIES	OEMS CONED NUMBER: 1819-R4-06246-T1
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#	EMT NUMBER:	EMT NAME (Print):	EMT SIGNATURE:
13	P0902109	Robert Marshimer	
14	M5066555	Ryan Malcomson	
15	P0901765	Howard Page	
16	P984117	Thomas J. Berninger	
17	E0909172	Robert Manchester	
18	884349	Craig Snel	
19	881970	JOSH NIX	
20	834199	John W. Gynn	
21	897516	Michael Fernandez	
22	881968	Chris Marotte	
23	E0903549	Rosemary Callahan Gray	
24	813850	ROBERT J MANEINE JR	
25	838962	Richard S. Smith	
26	8865720	JENNIFER HOEFT	
27	P880730	Chris Olson	
28	P0902462	JOHN MORRISSEY	
29	874460	Matt Croul	
30	807588	ERIC J. ELDER	
31	819114	SCOTT G Breen	
32	889963	James Raymond	
33	873087	Allison Polson	
34	0902817	Jason Rkstrm	
35	0902177	JOSHUA Anachi	
36	0901455	Jason Anachi	
37	862762	PATRICK TRAVERS	
38	850701	DON SWEETMAN JR	
39	911235	Christopher Dacette	
40	879169	PAUL PRUSIK	

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): DAN MUSE, MD	INSTRUCTOR Signature: 	INSTRUCTOR EMT Number:
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**MASSACHUSETTS**  
**OFFICE OF EMERGENCY MEDICAL SERVICES**  
 DEPARTMENT OF PUBLIC HEALTH

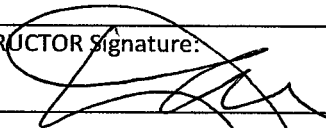
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PROGRAM TITLE (Print): M&M ROUNDS: ENVIRONMENTAL INJURIES	OEMS CONED NUMBER: 1819-R4-06246-T1
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	EMT NUMBER:	EMT NAME (Print):	EMT SIGNATURE:
13	E0905185	Fallon Raithe	Fallon Raithe
14	E894991	Jonette Jean-Louis	Jonette Jean-Louis
15	873804	CHRIS DONAHUE	Chris Donahue
16	853169	Michael MacCubain	Michael MacCubain
17	901495	Brendan Brewer	Brendan Brewer
18	810046	Craig A. ERICKSON	Craig A. Erickson
19	848945	JAMES MICCIANTUONO	James P. Micciantuono
20	849422	Jay McNamara	Jay McNamara
21	E831815	STEVE RODRIGUEZ	Steve Rodriguez
22	860537	IAN KURTINITIS	Ian Kurtinitis
23	E827861	Jammy Hyle	Jammy Hyle
24	E873753	GEORGE HICKY	George Hicky
25	882134	TIMOTHY HOLMES	Timothy Holmes
26	876090	Anthony Causo	Anthony Causo
27	0909334	ROBERT J NEUMEISER	Robert J. Neumeiser
28	892159	Mervyn Chandler	Mervyn Chandler
29	869082	KENNETH DOW	Kenneth Dow
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INSTRUCTOR NAME (Print): DAN MUSE, MD	INSTRUCTOR Signature: 	INSTRUCTOR EMT Number:
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