

MASSACHUSETTS 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): ROUNDS: MENTAL ILLNESS		PROGRAM SPONSOR (Print): BROCKTON HOSPITAL	
PROGRAM LOCATION (Print): 770 CRESCENT STREET, BROCKTON MASS		PROGRAM DATE: 2/28/2017	PROGRAM TIMES: 9:00 AM TO 11:00 AM
OEMS CONED NUMBER: 1617-R5-01038-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	P880730	Chris Olson	
2	867779	Alexander Smirnov	
3	515077	Douglas Campbell	
4	5025337	John Yang	
5	E0906503	DAVID REPERTA	
6	858791	Nick Grasso	
7	871073	Daniel Wauthob	
8	858802	STEVEN FOSTER	
9	820056	Michael Carroll	
10	855576	David McGinn	
11	8A0195	SHEEHAN, TIMOTHY J	
12	826989	George Gardner Jr	

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): Daniel Muse, MD	INSTRUCTOR Signature 	INSTRUCTOR EMT Number:
---	--------------------------	------------------------

MASSACHUSETTS
OFFICE OF EMERGENCY MEDICAL SERVICES
 DEPARTMENT OF PUBLIC HEALTH

DPH/OEMS 200-59
 CONED ROSTER
 01/2016

(Continuing Education Roster Continued):

PROGRAM TITLE (Print): ROUNDS: MENTAL ILLNESS	OEMS CONED NUMBER: 1617-R5-01038-T1
--	--

	EMT NUMBER:	EMT NAME (Print):	EMT SIGNATURE:
13	876912	Casey Florence	<i>Casey Florence</i>
14	842954	William Burton	<i>William Burton</i>
15	839564	Darelle Harmon	<i>Darelle Harmon</i>
16	873526	Nicole Amarel	<i>Nicole Amarel</i>
17	902109	Robert Marshimer	<i>Robert Marshimer</i>
18	824216	Thomas Luckman Jr	<i>Thomas Luckman Jr</i>
19	812772	MAEK DiRosco	<i>MAEK DiRosco</i>
20	871584	Joseph Murphy	<i>Joseph Murphy</i>
21	825716	Chris Hamiker	<i>Chris Hamiker</i>
22	858067	THOMAS EVANS	<i>THOMAS EVANS</i>
23	812776	Walter Scotledge JR.	<i>Walter Scotledge JR.</i>
24	851194	Glen Guffen	<i>Glen Guffen</i>
25	861134	Brian Macaulay	<i>Brian Macaulay</i>
26	0902177	Joshua Anacici	<i>Joshua Anacici</i>
27	840911	DALE CAMPBELL	<i>Dale Campbell</i>
28	813850	ROBERT J Mancinelli, Jr	<i>Robert J Mancinelli, Jr</i>
29	E0908851	Paul Chull	<i>Paul Chull</i>
30	825148	Richard M Smith	<i>Richard M Smith</i>
31	857866	Michael Nelson	<i>Michael Nelson</i>
32	849424	Jay McNamee	<i>Jay McNamee</i>
33	808065	JOHN J. Stannon	<i>John J. Stannon</i>
34	870562	Andrew Wicks	<i>Andrew Wicks</i>
35	873185	Matthew J Finney	<i>Matthew J Finney</i>
36	826502	William A Barkepusky II	<i>William A Barkepusky II</i>
37	842664	JOHN Prewitt	<i>John Prewitt</i>
38	832730	BYNN LACUINA	<i>BYNN LACUINA</i>
39	850579	Matthew Smith	<i>Matthew Smith</i>
40	882170	Carolynn Bunker	<i>Carolynn Bunker</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): Daniel Muse, MD	INSTRUCTOR Signature: <i>[Signature]</i>	INSTRUCTOR EMT Number:
---	---	------------------------

Note, if you do not have enough space for all students, simply copy and attach additional sheets of this page and number appropriately

MASSACHUSETTS
OFFICE OF EMERGENCY MEDICAL SERVICES
 DEPARTMENT OF PUBLIC HEALTH

DPH/OEMS 200-59
 CONED ROSTER
 01/2016

(Continuing Education Roster Continued):

PROGRAM TITLE (Print): ROUNDS: MENTAL ILLNESS	OEMS CONED NUMBER: 1617-R5-01038-T1
--	--

	EMT NUMBER:	EMT NAME (Print):	EMT SIGNATURE:
13	P837274	PAULA BAILEY	
14	878140	Ilyer Bryant	
15	871048	Jeffrey Crozzo	
16	877039	Justin Silva	
17	Q36697	George O'Neil	
18	890180	Alfred Cunningham	
19	903665	Chris Gillespie	
20	870559	Gerald Wawio	
21	843392	Eric Peterson	
22	P081844	Daniel Rice	
23	873809	BRANDON SMITH	
24	880460	Robert Heffernan	
25	837183	Keith Batchelder	
26	P0901673	JONATHAN HOFFMANN	
27	P0902214	Nicholas Furey	
28	099762	Charles Armanetti	
29	861928	JEAN PETERS	
30	E3160981	GREG SORNO	
31	P0902099	Ryan Connolly	
32	839558	Francis Currie	
33	818774	Stephen M. DUGGAN	
34	829726	SCOTT PINARDI	
35	P0901824	William A. Parker	
36	848945	JAMES MICCIANTUARO	
37	859881	Michael Syrek	
38	892524	Victoria Bright	
39	884715	Andrew Nasal	
40	878366	Antonio Morais	

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): Daniel Muse, MD	INSTRUCTOR Signature: 	INSTRUCTOR EMT Number:

MASSACHUSETTS
OFFICE OF EMERGENCY MEDICAL SERVICES
 DEPARTMENT OF PUBLIC HEALTH

DPH/OEMS 200-59
 CONED ROSTER
 01/2016

(Continuing Education Roster Continued):

PROGRAM TITLE (Print): ROUNDS: MENTAL ILLNESS	OEMS CONED NUMBER: 1617-R5-01038-T1
--	--

	EMT NUMBER:	EMT NAME (Print):	EMT SIGNATURE:
13	810044	Donald J. Chipman	
14	P817210	Paul Evangelista	
15	817015	JAMES D WILSON	
16	896148	William A. Gordon	
17	808049	Richard Furlong	
18	849763	Christopher BARBOUR	
19	850592	SCOTT NASARELLA	
20	0902317	David Bradshaw	
21	841240	Thomas T. Henderson	
22	891024	STEPHEN A. SCIARA	
23	817532	Julio POMA	
24	0901978	Andrew Dingle	
25	0901791	Karenth Wright	
26	867806	Michael Monteforte	
27	803012	Jay Hegner	
28	884325	RYAN AMADO	
29	901852	Rob Gerson	
30	120810	Wayne Del Prete	
31	822135	JAMES BEATTY	
32	851623	Tim Carroll	
33	833231	James Brackett	
34	838447	Jeffrey R. Kelleher	
35	826305	JAMES I. JANUS	
36	823752	Bryan C Sheppard	
37	836196	Barnett Johnson	
38	871131	Christopher Cotti	
39	847342	Anthony Ciccolo	
40	852683	James Bunker	

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): Daniel Muse, MD	INSTRUCTOR Signature: 	INSTRUCTOR EMT Number:
---	---------------------------	------------------------

Note, if you do not have enough space for all students, simply copy and attach additional sheets of this page and number appropriately

MASSACHUSETTS

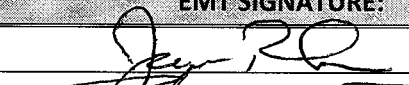


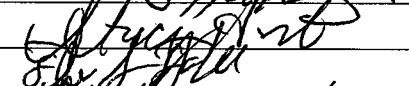
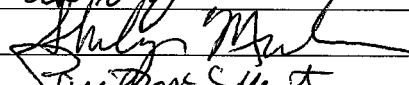
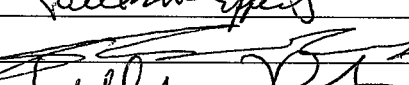
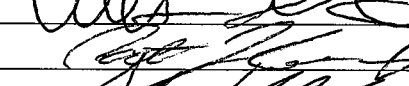
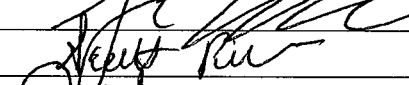
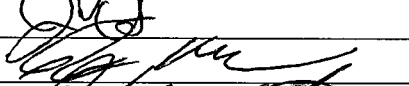
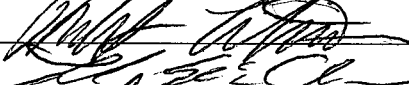
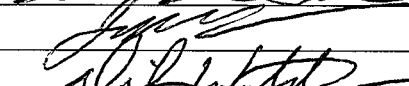
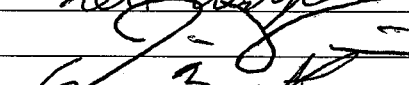
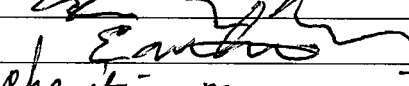
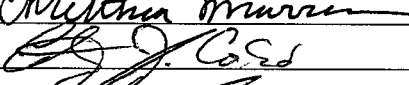
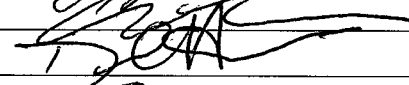
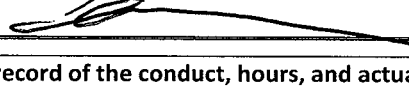
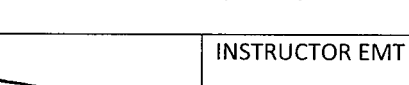
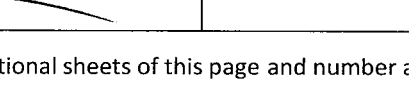


OFFICE OF EMERGENCY MEDICAL SERVICES

DEPARTMENT OF PUBLIC HEALTH

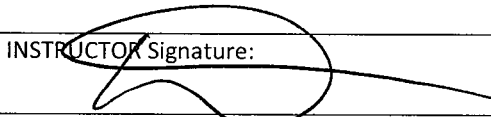
DPH/OEMS 200-59
CONED ROSTER
01/2016

(Continuing Education Roster Continued):

PROGRAM TITLE (Print): ROUNDS: MENTAL ILLNESS	OEMS CONED NUMBER: 1617-R5-01038-T1
---	---

#	EMT NUMBER:	EMT NAME (Print):	EMT SIGNATURE:
13	815111	James Rush	
14	883780	Patrick Campbell	
15	877215	Justin Goldberg	
16	613435	Gregory Bonagel	
17	832727	Eric Hoffmann	
18	853134	Stacy Horte	
19	829761	Thomas G. Ford	
20	80901703	Sherilyn Mullin	
21	824241	Paul McEafferty	
22	884779	Thomas Luckman #1	
23	166538	WALTER GUSTIN	
24	84005	PATRICK JONES	
25	838767	JACKSON MACOMBER	
26	861929	Scott Pillsbury	
27	819227	James W. Curtis	
28	851248	Richard Mackinnon Jr.	
29	873710	Robert Costanzo	
30	A0900132	Luke McDonovan	
31	A0900133	Jason Murphy	
32	858434	Daniel Westgate	
33	839840	Jesse Vigneres	
34	E0909412	Brian M Parks	
35	E896430	SCHADRAC EXANTUS	
36	868342	christina morrison	
37	870090	Anthony Corso	
38	841001	GREG LAFLEUR	
39	879890	DEREK HAIMAIDI	
40	0906907	Seah Bettenco	

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): Daniel Muse, MD	INSTRUCTOR Signature: 	INSTRUCTOR EMT Number:
---	---	------------------------




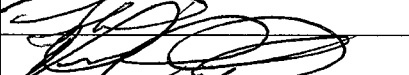


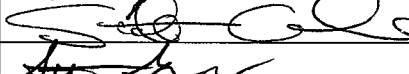
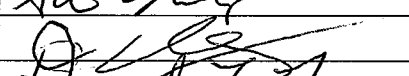
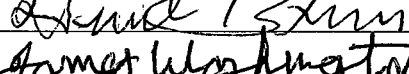
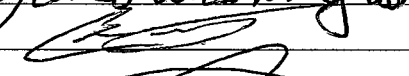
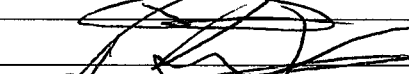
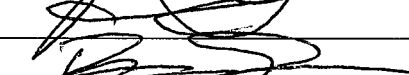
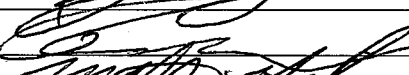
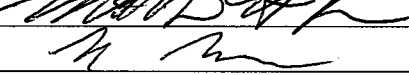
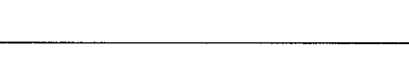
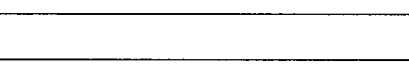
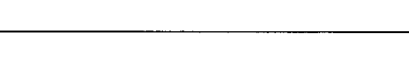

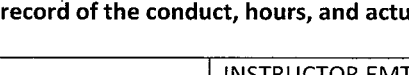
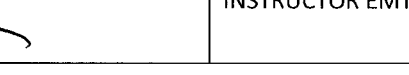
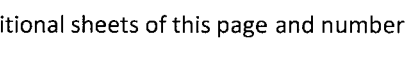

MASSACHUSETTS OFFICE OF EMERGENCY MEDICAL SERVICES

DEPARTMENT OF PUBLIC HEALTH

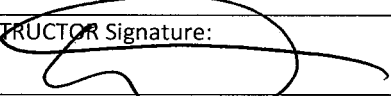
DPH/OEMS 200-59
CONED ROSTER
01/2016

(Continuing Education Roster Continued):

PROGRAM TITLE (Print): ROUNDS: MENTAL ILLNESS	OEMS CONED NUMBER: 1617-R5-01038-T1
---	---

EMT NUMBER:	EMT NAME (Print):	EMT SIGNATURE:
13	886594 Chris Harris	
14	82611364 Joseph Spardell	
15	834205 Craig Medall	
16	846867 Michael Peders	
17	A0900167 Scott John	
18	806488 Michael S. Botwin	
19	874551 Michael Ryan	
20	830368 Mark Robertson	
21	130760 Dorothy E. Austin Jr	
22	832561 Scott Collins	
23	880919 Scott Greenberg	
24	869082 KENNETT Daw	
25	823258 DANIEL T. Finn	
26	822463 James Washington	
27	881834 Brian Trefry	
28	870471 PETER KOURVETAKIS	
29	874599 Patrick Flanagan	
30	858792 Christopher Horn	
31	858808 BRYAN SMITH	
32	862763 Philip Woolf	
33	834335 Matthew Rich	
34	847906 FRED FREEMAN	
35		
36		
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): Daniel Muse, MD	INSTRUCTOR Signature: 	INSTRUCTOR EMT Number:
---	---	------------------------