

PEARS – 2012



Pediatric Emergency Assessment, Recognition and Stabilization

Overview

The Pediatric Emergency Assessment, Recognition and Stabilization, (PEARS) course, developed by the American Heart Association, (AHA) focuses on the priorities in assessment and management of the ill or injured child in the first few minutes of an emergency. In this one-day course participants will have an opportunity to practice emergency techniques such as infant and pediatric CPR, operation of an Automatic External Defibrillator (AED), ventilation of a child with a bag valve mask, and the use of a length-based resuscitation tape.

Course Objectives

Upon completion, the participant will be able to:

- Recognize respiratory distress and failure, shock and cardiac arrest
- Provide appropriate lifesaving actions within the initial minutes of the response until the child is transferred to an advanced life support provider

Target Audience

- EMT-Basics
- Healthcare providers such as nurses who care for children outside emergency or critical care areas

This course is not intended for those who require credentialing in pediatric advanced life support skills or who are routinely involved in pediatric resuscitation.

Registration/General Information

Registrations that are faxed must include credit card information. Registrations with payment in the form of a check can be mailed to the HOPE Office. Fees include a continental breakfast, book, confirmation letter and map. Materials will be mailed approximately 30 days prior to the date of the class. Registration fees are utilized solely for the Johns Hopkins Children's Center and in no way reflect income to the American Heart Association, Inc. (AHA).

Instructor Course (One-Day Course)

This one-day course reviews the key concepts of the PALS/PEARS curriculum focusing on adult learning strategies with emphasis on interactive teaching sessions. Senior faculty members will share helpful hints on facilitating an educational experience for providers who want to improve their knowledge, attitude, and skills in pediatric assessment and resuscitation.

Accreditation

Individuals who successfully complete the cognitive skills examination in accordance with AHA guidelines will be awarded the appropriate two-year PEARs course completion card.

Nurses

The American Association of Critical-Care Nurses (AACN) will award 7 CEU credits for the PEARs course.

Pre-Hospital

MIEMSS–Office of Education and Certification
PEARS Provider. 8 hours
PEARS Instructor. 8 hours

Other

If requested, a HOPE Certificate listing the number of course hours will be issued for all other providers.

To Contact the Office

410-614-1960 (Phone) 410-502-5103 (Fax)

Rose Stinebert
HOPE Program Administrator
rstineb1@jhmi.edu
or
Cheryl Camacho
Pediatric Education Specialist
ccamach4@jhmi.edu

HOPE - 2012
**Hopkins Outreach for
Pediatric Education**

www.hopkinschildrens.org/hope

PEARS Classes 2012

All courses will be held at Johns Hopkins Hospital

April 9..... Monday

September 22..... Saturday

PEARS Registration Fees

All Participants.....\$235

Students (*Copy of student I.D. required*)..... \$185

PEARS/PALS Instructor

All Participants..... \$325

Cancellation Policy

Cancellations or rescheduling requests will be honored only if received 10 days prior to day one of the course. Only 1 rescheduling request will be acknowledged. Refunds for cancellations will be subject to a \$50 administrative fee. NO REFUNDS will be given within 10 days of the scheduled course. If you have a last minute emergency, you MUST call the HOPE Office. A refund will NOT be issued, but you will be eligible to reschedule to another course.

FOR OFFICE USE ONLY:

Paid (Date): _____ Materials Sent (Date): _____

Notes: _____

Registrations accepted up to 10 days prior to class date only

Registration Form (Please Print) Class Date: _____

First Name M. I. Last Name

Address

City State Zip Code

Work Telephone Home Telephone Other (Cell/Pager)

Place of Employment

E-mail

What is your specialty? ___ MD ___ DO ___ PA ___ NP ___ CRNA

___ CRNP ___ RN ___ CRT-I ___ NREMT-P ___ EMT-I ___ EMT-B

___ RRT ___ CRTT OTHER _____

Registration Fees: (Payment Must Accompany the Registration Form)

Method of Payment: _____ (Check) _____ (Credit Card)

Please make checks or money orders payable to:

HOPE

c/o The Johns Hopkins Children's Center
600 N. Wolfe Street
HOPE Office, Brady 403
Baltimore, Maryland 21287-3716

A \$40 service fee will be added for all returned checks

Credit Card Registrations:

___ VISA ___ MASTERCARD ___ DISCOVER ___ AMERICAN EXPRESS

Credit Card # _____ Exp. _____

