

CPR AHA BLS Blended Learning - Online and Skills Testing

Friday, August 18, 2023 (3 sessions: 8:00-8:45am, 9:00-9:45am, or 10:00-10:45am
Wednesday, September 20, 2023 (3 sessions: 6:00-6:45pm, 7:00-7:45pm, or 8:00-8:45pm)
Friday, November 10, 2023 (3 sessions: 8:00-8:45am, 9:00-9:45am, or 10:00-10:45am

\$87.50 TOTAL

\$31 (paid to AHA by you directly) for the online course and the other \$56.50 (paid to SDDS) for the skills portion – 3 units of CE included

In-Person Practice Session and Skills Test at the SDDS Office

These CPR Courses will be an AHA Blended Learning format. Below are the steps to register and complete the course. Email sdds@sdds.org if you have any questions.

Step 1 – Register for the BLS/CPR providers course with SDDS (via this registration form, phone, or on the SDDS website)

 You will receive an email from SDDS with a link to AHA to sign up and pay for the online course (\$31).

Step 2 - Complete the HeartCode BLS Online course

- Written examination is part of the online course 84% to pass
- Print a copy of your HeartCode BLS Online Course Completion Certificate (bring this copy to the skills test)

Step 3 – Attend the IN-PERSON Skills practice session and skills test at the SDDS Office.

- Face Coverings are required to enter the class and must remain in place throughout the class.
- No food or drink please.
- Gloves will be provided and utilized throughout the training.

Step 4 – Your American Heart Association BLS (CPR) card will be issued digitally via email. Physical cards are no longer issued.

CPR BLS Course Registration	REGISTRATION FEE:		MASKS:			
Of R DED Course Registration	\$56.50 (SDDS Members/Staff)	\$	\$25 (w/ oxygen inlet)	\$		
Who's coming?(include designation)	LATE REG: \$66.50 (begins 10 days prior to class)	\$	\$40 (adult ambu-bag—optional)	\$		
(molade designation)			\$35 (child ambu-bag—optional)	\$		
	\$101 (CDA/non-SDDS member fee)	\$				
Telephone:	\$113 (non-member fee)	\$	TOTAL:	\$		
Email: Designation: Date of Course: Date of Course: Designation: Date of Course: Date of Course:						
Cardholder Name: C	Card #:		Exp. Date:			
Security Code (3-digit number on back of card): Billing Address:						
Please fax, scan, or mail form to: SACRAMENTO DISTRICT DENTAL SOCIETY: 2035 H	urley Wy, Ste 200 • Sacramento, CA 9582	5 • Phone: 916	.446.1227 • Fax: 916.447.3818 •	www.sdds.org		

The Sacramento District Dental Society is an approved CE provider through the Dental Board of California (RP2168) • This course meets the Dental Board of California's requirements for units of CE listed.

Cancellation Policy: Full refund granted less \$25 administration fees, if received in writing 14 days before the class. NO REFUNDS if cancelled within 13 days of the class or for No Shows or registration received after that date. Attendee substitutions OK. By registering for this course/event, I agree to the terms and conditions of this event. Visit sdds.org for full details. PLEASE CALL SDDS WITH ANY SPECIAL DIETARY NEEDS.

