



SRI BALAJI VIDYAPEETH (SBV)

(Deemed to be University)
U/S 3 of UGC Act 1956
Puducherry-607402

This document contains the details of
Certificate course in American Heart Association accredited
ACLS & BLS courses

conducted by the Medical Simulation Centre,
Sri Balaji Vidyapeeth, Deemed to be University,
in the last five years.


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Criteria 1

Metrix 1.3 : Curriculum Enrichment

1.3.2

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Details of the Certificate Course in American Heart Association accredited ACLS & BLS

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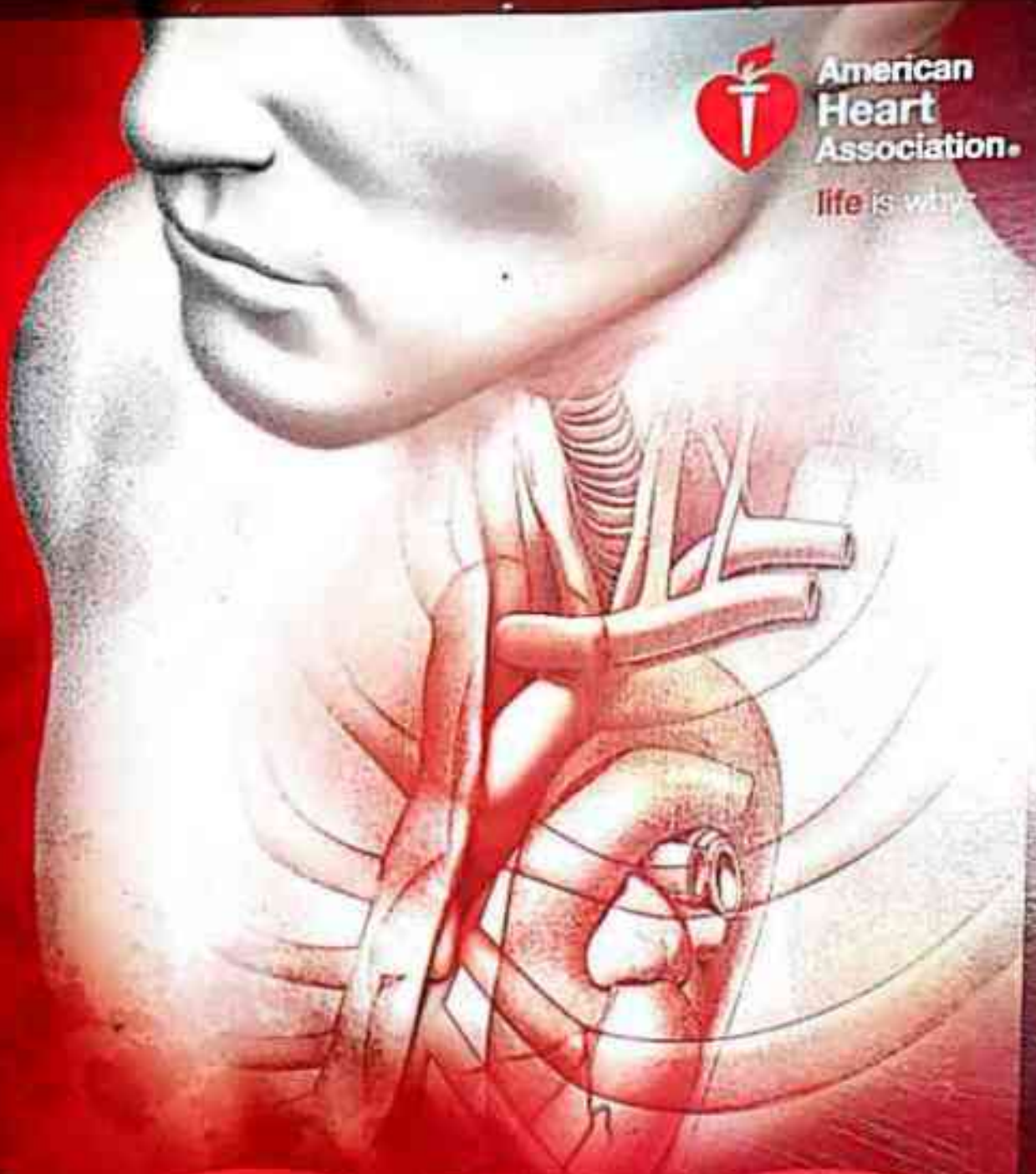
1. [Link to Prospectus](#)
2. [Cover page of AHA manual on ACLS](#)
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American
Heart
Association.

life is what



ADVANCED CARDIOVASCULAR LIFE SUPPORT

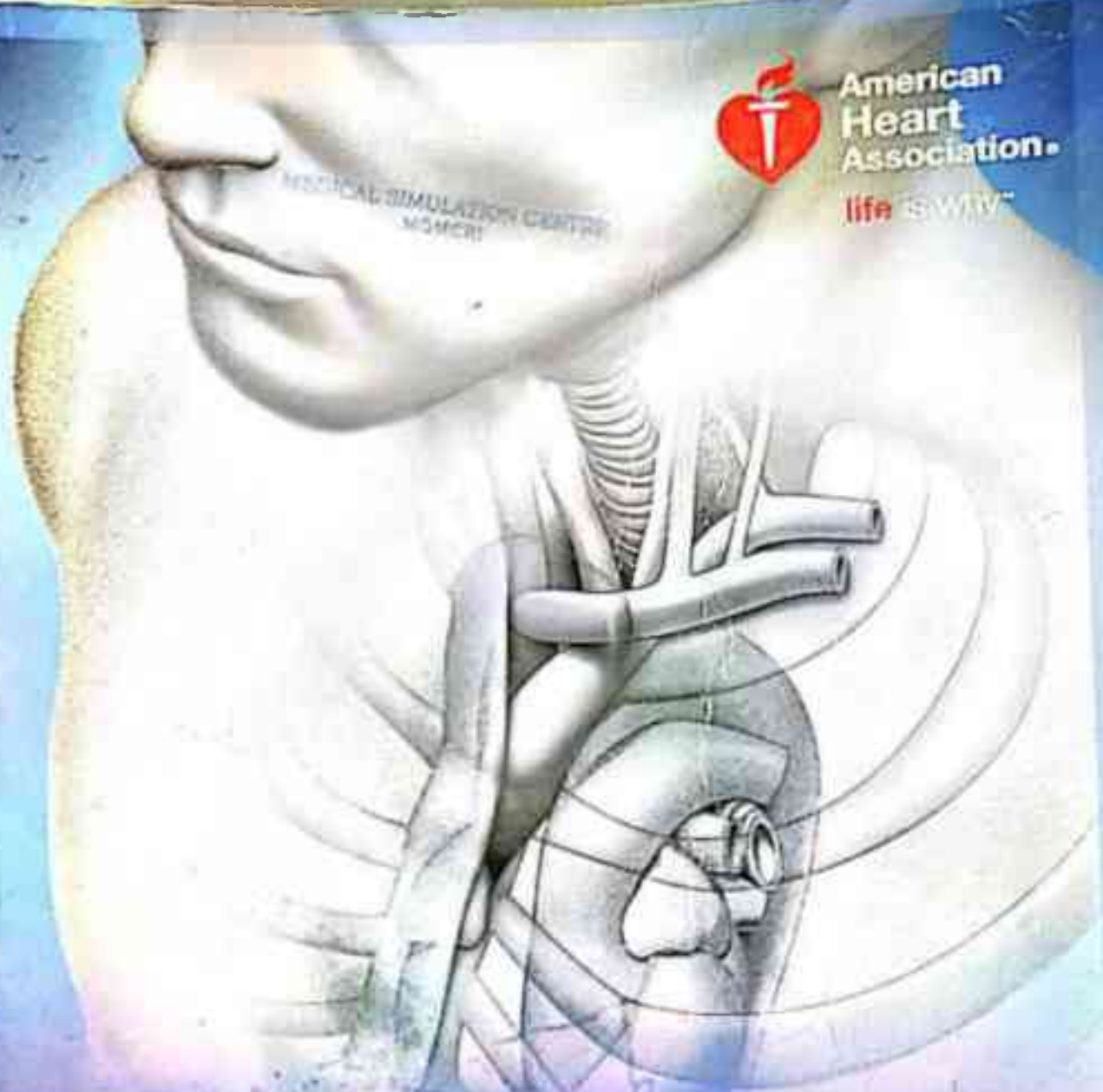
PROVIDER MANUAL



American
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Association.

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MEDICAL SIMULATION CENTRE
MCMCER



BASIC LIFE SUPPORT

PROVIDER MANUAL

CPR Manual

**Based on American Heart Association
2015 Guidelines**

**Dr. Hemanth Kumar V.R
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38	Dr. Kamalasundar
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40	Mrs. Deepa J
41	Dr.Arya Jaya Varma
42	Dr.Kavitha
43	Dr.Thamizhp pozhil guna
44	Dr.Rilna
45	Dr.Gunasekaran.D
46	Dr.Jagadeesh
47	Dr.Podhini Jagadeesan



VC'S FOREWORD

*Message from
the Vice Chancellor,*



I am Pleased to know that the Medical Simulation Centre, MGMCRI plans to bring out second version of simplified manual on CPR, based on AHA 2015 recommendations. Medical Simulation Centre has been conducting AHA approved courses on BLS, ACLS and PALS, training hundreds of health care providers from different backgrounds . The centre has realized the need for a simplified CPR manual with flow charts, algorithms that are easily understandable which helps in rapid decision making .

The new version incorporated drugs used during resuscitation . The team of Medical Simulation Centre deserves appreciation for bringing up this second version.

Prof. Subhash Chandra Parija


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Foreword

Message from the Director Simulation Centre,



Basic Life Support and Advanced Cardiac Life support are today's essential skills for all doctors. This training helps to tackle immediate life threats and saves countless lives worldwide. The MSC, MGMCRI is proud to be one of the International Training Centres for these courses in India. This in house manual edited by Prof. HemanthKumar VR. HOD of Anaesthesia, ITC Coordinator is a simplified algorithmic approach to a very confusing subject and I am sure it will be immensely helpful for all participants in these courses. I commend the entire authorship of this booklet for an excellent job.

Prof. Dinker R Pai


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Basic Life Support (BLS)

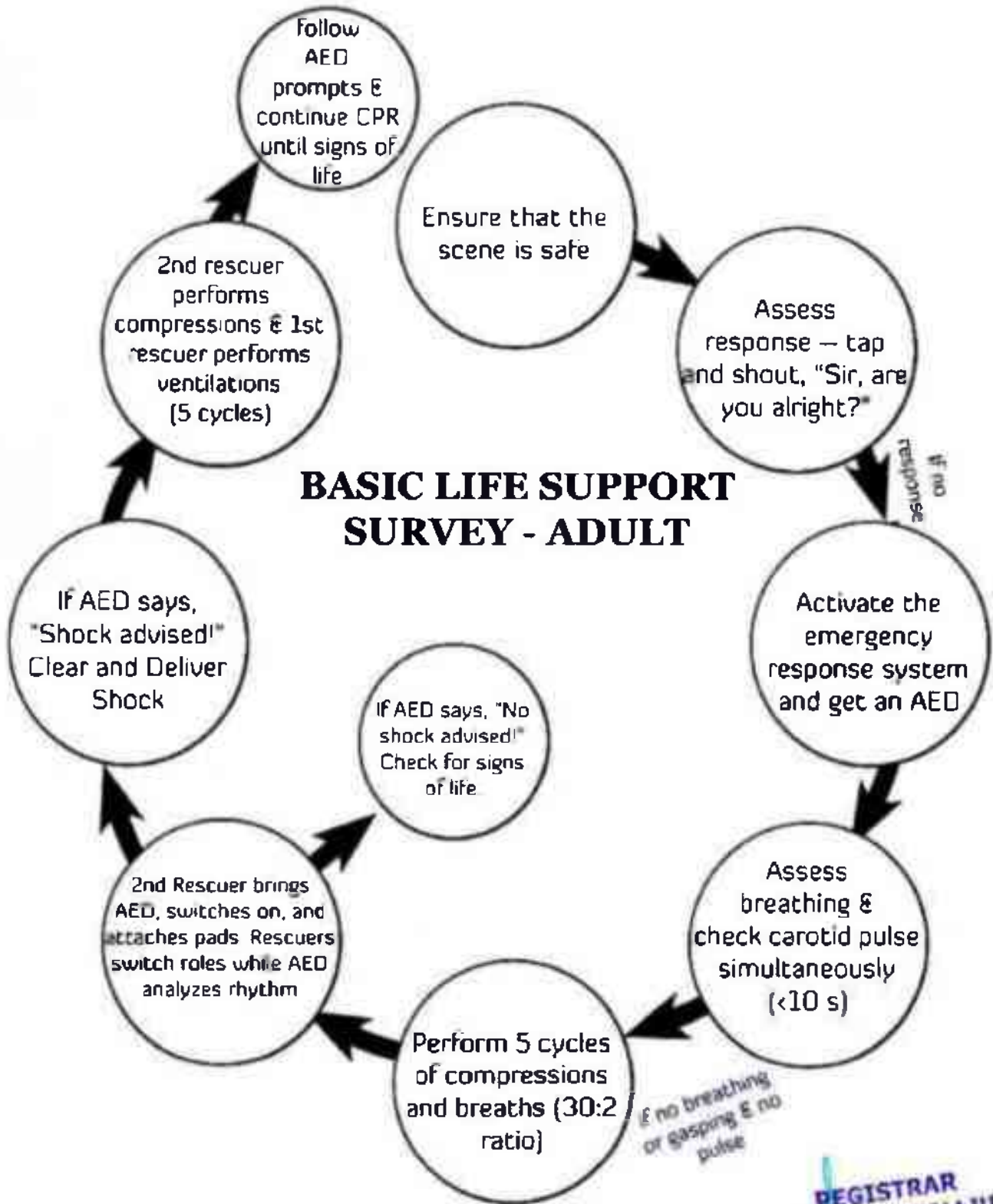


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BLS Survey – Adult Algorithm



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Assessing Response

- * Tap: on the shoulder
- * Shout: sir, are you okay?



(Call for help) Activating Emergency Response System

- * Shout for help
- * Call 108 & ask for AED





Check pulse and breathing

- * Simultaneously Scan the chest movement for breathing & check carotid pulse (in the groove between trachea & sternocleidomastoid muscle) atleast 5sec & not more than 10 sec



Hand Position

- * Heel of the palm of one hand on the center of lower half of sternum (i.e) center of two nipples
- * Support with other hand





Performing CPR

- * Wrist, elbows, shoulders in a straight line
- * Movement should come from hip joint



Breath using a pocket mask

- * Keep the pocket mask over the face tightly
- * Do head tilt & chin lift if no suspected neck injury
- * Give 2 breaths (1 breath over 1 sec)
- * Do not hyperventilate
- * Watch for chest rise





2 Rescuer CPR with Bag mask ventilation

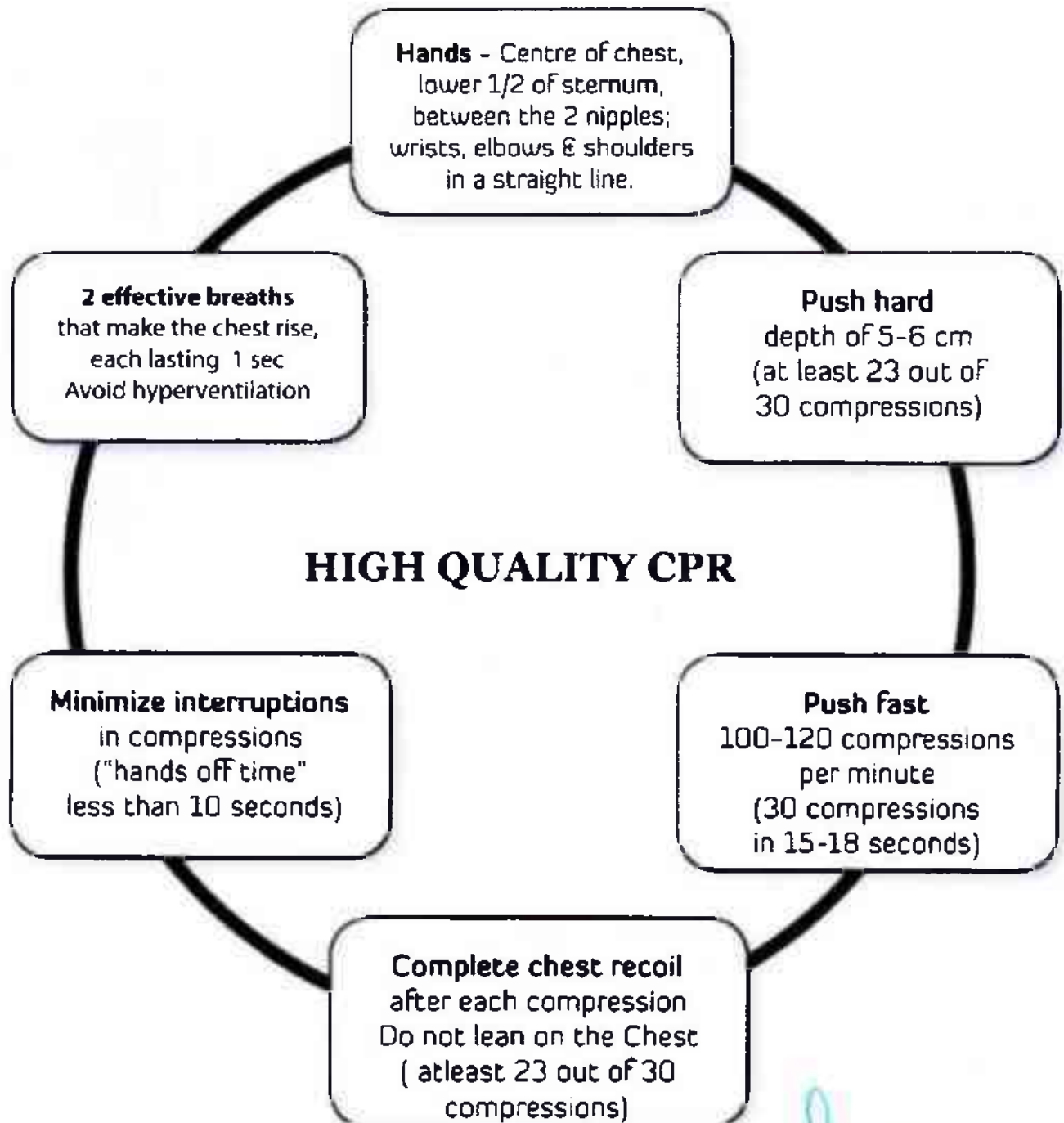
- * 1st rescuer gives 30 compression
- * 2nd rescuer positioned at head end of victim & gives 2 breaths using bag mask ("C & E" technique to hold the mask, head tilt & chin lift)
- * 1 breath over 1 sec
- * Do not hyperventilate
- * Watch for chest rise



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Critical Concepts of High Quality CPR

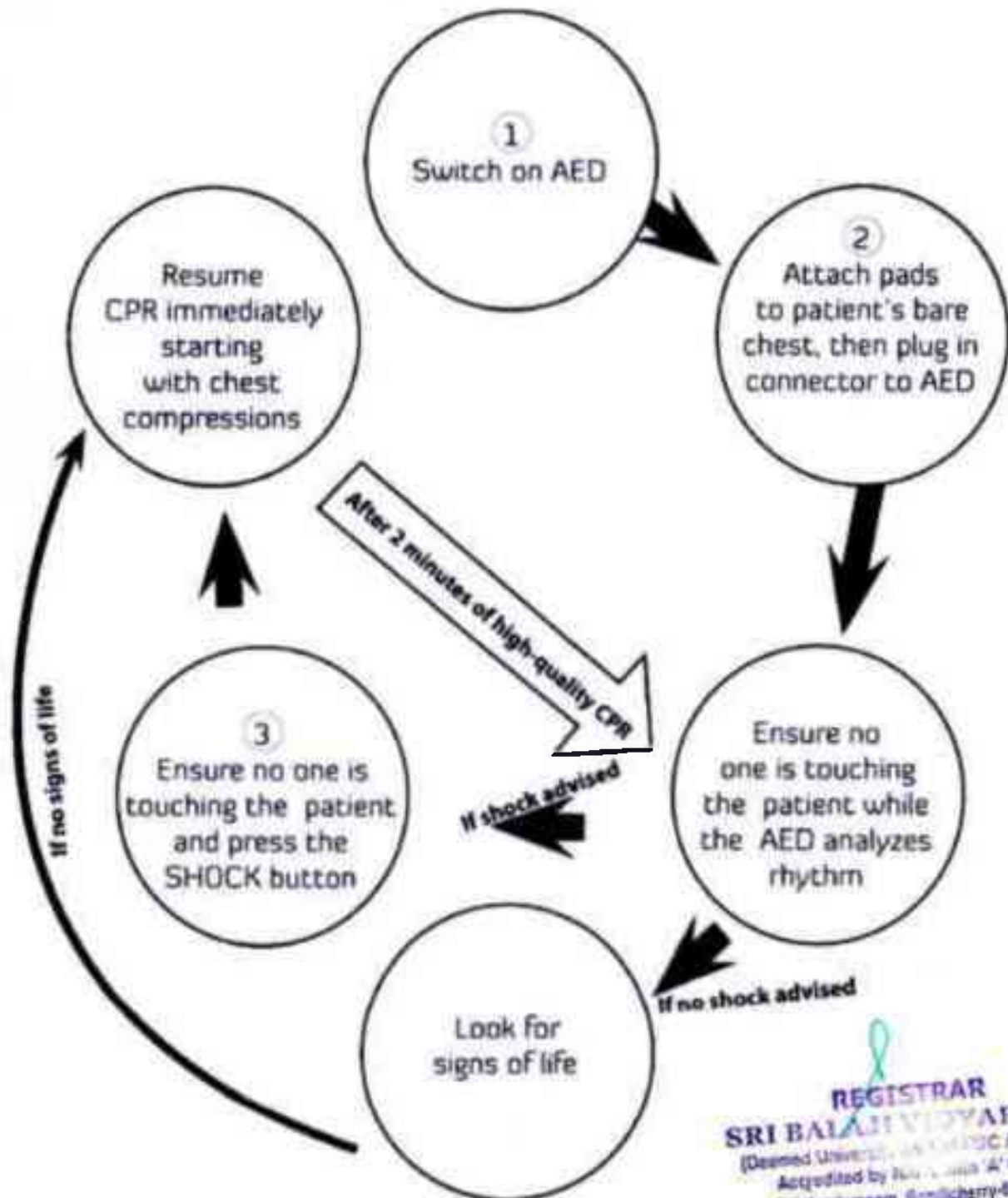


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AED Algorithm

AUTOMATED EXTERNAL DEFIBRILLATOR



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Use of AED on infants

1. A manual defibrillator is preferred
2. If not available, an AED with a paediatric dose attenuator is preferred.
3. Use an AED without a paediatric dose attenuator if neither is available.

Use of AED pads in children less than 8 years of age

1. An AED with child pads.
2. If child pads are not available, use adult pads (but not touching each other).

1. Switching on AED

Rationale:

To listen & Follow the
AED prompts



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2.a. Applying AED pads to patient's chest

Rationale:

To analyse the rhythm.

*Attach the apex pad
just below the left
nipple

*Attach the sternal pad
just below the right
clavicle



2.b. Plugging in pads connector to AED

Rationale:

This step should not be
done before attaching
the pads since AED
will start analyse the
rhythm even if the pads
are in the air





2.c. Clearing the patient before rhythm analysis

Rationale:
To avoid
misinterpretation of
rhythm by the AED



3. Delivery of shock

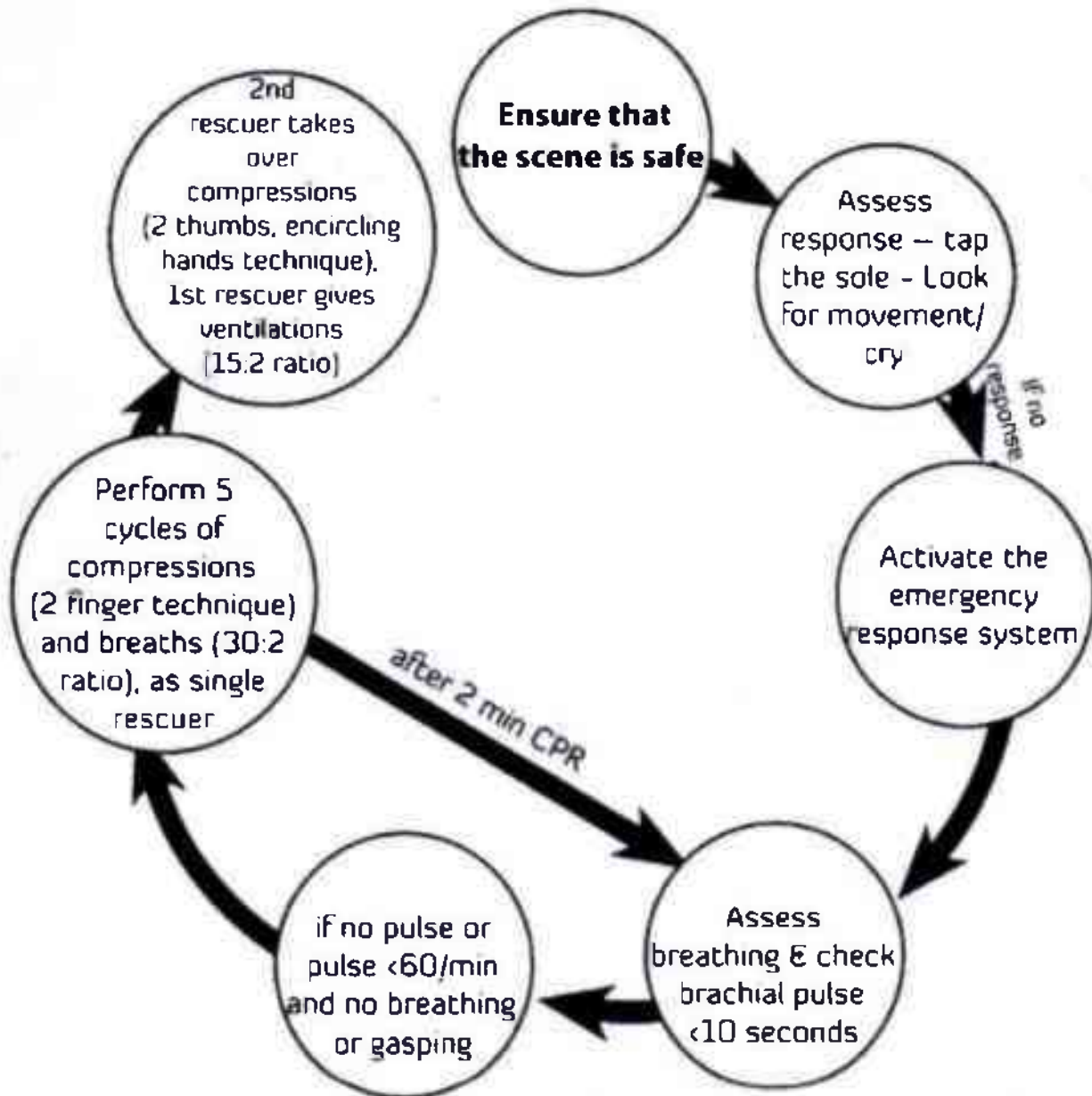
Rationale:
Press the shock button
manually after ensuring
that no one is touching
the victim



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BLS Survey – Infant Algorithm



* If only one rescuer is doing CPR after 2 min. of CPR look for signs of life. If absent continue 5 cycles of CPR.

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Checking response

- * Tap: on the sole
- * Shout : hey Papa..



Activating Emergency Response System (Calling for help)

- * Shout for help
- * Call 108 & ask for AED





Pulse and breathing

Simultaneously
Scan the chest
movement
and check brachial
pulse by gently
compressing the
brachial artery
with the pulp of
3 or 4 fingers in
the inner aspect
of arm, midway
between shoulder
& elbow, at least for
5 sec
and not more than
10 sec.



2 finger technique

- * 2 fingers
perpendicular to the
center of the lower
half of sternum
(center of 2 nipples)
- * 30 compressions
with the depth of one
and half inches or
4cm
- * Allow complete
chest recoil after
each compression





Using a pocket mask

- * Keep the pocket mask over the face tightly
- * Head should be in the neutral position
- * Do not hyper extend the neck
- * Give 2 breaths (1 breath over 1 sec)
- * Do not hyperventilate
- * Watch for chest rise



Two thumbs hands encircling technique(2 Rescuer CPR)

- * 1 rescuer: positioned at foot end of infant
- * 2 thumb hand encircling technique
- * 15 compression
- * 2 rescuer: positioned at head end of infant
- * Using bag mask ("C & E technique" to hold the mask)
- * Give 2 breaths (1 breath over 1 sec)
- * Do not hyperventilate
- * Watch for chest rise



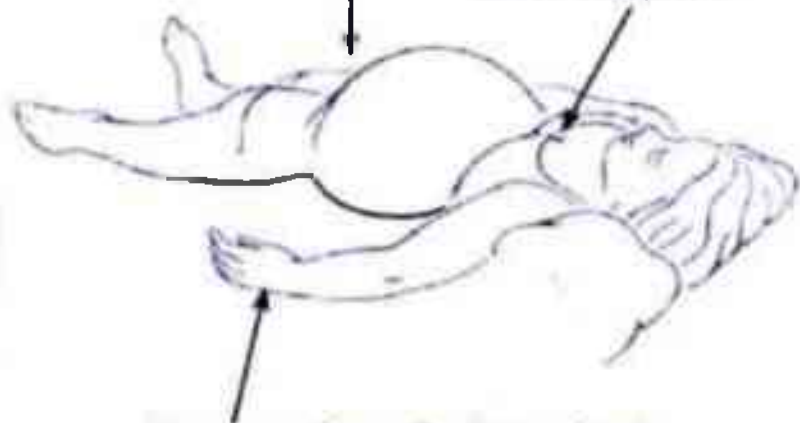


Pregnancy and CPR

- Follow BLS and ACLS guidelines
- Modified Position - do manual uterine displacement.
- Chest compressions should be performed slightly higher on the sternum than normally recommended to adjust for elevation of diaphragm
- Intravenous access to be secured above diaphragm level
- If no Return Of Spontaneous Circulation by 4 min perform emergency caesarean section
- Aim for delivery within 5 min of onset of resuscitation
- Continue resuscitative efforts during and after caesarean section

Caesarean section if no ROSC < 4 min

Chest compressions higher than usual place



IV access above diaphragm level





Summary of High Quality BLS

Component		Adults	Children	Infants (age<1 yr)
Scene safety		Ensure "Scene is safe"		
Check Response		Tap and Shout, "Are you all right?" Look for movement / speech		Flick the soles of the feet & look for movement / cry
Call for Help		Activate Emergency Response System; Get AED		
Check Pulse & Breathing Simultaneously		Check pulse and observe for chest rise (>5 sec but <10 sec)		
		Carotid pulse		Brachial pulse
Hand placement for compressions		Two hands – centre of chest; lower ½ of sternum (between the 2 nipples)	As in adult. One hand alone may be used for small children	Two finger technique (If one rescuer)
				Two thumb-encircling hands technique (If 2 rescuers)
Compression rate		100-120 per min		
Compression depth		At least 5 cm	At least 1/3rd the AP diameter of chest	
			About 5 cm	About 4 cm
Compression / ventilation ratio	Without advanced airway	30:2 for one or two rescuers		30:2 if one rescuer 15:2 if two rescuers
	With advanced airway	Continuous compressions @ 100-120 per min 1 breath every 6 seconds		

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Chest recoil		Allow full re-expansion of chest before next compression	
Minimize interruptions		All interruptions should be <10 seconds (hands off time <10 sec)	
Opening the airway	No suspicion of cervical spine injury	Head tilt-chin lift	
		Maximize extension of neck	Avoid hyperextension
	Suspicion of cervical spine injury	Jaw thrust (No head extension)	
Device for giving artificial breaths	1 rescuer	Mouth-to-mask / Mouth-to-mouth	
	2 rescuer	Bag-mask device	
Breaths during respiratory arrest		1 breath every 5-6 seconds	1 breath every 3-5 seconds

Activation of Emergency Response System

Adults — If you are alone with no mobile phone, leave the victim to activate the emergency response system and get the AED before beginning CPR. Otherwise, send someone and begin CPR immediately. Use the AED as soon as it is available.

Children & Infants

Witnessed collapse — If you are alone with no mobile phone, leave the victim to activate the emergency response system and get the AED before beginning CPR. Otherwise, send someone and begin CPR immediately. Use the AED as soon as it is available.

Unwitnessed collapse — Give 2 minutes of CPR. Then Leave the victim to activate the emergency response system and get the AED. Return to the child or infant and resume CPR. Use the AED as soon as it is available.





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**Advanced Cardiovascular
Life Support (ACLS)**

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Megacode Resuscitation Team Concept

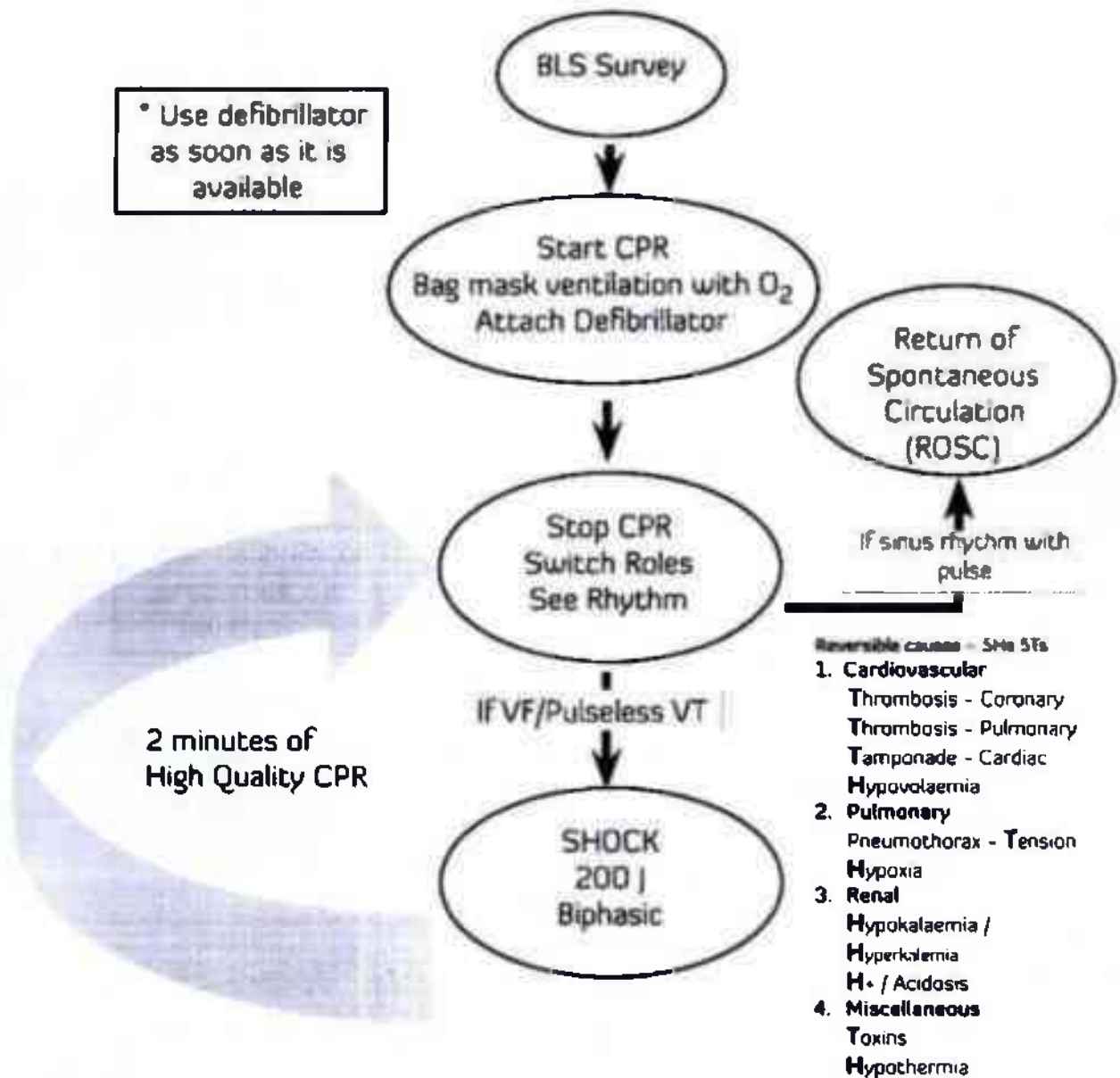
Effective resuscitation requires coordination between the team leader and team members. The coordination is discussed in the following 8 principles.

Principles of team resuscitation

No.	Principle	Example
1	Closed-loop communication	Leader – "Now that we have a shockable rhythm (VF) on the monitor, give 200 J biphasic shock." Member – After delivering the shock, says, "200 J biphasic shock delivered."
2	Clear messages	The leader instead of just saying "Give shock" should say, "Give 200 J biphasic shock."
3	Clear roles and responsibilities	The leader assigns clearly the following roles to team members – Compression, Ventilation, Monitor & Defibrillation, IV Access and drugs, Code Recorder.
4	Knowing one's limitations	If a team member assigned for defibrillation does not know how to use the defibrillator, the team leader assigns the role to a member who is capable of using the defibrillator.
5	Knowledge sharing	Team leader tells team member to apply conductive gel properly and apply sufficient pressure with the paddles on the chest before delivering shocks
6	Constructive intervention	If a team member fails to synchronize the defibrillator for a patient requiring cardioversion, another team member intervenes and reminds about synchronization.
7	Reevaluation and summarizing	The patient continues to have persistent VF, and we have now given 3 shocks, one dose of Epinephrine and Amiodarone each.
8	Mutual respect	The team leader gives commands with respect to team members, without shouting or criticism.



Cardiac arrest – VF/VT (Algorithm)

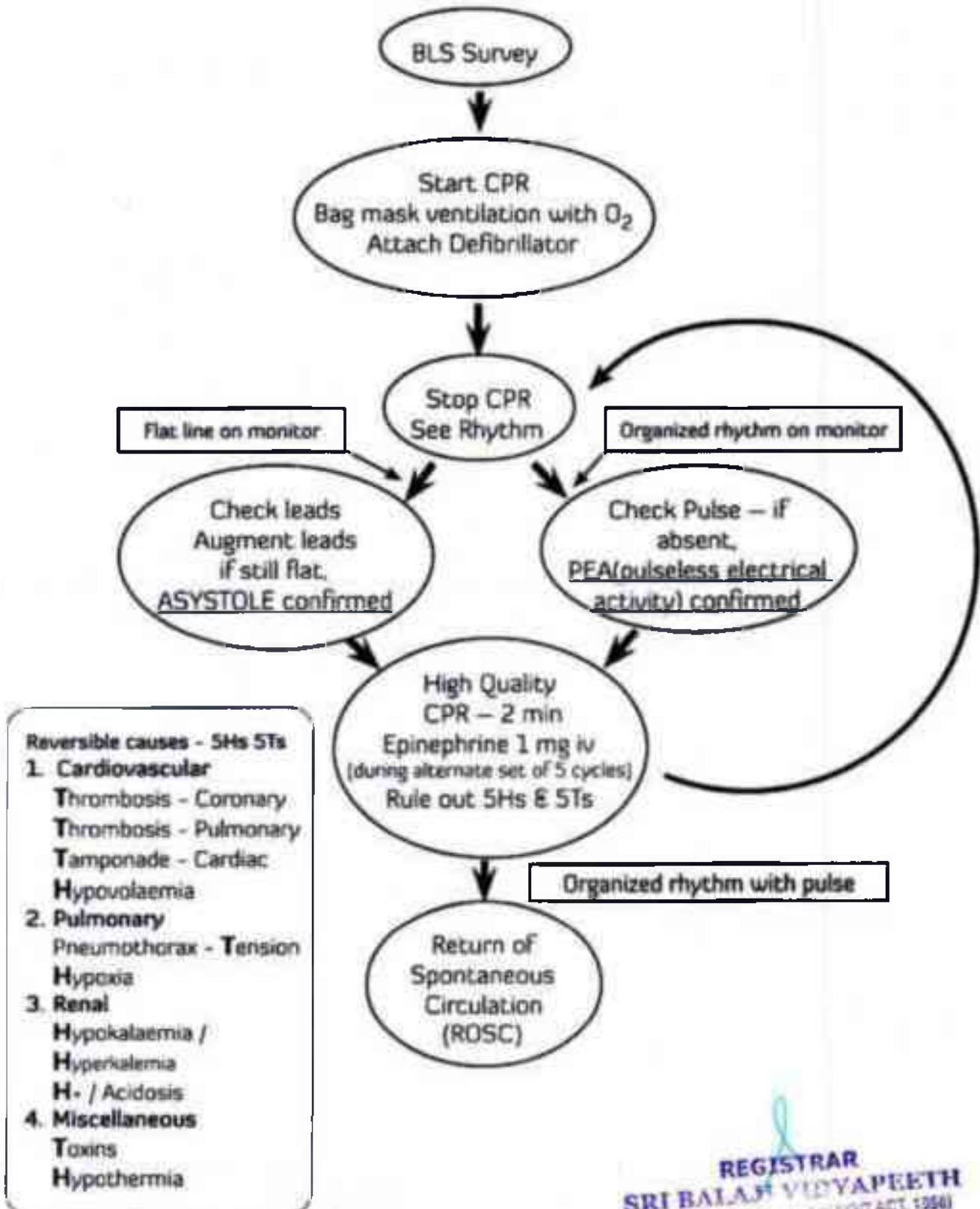


- After 1st shock – Ensure iv/IO access
- After 2nd shock – Epinephrine 1 mg iv bolus, consider advanced airway
- After 3rd shock – Amiodarone 300 mg iv, Treat reversible causes - 5Hs 5Ts
- After 4th shock – Repeat Epinephrine 1 mg iv after every even shock
- After 5th shock – Amiodarone 150 mg iv, second dose

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Cardiac Arrest – Asystole / PEA Algorithm

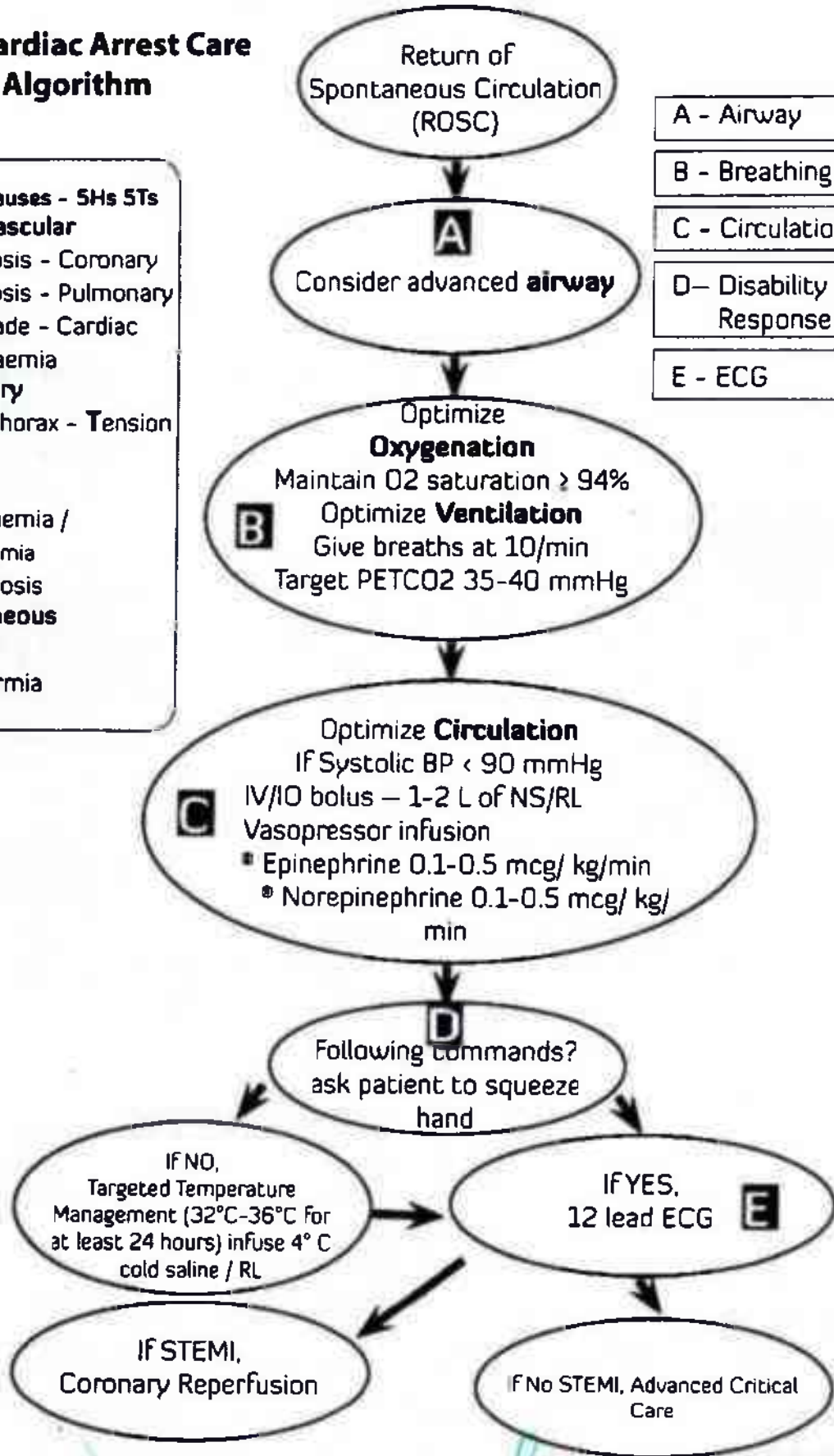




Post Cardiac Arrest Care Algorithm

- Reversible causes - 5Hs 5Ts
- 1. Cardiovascular**
Thrombosis - Coronary
Thrombosis - Pulmonary
Tamponade - Cardiac
Hypovolaemia
 - 2. Pulmonary**
Pneumothorax - Tension
Hypoxia
 - 3. Renal**
Hypokalaemia /
Hyperkalemia
H⁺ / Acidosis
 - 4. Miscellaneous**
Toxins
Hypothermia

- A - Airway
- B - Breathing
- C - Circulation
- D - Disability / Response
- E - ECG






Peri-arrest Management

Responsive patients (AB VOMIT)

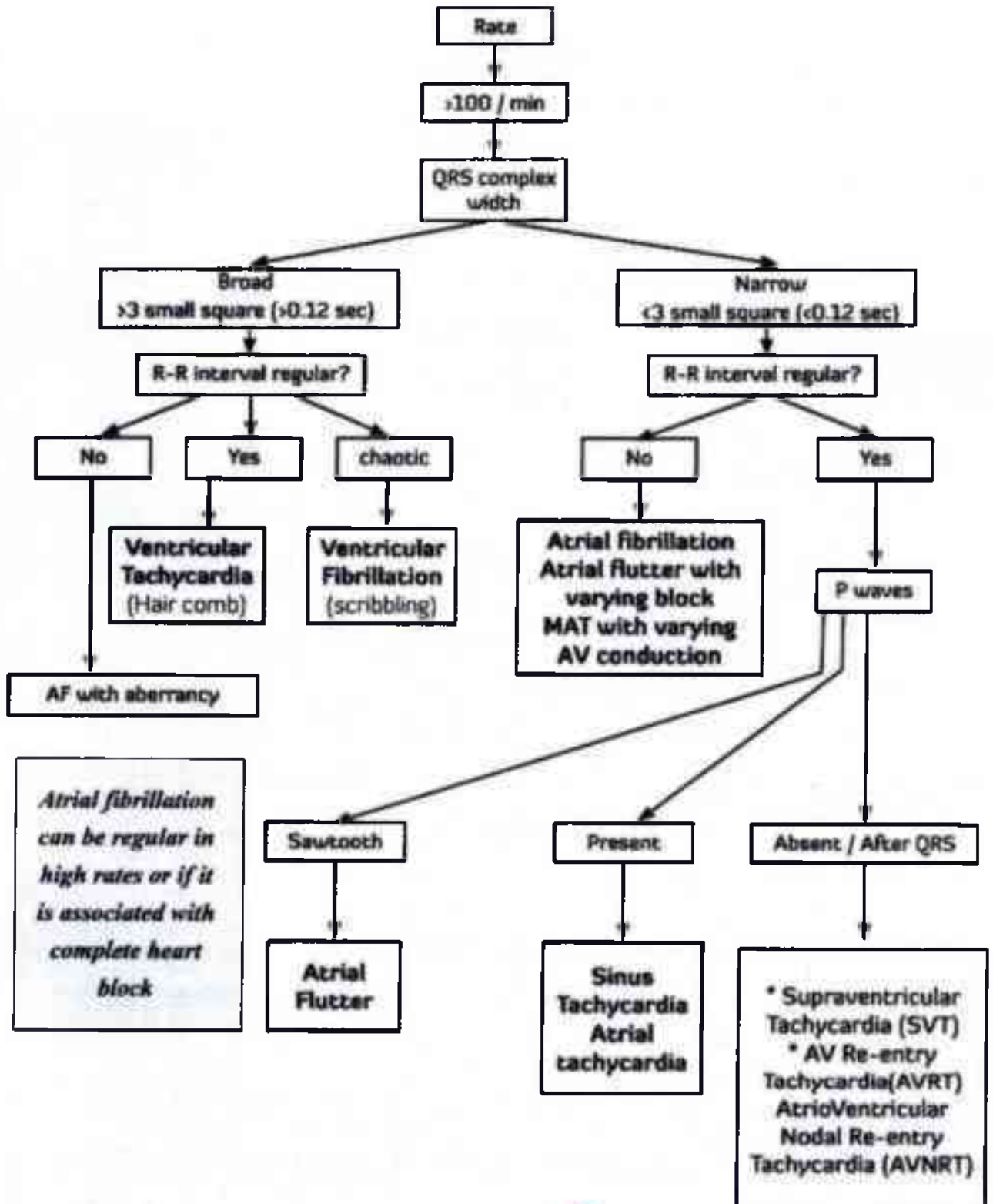
1. Airway - Ensure it is patent
2. Breathing - Ensure rate & pattern is normal
3. Vitals
4. O₂
5. Monitor - See rate & rhythm
6. IV Access
7. Treat as below after considering heart rate, ECG rhythm & blood pressure.

	Systolic BP > 90 mmHg	Systolic BP < 90 mmHg
Heart Rate < 50/min	<p>Observe and monitor</p>	<p>Atropine 0.5 mg iv, every 3-5 minutes, maximum 3 mg (cumulative)</p> <p style="text-align: center;">↓ (If no response)</p> <p>Transcutaneous Pacing)</p> <p style="text-align: center;">↓ (If not available or not effective)</p> <p>Dopamine infusion 2-10 mcg/kg/min (or) Epinephrine infusion 2-10 mcg/min</p>
Heart Rate > 150/min	<p>12 Lead ECG</p> <p>Regular, Narrow QRS</p> <ol style="list-style-type: none"> 1. Vagal manoeuvres 2. Adenosine 6 mg IV, repeat with 12 mg 3. Beta blockers / Calcium channel blockers 4. Expert consultation <p>Irregular, Narrow QRS</p> <ol style="list-style-type: none"> 1. Beta blockers / Calcium channel blockers 2. Expert consultation <p>Broad QRS</p> <ol style="list-style-type: none"> 1. Adenosine 6 mg IV, if regular and monomorphic (re-entry SVT) 2. Amiodarone 150 mg slow IV over 10 minutes 3. Expert consultation 	<p>Synchronized cardioversion</p> <ul style="list-style-type: none"> • Sedate (IV Midazolam 1-2 mg) / Fentanyl 50-100mg • Synchronize defibrillator • Select energy (according to rhythm) <p>(Initial recommended energy doses in biphasic current)</p> <ul style="list-style-type: none"> • Atrial Flutter & SVT: 50-100 J • VT: 100 J • Atrial Fibrillation: 120 J


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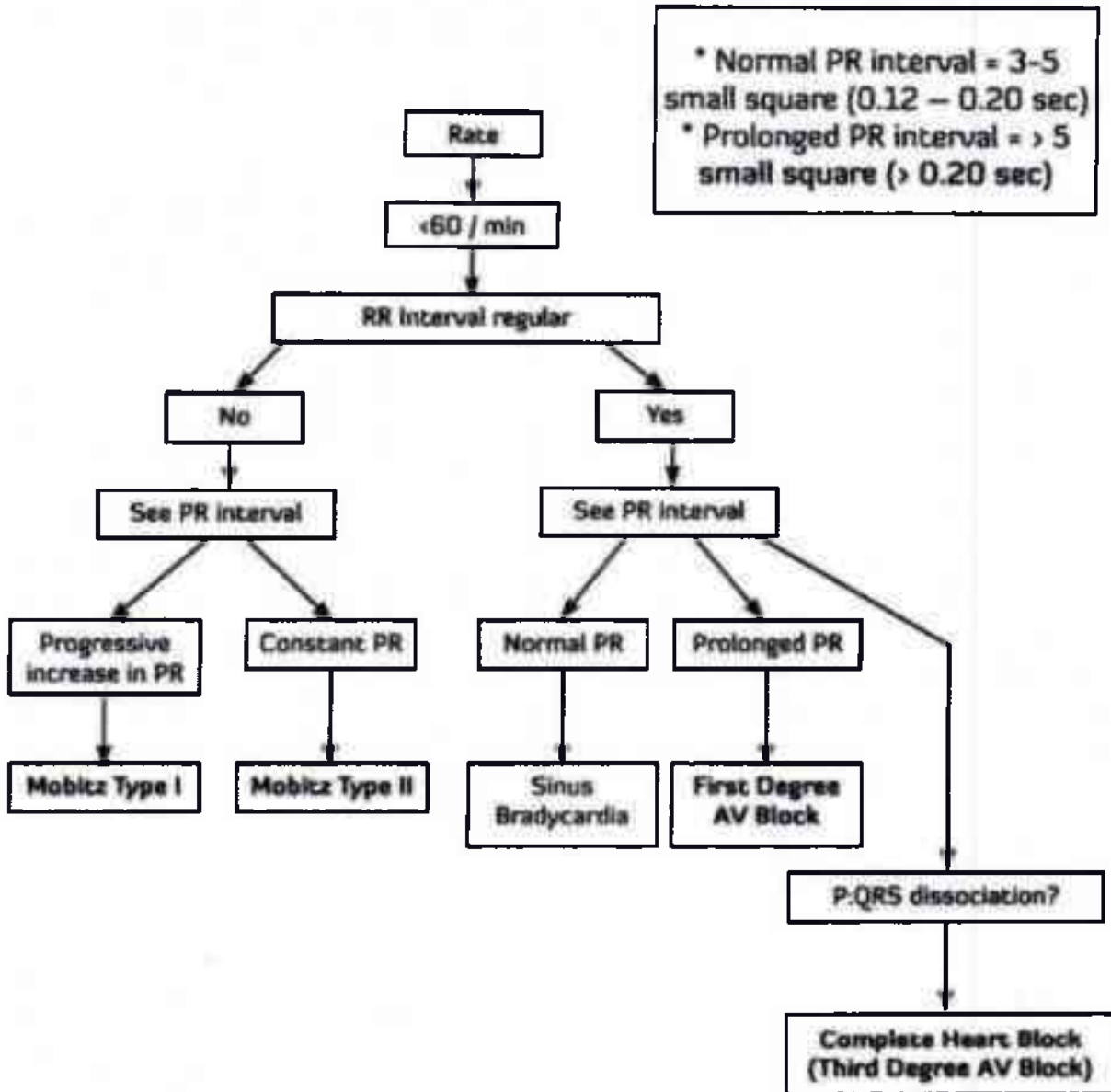


ECG algorithm (Tachyarrhythmias)





ECG algorithm (Bradyarrhythmias)

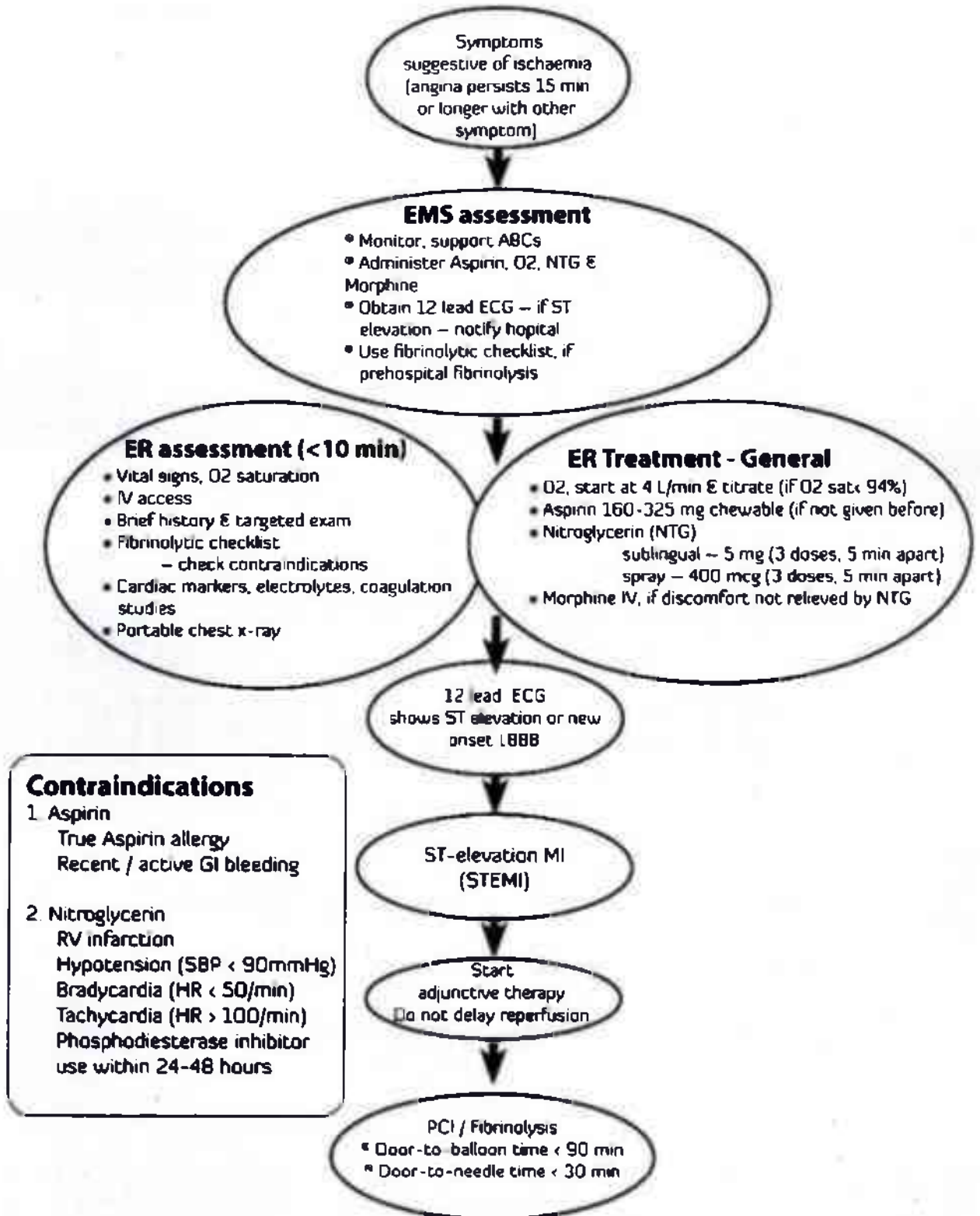


Bradycardia with retrograde or merged P after QRS is junctional

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Acute Coronary Syndrome (ACS) Algorithm



Contraindications

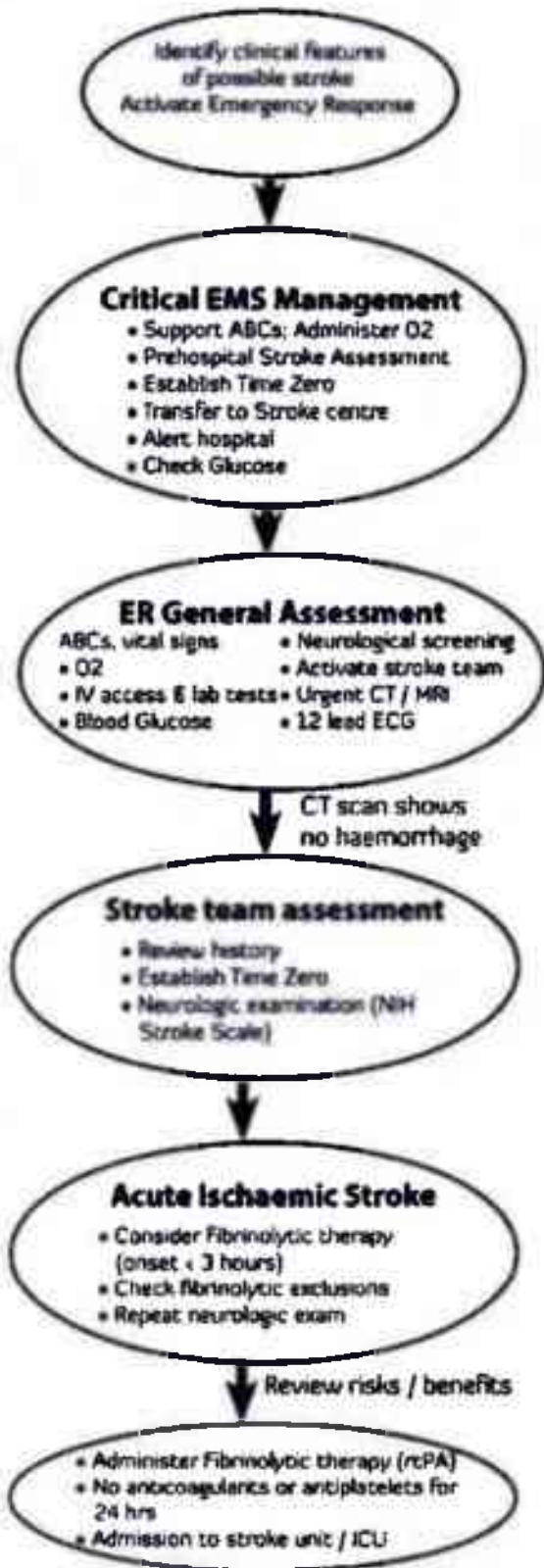
- Aspirin
 - True Aspirin allergy
 - Recent / active GI bleeding
- Nitroglycerin
 - RV infarction
 - Hypotension (SBP < 90mmHg)
 - Bradycardia (HR < 50/min)
 - Tachycardia (HR > 100/min)
 - Phosphodiesterase inhibitor use within 24-48 hours

*ABC – Airway, Breathing, Circulation
*ER – Emergency department

*EMS – Emergency Medical Services
*PCI- Percutaneous Coronary Intervention



Stroke Algorithm



Cincinnati Prehospital Stroke Scale

F-A-S-T

1. Facial droop
2. Arm Drift
3. Slurred Speech
4. Transport to Stroke Centre

Critical Time Periods

Action / Intervention	Perform within
General assessment	10 min
Neurologic assessment	25 min
CT Scan	25 min
Fibrinolysis (from ER arrival)	60 min
Fibrinolysis (from Time Zero)	3 hours
Admission to stroke unit/ICU	3 hours

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* NIH Stroke Scale – National Institute of Health Stroke Scale



Electrical therapies used in ACLS

- 1) Defibrillation (Unsynchronized shock)
- 2) Synchronized Cardioversion
- 3) Transcutaneous Pacing

Defibrillation

Indication: Cardiac arrest patient with VF / Pulseless VT on monitor
VF/Pulseless VT on monitor

Energy used:

120-200 J Biphasic current (based on manufacturer recommendations; if not known, then use 200 J) 360 J Monophasic.

Steps:

- 1) Select energy
- 2) Apply conductive gel on paddle placement sites
- 3) Place paddles on the patient's chest - sternal paddle below the right clavicle, apex paddle on the left 5th intercostal space on the midaxillary line
- 4) Charge the defibrillator (pressing the charge button under the right thumb on the apex paddle)
- 5) Clear the patient by warning loudly - "Shocking - everybody stay clear"
- 6) Apply pressure (enough to cause mild indentation) on the chest and press shock buttons on both paddles simultaneously.
- 7) Resume chest compressions immediately (do not delay by checking for pulse or analyzing rhythm)

Transthoracic impedance:

For shock energy to be delivered maximally to the heart, transthoracic impedance has to be kept to a minimum. This can be done by

- 1) Using conductive gel - ensures maximum energy is delivered to the myocardium by decreasing impedance, ensures better contact between the paddles and chest wall.
- 2) Pressing the paddles and ensuring adequate contact with chest wall - until the indicator on the sternal paddle goes green (red and yellow indicate insufficient contact)
- 3) Pressing the paddles until there is indentation of the chest wall



Defibrillator safety:

- 1) Avoid O₂ flowing across the chest by avoiding giving ventilations during defibrillator use.
- 2) Charge the defibrillator only after the paddles are placed on the chest,
- 3) Avoid holding the defibrillator paddles in your hands for long
- 4) Warn loudly - "Shocking, everybody stay clear!" and checking visually before delivering shock
- 5) Put the paddles back on the defibrillator immediately after the shock is delivered
- 6) Do not hold both paddles on one hand

Synchronized cardioversion

Indications:

A patient with tachycardia and haemodynamically unstable (hypotension, and signs and symptoms of poor perfusion)

Initial energy doses recommended

Differs according to the rhythm on the monitor

- 1) Atrial flutter and Supraventricular tachycardia - 50 to 100 J Biphasic
- 2) Ventricular tachycardia - 100 J
- 3) Atrial fibrillation - 120 J and above If the rhythm does not convert, increase energy levels for subsequent shocks.

Steps:

- 1) Sedate the patient - IV Midazolam 1 to 2 mg / Fentanyl 50-100 mcg
- 2) Select energy dose according to the rhythms mentioned above
- 3) Set the defibrillator to "Synchronization" mode - this is confirmed by "Sync" display on the monitor, and by dots or dashes identifying R waves
- 4) Apply gel
- 5) Place paddles
- 6) Charge the defibrillator
- 7) Clear the patient
- 8) Shock - since the shock is delivered only at the next synchronization (with R wave), you may need to hold the paddles a little longer to confirm that shock has been delivered



Transcutaneous pacing

Indications - A patient with bradycardia and showing symptoms and signs of poor perfusion (including hypotension)

Steps:

- 1) Sedate the patient
- 2) Apply adhesive pacing pads on the patient's chest
- 3) Set the defibrillator to pacing mode
- 4) Select the desired pacing heart rate (80/min or above)
- 5) Increase the pacing current by 5 mAmp at a time while watching the monitor for the pacing impulses to appear (pacing current spike followed by broad QRS complex at the set heart rate) - electrical capture
- 6) After the impulses appear, increase the current by another 5-10 mAmp as a safety margin above the threshold
Check the vitals - pulse rate should match the set pacing rate (mechanical capture), BP should recover

	SYNCHRONIZED CARIOVERSION	DEFIBRILLATION
DEFINITION	" CARDIOVERSION " is the application of electricity to terminate a <i>still perfusing rhythm</i> (e.g., ventricular tachycardia with a pulse, supraventricular tachycardias including atrial arrhythmias) to restore the normal Sinus Rhythm	" DEFIBRILLATION " is the application of electricity to terminate a <i>non perfusing rhythm</i> (Pulseless ventricular tachycardia, Ventricular Fibrillation) to restore the normal sinus Rhythm.
MECHANISM OF ACTION	By depolarising all excitable tissue of the circuit and making the tissue refractory, the circuit is no longer able to propagate or sustain re-entry.	By depolarising a critical mass of the heart muscle, terminates the arrhythmia, and allows normal sinus rhythm to be re-established by the body's natural pacemaker, in the sino-atrial node of the heart.
LEVEL OF CONSCIOUSNESS	Conscious	Unconscious
SYNCHRONICITY	Synchronous By pressing the "SYNC" soft key, the defibrillator will enter "SYNC" mode and the synchronising circuit within the defibrillator will detect the patient's R-waves. When the shock button is pressed and held, the unit discharges with the next detected R-wave, thus avoiding the vulnerable T-wave segment of the cardiac cycle.	Non synchronous The shock may fall randomly anywhere within the cardiac cycle (QRS complex). Unsynchronized cardioversion (defibrillation) is used when there is no coordinated intrinsic electrical activity in the heart (pulseless VT/VF) or the defibrillator fails to synchronize in an unstable patient.
ENERGY LEVEL	Starts at 25J – 120 J	Highest energy as per manufactured recommendation 120J-200J
INDICATIONS	Tachyarrhythmias causing hemodynamic compromise 1. Ventricular Tachycardia with pulse 2. Supraventricular Tachycardia 3. Atrial Flutter	1. Ventricular Fibrillation 2. Pulseless Ventricular Tachycardia





	<p>4. Atrial Fibrillation 5. Atrial Tachycardia 6. Junctional Tachycardia</p>	
NEED FOR PROCEDURAL SEDATION	Patient needs Sedation because patient is conscious.	Patient does not need sedation because patient is Unconscious.
PRACTICAL PROCEDURE	<ul style="list-style-type: none"> • Check the availability of full Resuscitation Equipments and Drugs • Secure IV access • Connect ECG Monitoring and Pulse Oximetry • Sedate with Midazolam and Fentanyl • Pre-oxygenation • ENSURE SYNCHRONISATION is ON and marker on "R wave" • Select Energy Level – 25 -120 • Follow the steps as in page 39 	<ul style="list-style-type: none"> • Check the availability of full Resuscitation Equipments and Drugs • Secure IV access • Connect ECG Monitoring and Pulse Oximetry • ENSURE SYNCHRONISATION is OFF • Select Energy Level – High Joules (Highest as per manufacturer recommendation) • Follow the steps as in page 38

ENERGY AND CURRENT FLOW

Adequate current flow through the heart is required for successful defibrillation. The current delivered to the myocardium with a given energy is dependent on the "Trans thoracic Impedance", which can vary widely among patients. Thus, the same energy dose can potentially deliver varying current to a patient. Additionally, the percentage of current shunted through the thorax, away from the myocardium, influences the net current a patient receives.

MONOPHASIC DEFIBRILLATORS

Electrical current flows in a single direction from an electrode on one side of the patient's chest to a second electrode on the other side. The waveform associated with monophasic defibrillations contains a Single peak. The highest part of the waveform, the peak current, is a key determinant of successful defibrillation. There must be enough current to reach the heart to defibrillate (terminate the lethal rhythm), but not so much peak current that the heart is damaged.

BIPHASIC DEFIBRILLATORS

Electricity is sent from one electrode to the other in the first phase of this waveform, followed by a return back to the originating electrode in the second phase. Biphasic technology requires a much lower current to achieve successful termination of fibrillation. This may result in less damage to the myocardium and a reduced frequency of postshock contractility and dysrhythmias.

PADDLE / PADS SIZE

- Larger Size associated with higher success rates and less Myocardial Damage
- Paddles/pads of 10–13 cm optimally reduce transthoracic impedance

METHOD OF USE

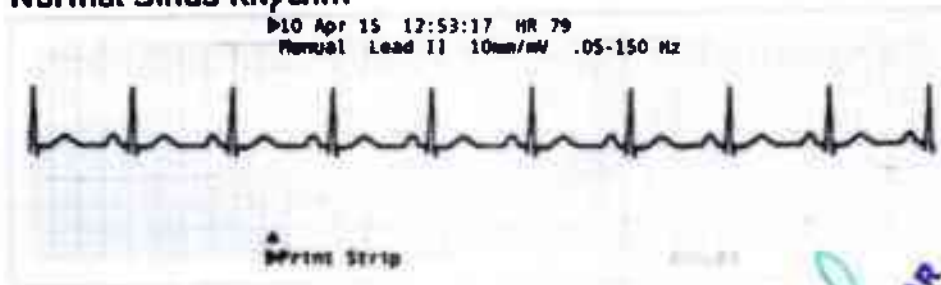
There are two accepted positions to optimize current delivery to the heart:

- **ANTEROAPICAL** – one pad/paddle is placed to the right of the sternum just below the clavicle, and the other is centred lateral to the normal cardiac apex in the anterior or midaxillary line (V5–6)
- **ANTEROPosterior** – the anterior pad/paddle is placed over the precordium or apex, and the posterior pad/paddle is placed on the back in the left or right infraclavicular region.



ARRHYTHMIAS

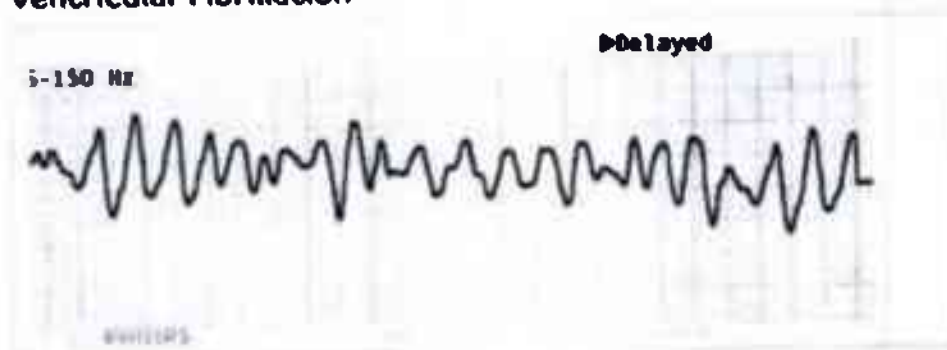
Normal Sinus Rhythm



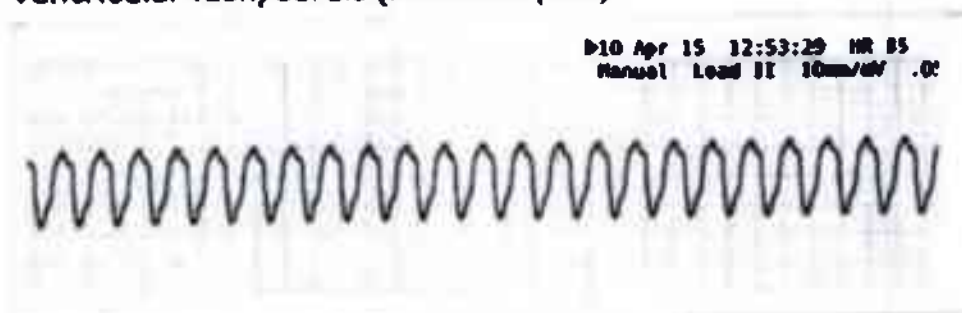
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Pillayarpatti - 605007



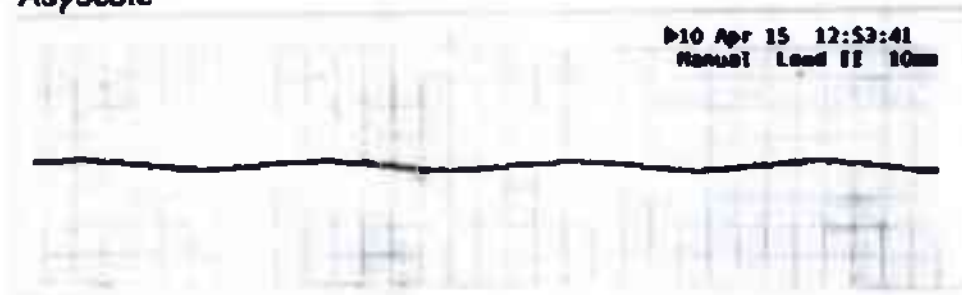
Ventricular Fibrillation



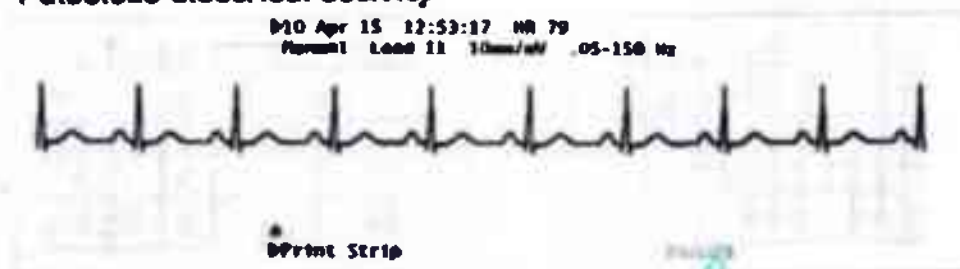
Ventricular Tachycardia (Monomorphic)



Asystole

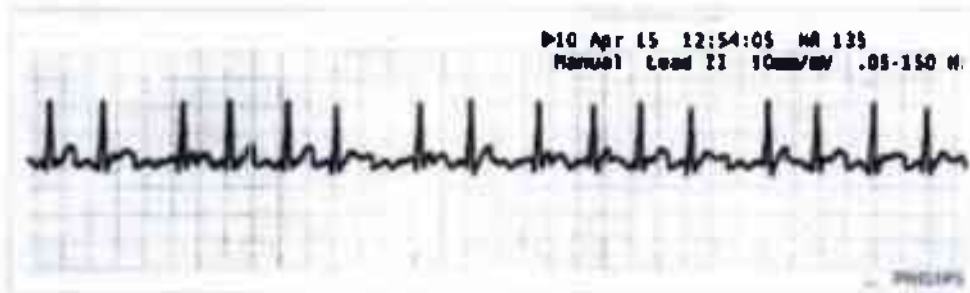


Pulseless electrical activity

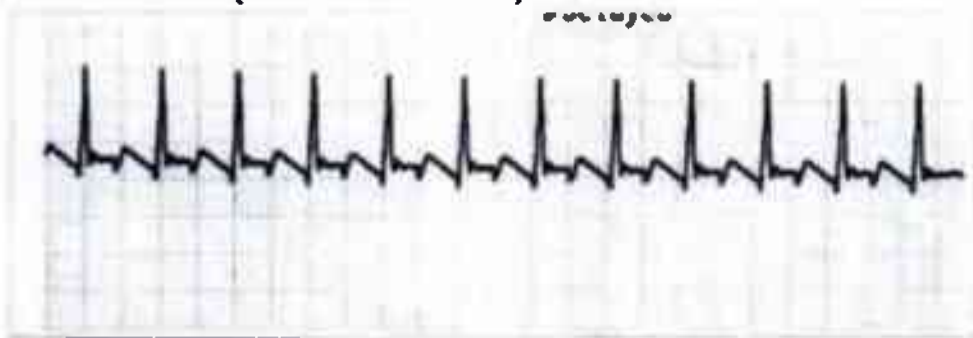




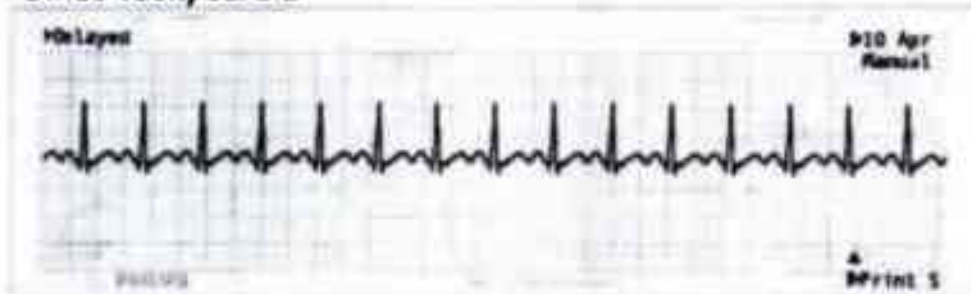
Atrial Fibrillation



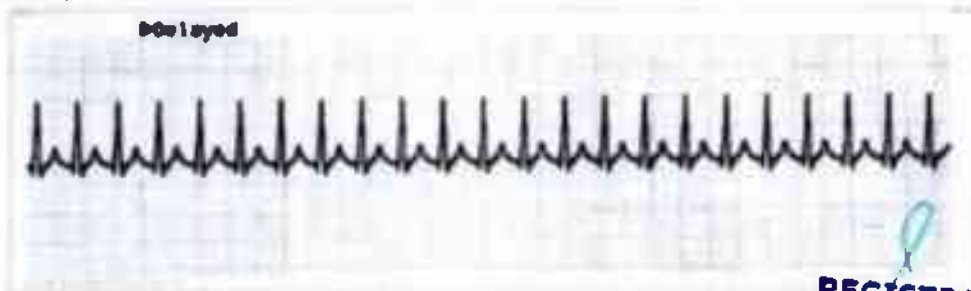
Atrial Flutter (with 2:1 AV block)



Sinus Tachycardia



Supraventricular Tachycardia

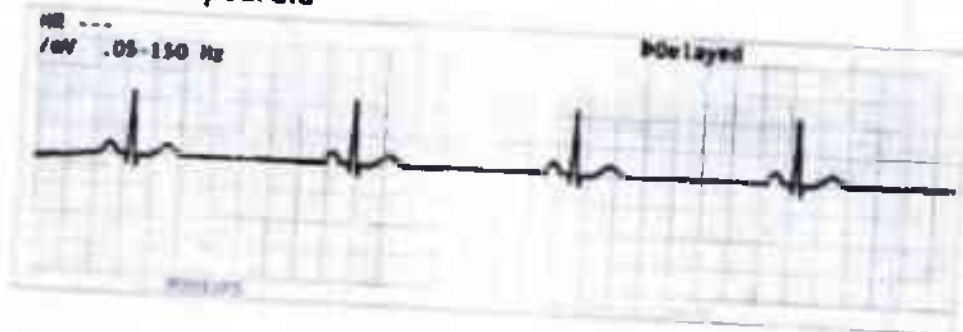


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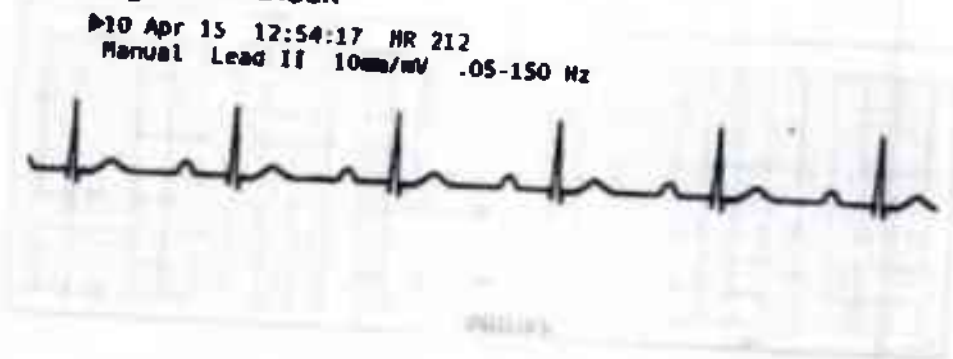


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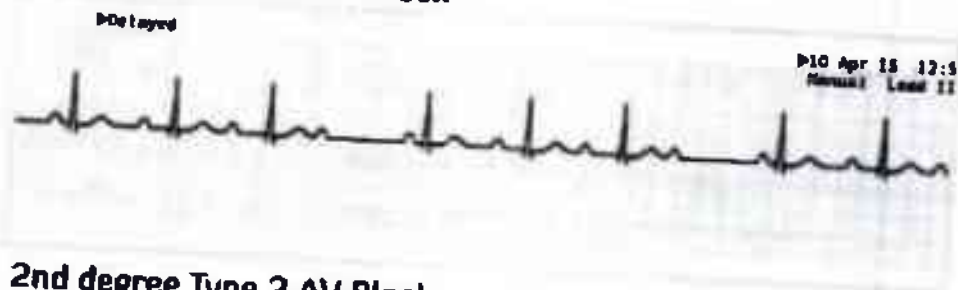
Sinus Bradycardia



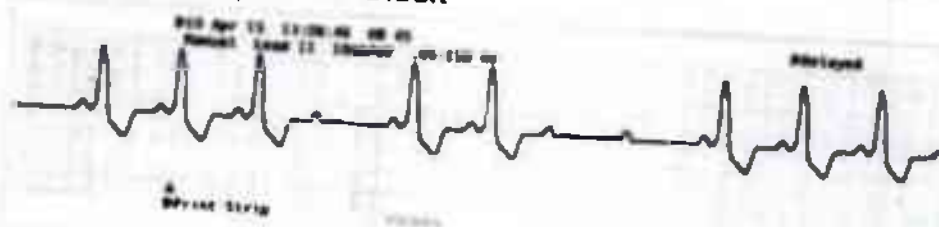
1st degree AV Block



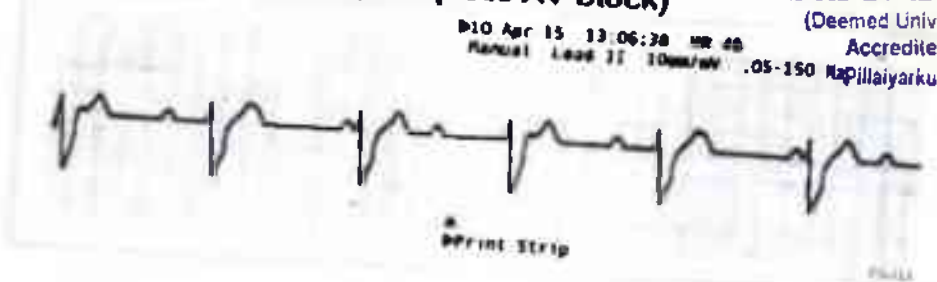
2nd degree Type 1 AV Block



2nd degree Type 2 AV Block



3rd degree AV Block (Complete AV Block)



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Drugs

Anaesthesiology Postgraduates

Dr. Janani .N

Dr. Saranya .N

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DRUG NAME	MOA and effects	ONSET and DURATION	DOSAGE & ROUTE OF ADMINISTRATION	INDICATIONS	CONTRAINDICATIONS SIDE EFFECTS	PRECAUTIONS
Epinephrine (naturally occurring catecholamines)	<ul style="list-style-type: none"> Beta & Alpha adrenergic agonist $\alpha_1, \alpha_2, \beta_1, \beta_2$ Myocardial stimulation (beta 1) Peripheral vasoconstriction Bronchodilator (beta 2) Mydriatic Hyperglycaemic 	<p>Onset: IV - 1-2 min SC: 5-10min Duration - 5-10 min</p>	<p>Adult: 1 mg IV/10 every 3-5 minutes Pediatric dose: 0.01 mg/kg (0.1 mL/kg of 1:10,000 solution) IV/10 every 3 to 5 min Anaphylaxis: SC/IM: 0.5mg IV: 100mcg every 3-5 mins followed by infusion. Infusion dose: Range - 0.03-3 mcg/kg/min Nebulisation: (adult and pediatric) 0.5mg/kg of 1:1000 dose dilution (max 5mg) Epidural test dose: 1:200000 (5 mcg/ml)</p>	<ul style="list-style-type: none"> Cardiac arrest (asystole, pulseless electrical activity, ventricular fibrillation). Shock states Anaphylaxis 99 Test dose in epidurals and peripheral nerve blocks to rule out vascular placement Ca- administration with local anaesthetics 	<p>Based on situation</p> <ul style="list-style-type: none"> Ventricular arrhythmias Cerebrovascular haemorrhage Myocardial Ischemia. 	<p>Halothane (inhalational anaesthesia) - ventricular arrhythmias Limit- 0.15mg</p>

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DRUG NAME	MOA and effects	ONSET and DURATION	DOSAGE & ROUTE OF ADMINISTRATION	INDICATIONS	CONTRAINDICATIONS	SIDE EFFECTS	PRECAUTIONS
Amlodarsone	<ul style="list-style-type: none"> • Class III Antiarrhythmic drug. • Possesses characteristics of all 4 classes. • Inhibits sodium channels at rapid pacing frequencies (Class I): • Suppresses AV node via sympatholytic activity (Class II): • Blocks potassium channels, which prolongs the cardiac action potential (Class III); • Negative inotropy by blocking L-type calcium channels (Class IV) 	<p>Onset :IV - < 30min Duration : variable Elimination Half life of single dose - 56 days</p>	<p>Cardiac arrest: Adult: 300 mg initial dose; 150 mg second dose after 2nd shock. Pediatric: 5 mg/kg IV or IO; may repeat twice at same dose; maximum of 15 mg/kg Refractory tachyarrhythmias: 150mg iv bolus over 10 mins followed by Infusion : 1mg/min for 6 hrs 0.5mg/min for 18hrs</p>	<ul style="list-style-type: none"> • Ventricular tachycardia. • Ventricular fibrillation refractory to defibrillation; second-line after epinephrine. • Atrial fibrillation /flutter and other supraventricular tachycardias. 	<ul style="list-style-type: none"> • Prolonged QT interval. • Second degree AV block • Complete AV block. • Hepatotoxicity • Porphyria 	<ul style="list-style-type: none"> • Bradycardia • Hypotension 	



DRUG NAME	MOA and effects	ONSET and DURATION	DOSAGE & ROUTE OF ADMINISTRATION	INDICATIONS	CONTRAINDICATIONS	SIDE EFFECTS	PRECAUTIONS
Lidocaine	<ul style="list-style-type: none"> • Antiarrhythmic class 1b, weak sodium channel blocker • Delays spontaneous phase 4 depolarisation. 	<p>Onset :IV- 45-90secs (bolus)</p> <p>Duration - 10 - 20 min (IV bolus)</p> <p>Context sensitivity time (after 3days infusion) - 20 - 40 min</p> <p>Elimination half life - 1.5-2hrs</p>	<p>Adult: 1-1.5mg/kg Initial dose IV</p> <p>Repeat doses: 0.5-0.75mg/kg IV with total maximum loading dose of 5mg/kg.</p> <p>Pediatric Dose: Give 1mg/kg IV bolus.</p> <p>Local anaesthetic toxic dose: 5mg/kg</p> <p>7mg/kg (with adrenaline)</p> <p>Suppress pressor response: 1.5mg/kg (30-60 secs before intubation)</p>	<ul style="list-style-type: none"> • Monomorphic VT • Refractory Ventricular fibrillation (VF) • Pulseless ventricular tachycardia (pVT) • Prevention of intubation response • Stress response 	<ul style="list-style-type: none"> • Wolff-Parkinson-White Syndrome • II degree or III degree Heart Block • Adams Stokes Syndrome 	Local anesthetic systemic toxicity	<ul style="list-style-type: none"> • Atrial arrhythmias Respiratory Depression

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DRUG NAME	MOA and effects	ONSET and DURATION	DOSEAGE & ROUTE OF ADMINISTRATION	INDICATIONS	CONTRAINDICATIONS	SIDE EFFECTS	PRECAUTIONS
Atropine	<ul style="list-style-type: none"> Anticholinergic (muscarinic antagonist) Blocks the neurotransmitter acetylcholine in the central and peripheral nervous systems through competitive inhibition 	Onset: IV - < 30 secs Duration: 30 min	Adult : Bradycardiac: 0.5mg IV/IO. Repeat every 3 to 5 minutes with a maximum dose of 3mg. Neurovascular blockade reversal: IV: 25-30 mcg/kg 30-60 seconds before resuscitation vasolytic dose: 2-3mg	<ul style="list-style-type: none"> Symptomatic Bradycardia I degree Heart block Mobitz type 1 / II degree heart block (in presence of AV Node escape rhythm) OPC Poisoning 	<ul style="list-style-type: none"> Acute MI Tachycardia Post Heart Transplant Glaucoma 	<ul style="list-style-type: none"> Central cholinergic syndrome when given in lower doses 	<ul style="list-style-type: none"> Use cautiously in myocardial ischemia because it increases myocardial oxygen demand. Not effective for Hypothermic Bradycardia



DRUG NAME	MOA and effects	ONSET and DURATION	DOSAGE & ROUTE OF ADMINISTRATION	INDICATIONS	CONTRAINDICATIONS	SIDE EFFECTS	PRECAUTIONS
Magnesium (MgSO ₄ 1 gram = 4 mmol, 8 mEq, or 98 mg of elemental magnesium)	<ul style="list-style-type: none"> • Non competitive NMDA antagonism. • Ca ++ antagonist and blunts the release of catecholamines <p>Effects :</p> <ul style="list-style-type: none"> • Potentiates Non depolarizing muscle relaxants • Tocolysis (calcium antagonism) • Preeclampsia • Neuroprotective in cerebral palsy 	Onset - IV immediate IM - 1hr Duration : IV - 30 min IM - 3-4 hrs	<p>Adult :</p> <p>With a pulse: 1-2g slow IV/IO infusion over 5-60 minutes, followed with a maintenance infusion of 0.5-1g/hr. (Magnesium should be diluted in 50-100ml of D₅W.)</p> <p>Cardiac arrest: 1-2gm slow IV/IO infusion over 5-20 minutes. (Magnesium should be diluted in 50-100ml of D₅W.)</p> <p>In instances of severe renal impairment do not give more than 20g in 48 hours.</p> <p>Pediatric : Give 25-50mg/kg IV/IO over 15-30 minutes with a max dose of 2g. (Magnesium should be diluted in 10mg/ml of D₅W.)</p> <p>Therapeutic range is a serum level of 4-7 mEq/L.</p>	<ul style="list-style-type: none"> • Torsades de pointes during cardiac arrest • Atrial fibrillation • Hypomagnesemia • Digitalis Toxicity • Asthma attacks resilient to first line therapy • Preeclampsia • Obtund pressor response during intubation • Postoperative analgesia • Preterm labour • Shivering 	<ul style="list-style-type: none"> • Hypermagnesemia • Hypocalcemia • Neuromuscular disorders such as myasthenia gravis or Eaton-Lambert syndrome 	<ul style="list-style-type: none"> • Magnesium intoxication- • Hypotension, CNS depression • Respiratory paralysis 	<ul style="list-style-type: none"> • Monitor renal function, blood pressure, respiratory rate, and deep tendon reflex when magnesium sulfate is administered parenterally. • Attenuates Hypoxic Pulmonary Vasoconstriction • Crosses the placenta and cause neonatal hypotonia and neonatal depression in severe magneemia.

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DRUG NAME	MOA and effects	ONSET and DURATION	DOSEAGE & ROUTE OF ADMINISTRATION	INDICATIONS	CONTRAINDICATIONS	SIDE EFFECTS	PRECAUTIONS
Adenosine	<ul style="list-style-type: none"> • Prolongs AV node conduction, by inhibiting L-type calcium channels in cardiac tissue nodes. • Antagonizes cAMP mediated norepinephrine stimulation of ventricular muscle. Pharmacological stress during nuclear stress tests	Onset: IV - 20-30 Secs Elimination half life is 10min	Adults : 6mg-12mg-12mg 1 st dose 6mg IV/10 over 1-3 seconds, immediately followed by 20ml of NS by rapid IV/10. 2 nd dose: if the patient still has an SVT rhythm 1-2 minutes later give 12mg IV/10 over 1-3 seconds, immediately followed by 20ml of NS by rapid IVP/10. Followed by an additional 12 mg IV fast bolus 1-2 minutes Stress test: 0.14 mg/kg/min for 5-6 minutes.	<ul style="list-style-type: none"> • Paroxysmal SVT • Stable narrow complex SVT/ • Non-sustained VT 	<ul style="list-style-type: none"> • Polymorphic wide complex Tachycardia • Unstable VT • II or III degree Heart block 	<ul style="list-style-type: none"> • Brief period of Asystole or Bradycardia. • Ventricular ectopy • Transient AV block • Flushing , headache , dyspnea , bronchospasm 	<ul style="list-style-type: none"> • Bronchial Asthma • Lower dose of 3mg for patients receiving carbamazepine, dipyridamole • CNS - Low-dose adenosine induces neuropathic pain, hyperalgesia, and ischemic pain.

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DRUG NAME	MOA and effects	ONSET and DURATION	DOSAGE & ROUTE OF ADMINISTRATION	INDICATIONS	CONTRAINDICATIONS	SIDE EFFECTS	PRECAUTIONS
Dopamine (Endogenous catecholamine)	<ul style="list-style-type: none">• Beta adrenergic and dopaminergic agent• $D_1 \gg D_2 \gg \beta \gg \alpha$• Positive chronotropic and inotropic effects on myocardium• D_1 - diuresis (<5 mcg/kg/min)• Alpha and beta - 5-10mcg/kg/minAlpha - >15mcg/kg/min	IV - 2-4 mins Duration -10 min Elimination half life - 2min	Infusion dose: 5 to 20µg/kg/10min IV/IO	<ul style="list-style-type: none">• Second line drug for Symptomatic Bradycardia (after atropine)Severe Hypotension	NIL	<ul style="list-style-type: none">• Sinus tachycardia• Arrhythmias• Euthyroid sick syndrome (inhibition of thyrotropin releasing hormone)	<ul style="list-style-type: none">• Correct Hypovolemia before initiating Dopamine• Caution in cardiogenic shock with CHF• Inactivated by alkaline solutions• Patients on MAOIs

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DRUG NAME	MOA and effects	ONSET and DURATION	DOSAGE & ROUTE OF ADMINISTRATION	INDICATIONS	CONTRAINDICATIONS	SIDE EFFECTS	PRECAUTIONS
Nor adrenaline (Endogenous catecholamine)	<ul style="list-style-type: none"> • $\alpha_1 = \alpha_2; \beta_1 \gg \beta_2$ • Arterial and venous vasoconstriction 	Onset : 1-2 min Duration : Elimination half life - 2 min	Infusion dose : 0.01-3 mcg/kg/min	<ul style="list-style-type: none"> • Cardiogenic , anaphylactic, and septic shock 	NIL	<ul style="list-style-type: none"> • Bradycardia • Tissue Hypoxia & Ischaemic injury 	Extravasation through peripheral veins
Dobutamine Synthetic catecholamine)	<ul style="list-style-type: none"> • Racemic mixture(50% (+) and 50% (-) • $\beta_1 \gg \beta_2 \gg \alpha$ • (-) isomer is $\alpha_1 \gg \beta_1$ and β_2 • (+) is competitive antagonist at α_1 , potent β_1 and β_2 agonist Positive inotropic agent 	Onset : IV - 1-2 min Peak - 10 min Duration : Elimination half life - 2 min	Infusion dose : 5-15mcg/kg/min	<ul style="list-style-type: none"> • Resting cardiac stress test Heart failure 		<ul style="list-style-type: none"> • Tachyarrhythmias • Prolonged Infusion - Endothelial myocarditis • Peripheral eosinophilia 	Extravasation through peripheral veins.

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DRUG NAME	MOA and effects	ONSET and DURATION	DOSAGE & ROUTE OF ADMINISTRATION	INDICATIONS	CONTRAINDICATIONS	SIDE EFFECTS	PRECAUTIONS
Midazolam	<ul style="list-style-type: none">Facilitates GABA increased frequency of chloride channel opening, hyperpolarization. Imidazole ring is open in acidic solutions, ionized and hydrophilic. In physiologic pH, ring is closed, nonionised and lipophilic	Onset IV - Immediate (peak effect - 3-5min) IM - 3-5min Oral - 5-15 min Nasal - 3-5 min Rectal - 5-10 min Duration : Elimination half life - IV - 3hrs IM - 4.2hrs	0.05- 0.15mg/kg IV 0.1-2 mg/kg IM 0.25-0.75 mg/kg oral 0.1-0.2 mg/kg nasal 0.75 -1 mg/kg rectal	<ul style="list-style-type: none">Sedation for cardioversionPremedication - Anxiolysis and amnesia;Emergence delirium;Withdrawal of abuse drugsAnticonvulsantPONVAntipruritic	Situational	Respiratory depression	<ul style="list-style-type: none">Ceiling effectCytochrome P450 inhibition prolongs the duration Pregnancy - category D - floppy baby syndrome

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DRUG NAME	MOA and effects	ONSET and DURATION	DOSAGE & ROUTE OF ADMINISTRATION	INDICATIONS	CONTRAINDICATIONS	SIDE EFFECTS	PRECAUTIONS
Fentanyl	<ul style="list-style-type: none"> Lipophilic Opioid Agonist. binds mu opioid receptor, G protein coupling regulates adenylatecyclase, reducing concentrations of cAMP. 	<p>Onset IV - 2-5- min</p> <p>IM - 10- 15 min</p> <p>Duration : 1-2 Hrs</p> <p>Context sensitivity half time (4hr infusion) - 260 min</p> <p>Elimination half life:7- 12 hrs</p>	<p>IV Induction dose :1.5- 3 mcg/kg</p> <p>Epidural 50-100 mcg</p> <p>Spinal 10-25 mcg</p> <p>Infusion dose: 1-2 mcg /kg/hr Infusion 75-150mcg per hr.</p> <p>PCA - 10mcg IV with 5- 10mins lockout time with basal rate< 50mcg/hr with demand dose of 20mcg. Maximum dose in 4 hrs 300mcg</p>	<ul style="list-style-type: none"> Intra and post operative analgesia Adjunct in regional anesthesia Sedation 		<ul style="list-style-type: none"> Respiratory depression Chest wall rigidity (the 'wooden chest' phenomenon) 	
Morphine	<ul style="list-style-type: none"> Agonist at mu and kappa opioid receptor. Hydrophilic opioid 	<p>Onset : iv IM</p> <p>Duration :4 - 5 hrs (iv)</p> <p>Context sensitivity half life: Elimination half life: 2-3 hrs</p>	<p>IV - 0.05 - 0.1 mg/kg</p> <p>IM - 0.1-0.2mg/kg</p> <p>Sublingual - 0.2 - 0.4mg Q8H</p>	<ul style="list-style-type: none"> Premedication Analgesic Left ventricular failure Pulmonary edema 	<ul style="list-style-type: none"> hepatic failure 	<ul style="list-style-type: none"> nausea vomiting , constipation histamine release - pruritus delayed respiratory depression miosis urinary retention 	<ul style="list-style-type: none"> Hypopituitarism Hypothyroidism Bronchial asthma

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Grade





DRUG NAME	MOA and effects	ONSET and DURATION	DOSEAGE & ROUTE OF ADMINISTRATION	INDICATIONS	CONTRAINDICATIONS	SIDE EFFECTS	PRECAUTIONS
Diltiazem	<ul style="list-style-type: none"> • Nondihydropyridine Calcium channel blockers(class IV Antiarrhythmic) • Slows AV node conduction and increase AV Node refractoriness • Potent peripheral and coronary vasodilator • negative inotrope 	Onset :IV - 3min Duration : 1-10 hr Elimination half life:3-9hrs	For paroxysmal svr , atrial flutter, atrial fibrillation: Initial Dose :15- 20 mg (0.25mg/kg) IV for 2 minutes Additional dose : In 15 minutes 20-25mg iv over 2 mins Maintenance dose :5-10mg/hr IV infusion not more than 15 mg/hr upto 24hrs	<ul style="list-style-type: none"> • Refractory reentry SVT in patients with narrow QRS complex & adequate BP • Atrial flutter • A. fibrillation • Angina pectoris • Hypertension • Migraine prophylaxis 	<ul style="list-style-type: none"> • Hypotension (systolic BP < 90mmhg) • WPW syndrome • Sick sinus syndrome except in patients with functioning ventricular pacemaker. • AV Block without pacemaker • Prinzmetal's angina • COPD • CHF 	<ul style="list-style-type: none"> • Headache • Hypotension • Dizziness • Bradycardia 	<ul style="list-style-type: none"> • Patients receiving oral Beta Blockers


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DRUG NAME	MOA and effects	ONSET and DURATION	DOSAGE & ROUTE OF ADMINISTRATION	INDICATIONS	CONTRAINDICATIONS	SIDE EFFECTS	PRECAUTIONS
Verapamil	<ul style="list-style-type: none"> • NonDihydropyridine L-TYPE Calcium channel blockers(class IV Antiarrhythmic agent) • Suppresses SA node and ventricular automaticity • prolongation of AV nodal ERP 	Onset IV - 1-5min Duration : 1-6 hr Elimination half life : 6-12 hrs	Initial Dose 2.5-5 mg; IV for 2 min; Repeat as 5-10 mg every 15-30 mins / total dose of 20 to 30 mg	<ul style="list-style-type: none"> • Control ventricular rate in Atrial fibrillation or atrial flutter • PSVT • Hypertension • Angina 	<ul style="list-style-type: none"> • Broad QRS complex • WPW • Ventricular tachycardia • Post MI • Partial Heart block • Sick Sinus Syndrome 	<ul style="list-style-type: none"> • Symptomatic Hypotension • Sinus Bradycardia • Cardiac arrest • A-V block • Non obstructive Paralytic Ileus 	
Digoxin	<ul style="list-style-type: none"> • Cardiac Glycoside with positive inotropic effects by intracellular calcium accumulation. • Binds to Na+ /K + ATPase channel in cardiac myocytes, decreasing its function. • slows Av node conduction 	Onset IV- 5-30min Slow onset Peak effect - 1.5 - 4hrs Duration : 2-4 days Elimination half life: 36 hrs	Total Loading Dose: 8 - 12 mcg/kg; half should be administered initially over 5 mins; remaining portion as 25% fractions at 4-8 hr intervals.	<ul style="list-style-type: none"> • Ventricular rate control in Atrial fibrillation & Atrial flutter • Alternative drug for Reentry SVT. • Mild to moderate CHF 	<ul style="list-style-type: none"> • Hypokalemia • Renal & Hepatic Disease • Thyrotoxicosis • VT • WPW Syndrome 	<ul style="list-style-type: none"> • Pulsusbigemini • Ventricular Extrasystoles • VT, VF • Cardiac toxicity • AV Block • Nausea • Vomiting 	<ul style="list-style-type: none"> • With amiodarone; decrease the digoxin dose to 50% • Avoid electrical cardioversion unless it is life threatening . give low energy shock (10 -20 J)



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DRUG NAME	MOA and effects	ONSET and DURATION	DOSAGE & ROUTE OF ADMINISTRATION	INDICATIONS	CONTRAINDICATIONS	SIDE EFFECTS	PRECAUTIONS
Metoprolol Esmolol Propranalol Labetolol	<ul style="list-style-type: none"> Metoprolol and esmolol - Selective Beta 1 receptor blocker Propranalol - beta 1 and beta 2 Labetolol - Beta Blocker with Alpha blocking activity 	<p>Onset: Metoprolol - immediate (iv) Elimination half life - 3-4 hrs Esmolol - 90 seconds (rapid onset) Elimination half life - 2 min Propranalol - 2-10 min (iv) Duration : 5min</p>	<p>Metoprolol - 1-15mg iv over 5mins Esmolol - 50 - 300mcg/kg/min Propranalol - 0.5-1 mg to max 3 mg Labetolol - 10 to 20 mg IV over 2mins (double the dose maximum - 80mg/dose) Total maximum dose - 300 mg</p>	<ul style="list-style-type: none"> Angina Hypertension To control heart rate 	<ul style="list-style-type: none"> Heart block Sick sinus syndrome Bradycardia Cardiogenic Shock Bronchial Asthma 	<ul style="list-style-type: none"> dizziness, tired feeling depression Confusion memory problems nightmares trouble sleeping diarrhea 	

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DRUG NAME	MOA and effects	ONSET and DURATION	DOSAGE & ROUTE OF ADMINISTRATION	INDICATIONS	CONTRAINDICATIONS	SIDE EFFECTS	PRECAUTIONS
Calcium	<ul style="list-style-type: none"> Calcium gluconate (10%) 1gm containing 4.65 mEq has elemental calcium of 93mg Calcium Chloride 1g containing 13.6 mEq has elemental calcium of 273 mg 	Onset: IV - immediate Duration : 30 min - 2 hr for 1gm.	CARDIAC ARREST due to hyperkalemia: 1- 3 gm iv over 2-5 mins HYPOCALCEMIA: Mild (ionized calcium: 4 to 5 mg/dL [1 to 1.2 mmol/L]): 1 to 2 g over 2 hours; asymptomatic patients may be given oral calcium Moderate to severe (without seizure or tetany; ionized calcium: <4 mg/dL [<1 mmol/L]): 4 g over 4 hours Severe symptomatic (eg, seizure, tetany): 1 to 2 g over 10 minutes; repeat every 60 minutes until symptoms resolves	<ul style="list-style-type: none"> Cardiac arrest due to hyperkalemia. Hyperkalemia treatment Hypotension treatment Magnesium toxicity in preclampsia or eclampsia 	<ul style="list-style-type: none"> Hypercalcemia Ceftriaxone 	<ul style="list-style-type: none"> Bradycardia Hypotension Constipation Extravasation necrosis Hyperphosphatemia Hypokalemia Hypomagnesemia 	



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DRUG NAME	MOA and effects	ONSET and DURATION	DOSAGE & ROUTE OF ADMINISTRATION	INDICATIONS	CONTRAINDICATIONS	SIDE EFFECTS	PRECAUTIONS
Sodium bicarbonate (8.4% = 84mg/ml)	1ml = 1 mEq 1g of NaHCO ₃ provides ~12 mEq each of sodium and bicarbonate ions	Onset IV - 15 min	Cardiac arrest due to metabolic acidosis : IV: Initial: 1 mEq/kg/dose; repeat doses should be guided by arterial blood gases HCO ₃ ⁻ -(mmol) = 0.3 x weight (kg) x base deficit (mmol/l) Administer 1/2 dose initially over 30 mins to 1 hr, then remaining 1/2 dose over the next 24 hours; monitor pH, serum HCO ₃ ⁻ , and clinical status	<ul style="list-style-type: none"> • Cardiac arrest • Severe Metabolic acidosis (PH < 7.15 and HCO₃⁻ < 10 mEq) • Hyperkalemia • Renal tubular acidosis • Overdose of TCA. 	<ul style="list-style-type: none"> • Gastrointestinal loss (severe vomiting) and patients on diuretics - risk of hypochloremic alkalosis 	<ul style="list-style-type: none"> • Hyponatremia • Hyperosmolarity • severe pulmonary edema • hypocalcemia • gastric distension • intracranial acidosis • rebound alkalosis 	<ul style="list-style-type: none"> • rapid IV injection may cause intracranial bleed • elderly • CHF • Cirrhosis • Jaundice • Heart failure • Peptic ulcer disease • Renal impairment

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DRUG NAME	MOA and effects	ONSET and DURATION	DOSAGE & ROUTE OF ADMINISTRATION	INDICATIONS	CONTRAINDICATIONS	SIDE EFFECTS	PRECAUTIONS
Potassium chloride	<ul style="list-style-type: none"> • Availability - 150mg/ml • 10ml - 20 mEq of K⁺ and Cl • 10 mEq of potassium chloride increases serum potassium by 0.1mEq/L 	Variable	<p>Serum potassium >2.5 to 3.5 mEq/L: 10 mEq/hour; (peripheral line) maximum 24-hour dose:200 mEq</p> <p>Serum potassium <2.5 mEq/L or symptomatic hypokalemia: (central line only): 40 mEq/hour; up to 400 mEq/24 hours.</p>	<ul style="list-style-type: none"> • Hypokalemia 	<ul style="list-style-type: none"> • Hyperkalemia • Ckd on renal replacement therapy • hypersensitivity 	<ul style="list-style-type: none"> • Asystole • Hyperkalemia • Abdominal pain • Abdominal distress • Dyspnea 	<ul style="list-style-type: none"> • Cardiovascular disease • Hepatic impairment • Renal impairment • Thrombophlebitis



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ADVANCED CARDIAC LIFE SUPPORT

ACLS Provider



**ADVANCED
MEDICAL
CERTIFICATION™**

This card certifies that the individual listed above has successfully completed the evaluations in accordance with the curriculum of Advanced Medical Certifications (AMC) Advanced Cardiac Life Support (ACLS) program, based on the latest AHA Standards and Guidelines.

Issue Date

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Recommended Renewal Date

SAMPLE CERTIFICATE FOR BASIC LIFE SUPPORT COURSE

B A S I C L I F E S U P P O R T

**BLS
Provider**



**American
Heart
Association**

**has successfully completed the cognitive and skills evaluations
in accordance with the curriculum of the
American Heart Association Basic Life Support (CPR and AED) Program.**

Date Completed

13 Jan 2020

Expiration Date

Jan 2022

Training Center Name

Instructor Name

Dr. Arulmozhi

Training Center ID

ZZ21037

Instructor ID

12180739310

Training Center City, Country

eCard Code

A40B0B235188

Training Site Name

QR Code




To view or verify authenticity, students and employers should scan this QR code with their mobile device or go to www.cprverify.org

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SAMPLE CERTIFICATE FOR BASIC LIFE SUPPORT COURSE

BASIC LIFE SUPPORT		BASIC LIFE SUPPORT	
BLS Provider		 American Heart Association	
<p>The above individual has successfully completed the cognitive and skills evaluations in accordance with the curriculum of the American Heart Association Basic Life Support (CPR and AED) Program</p>			
Date Completed 13 Jan 2020	Expiration Date Jan 2022	eCard Code A40B0B235188	
<small>To view or verify authenticity, students and employers should scan this QR code with their mobile device or go to www.ahr.org</small>		Training Center Name Training Center ID ZZ21037 Training Center Pondicherry, INDIA Training Site Name Instructor Name Dr. Arulmozhi Instructor ID	
<small>© 2016 American Heart Association 15-2800 7-16</small>			

SAMPLE


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Enrolled list of students for Certificate Course in American Heart Association accredited ACLS & BLS for the year 2016-2017

Description: BLS FOR PG'S 27.09.2016
 Course: BLS: BLS for Healthcare Providers Course (English)
 Course Start Date: 27 Sep 2016
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 17
 Primary Instructor: Dr. N. Mugunthan
 Secondary Instructor: Dr. Dewan Roshan Singh
 Additional Instructor 1: Dr. Gayatri Mishra
 Additional Instructor 2: Dr. Arunprasath P

#	Certificate Number	Student	Status	Student Name
1	7ab8da9fa033		passed	Dr. Abhilash Peddu
2	446c116aa6a2		passed	Dr. Abhishant
3	63e5a1eb295e		passed	Dr. Devarasetty Shravani
4	dbe0898ff4f0		passed	Dr. Gobinath
5	c6c155b3123e		passed	Dr. Janani Mathialagan
6	343cb1b746b6		passed	Dr. Karthikeyan
7	136461956859		passed	Dr. Krishna Reddy K
8	025d4291968a		passed	Dr. Kishore Kumar Behera
9	d88926a6ee4a		passed	Dr. Natasha Celia Saldanha
10	804ef07bf5bf		passed	Dr. Paresh Vijay Nichlani
11	cb5d30d44179		passed	Dr. Raam Deepak
12	a6cb2c08b63f		passed	Dr. Roshan Raj
13	cbc709154da7		passed	Dr. Roshni K
14	342f95bb698b		passed	Dr. Sandeep Kumar Tripathi
15	b6c21fdb396a		passed	Dr. Senthil Prasad R
16	ec574125af85		passed	Dr. Sharmila T
17	fb7668ee3954		passed	Dr. Subrat Kumar Nayak

(NOTE: The attendance list is downloaded from the official AHA Website. The hardcopy of the attendance is not maintained for more than a year as per the rule by AHA.)

Description: ACLS FOR PG'S
 Course: ACLS: Advanced Cardiovascular Life Support Course (English)
 Course Start Date: 28 Sep 2016
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 17
 Primary Instructor: Dr. N. Mugunthan
 Secondary Instructor: Dr. Dewan Roshan Singh
 Additional Instructor 1: Dr. Gayatri Mishra
 Additional Instructor 2: Dr. Arunprasath P
 Additional Instructor 3: Dr. Kusha Nag
 Additional Instructor 4: Dr. Jaya V
 Additional Instructor 5: Dr. Rani P

#	Certificate Number	Student	Status	Student Name
1	55c8c693d0dd		passed	Dr. Abhilash Peddu
2	b9be03cdef42		passed	Dr. Abhishant
3	62fcf17c292d		passed	Dr. Devarasetty Shravani
4	abfc90fdd0ce		passed	Dr. Gobinath
5	7e58cc00207b		passed	Dr. Janani Mathialagan
6	db59fe72a622		passed	Dr. Karthikeyan
7	a218602f8d01		passed	Dr. Krishna Reddy K
8	40a7ba2ec785		passed	Dr. Kishore Kumar Behera
9	53b3d13541f6		passed	Dr. Natasha Celia Saldanha
10	348255af6309		passed	Dr. Paresch Vijay Nichlani
11	865bf5379a24		passed	Dr. Raam Deepak
12	f94067ccd9d1		passed	Dr. Roshan Raj
13	c4261ec2dd41		passed	Dr. Roshni K
14	bb5f46f06540		passed	Dr. Sandeep Kumar Tripathi
15	d268b48b0045		passed	Dr. Senthil Prasad R

#	Certificate Number	Student	Status	Student Name
16	82bcd78738e3		passed	Dr. Sharmila T
17	685236b240a7		passed	Dr. Subrat Kumar Nayak

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Description: BLS PG'S
 Course: BLS: BLS for Healthcare Providers Course (English)
 Course Start Date: 18 Oct 2016
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 15
 Primary Instructor: Dr. N. Mugunthan
 Secondary Instructor: Dr. Rani P
 Additional Instructor 1: Dr. Kusha Nag
 Additional Instructor 2: Dr. Jaya V
 Additional Instructor 3: Dr. Siva Ranganathan Green

#	Certificate Number	Student	Status	Student Name
1	6658a003e6c6		passed	Dr. Ajay. P
2	78a1c7919c7b		passed	Dr. Anirudhya. J
3	337c6abb6ebc		passed	Dr. Aparna Bhuyan
4	8ab385d49ca3		passed	Dr. Govind Shaji
5	fd4a6c9546c6		passed	Dr. Midhun. T .T
6	9e3d487e4040		passed	Dr. Monika. S
7	bbf06590a0bc		passed	Dr. Nikhila Raj. P. J
8	66981ba772de		passed	Dr. Nivethitha. S
9	958aca6d4807		passed	Dr. Prathana Seles. S
10	657e333bd0a1		passed	Dr. Saumitra Dubey
11	217e3e640a9a		passed	Dr. Shameera Begum
12	9cd1d78fcce4		passed	Dr. Shinju. S. Mathew
13	8ad4d7bbd96c		passed	Dr. Surendran. V
14	a1fa7555628d		passed	Dr.Thiyagesa Deva Ganapathy
15	ed51ba823ed7		passed	Dr. Vasanthakumar. N

Description: ACLS FOR PG'S
 Course: ACLS: Advanced Cardiovascular Life Support Course (English)
 Course Start Date: 19 Oct 2016
 ITC: Medical Simulation Centre, MGHCRI
 Training Site:
 Status: Locked
 Quantity: 15
 Primary Instructor: Dr. N. Mugunthan
 Secondary Instructor: Dr. Rani P
 Additional Instructor 1: Dr. Kuska Nag
 Additional Instructor 2: Dr. Arunprasath P
 Additional Instructor 3: Dr. Siva Ranganathan Green
 Additional Instructor 4: Dr. Snipriya R
 Additional Instructor 5: Dr. Dewan Roshan Singh

#	Certificate Number	Student	Status	Student Name
1	1647ce1cab14		passed	Dr. Ajay. P
2	f1dbe287e27d		passed	Dr. Anirudhya. J
3	1a08168f64e1		passed	Dr. Aparna Bhuyan
4	e4cb45a4e0fd		passed	Dr. Govind Shaji
5	6ef89f95d6c2		passed	Dr. Midhun .T.T
6	4d272257a08d		passed	Dr. Monika. S
7	57f161bb6f3c		passed	Dr. Nikhila Raj. P.J
8	396481c54bb6		passed	Dr. Nivethitha. S
9	990efb307496		passed	Dr. Prathana Seles. S
10	724d75b45bc6		passed	Dr. Saumitra Dubey
11	009613368a48		passed	Dr. Shameera Begum
12	cc62a56a645e		passed	Dr. Shinju .S. Mathew
13	d76efb37128b		passed	Dr. Surendran. V
14	3af6acff39ae		passed	Dr.Thiyagesa Deva Ganapathy
15	cf1c790656f4		passed	Dr. Vasanthakumar .N

Description: BLS FOR INTERNS 22.11.2016
 Course: BLS: BLS for Healthcare Providers Course (English)
 Course Start Date: 22 Nov 2016
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 12
 Primary Instructor: Dr. N. Mugunthan
 Secondary Instructor: Dr. Sripriya R
 Additional Instructor 1: Dr. Jaya V
 Additional Instructor 2: Dr. Arunprasath P
 Additional Instructor 3: Dr. Kusha Nag

#	Certificate Number	Student	Status	Student Name
1	c651a3ddb7b5		passed	Dr. Anavindhoss D
2	b61313adb32f		passed	Dr. Bhuvanarani D
3	7e4823400b92		passed	Dr. Dineshram R
4	1afae2475966		passed	Dr. Ragul K
5	c43eb4e2e1a7		passed	Dr. Rupesh Kanna R
6	65b2d586028e		passed	Dr. Sheik Mohideen T
7	65198c5e4b84		passed	Dr. Surendhar M
8	1d9aab211043		passed	Dr. Thushita Nivasini S
9	10ce34441413		passed	Dr. Udaya Kumar D
10	89b547170248		passed	Dr. Uthra Rajendhan
11	2186f4421c4e		passed	Dr. Vishnu Prathab T
12	da7225fd5ad8		passed	Dr. Yoga Raja

Description: ACLS FOR INTERNS 23 &24 NOVEMBER

Course: ACLS: Advanced Cardiovascular Life Support Course (English)

Course Start Date: 23 Nov 2016

ITC: Medical Simulation Centre, MGMCRI

Training Site:

Status: Locked

Quantity: 11

Primary Instructor: Dr. N. Mugunthan

Secondary Instructor: Dr. Snipriya R

Additional Instructor 1: Dr. Jaya V

Additional Instructor 2: Dr. Arunprasath P

Additional Instructor 3: Dr. Kusha Nag

Additional Instructor 4: Dr. Rani P

Additional Instructor 5: Dr. Gayatri Mishra

#	Certificate Number	Student	Status	Student Name
1	3a0175374031		passed	Dr. Anandhi. S
2	7b02a0310b52		passed	Dr.D. Bhuvanarani
3	c6e67f2ce53e		passed	Dr. Bethubarani. M
4	5750ee24c7cf		passed	Dr. Dhivagar. K
5	aff96b673d37		passed	Dr. Dhinesh. G
6	f39d5cdece3a		passed	Dr. Dinesh Prabhu. B
7	01082f55bb56		passed	Dr. Mohamed Aarif. N
8	f4090f3076fc		passed	Dr. Priyavadhana. G. M
9	8d96eb505707		passed	Dr. Rupesh Kanna. R
10	26182c9e70ae		passed	Dr. Surendhar. M
11	4064c5e8c1ea		passed	Dr. Uthna Rajendran

Description: BLS for Interns Feb 7th 2017
 Course: BLS: BLS for Healthcare Providers Course (English)
 Course Start Date: 7 Feb 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 16
 Primary Instructor: Dr. N. Mugunthan
 Secondary Instructor: Dr. Rani P
 Additional Instructor 1: Dr Sobana R.
 Additional Instructor 2: Dr. V R Hemanth Kumar
 Additional Instructor 3: Dr. Jaya V

#	Certificate Number	Student	Status	Student Name
1	8021448d3f9d		passed	Dr. Aswathi.C
2	fb9cbe388a75		passed	Dr. R. Aswini Anugraha
3	2ee3d7dcbb84		passed	Dr. V. Balachandiran
4	7d0575e0b19f		passed	Dr. E. Binoth Navilson
5	34c42179e847		passed	Dr. R. Mahesh Arvinth
6	959d7e4d2abc		passed	Dr. Malepati Chandana
7	7a364956baf6		passed	Dr.S. Manivannan
8	d17e820337f5		passed	Dr. R.Priyaanthini
9	4569b6b60fcd		passed	Dr. Prithiviraj.M
10	80692e2640d0		passed	Dr. Priya.N
11	e0242b79631f		passed	Dr. Priyanka.P
12	3cf41f9bf6e0		passed	Dr. M. Sivabalan
13	fe2a78715a64		passed	Dr. Sivagami.S
14	9ae79f714d38		passed	Dr. S. Sneha Ganga
15	2aacc27667d9		passed	Dr.M. Soundharya
16	02d86a48c72e		passed	Dr. Suriyan.K.R

Description: ACLS for INTERNS Feb 8th 89th 2017
 Course: ACLS: Advanced Cardiovascular Life Support Course (English)
 Course Start Date: 8 Feb 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 17
 Primary Instructor: Dr. N. Mugunthan
 Secondary Instructor: Dr. Rani P
 Additional Instructor 1: Dr. Sobana R.
 Additional Instructor 2: Dr. V R Hemanth Kumar
 Additional Instructor 3: Dr. Jaya V
 Additional Instructor 4: Dr. Sripriya R

#	Certificate Number	Student	Status	Student Name
1	0a3ed36f1149		passed	Dr. Aswathi.C
2	64fef6a6e9bfa		passed	Dr. R. Aswini Anugraha
3	0e009a1eeab5		passed	Dr. V. Balachandiran
4	02b28611a836		passed	Dr. E. Binoth Navilson
5	34a619c7173a		passed	Dr. R. Mahesh Arvinth
6	ea11bb6a7e8b		passed	Dr. Malepati Chandana
7	64bcfe5c49b3		passed	Dr. S. Manivannan
8	6b69432b5c40		passed	Dr. R. Priyaanthini
9	e2fff3526a55		passed	Dr. Prithiviraj.M
10	7ed75a73b8a3		passed	Dr. Priya.N
11	0b8e5a38820e		passed	Dr. Priyanka.P
12	ce72dff4eee		passed	Dr. M. Sivabalan
13	df6ed0a2a1c4		passed	Dr. Sivagami.S
14	8bf67867d00c		passed	Dr. S. Sneha Ganga
15	2fe1462f183e		passed	Dr. M. Soundharya
16	00bf97d41c59		passed	Dr. Sivakamy.M

#	Certificate Number	Student	Status	Student Name
17	1c0641a02861		passed	Dr. Tirou Malini.T


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Description: BLS for Interns Feb 21st 2017
 Course: BLS: BLS for Healthcare Providers Course (English)
 Course Start Date: 21 Feb 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 14
 Primary Instructor: Dr. V R Hemanth Kumar
 Secondary Instructor: Dr. N. Mugunthan
 Additional Instructor 1: Dr. Kusha Nag
 Additional Instructor 2: Dr. Sameera M Jahagirdar
 Additional Instructor 3: Dr. Sripriya R
 Additional Instructor 4: Dr. Dewan Roshan Singh

#	Certificate Number	Student	Status	Student Name
1	6f9bcfdcea40		passed	Dr. Amuthapriya.S.M
2	B19c5a0a5972		passed	Dr. C. Anu Srishti
3	92507c158c78		passed	Dr. Aravind. J
4	c22ac828e057		passed	Dr. P. Arulmozhi
5	086817867a4f		passed	Dr. Meena. R
6	8d29512f3448		passed	Dr. M. Mugunda Raj
7	01781aaadbb8		passed	Dr. Nandhini Munirathinam
8	eb6a400bb230		passed	Dr. R. Raghavi
9	dee30b045a0c		passed	Dr. D.V .Ranganajan
10	4b5101642a40		passed	Dr. Rishmitha Roy. C.K
11	760d4b4bb104		passed	Dr. V. Sangeetha
12	44e518cdde89		passed	Dr. Sreesubhageetha .D
13	5f8c57f4813f		passed	Dr. G. Naveen
14	dbf4b35221d1		passed	Dr.Lakshmi Narayanan C.R

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Description: ACLS for INTERNS Feb 22 & 23, 2017
 Course: ACLS: Advanced Cardiovascular Life Support Course (English)
 Course Start Date: 22 Feb 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 14
 Primary Instructor: Dr. V R Hemanth Kumar
 Secondary Instructor: Dr. N. Mugunthan
 Additional Instructor 1: Dr. Kusha Nag
 Additional Instructor 2: Dr. Sameera M Jahagindar
 Additional Instructor 3: Dr. Sripriya R
 Additional Instructor 4: Dr. Dewan Roshan Singh

#	Certificate Number	Student	Status	Student Name
1	b82ecb8e2369		passed	Dr. Amuthapriya. S.M
2	17f108d0fc45		passed	Dr. C. Anu Srishti
3	f8bdeeb26efb		passed	Dr. Aravind. J
4	ae68fca75f1f		passed	Dr. P. Arulmozhi
5	58d41420935f		passed	Dr. Meena. R
6	07aa90ace2ba		passed	Dr. M. Mugunda Raj
7	98ddf41c8a9b		passed	Dr. Nandhini Munirathinam
8	63b724865f1e		passed	Dr. R. Raghavi
9	adb4d1de0306		passed	Dr. D.V .Rangarajan
10	5de0715d35a3		passed	Dr. Rishmitha Roy. C.K
11	7fc5c182c177		passed	Dr. V. Sangeetha
12	d3bc54d1fbec		passed	Dr. Sreesubhageetha .D
13	4e7f3cd9932c		passed	Dr. Lakshmi Narayanan. C.R
14	da3f0eb28f05		passed	Dr. Tharun. J

Description: BLS for Interns March 7
 Course: BLS: BLS for Healthcare Providers Course (English)
 Course Start Date: 7 Mar 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 17
 Primary Instructor: Dr. Dewan Roshan Singh
 Secondary Instructor: Dr. N. Mugunthan
 Additional Instructor 1: Dr. Siva Ranganathan Green
 Additional Instructor 2: Dr. V R Hemanth Kumar
 Additional Instructor 3: Dr. Gayatri Mishra
 Additional Instructor 4: Dr. Arunprasath P

#	Certificate Number	Student	Status	Student Name
1	f1c61ec8eb1f		passed	Dr. Abilash .M
2	fe0b8c87ce34		passed	Dr. Aiswarya. M
3	1abd36d24114		passed	Dr. Akshada. B
4	1832231122ca		passed	Dr. Akshaya. S
5	ea35827d8e5		passed	Dr. Nandhini. P
6	8fddcb42e770		passed	Dr. Naveen Kumar. S.S
7	74447484f55a		passed	Dr. Neelesh. K
8	97a76b93a323		passed	Dr. Neena. K
9	89c729196aff		passed	Dr. Sree Shyamini. S.R
10	42e2212c7981		passed	Dr. Suganya. S
11	ebca4660f4f7		passed	Dr. Suvadha. K
12	42654e605c04		passed	Dr. Swathi. S
13	d2ef05fc76ec		passed	Dr. Aloysius Reuben.A
14	008c5f456e1c		passed	Dr. Sumaiya Imroze
15	e04ef9d3df65		passed	Dr. M. Sivaranjani
16	ea1c9f3d81dd		passed	Dr. Sakthirajan. P
17	6af86245c005		passed	Dr. Priya Rudingwa

Description: ACLS for INTERNS March 8th & 9th 2017
 Course: ACLS: Advanced Cardiovascular Life Support Course (English)
 Course Start Date: 8 Mar 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 17
 Primary Instructor: Dr. Dewan Roshan Singh
 Secondary Instructor: Dr. N. Mugunthan
 Additional Instructor 1: Dr. Siva Ranganathan Green
 Additional Instructor 2: Dr. V R Hemanth Kumar
 Additional Instructor 3: Dr. Gayatri Mishra
 Additional Instructor 4: Dr. Arunprasath P

#	Certificate Number	Student	Status	Student Name
1	f0be0b098e61		passed	Dr. Abilash .M
2	034587cfcdbb		passed	Dr. Aiswarya. M
3	488017ebad01		passed	Dr. Akshada. B
4	e3fbb4825743		passed	Dr. Akshaya. S
5	eaed418a1c67		passed	Dr. Nandhini. P
6	95aba538229b		passed	Dr. Naveen Kumar. S.S
7	3e0ede2bf73d		passed	Dr. Neelesh. K
8	e8939e715326		passed	Dr. Neena. K
9	ff104135fcea		passed	Dr. Sree Shyamini. S.R
10	781ed2f2448e		passed	Dr. Suganya. S
11	4940aa9bc533		passed	Dr. Suvadha. K
12	3826006ef8a3		passed	Dr. Swathi. S
13	6b3fa7e8ec20		passed	Dr. Aloysius Reuben. A
14	1242771d1d31		passed	Dr. Sumaiya Imroze
15	f38d80806ef7		passed	Dr. M. Sivaranjani
16	caf482d0b5bd		passed	Dr. Sakthirajan. P

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#	Certificate Number	Student	Status	Student Name
17	8f9c352c120d		passed	Dr. Priya Rudingwa

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Description: BLS for Interns March 21
 Course: BLS: BLS for Healthcare Providers Course (English)
 Course Start Date: 21 Mar 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 24
 Primary Instructor: Dr. Jaya V
 Secondary Instructor: Dr. N. Mugunthan
 Additional Instructor 1: Dr. Sripriya R
 Additional Instructor 2: Dr. V R Hemanth Kumar
 Additional Instructor 3: Dr. Dewan Roshan Singh
 Additional Instructor 4: Dr. Kusha Nag

#	Certificate Number	Student	Status	Student Name
1	7fdb8f62e45d		passed	Dr. Dhivakar. S
2	3fa6ab56d3b5		passed	Dr. Dhivya. v
3	61d7b3d0ec84		passed	Dr. George Joseph
4	0c40e38c279f		passed	Dr. Omprabha. P
5	44a85dd5af5e		passed	Dr. Praveen.M
6	b0baba991f30		passed	Dr. Preethika Palani
7	4779f35c95f3		passed	Dr. Saranya.B
8	66cfed44013b		passed	Dr. Sathiya Sheelan.G
9	857681af6ad7		passed	Dr. Sathya.R
10	0f3fa673098b		passed	Dr. Seema Anzum. H
11	196fd3f74f5a		passed	Dr. Sweatha. K
12	33f1f200a693		passed	Dr. Vasantha Kogilam. M
13	737c24b8a2f1		passed	Dr. Vasulingam. R.M
14	ecc88ebb84d8		passed	Dr. Vigneshvaran. P
15	5ed7f2f963d6		passed	Dr. Gopinath M.K
16	243c93b9dd81		passed	Dr. Niroscha. S
17	1b99fb451a8c		passed	Dr. Swathi. S

#	Certificate Number	Student	Status	Student Name
18	b4709e37d493		passed	Dr. Rakul Raj. N
19	8455f151fed2	nui darang <nuitaggu@gmail.com>	passed	Dr. Nui Darang
20	b8b1b30c4d3c		passed	Dr. Dilip Coumar.D
21	cf9da3a1924d		passed	Dr. Aswin Mukesh. R
22	513cc448a95f		passed	Dr. Dhivyabhalan. B
23	7a3c23fe1e7a		passed	Dr. Girish. K.G
24	0c4ee52adfa5		passed	Dr. Sutaraj Seth

Description: ACLS for INTERNS March 22 & 23, 2017
 Course: ACLS: Advanced Cardiovascular Life Support Course (English)
 Course Start Date: 22 Mar 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 20
 Primary Instructor: Dr. Jaya V
 Secondary Instructor: Dr. N. Mugunthan
 Additional Instructor 1: Dr. Sripriya R
 Additional Instructor 2: Dr. V R Hemanth Kumar
 Additional Instructor 3: Dr. Dewan Roshan Singh
 Additional Instructor 4: Dr. Kusha Nag

#	Certificate Number	Student	Status	Student Name
1	4847192b1511		passed	Dr.Dhivakar. S
2	60c662ddaa8e		passed	Dr.Dhivya. V
3	9835484d6f20		passed	Dr.George Joseph
4	be1709e9a5cd		passed	Dr.Omprabha. P
5	1ac917b172d6		passed	Dr.Praveen.M
6	48c5921c55df		passed	Dr.Preethika Palani
7	324c2c99354a		passed	Dr.Saranya.B
8	99c53f0a4a32		passed	Dr.Sathiya Sheelan. G
9	2f67b2189ef5		passed	Dr.Sathya. R
10	20b18747d3cc		passed	Dr.Seema Anzum. H
11	76d6169d53bf		passed	Dr.Sweatha. K
12	f9c539e30cee		passed	Dr.Vasantha Kogilam. M
13	652f6b6c60bd		passed	Dr.Vasulingam. R.M
14	84cd62e20d8d		passed	Dr.Vigneshvaran. P
15	8101f065642d		passed	Dr.Gopinath M.K
16	08a554215fce		passed	Dr.Nirosha. S

#	Certificate Number	Student	Status	Student Name
17	f84fe30d12b2		passed	Dr.Swathi. S
18	a15575e39d92	nuiarang <nuitaggu@gmail.com>	passed	Dr.Nui Darang
19	538e6a6b6ab5		passed	Dr.Dilip Coumar.D
20	1283d4f428a4		passed	Dr.Aswin Mukesh. R

Description: BLS for Interns April 4th 2017
 Course: BLS: BLS for Healthcare Providers Course (English)
 Course Start Date: 4 Apr 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 19
 Primary Instructor: Dr. Siva Ranganathan Green
 Secondary Instructor: Dr. N. Mugunthan
 Additional Instructor 1: Dr. Gayatri Mishra
 Additional Instructor 2: Dr. V R Hemanth Kumar
 Additional Instructor 3: Dr. Kusha Nag
 Additional Instructor 4: Dr. Rani P

#	Certificate Number	Student	Status	Student Name
1	e4cd26d59ad3		passed	Dr. Gowtham Krishnan. R
2	e8a28db5d2e2		passed	Dr. Hemraj Bhasker. M
3	4f6affeb5bff		passed	Dr. Rao Haneesha
4	d3c150cdd86d		passed	Dr. Jayalakshmi. R
5	4a0d82690ef5		passed	Dr. RK. Jhanani
6	2386c32e8135		passed	Dr. John Benial Kumar. K
7	f49a015a46f3		passed	Dr. Kavetha. J
8	0732f777d5cd		passed	Dr. E.G. Shaarumathi
9	491a47ab9736		passed	Dr. Shalima. S
10	2cb3826199db		passed	Dr. Sharmila. S
11	172c9a426d32		passed	Dr. Vijaya Babu C.J
12	6c4ff92bb7a6		passed	Dr. Vinitha. D
13	a271818f6548		passed	Dr. Visali. P
14	869b09f8bd85		passed	Dr. Vishalini. A
15	0b1391e4819b		passed	Dr. Sriraam. M
16	1f53e32ae98d		passed	Dr. Thiaghu. P

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#	Certificate Number	Student	Status	Student Name
17	78eb9c68f138	Vijaykumar <vijaykumar19942@gmail.com>	passed	Dr. Vijayakumar. S
18	f8b997eab657		passed	Ms.Viji. C
19	124704b77e35		passed	Dr. Sankari. T

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Description: ACLS for INTERNS April 5&6, 2017
 Course: ACLS: Advanced Cardiovascular Life Support Course (English)
 Course Start Date: 5 Apr 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 16
 Primary Instructor: Dr. Siva Ranganathan Green
 Secondary Instructor: Dr. N. Mugunthan
 Additional Instructor 1: Dr. Gayatri Mishra
 Additional Instructor 2: Dr. V R Hemanth Kumar
 Additional Instructor 3: Dr. Kusha Nag
 Additional Instructor 4: Dr. Rani P

#	Certificate Number	Student	Status	Student Name
1	f07b047f77b5		passed	Dr. Gowtham Krishnan. R
2	7eb547ae39c5		passed	Dr. Hemraj Bhasker. M
3	b1267b155503		passed	Dr. Rao Haneesha
4	b6b17339d949		passed	Dr. Jayalakshmi. R
5	ac98a461d27f		passed	Dr. RK. Jhanani
6	c49b558a2b36		passed	Dr. John Benial Kumar. K
7	14aba434ae59		passed	Dr. Kavetha. J
8	2e244536bd65		passed	Dr. E.G. Shaanumathi
9	2ca855aae878		passed	Dr. Shalima. S
10	c7928c2a5881		passed	Dr. Sharmila. S
11	ed54d5c2bfb3		passed	Dr. Vijaya Babu C.J
12	bdd1ad890c47		passed	Dr. Vinita. D
13	821ec11d8283		passed	Dr. Visali. P
14	14e6cbe61ddc		passed	Dr. Vishalini. A
15	e62040884832		passed	Dr. Sriraam. M
16	6d510c4d883e		passed	Dr. Thiaghu. P

Description: BLS for Interns April 18 2017
 Course: BLS: BLS for Healthcare Providers Course (English)
 Course Start Date: 18 Apr 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 27
 Primary Instructor: Dr. V R Hemanth Kumar
 Secondary Instructor: Dr. N. Mugunthan
 Additional Instructor 1: Dr. Dewan Roshan Singh
 Additional Instructor 2: M F Kingsle Kishore Coumar
 Additional Instructor 3: Dr Sobana R.
 Additional Instructor 4: Dr. Arunprasath P
 Additional Instructor 5: Dr. Rani P

#	Certificate Number	Student	Status	Student Name
1	c8b141ba880f		passed	Dr. Keerthana. B
2	3c1496d2faf1		passed	Dr. Kiran Raj. R
3	483098edac7b	KIRIPRASAD R <kiriprasadr@gmail.com>	passed	Dr. Kiriprasad. R
4	e962af30733f	Krithisha <krithishageni22@gmail.com>	passed	Dr. Krithisha. K
5	b841f2ba32aa	Lavanya <lavanrocky@gmail.com>	passed	Dr. Lavanya. R
6	359c5f6993ce		passed	Dr. Logeshwaran. T
7	e993a2986b05		passed	Dr. Majety Subha Harinya
8	0acd154ec9b8		passed	Dr. Shamick Saha
9	243ba92e2dac		passed	Dr. R. Niveda
10	1f55e95da2a8	Dr.N.Jothimeena <jothimeena17@gmail.com>	passed	Dr. N. Jothimeena
11	275e0a2fb2ac		passed	Dr. P.S. Kishen Khanna
12	ae8d83f5a435		passed	Dr. I.S. Ferina Sanofar

#	Certificate Number	Student	Status	Student Name
13	0516f61d4550		passed	Dr. Pradip.J
14	02c116019310		passed	Dr. P.Kiran
15	0417e09d9fe7		passed	Dr. K.Anil Kumar
16	77874e1b61c4		passed	Dr. Ashit
17	ec9cc11b8a09	Dr L Siva Kumar Reddy <sivakumar1.dr@gmail.com>	passed	Dr. L.Siva kumar reddy
18	600b9e687c4e	SENTHIL KUMAR T <senthilkumar.dino@gmail.com>	passed	Dr. Senthil kumar. T
19	88f2948883b8	Dr. Alai taggu <dhalaitaggun@gmail.com>	passed	Dr. Alai Taggu
20	68eb4a1970a3		passed	Mr. D. Gayathri
21	4e31baeeb851		passed	Dr. Mohammed Abdul Qadeer Khan
22	92e8715d0d61	Dr. M. Sindhupriya <dr.sindhustalin@gmail.com>	passed	Dr. M. Sindhupriya
23	9387f1a0abc6		passed	Dr. Muthamilan.M
24	e2a78e82d850	sandhiya <sandyka121@gmail.com>	passed	Dr. P.Sandhiya
25	52573748d535		passed	Dr. Priyanga. E
26	fadb5188ec2f	Nandini A Patel <nandinipatel20@gmail.com>	passed	Dr. Nandini A. Patel
27	8c9e24f2d1c2	Mr. MOHAMMED RAFI. M <iamanurse.rafi@gmail.com>	passed	Mr. Mohammed Rafi. M

Description: ACLS for INTERNS April 19&20, 2017
 Course: ACLS: Advanced Cardiovascular Life Support Course (English)
 Course Start Date: 19 Apr 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 20
 Primary Instructor: Dr. V R Hemanth Kumar
 Secondary Instructor: Dr. N. Mugunthan
 Additional Instructor 1: Dr. Dewan Roshan Singh
 Additional Instructor 2: Dr Sobana R.
 Additional Instructor 3: Dr. Rani P
 Additional Instructor 4: Dr. Arunprasath P

#	Certificate Number	Student	Status	Student Name
1	1e67ddba3a80		passed	Dr. Keerthana. B
2	ee951f6cca04	KIRIPRASAD R <kiriprasadr@gmail.com>	passed	Dr. Kiriprasad. R
3	19f78c969cb0	Krithisha <krithishageni22@gmail.com>	passed	Dr. Krithisha. K
4	82dc0cdb7583	Lavanya <lavanrocky@gmail.com>	passed	Dr. Lavanya. R
5	a489eeb947a4		passed	Dr. Logeshwaran. T
6	1b19d04874d7		passed	Dr. Majety Subha Harinya
7	c477faf97bf2		passed	Dr. Shamick Saha
8	b2e8ae93b4eb		passed	Dr. R. Niveda
9	7851b286dce5		passed	Dr. N. Jothimeena
10	82249d557cea		passed	Dr. P.S. Kishen Khanna
11	57051711a5db		passed	Dr. I.S. Ferina Sanofar
12	4ce903f4e324		passed	Dr. Pradip.J
13	3989b6a65536		passed	Dr. P.Kiran

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#	Certificate Number	Student	Status	Student Name
14	a44913b786c3		passed	Dr. K.Anil Kumar
15	b6daabccd63e		passed	Dr. Ashit
16	d895eff4caae	Dr L Siva Kumar Reddy <sivakumar1.dr@gmail.com>	passed	Dr. L.Siva kumar reddy
17	cdf90d67b5ec	SENTHIL KUMAR T <senthilkumar.dino@gmail.com >	passed	Dr. Senthil kumar.T
18	40c02b80749e	Dr. Alai taggu <dralaitaggun@gmail.com>	passed	Dr. Alai Taggu
19	ef0fa34a23b0		passed	Mr. D. Murli
20	002b754f56c3		passed	Dr. Mohammed Khan

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Description: BLS for SSSMCRI Interns MAY 23RD 2017
 Course: BLS: BLS for Healthcare Providers Course (English)
 Course Start Date: 23 May 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 18
 Primary Instructor: Dr. N. Mugunthan
 Secondary Instructor: Dr. V R Hemanth Kumar
 Additional Instructor 1: Dr. Siva Ranganathan Green

#	Certificate Number	Student	Status	Students Name
1	794c4d027b8a		passed	Dr. Sathya Saranya. C
2	d018a05800a9	G.S.VIDHYA <vidhyagopa700@gmail.com>	passed	Dr. Vidhya G.S
3	7a4dabd5539b		passed	Dr. S. Steffy Fensia
4	7bc124037485	D.Uma Maheswari. <umadeenadayalan@gmail.com>	passed	Dr. D. Uma Maheswari
5	b9a994368742		passed	Dr. Upendran Nagappan. D
6	ecbfca6c1eee		passed	Dr. Ukesh Prabhu. S
7	e3c1147674c4		passed	Dr. Ajina Jerome
8	1877f159d0ba		passed	Dr. Deepak Mallaya. N. C
9	1b46013ddda2		passed	Dr. S. Ananthi
10	a043fd9aabc1		passed	Dr. Vignesh. I
11	526568c0c506		passed	Dr. Jothish Kumar. S
12	e0723dff7d5e		passed	Dr. Mohan Raj. S
13	6043d320df17		passed	Dr. Naveen. M
14	2cbd86a4a6c5		passed	Dr. Divya Bharathi. M
15	4174668ecb0f		passed	Dr. Poompozhi. M
16	60310b600df8		passed	Dr. Sakthi Jayalakshmi. V
17	6f260b0e6d57		passed	Dr. Sasikala. S
18	add055183f14		passed	Dr. Raj Sridhar. R

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Description: ACLS for SSSMCRI INTERNS 24th & 25th MAY 2017
 Course: ACLS: Advanced Cardiovascular Life Support Course (English)
 Course Start Date: 24 May 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 20
 Primary Instructor: Dr. N. Mugunthan
 Secondary Instructor: Dr. V R Hemanth Kumar
 Additional Instructor 1: Dr. Siva Ranganathan Green

#	Certificate Number	Student	Status	Student Name
1	7c0b731c76f4		passed	Dr. Sathya Saranya. C
2	73a2dee82235		passed	Dr. Vidhya G.S
3	0407ede77a8e		passed	Dr. S. Steffy Fensia
4	ef18badd437a		passed	Dr. D. Uma Maheswari
5	5d19be383602		passed	Dr. Upendran Nagappan. D
6	cdde713e5969		passed	Dr. Ukesh Prabhu. S
7	38baaa826627		passed	Dr. Ajina Jerome
8	053a55837e86		passed	Dr. Deepak Mallaya. N. C
9	e5a5c47e4535		passed	Dr. S. Ananthi
10	e6c17d994a6d		passed	Dr. Vignesh. I
11	c6f182f015dd		passed	Dr. Jothish Kumar. S
12	d4121ae3fe7a		passed	Dr. Mohan Raj. S
13	a08f57f214f1		passed	Dr. Naveen. M
14	7b2576d44620		passed	Dr. Divya Bharathi. M
15	df1416d52216		passed	Dr. Poompozhi. M
16	350a2e8759ae		passed	Dr. Sakthi Jayalakshmi. V
17	14ebf89e3b80		passed	Dr. Sasikala. S
18	7f43bc8e188b		passed	Dr. Raj Sridhar. R
19	4232979ad296	Dr. M. Sindhupriya <dr.sindhustalin@gmail.com>	passed	Dr. M. Sindhupriya

#	Certificate Number	Student	Status	Student Name
20	20488e8a97a9	M F Kingsle Kishore Coumar <kishore.coumar@gmail.com>	passed	Mr. MF Kingsle Kishore Coumar

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Description: BLS for SSSMCRI Interns 12 June 2017
 Course: BLS: BLS for Healthcare Providers Course (English)
 Course Start Date: 12 Jun 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 21
 Primary Instructor: Dr Sobana R.
 Secondary Instructor: Dr. M. Sindhupriya
 Additional Instructor 1: Mr. MOHAMMED RAFI. M

#	Certificate Number	Student	Status	Students Name
1	ca9d6d9c2b9f		passed	Dr. Deepak Pranesh. R
2	5f5ddd7ca660		passed	Dr. Arthi. D
3	9c321884915e	Kavin <ganeshprabhu017@gmail.com>	passed	Dr. N. Kavinraj
4	1e04f54655ae		passed	Dr. Namitha. N
5	c9c0405364be	Techi togung <togung57@gmail.com>	passed	Dr. Techii Togung
6	140848c717b7	Siddarthan <a.siddarthan24@gmail.com>	passed	Dr. A. Siddarthan
7	10c5c7a81888		passed	Dr. P. Theepathorani
8	9984679c7907		passed	Dr. C. Suresh
9	505b79a37506		passed	Dr. N. Jai Arjuna
10	6819b0bf39eb		passed	Dr. Anisha Firthouz. A
11	8f99b05a2ac5		passed	Dr. Jegatheesh.R
12	8a4ef339c635	Samraj <sammythedoc@gmail.com>	passed	Dr. Samraj.S
13	afdbc6a147f6		passed	Dr. N. Kasiviswanathan
14	3c131977b497		passed	Dr. Libby Delicia Selvaraj
15	5c975197fd9b		passed	Dr. Madhulika
16	ecd478187637	Pavithra <rbpavithra94@gmail.com>	passed	Dr. Pavithra.R
17	55129876b561		passed	Dr. John Giftson

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#	Certificate Number	Student	Status	Student Name
18	95a857a67157		passed	Dr. K. Divya Bharathy
19	a8463685ed42	P.Nirumalan <niruparkavi@gmail.com>	passed	Dr. Nirumalan
20	d775195e974e	Prabhakaran <prajags10@gmail.com>	passed	Dr. S. Prabhakaran
21	5477be4ecc59		passed	Dr. Ilavenil

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DEPARTMENT OF
 DISTANCE EDUCATION
 SRI BALAJI VIDYAPEETH
 PILLAIYARKUPPAM, PONDICHERRY-607 402.

Description: ACLS for SSSMCRI INTERNS 13 & 14 June 2017
 Course: ACLS: Advanced Cardiovascular Life Support Course (English)
 Course Start Date: 13 Jun 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 19
 Primary Instructor: Dr. Siva Ranganathan Green
 Secondary Instructor: Dr Sobana R.
 Additional Instructor 1: Dr. Sameera M Jahagirdar

#	Certificate Number	Student	Status	Student Name
1	4452da70d6b1		passed	Dr. Deepak Pranesh. R
2	ee32c35151f7		passed	Dr. Arthi. D
3	91e2da1c22f1	Kavin <ganeshprabhu017@gmail.com>	passed	Dr. N. Kavinraj
4	4f471fd4507a		passed	Dr. Namitha. N
5	f2090095f7c1	Siddarthan <a.siddarthan24@gmail.com>	passed	Dr. A. Siddarthan
6	0141119d8435		passed	Dr. P. Theepathorani
7	6acdf487d568		passed	Dr. C. Suresh
8	6b1a6ba2cacf		passed	Dr. N. Jai Arjuna
9	8ccf74c69439		passed	Dr. Anisha Firthouz. A
10	8545591a61f1		passed	Dr. Jegatheesh.R
11	1a86ca0ea692	Samraj <sammythedoc@gmail.com>	passed	Dr. Samraj.S
12	a83414e05c71		passed	Dr. N. Kasiviswanathan
13	ed2222cb895c		passed	Dr. Libby Delicia Selvaraj
14	820dcc88cab9		passed	Dr. Madhulika
15	2baa3df7c236	Pavithra <rbpavithra94@gmail.com>	passed	Dr. Pavithra.R
16	1cd487fd5c3e		passed	Dr. John Giftson

#	Certificate Number	Student	Status	Student Name
17	4e941acbc14a	Divya bharathy. K <divyabarathi702.db@gmail.com>	passed	Dr. K. Divya Bharathy
18	d93e79336997	P.Nirumalan <niruparkavi@gmail.com>	passed	Dr. Nirumalan
19	78d4f6795f9e	Prabhakaran <prajags10@gmail.com>	passed	Dr. S. Prabhakaran

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Description: BLS for Interns 5 July 2017
 Course: BLS: BLS for Healthcare Providers Course (English)
 Course Start Date: 5 Jul 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 9
 Primary Instructor: Mr. MOHAMMED RAFI. M
 Secondary Instructor: Dr. M. Sindhupriya
 Additional Instructor 1: SENTHIL KUMAR T
 Additional Instructor 2: Dr. Sripriya R

#	Certificate Number	Student	Status	Student Name
1	82d079654ef4		passed	Dr. Akannath. R
2	92a1691244b3	Pradeep <pradeeptram1994418@gmail.com>	passed	Dr. Pradeep. R
3	292a24b26571		passed	Dr. Sriramadesigan. R
4	e02d46097f51	Nivethitha .S.K <nivethithasenthilkumar@gmail.com>	passed	Dr. Nivethitha. S. K
5	501b53ef3bfe	NADHIM RIZVI S <nadhimdoc@gmail.com>	passed	Dr. Nadhim Rizvi. S
6	cf41247bbfd2		passed	Dr. Sree Suganya. M
7	e8a8983a30ec	GOPPALAKRISHNAN M <mgoppala.krishnan@gmail.com>	passed	Dr. Goppalakrishnan. M
8	b5e042a79913		passed	Dr. Nalina. p
9	77fb4e449faa		passed	Dr. Priyanga.K

Description: ACLS for INTERNS 6 & 7 July 2017
 Course: ACLS: Advanced Cardiovascular Life Support Course (English)
 Course Start Date: 6 Jul 2017
 ITC: Medical Simulation Centre, MGMCRI
 Training Site:
 Status: Locked
 Quantity: 11
 Primary Instructor: Dr. V R Hemanth Kumar
 Secondary Instructor: SENTHIL KUMAR T
 Additional Instructor 1: Dr. M. Sindhupriya
 Additional Instructor 2: Dr. Snipriya R

#	Certificate Number	Student	Status	Student Name
1	65acc3c3bc22		passed	Dr. Ilavenil. G
2	15b70aa60f84		passed	Dr. Akarnath. R
3	c1d296ae886c	Pradeep <pradeepnam199441@gmail.com>	passed	Dr. Pradeep. R
4	51be67ed5bcb		passed	Dr. Sriramadesigan. R
5	be0a02488509	Nivethitha .S.K <nivethithasenthilkumar@gmail.com>	passed	Dr. Nivethitha. S. K
6	b57fd2efca69	NADHIM RIZVI S <nadhimdoc@gmail.com>	passed	Dr. Nadhim Rizvi. S
7	7b2f228c0e09		passed	Dr. Sree Suganya. M
8	93f90a56e529	GOPPALAKRISHNAN M <mgoppala.krishnan@gmail.com>	passed	Dr. Goppalakrishnan. M
9	d85839f15090		passed	Dr. Malina. p
10	4c0e1dba6221		passed	Dr. Priyanga.K
11	0288420878b7		passed	Dr. Vijayakumar.S

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