

Course Evaluation

Basic Life Support Card in PALS Course



Date _____ Instructor(s) _____

Training Center _____ Location _____

1. Overall, I was satisfied with this offering.*

- ☐ Strongly agree
- ☐ Agree
- ☐ Neutral
- ☐ Disagree
- ☐ Strongly disagree

2. The offering was scientifically rigorous, and the clinical content was evidence based.*

- ☐ Strongly agree
- ☐ Agree
- ☐ Neutral
- ☐ Disagree
- ☐ Strongly disagree

3. The content appropriately represented the data on the subject and was not biased toward specific products or services.*

- ☐ Strongly agree
- ☐ Agree
- ☐ Neutral
- ☐ Disagree
- ☐ Strongly disagree

4. Learning objectives: After participating in this activity, I will be better able to*

	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
Describe the importance of high-quality CPR and its impact on survival	☐	☐	☐	☐	☐
Apply the BLS concepts of the Chain of Survival	☐	☐	☐	☐	☐
Recognize the signs of someone needing CPR	☐	☐	☐	☐	☐
Perform chest compressions using correct hand placement at the correct rate and depth with chest recoil	☐	☐	☐	☐	☐
Demonstrate effective breaths or ventilation	☐	☐	☐	☐	☐
Describe how to use an AED for an adult	☐	☐	☐	☐	☐
Perform high-quality CPR for an adult	☐	☐	☐	☐	☐
Describe how to relieve a foreign-body airway obstruction for an adult, a child, and an infant	☐	☐	☐	☐	☐

5. My research or practice will be impacted or changed as a result of something I learned in this offering.*

- ☐ True
- ☐ False

6. Please rate the instructors for this course: *

[illegible]

7. What action related to basic life support will you now take that you would not have done before participating in this activity?*

8. Please rate the following: *

[illegible]