

American Heart Association Emergency Cardiovascular Care Program Instructor Monitor Form

Name of Instructor:

Type of Instructor: HS BLS ACLS ACLS-EP PALS

Instructor's Primary TC for This Discipline:

Reason for Monitoring:

Initial Recognition

TC Sponsoring Instructor Course:

Instructor Course Date:

Renewal

Instructor Card Expiration Date:

Remediation (for repeat monitoring as needed if previous monitoring is unsuccessful)

Previous Monitoring Date:

Previously Monitored by:

Name of Reviewer:

Reviewer's status (check all that apply):

TCF BLS IT Course Director Lead Instructor

BLS ACLS PALS

Monitoring Date:

Monitoring Location (TC and Site):

Name of Course Taught (ie, BLS Healthcare Provider Renewal Course)

Teaching was monitored during the following part(s) of course:

Teaching/Skills Stations Evaluation/Skills Stations Remediation

Instructor Monitor Checklist

Instructions: Check appropriate box (E = Excellent, S = Satisfactory, NI = Needs Improvement, NA= Not Applicable) for all criteria that apply to the monitoring process. Instructor teaching and student evaluation skills are to be monitored. Please complete all areas. ***Comment on all areas indicated as "Needs Improvement."**

	E	S	NI*	NA	Comments
Teaching Effectiveness					
Organizes physical set-up to facilitate learning by students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Introduces objectives/outline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Covers core content following outline consistent with AHA guidelines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Summarizes key information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Demonstrates mastery of course content/ability to respond to student questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Demonstrates willingness and ability to demonstrate skills (when applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Allows adequate time for skills practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Uses interactive teaching style/encourages student participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Manages time effectively (begins/ends on time, avoids digression from key points)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Provides effective and ongoing feedback to students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Demonstrates professionalism (appropriate attire, use of terminology, etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Evaluation Effectiveness					
Uses performance checklists (as available)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Evaluates fairly, using current AHA guidelines and materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Provides or recommends appropriate remediation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Materials/Equipment					
Uses equipment that is clean and in good working order	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Uses appropriate standard (universal) precautions whenever applicable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Uses current AHA materials (video, tool kit, etc) to deliver content	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All students are using appropriate AHA textbook	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Refers to AHA textbook during teaching and/or evaluation feedback	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Demonstrates ability to use and troubleshoot audiovisual equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Signatures/Recommendations

Instructions: Please use the Instructor Monitor Checklist as a basis for recommendations. Reviewer should send completed form to Instructor's primary TC for discipline monitored.

Reviewer's Recommendations/Comments:

Do you recommend new/renewal of Instructor status for this Instructor Candidate/Instructor?
 Yes No If no, please summarize your rationale and provide recommendations for remediation (please attach additional comments as needed).

Signature of Reviewer: _____ **Date:** _____

Instructor's Comments (please attach additional comments as needed):

Signature of Instructor: _____ **Date:** _____