**ADVANCED TRAUMA LIFE SUPPORT - ATLS® REFRESHER COURSE**

**COURSE DESCRIPTION:**

The **ATLS®** course is a continuing medical education program designed to teach doctors life-saving skills and a standardized approach to trauma care in the "golden hour". The American College of Surgeons (ACS) requires that physicians who wish to maintain current ATLS® status must complete a refresher course every four years. The refresher course consists of pre- and post-course tests, a review of core content, discussions of triage scenarios, and a performance proficiency evaluation.

**COURSE SPONSOR:** London Health Sciences Centre - Trauma Program & CSTAR

**COURSE FEE:** **$750.00 Per Participant (Includes: Course Material & Refreshments)**

***ANY DIETARY RESTRICTIONS?*** *(Specify)****:***

**CHEQUE PAYABLE TO:** *Trauma Education Associates -* ***ATLS®***

**COURSE DATE (check one):** Feb 24, 2024

May 4, 2024

Sept 14, 2024

Nov 9, 2024

*If these dates do not fit your schedule, call 519 663-3111 to be put on a waiting list and notified of future course dates.*

**CANCELLATIONS:**

***We reserve the right to cancel courses 30 days in advance of the course date due to insufficient registrations.***

***Course fee will be refunded or you can move to another course date if available.***

**REFUND** - if notification received 30 days prior to course = fee paid less $100.00

**NO REFUND** - if cancellation within 30 days of course (substitutions allowed)

***\*NOTE:*** *Register early as registration is limited and courses are filled on a first come, first served basis*.

NAME TELEPHONE

ADDRESS FAX

CITY & PROVINCE POSTAL CODE

**E-MAIL** PAGER (if applicable):

DATE & LOCATION OF PREVIOUS COURSE:

COURSE # OF PREVIOUS COURSE:

***(NB: if last provider course date was more than 4.5 years prior to course date the ACS requires you to repeat the full Provider course)***

**Please Check One:**

[ ] Emergency Physician [ ] Surgeon, Specialty [ ] Other (specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please return:** 1) COMPLETED APPLICATION FORM, and

2) **CHEQUE MADE PAYABLE TO:** Trauma Education Associates - **ATLS®**

3) For payment by e-transfer please use email [tammy.mills@lhsc.on.ca](mailto:tammy.mills@lhsc.on.ca)

**To:** ATLS - Attention: Tammy Mills

Victoria Hospital Trauma Program E1-129

800 Commissioners Rd E

London, ON N6A 5W9

T: 519-667-6795 F: 519-667-6518

**Registration and course information please e-mail:** [tammy.mills@lhsc.on.ca](mailto:tammy.mills@lhsc.on.ca)