



ORIGINAL

DEPARTMENT OF THE NAVY
NAVAL HOSPITAL
1 PINCKNEY BOULEVARD
BEAUFORT, SOUTH CAROLINA 29902-6148

IN REPLY REFER TO:

NAVHOSPBFTINST 1500.3A

~~09K~~ ~~OFFOX~~
14 JUN 2005

NAVHOSP BEAUFORT INSTRUCTION 1500.3A

Subj: REQUIRED CERTIFICATIONS IN LIFE SAVING COURSES

Ref: (a) Textbook of Advanced Cardiac Life Support, American Heart Association
(b) Textbook of Pediatric Advanced Life Support, American Heart Association
(c) Textbook of Neonatal Resuscitation, American Heart Association

Encl: (1) BCLS/ACLS/PALS/NRP/ATLS NHBFT Privileged Practitioner Template
(2) BCLS/ACLS/PALS/NRP/ATLS NHBFT Clinical Support Staff Template

1. Purpose. To establish procedures for management of certification requirements and, in accordance with references (a) through (c), and guidelines set forth in enclosures (1) and (2) for resuscitation training for staff personnel. This is a complete revision and must be read in its entirety.

2. Cancellation. NAVHOSPBFTINST 1500.3

3. Scope. This instruction is applicable to all Command staff personnel.

4. Policy

a. Basic Cardiac Life Support (BCLS). Certification is required for all Command personnel having direct patient contact, both active duty and civilian. Cardio-Pulmonary Resuscitation (CPR) certification is strongly recommended for all non-healthcare workers in the hospital but is not mandatory.

b. Advanced Cardiac Life Support (ACLS). Certification must be attained prior to deployment/assignment outside the continental United States, or transfer to operational (Fleet or Fleet Marine Force) or contingency augmentation billets. Required target groups are defined in enclosures (1) and (2).

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c. Pediatric Advanced Life Support (PALS). Target groups are defined in enclosures (1) and (2).

d. Neonatal Resuscitation Program (NRP). Target groups are defined in enclosures (1) and (2).

e. Advanced Trauma Life Support (ATLS). Certification must be attained prior to deployment/assignment outside the continental United States, or transfer to operational (Fleet or Fleet Marine Force) or contingency augmentation billets. Target groups are defined in enclosures (1) and (2).

f. Exceptions to the above certification requirements may be requested in writing. This request will be reviewed and granted by the Commanding Officer.


R. QUIÑONES

Distribution:
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BCLS/ACLS/PALS/NRP/ATLS
NHBFT Privileged Practitioner Template

PROVIDER TYPE	BCLS	ACLS	PALS	NRP	ATLS
Anesthesiology	YES	YES	YES	NO	NO
Audiology	YES	NO	NO	NO	NO
Chiropractor	YES	NO	NO	NO	NO
Conscious Sedation - Providers w/privileges	YES	YES	NO	NO	NO
Dermatologist	YES	NO	NO	NO	NO
Dietitian	YES	NO	NO	NO	NO
Emergency Medicine	YES	YES	YES	NO	YES
Endocrinologist	YES	YES	NO	NO	NO
ENT	YES	YES	YES	NO	NO
Family Nurse Practitioner (That see PTs under 13 yrs)	YES	YES	YES	NO	NO
Family Nurse Practitioners	YES	YES	NO	NO	NO
Family Practice	YES	YES	YES	YES	NO
Flight Surgeon	YES	YES	NO	NO	YES
Gastroenterology	YES	YES	NO	NO	NO
General Dentistry	YES	NO	NO	NO	NO
General Surgery	YES	NO	NO	NO	NO
General Surgery (That practice Conscious Sedation)	YES	YES	NO	NO	NO
Internal Medicine	YES	YES	NO	NO	NO
Mental Health	YES	NO	NO	NO	NO
Neurology	YES	YES	NO	NO	NO
Nurse Midwife	YES	YES	NO	YES	NO
OB/GYN	YES	YES	NO	YES	NO
Occupational Health	YES	NO	NO	NO	NO
Operational Medicine/Primary Care	YES	YES	NO	NO	YES
Optometry	YES	NO	NO	NO	NO
Oral Surgery	YES	YES	YES	NO	NO
Orthopedics	YES	YES	NO	NO	NO
Pathology	YES	NO	NO	NO	NO
Pediatricians	YES	NO	YES	YES	NO
Pediatric Nurse Practitioner	YES	NO	YES	NO	NO
Pharmacy	YES	NO	NO	NO	NO
Physical Therapy	YES	NO	NO	NO	NO
Physical Medicine and Rehabilitation	YES	YES	NO	NO	NO
Physician Assistants	YES	YES	NO	NO	NO
Physician Assistants (That see PTs under 13 yrs)	YES	YES	YES	NO	NO
Physician Assistant/Sports Medicine	YES	NO	NO	NO	NO
Podiatry	YES	NO	NO	NO	NO
Preventive Medicine	YES	NO	NO	NO	NO
Pulmonary Medicine	YES	YES	NO	NO	NO
Radiology	YES	NO	NO	NO	NO
Social Work	YES	NO	NO	NO	NO
Women's Health Nurse Practitioner	YES	YES	NO	NO	NO

BCLS/ACLS/PALS/NRP/ATLS
CLINICAL SUPPORT STAFF TEMPLATE

NURSE ASSIGNED TO SECTION:	BCLS	ACLS	PALS	NRP	ATLS
Anesthesiology/Respiratory	YES	YES	NO	NO	NO
Branch Health Clinics	YES	YES	NO	NO	NO
Dental Hygienists	YES	NO	NO	NO	NO
Emergency Room - LPN	YES	NO	NO	NO	NO
Emergency Room - RN	YES	YES	YES	NO	NO
Family Practice	YES	YES	YES	NO	NO
General Surgery	YES	NO	NO	NO	NO
Health Promotions	YES	NO	NO	NO	NO
Immunizations	YES	YES	YES	NO	NO
Internal Medicine	YES	YES	NO	NO	NO
Mental Health	YES	NO	NO	NO	NO
OB/GYN	YES	NO	NO	YES	NO
Occupational Health	YES	NO	NO	NO	NO
Operating Room	YES	YES	NO	NO	NO
Orthopedics	YES	NO	NO	NO	NO
ACU (Recovery Room)	YES	YES	YES	NO	NO
Pediatrics	YES	NO	YES	NO	NO
SCU	YES	YES	YES	NO	NO
Ward M-5	YES	YES	YES	NO	NO