

Highland Park Hospital

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Highland Park, IL 60035
www.northshore.org

(847) 480-3758
(847) 480-2845 Fax

Case Review Sign- In Sheet

This form must be completed and returned to the EMS Office for CE credit

<i>Date of CE Case Review:</i>
<i>Attach PCR report:</i>
<i>Department Name:</i>
<i>Credit Hours: 1</i>

<i>Paramedic Names:</i>	<i>Signature:</i>

Signature of on Duty Fire Department Officer: _____