

# HEALTHCARE PROVIDER

Healthcare  
Provider



**Christina Feinstone**

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This card certifies the above listed individual has successfully completed the course requirements and cognitive evaluation in accordance with the Electronic Medical Certification (eMedCert) Basic Life Support (BLS) program curriculum.

**2/18/2022**

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Issue Date

**2/18/2024**

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Suggested Renewal Date

# HEALTHCARE PROVIDER

BLS Region: **US / Multi-Region**

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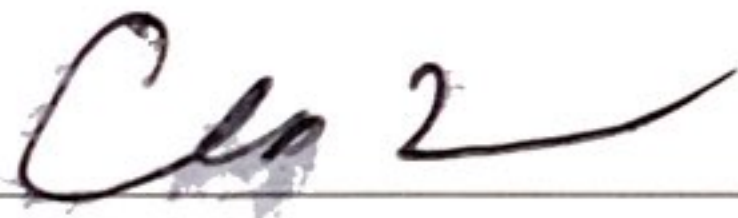
Training Center: **eMedCert**

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Provider  
Number: **236509**

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Cardholder  
Signature:

A handwritten signature in black ink, appearing to be 'C. 2' or similar, written over a horizontal line.