



American Board of Cardiovascular Perfusion

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ABCP-Recognized Simulation Center Application

Simulation Program Information

Mailing Address:

Email Address:

Phone Number:

URL:

Is this simulation center accredited? Please check one. Yes No

If yes, by whom?

Simulation Organization

Name of Simulation Administrator:

Title:

Degree/Credentials:

Mailing Address:

Email Address:

Phone Number:

Name of Simulation Facilitator 1:
(must be a CCP)

Title:

Degree/Credentials:

Mailing Address:

Email Address:

Phone Number:

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(If applicable)
Name of Simulation Facilitator 2:
(must be a CCP)

Title:

Degree/Credentials:

Mailing Address:

Email Address:

Phone Number:

(If applicable)
Name of Simulation Educator 1:

Title:

Degree/Credentials:

Email Address:

Phone Number:

(If applicable)
Name of Simulation Educator 2:

Title:

Degree/Credentials:

Email Address:

Phone Number:

Simulation Center Overview and Goals

After clicking "Submit by Email" at the end, an email will be generated and additional documentation may be attached along with this application. The \$250 processing fee must be mailed to the ABCP National Office before the application will be processed.

Please provide an overview of the Simulation Center's goals and educational methods to show how they serve the needs and expectations of the perfusion community.

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Please describe the process to review and validate HFPS simulation scenarios.

Define qualifications, training, and continuing education for Simulation Facilitator 1.
(Please submit an electronic copy of the CV for CCP Simulation Facilitator 1 with this form.)

Define qualifications, training, and continuing education for Simulation Facilitator 2.
(Please submit an electronic copy of the CV for CCP Simulation Facilitator 1 with this form.)

Define the roles, qualifications, training, and continuing education of other Simulation Educators involved with the simulation center.

Describe the simulation center's plans for quality assurance and improvement.

Please provide a list of equipment used at the simulation center.

Please provide your policy and procedure manual for simulated activities. (If the information is available on a website, please provide a URL in the space below.)