



NAME: IMOTENDA UONE
PHYSICAL ADDRESS: 42 HORATIO RD BRATESIDE
POSTAL ADDRESS: 04 RHODESVILLE RD EASTMEN
HARARE, K4268 CABS Norton
Harare, 421
TEL: (HOME) 0772 615 929 (CELL) 0184 013 228
0184 041 064
(WORK).....
ID NUMBER: 80-084790J80
PROFESSION: AMBULANCE TECHNICIAN
REG NO.: A/AT 4076
PRACTICE NUMBER: 19/1937
EXPIRY DATE: 31 December 2019
SIGNATURE: Resu
DATE:

Date	Category	Topic	Stamped/Signed by
20/01/22	7	Present lecture on O ₂ administration	Amuranda
08/03/22	10	Participating in first A&E exams	[Signature]
15/01/22	4	Attend lecture on Emergency drugs	[Signature]
10/08/22	3	1 day Seminar on Peds CPR	Amuranda
20/09/22	7	Lecture on Snake bites	Amuranda
02/11/22	10	Lecture on Patient	[Signature]