

EMMS

EMERGENCY MEDICAL SERVICES

**Paramedic Certification Course for Health
Care Professionals**
Application

May 5 – 16, 2008
July 7 – 18, 2008
October 6 – 17, 2008

Creighton

UNIVERSITY

Medical Center

Course Description

The course is designed to prepare the currently credentialed critical care health care professional for the assessment, care, transport and communication requirements of the sick and injured in the out of hospital setting. While giving an active health care professional (R.N., M.D., D.O.) credit for their clinical and educational expertise, this course supplements and augments skills already gained to enable the participant to function as a valuable prehospital team member with both ground and air service programs. After successful completion, the participant will meet eligibility requirements to complete the National Registry examination for Paramedics.

Pre-requisites: R.N., M.D. or D.O., EMT Basic Certification; two years critical care experience, ACLS provider; trauma and pediatric course certificate.

Didactic training is scheduled during the day, OR time to perform intubations will be scheduled with local hospitals in the mornings prior to classroom time. Field Internship for assessments with local fire departments and ambulance services will be scheduled evenings/weekend during the two-week course. Successful completion of the course requires each student to obtain 50 team leads. This may not be accomplished during the 2 weeks of class, so arrangements can be made with Creighton University EMS Education and your local EMS agencies to complete these in your local area.

The Creighton University EMS Education Program is approved by the Nebraska Department of Health to provide EMT education. Questions regarding reciprocity should be directed to the individual's state EMS credentialing agency for requirements.

Other Requirements:

- Two letters of recommendation (see enclosed forms)
- Copy of the following
 - Current CPR Certification (HealthCare Provider or equivalent)
 - ACLS Certification
 - Resume
 - EMT License/Certification/Registration
 - Drivers License/Birth Certificate
 - RN Licensure
 - Copy of High School or College Transcripts
 - Immunizations: (TB – within last year, Tetanus – within last 10 years, Polio, HEP B, MMR, Varicella)
- Essay – “Why I want to be a Paramedic” Essay should not exceed 1 page and should be double spaced, 10 – 12 pt font with 1” margins.

I certify that to the best of my knowledge there is no misrepresentation or falsification in any response on this application or its supporting documents.

Signed **Date**

Payment Information

\$2,500 Tuition

Required Non-Refundable Deposit Due with Application:

\$250.00

- Check enclosed (make check payable to EMS Education)
- Please bill my credit card (complete below)

Visa _____ Master Card _____ Discover _____

Credit Card Number: _____

Expiration Date: _____

Signature: _____

Mail application to:

**Creighton EMS Education
2514 Cuming St
Omaha, NE 68131**

E-mail: cuemse@creighton.edu

Website: <http://ems.creighton.edu>

Phone: 402-280-1280 **Toll Free:** 800-327-7530

Your application will be reviewed by the acceptance committee as soon as all the requirements have been submitted, and you will be notified of your acceptance via letter.

We reserve the right to cancel a class due to lack of enrollment. If a class is cancelled you will be notified four weeks prior to the start of the class. Please do not make travel arrangements before this time, and before receiving confirmation of the class status. You will receive a full tuition refund if the class is cancelled.