



## Professional Licensure Disclosure

### Creighton University Program

College/School	Department	Major/Degree Program
School of Medicine	Department of Health Professions	Physician Assistant

Contact for More Information	Title	E-Mail Address	Phone Number
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### State-by-State Disclosure Status

***For which states does this degree program meet the state-determined educational requirements for professional licensure or certification?***

State	Meets	Does Not Meet	State Does Not License This Profession	For information directly from the governing state licensing authority, please contact...
Alabama	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Alabama Board of Medical Examiners</a>
Alaska	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Alaska Medical Licensing Board</a>
Arizona	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Arizona Regulatory Board of Physician Assistants</a>
Arkansas	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Arkansas State Medical Board</a>
California	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Physician Assistant Board of California</a>
Colorado	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Colorado Medical Board</a>
Connecticut	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Connecticut Department of Public Health</a>

Delaware	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Delaware Board of Medical Practice</a>
District of Columbia	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">District of Columbia Department of Health</a>
Florida	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Florida Board of Medicine</a>
Georgia	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Georgia Composite Medical Board</a>
Hawaii	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Hawaii Board of Medical Examiners</a>
Idaho	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Idaho Board of Medicine</a>
Illinois	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Illinois Department of Financial and Professional Registration</a>
Indiana	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Indiana Professional Licensing Agency</a>
Iowa	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Iowa Department of Health and Human Services</a>
Kansas	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Kansas Board of Healing Arts</a>
Kentucky	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Kentucky Board of Medical Licensure</a>
Louisiana	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Louisiana State Board of Medical Examiners</a>
Maine	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Maine Board of Licensure in Medicine</a>
Maryland	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Maryland Board of Physicians</a>
Massachusetts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Massachusetts Board of Registration of Physician Assistants</a>
Michigan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Michigan Licensing and Regulatory Affairs</a>
Minnesota	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Minnesota Board of Medical Practice</a>
Mississippi	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Mississippi State Board of Medical Licensure</a>
Missouri	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Missouri Division of Professional Registration</a>
Montana	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Montana Board of Medical Examiners</a>
Nebraska	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Nebraska Department of Health and Human Services</a>
Nevada	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Nevada State Board of Medical Examiners</a>
New Hampshire	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">New Hampshire Office of Professional Licensure and Certification</a>
New Jersey	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">New Jersey Division of Consumer Affairs</a>

New Mexico	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">New Mexico Medical Board</a>
New York	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">New York State Education Department Office of the Professions</a>
North Carolina	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">North Carolina Medical Board</a>
North Dakota	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">North Dakota Board of Medicine</a>
Ohio	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">State Medical Board of Ohio</a>
Oklahoma	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Oklahoma Medical Board</a>
Oregon	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Oregon Medical Board</a>
Pennsylvania	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Pennsylvania Board of Medicine</a>
Rhode Island	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">State of Rhode Island Department of Health</a>
South Carolina	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">South Carolina Board of Medical Examiners</a>
South Dakota	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">South Dakota Board of Medical &amp; Osteopathic Examiners</a>
Tennessee	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Tennessee Department of Health</a>
Texas	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Texas Board of Medical Examiners</a>
Utah	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Utah Division of Professional Licensing</a>
Vermont	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Vermont Department of Health</a>
Virginia	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Virginia Department of Health Professions Board of Medicine</a>
Washington	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Washington Medical Commission</a>
West Virginia	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">West Virginia Board of Medicine</a>
Wisconsin	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">State of Wisconsin Department of Safety and Professional Services</a>
Wyoming	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Wyoming Board of Medicine</a>

### Additional Notes

1. Creighton University makes no claim about the applicability of its academic programs to any state-established requirements outside the domain of the educational criteria of academic programs designed to prepare students for state-level licensure.

2. **For Domestic Students/U.S. Residents:** Professional licensure requirements, and determinations of which academic programs fulfill them, are established solely by individual states, and are subject to change without notice to Creighton University. The records above will be updated annually; however, Creighton University cannot guarantee that they are always accurate.

*Creighton University cannot guarantee an individual's attainment of any state-established professional licensure or certification, in any field, in any jurisdiction.* All prospective students considering this program, and all current students in this program, should always consult the appropriate licensing agency(ies) in the state(s) in which they wish to practice professionally to determine each state's updated professional licensure requirements and ensure Creighton University's academic program compatibility. Before seeking admission or beginning study in a course or program involving licensure or certification, please visit the program's webpage or contact the program for information on the state in which you intend to pursue licensure.

3. **For International Students:** Creighton University makes no claims about whether or not Creighton programs satisfy the requirements for professional practice, certification, or licensure in any country other than the United States. Prospective students living and/or working outside of the United States, or who intend to work outside the United States, should confirm with the appropriate certifying agency whether successful completion of any degree program at Creighton University will meet the academic credential requirements of the country in which they intend to seek employment.