Paramedic Education Program Application

Program Description

Creighton University EMS Education has been offering EMS programs since 1974. While many changes have occurred in EMS, we remain committed to educating competent entry level paramedics who are prepared to meet the needs of today’s dynamic pre-hospital environment. Our faculty includes experienced EMS educators, pre-hospital providers, registered nurses and critical care physicians. Students participate in an intensive year long program consisting of approximately 650 hours of lecture and lab plus practical skills sessions and case studies. We have state-of-the-art labs and patient simulation equipment. An additional 500-600 hours of clinical education are taken in area hospitals and in the out-of-hospital environment. Students are involved in these components concurrently enabling them to combine theory with practical applications.

The Creighton University EMS Education Program is approved by the Nebraska Department of Health and Human Services to provide EMS education. Creighton University’s Paramedic program is accredited by the Commission on Accreditation of Allied Health Education Programs (www.caaHELP.org) upon the recommendation of the Committee on Accreditation of Education Programs for the EMS Professions (CoAEMSP).

Didactic Training

The classroom portion of the Paramedic program is comprised of lectures, practical skills sessions, case studies, review sessions, as well as written and practical testing including the following topics:

- Anatomy & Physiology
- Fundamentals of Paramedicine
- Advanced Patient Assessment
- Airway Management & Ventilation
- Cardiology
- Pulmonology
- Trauma
- Pediatrics
- Obstetrics
- EMS Operations
- Disaster Response

Certifications Included as part of this Training Program:

1. Advanced Cardiac Life Support Provider Course (ACLS)
2. Pre-Hospital Trauma Life Support (PHTLS)
3. Pediatric Advanced Life Support (PALS)
4. Pediatric Education for Pre-Hospital Professionals (PEPP)
5. Advanced Medical Life Support (AMLS)

Upon successful completion of the program, students are eligible to complete the National Registry Paramedic examination.

Direct any questions and submit application materials to:

Creighton University EMS Education
2514 Cuming St
Omaha, NE 68131

E-mail: ems@creighton.edu
Website: http://ems.creighton.edu
Phone: 402-280-1280 or 800-327-7530
Fax: 402-280-1288
Creighton University
Emergency Medical Services Education – Paramedic Education

Monday 8:30 a.m. – 3:30 p.m.
Tuesday 8:30 a.m. – 12:30 p.m.
Thursday 8:30 a.m. – 12:30 p.m. OR 1:00 p.m. – 5:00 p.m.

Student will be assigned to a single 4-hour session Thursday

☐ Credit Student – Please contact Mary Beth Bestenlehner (402-280-2730) mbbest@creighton.edu to enroll in Creighton University as a degree seeking student.

☐ Certificate Student – Please contact Mike Miller (402-280-1280) mikemiller@creighton.edu regarding requirements for enrolling as a Certificate Student.

Application Date: __________________________ □ Male □ Female

Name: ____________________________________________________________________________

Address: ____________________________________________________________________________

Street City State Zip

Primary Phone: __________________________

Secondary Phone: __________________________

Social Security Number: __________________________ E-mail: __________________________

Date of Birth: __________________________

EMS Affiliation: ____________________________________________________________________

EMT Certification

State: __________________________ Number: __________________________ Exp: ______

National Registry: Number: __________________________ Exp: __________________________

Do you have a physical handicap or disability that may require special provisions? □ Yes □ No

Have you ever been convicted of a misdemeanor or felony? □ Yes □ No

You will be required to complete a background investigation if accepted to the program. The background check is thorough. Is there anything that you would like to inform us about and explain in advance that might appear on your background investigation? Please attach any desired explanations.

Have you ever been addicted to any chemical substance? □ Yes □ No

Have you ever had any regulatory disciplinary action or sanctions brought against you in any profession? □ Yes □ No

Have you previously attended a paramedic course? If yes, please provide contact information (program name, phone number, contact person, and date) □ Yes □ No

If the answer to any of these questions is “Yes” please attach documentation of the circumstances.

Assessment Testing

An EMT Assessment Exam and/or the HOBET Exam may be required. You will be notified via letter if you are required to take one or both exams.

☐ EMT Basic test: Please call Sheryl Oviatt at 402-280-1289 to schedule a time for the test.

☐ HOBET test. Please call Sheryl Oviatt at 402-280-1289 to schedule a time for the test.
Other Requirements:
- Two completed recommendation forms
- Current résumé including work and education history
- Copy of the following
  - Current CPR Certification (Healthcare Provider or equivalent)
  - EMT License/Certification/Registration
  - Driver's License
  - GED, High School, or College Transcripts
- Essay – “Why I want to be a Paramedic” Essay. **Format instructions:** 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  $8,325 Tuition

Payment plans available by contacting Sheryl Oviatt, EMS Office Manager at: 402-280-1289.

$50 non-refundable application fee must be submitted with this application

If accepted to the program, a $950 deposit is required by July 22, 2012, to reserve your space in the program. The $50 application fee will be credited towards the $950 deposit.

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

Visa _____ Master Card _____ Discover _____ American Express _____

Credit Card Number: ____________________________________________________

Expiration Date: ____________________________

Signature: _____________________________________________________________

Individuals admitted to the Paramedic program are required to comply with Creighton University’s Immunization requirements for Health Science Students. Immunization compliance is monitored by Creighton University Health Services, www.creighton.edu/chc/healthservices. Please refer to the Health Science Students section for immunization requirements. The required Health History Form will be mailed to you with your acceptance letter. Submit all immunization information directly to Health Services. **Registration in any course at Creighton University requires students to have received two doses of MMR, or submission of positive immunity laboratory testing.** Full compliance with all immunization requirements is mandatory for students to participate in required patient care activities.