

# Paramedic Refresher



The Paramedic Refresher meets the National Registry requirements for the **Flexible Core Content** refresher training. This class consists of 24 hours of Paramedic Refresher curriculum.

Cost: \$55 per session

All classes meet at the Beatrice Fire Department, 310 Ella St., on Fridays from 8:30 a.m.-5:30 p.m.

## AGENDA

### Tuesday, Jan. 29, 2013 - Scott Crawford

- (8 hours) Airway, Breathing, and Cardiology
- Assess and provide care for respiratory distress in an adult patient
  - Use oxygen delivery system components
  - Perform techniques to assure a patent airway
  - Assess and provide care to a patient experiencing non-traumatic chest pain/discomfort

### Thursday, Feb. 14, 2013 - Scott Crawford

- (8 hours) Obstetrics & Pediatrics
- Assess and provide care to an infant or child with suspected abuse or neglect
  - Assess and provide care to an infant or child with a fever
  - Assess and provide care to the obstetric patient
  - Provide care to the newborn
  - Provide care to the mother immediately following delivery of a newborn

### Monday, Feb. 18, 2013 - Scott Crawford

- (5 hours) Medical Emergencies
- Assess and provide care to a patient with an altered mental status
  - Assess and provide care to a patient with a history of diabetes
  - Assess and provide care to a patient experiencing a seizure
  - Assess and provide care to a patient exposed to heat or cold
  - Assess and provide care to a patient experiencing a behavioral problem
  - Assess and provide care to a patient with suspected communicable disease
- (1 hour) Trauma
- Provide care to a patient with a painful, swollen, deformed extremity
  - Assess and provide care to a patient with burn injury
- (2 hours) Operational Tasks
- Use body mechanics when lifting and moving a patient
  - Communicate with a patient while providing care

**Textbook:** No textbooks required for these courses.

**Registration Required:** Complete the registration form. Register in person, by mail or fax and send with payment to:  
 (Mail) SCC Continuing Education Center  
 301 S. 68th St. Place  
 Lincoln, NE 68510-2449  
 (Fax) 402-437-2703

**NOTE:** Letter of Authorization on company letterhead is required at registration for third-party billing.

Report to the first class session unless you are notified that the class is full or has been cancelled. **CONFIRMATIONS ARE NOT MAILED.**

**If you have questions or wish more information, please contact:**

**Melanie Leseberg, Assistant Director of Health/EMS**  
 402-437-2506 or 800-828-0072, ext. 2506  
 mleseberg@southeast.edu

## REGISTRATION FORM - NON-CREDIT COURSE

**Southeast community college**

Complete this form with payment information and send via FAX or mail to: **SCC Continuing Education Center**  
**301 S. 68th St., Lincoln, NE 68510**  
**FAX: 402-437-2703**

Include credit card information or Letter of Authorization for third-party billing. The College requires a student's Social Security number as a condition for enrollment. A student's Social Security number information constitutes an "educational record" under the Family Educational Rights and Privacy Act (FERPA). The College will be privileged to redisclose that information only with the consent of the student or in those very limited circumstances when consent is not required by FERPA.

**PLEASE PRINT**

2013 QUARTER	
__ SUMMER	<u>x</u> WINTER
__ FALL	__ SPRING

Social Security Number		Name: Last		First		Middle Initial		Email Address	
Residence Mailing Address				City		State	Zip	County #	<input type="checkbox"/> Cell <input type="checkbox"/> Business Phone
Birth Date	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Ethnicity (select one): <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Race (select one or more): <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Asian <input type="checkbox"/> Black or African American	<input type="checkbox"/> Resident of Nebraska <input type="checkbox"/> Non-Resident of Nebraska	Home Phone			

**Paramedic Refresher Flexible Core Content**      **Please Check:**     **Jan. 29, 2013 - \$55**     **Feb. 14, 2013 - \$55**     **Feb. 18, 2013 - \$55**  
 Beatrice Fire Department • 8:30 a.m.-5:30 p.m.      Airway, Breathing & Cardiology      Obstetrics & Pediatrics      Medical Emergencies, Trauma & Operational Tasks  
 EMTL-3626-OCW2      EMTL-3625-OCW2      EMTL-3627-OCW2

### SIGNATURE

Check    Cash    Mastercard    AMEX    Discover    VISA   V Code \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Exp. Date \_\_\_\_\_ Credit card # \_\_\_\_\_

Billing agency (INCLUDE LETTER OF AUTHORIZATION ON COMPANY LETTERHEAD)

For the protection of your personal credit card information, do not e-mail this form to SCC. If faxing, only use the fax number listed or verify with SCC before using another SCC fax number.

Submission of this form indicates that I understand: 1) that my registration is complete and that I am accountable for the tuition and fees and subject to a grade in the courses listed; 2) that should I officially drop, cancel, or withdraw, any refund in tuition will be determined by the date I submit my request to Continuing Education; 3) that failure to attend a course does not constitute an official drop/withdrawal; 4) the personal information contained herein is correct as shown; and 5) any changes in SSN, legal name, address, residency, etc. must follow the College procedures in the Student Handbook and College Catalog. It is the policy of SCC to provide equal opportunity and nondiscrimination in all admission, attendance, and employment matters to all persons without regard to race, color, religion, sex, age, marital status, national origin, ethnicity, veteran status, sexual orientation, disability, or other factors prohibited by law or College policy. Inquiries concerning the application of SCC's policies on equal opportunity and nondiscrimination should be directed to the Vice President for Access/Equity/Diversity, SCC, Area Office, 301 S. 68th Street Place, Lincoln, NE 68510, 402-323-3412, FAX 402-323-3420, or jsoto@southeast.edu.

SCC Staff Tuition Waiver	(      )
<b>TOTAL DUE</b>	

FOR OFFICE USE ONLY	
DE _____	ID# _____

## REGISTERING ONLINE FOR SCC CONTINUING EDUCATION CLASSES

You must have an email account to register online.

1. Go to [www.southeast.edu/continuing](http://www.southeast.edu/continuing).
2. Click the **Register Today** button.
3. Select the **Continuing Education** gold bar.
4. Click the **Register and Pay for Continuing Education Classes** link.
5. **Search for your class** by entering either a **key word** in the title or the **course number**. Click **Submit**. (Enter information in only one field for broader results.)  
Key Word Example: *Driver*  
Course Number Example: *TRAN-3398*
6. **Select the course** for which you wish to register. Click **Submit**.
7. Enter your **personal information, certify your identification** and click **Submit**.  
\* You must provide your Social Security Number.
8. *Optional:* Enter your **Additional Registration Information** and click **Submit** or bypass the additional information and click **Submit**.
9. If you want to register for additional classes, select **Search for more classes** under "Choose one of the following." If you are finished selecting the class(es) for which you want to register, select **Register now (check out)**. Select your **Payment Type**. Click **Submit**.
10. Enter your **payment information**. Click **Submit**.

You will see your **class acknowledgement** with information about your **SCC Student ID Number**, **SCC User ID** and **password**. You also will receive an email with this same information for your records.

In the future it will be easy to register by logging in using your SCC User ID and password and it will not be necessary to provide your Social Security number again.

If you have problems getting registered, please call 402-437-2700 or 800-828-0072 for assistance.