

Paramedic Refresher



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

Cost: \$55 per session

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

AGENDA

Tuesday, Jan. 8, 2013 - Scott Crawford

- (8 hours) Airway, Breathing & Cardiology
- Provide ventilatory support for a patient
 - Attempt to resuscitate a patient in cardiac arrest
 - Provide care to a patient experiencing cardiovascular compromise
 - Provide post-resuscitation care to a cardiac arrest patient

Tuesday, Jan. 15, 2013 - Scott Crawford

- (3 hours) Medical Emergencies
- Assess and provide care to a patient experiencing an allergic reaction
 - Assess a patient with possible overdose
 - Assess and provide care to a near-drowning patient
- (5 hours) Trauma
- Perform a rapid trauma assessment
 - Assess a patient with a head injury
 - Assess and provide care to a patient with suspected spinal injury
 - Provide care to a patient with a chest injury
 - Provide care to a patient with an open abdominal injury
 - Provide care to a patient with shock/hypoperfusion

Wednesday, Jan. 23, 2013 - Scott Crawford

- (8 hours) Obstetrics & Pediatrics
- Assess and provide care to an infant or child with cardiac arrest
 - Assess and provide care to an infant or child with respiratory distress
 - Assess and provide care to an infant or child with shock/hypoperfusion
 - Assess and provide care to an infant or child with trauma

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 • 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

<input type="checkbox"/> SUMMER	<input checked="" type="checkbox"/> WINTER
<input type="checkbox"/> FALL	<input type="checkbox"/> 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
Mandatory Core Content
Beatrice Fire Department • 8:30 a.m.-5:30 p.m.

Please Jan. 8, 2013 • \$55
Check: Airway, Breathing & Cardiology
EMTL-3622-OCW2

Jan. 15, 2013 • \$55
Medical Emergencies & Trauma
EMTL-3631-OCW2

Jan. 23, 2013 • \$55
Obstetrics & Pediatrics
EMTL-3623-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	()
TOTAL DUE	

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.
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.