



capitahealth



# Pre-Hospital Trauma Life Support (PHTLS)

**Pre-Hospital Trauma Life Support – Hybrid** – Students complete 8 hours of online course content that covers the didactic portion of the provider course. The student’s certificate of completion is **REQUIRED** to gain entry into the 8 hour classroom portion. 16 hours of CAPCE credit will be awarded upon successful completion of the course. Upon completion of registration requirements, course code for the Online Module will be emailed to the student.

**Pre-Hospital Trauma Life Support – Refresher** – 8-hour classroom course for individuals who have successfully completed the 16 hour PHTLS provider course within the past four years. 8 hours of CAPCE credit will be awarded upon successful completion of the course.

**Prerequisites:** PHTLS 9<sup>th</sup> ed. Textbook

**Course Completion Certificate at start of class is required for Hybrid Course**

**PHTLS—HYBRID 9a—5p**

Fri Apr 24

Thu Oct 22

**PHTLS—Refresher 9a—5p**

Fri Mar 13

Wed Sep 9

**Course Costs for:**

**Non-Capital Health Employees**

**Capital Health Employees**

PHTLS-HYBRID  
(INCLUDES ONLINE MODULE)

\$275.00

No Charge

PHTLS-Refresher (1 Day)

\$150.00

**To Register:**

This form is designed to be paperless. Fill out the form, save it then e-mail it as an attachment to:

[EMSEducation@capitalhealth.org](mailto:EMSEducation@capitalhealth.org)

Any applicable payment, credit card or check (payable to: **Capital Health**) must be received before registration is finalized.

**Questions?**

Contact the EMS Education office at (609) 815-7291 or at the e-mail address above.

P H T L S	NAME: _____ NJ/PA EMS ID #: _____	
	EMAIL ADDRESS _____	
	Cell Phone Number _____ CHS EMP ID #: _____	
	<b>CIRCLE ONE:</b> EMT / PARAMEDIC / FF / RN / LEO / OTHER	
	COURSE TYPE REQUESTED: _____ (DATE) _____ TIME: _____	
	2nd Choice: (DATE) _____ TIME: _____ 3rd Choice: (DATE) _____ TIME: _____	
	APPLICANT SIGNATURE _____ DATE _____	
	<small>SUBSTITUTIONS INTO AN ALTERNATE CLASS MAY BE ALLOWED, IF THERE ARE SPOTS AVAILABLE. NO REFUNDS WILL BE GIVEN. CLASSES FILL QUICKLY, PLEASE PROVIDE ALTERNATE DATES IN CASE YOUR FIRST CHOICE IS FULL. FOR EMS EMPLOYEES: ENROLLMENT INTO CLASS CONSTITUTES ACCEPTANCE OF A WORK SHIFT.</small>	
	<b>All Listed Courses Will Be Held At:</b> EMS Education, 832 Brunswick Ave., 2 <sup>nd</sup> Floor, Trenton, NJ 08638	
	<b>OFFICE USE ONLY:</b> Date Received _____ / _____ / _____            Registration Info Sent: _____ / _____ / _____	
Online Course Code: _____		