CLEAR

APPLICATION FOR COMPREHENSIVE EMERGENCY MEDICAL SERVICE

Reply to:

HOSPITAL NAME

1. Name and experience of the full-time physician responsible for the service:

2. Are physicians, dentists and podiatrists who staff the service members of the medical staff? YES NO

3. Names and qualifications of physicians who are in-house 24 hours a day in the following specialties: Medicine:

Surgery:

Anesthesiology:

Neurosurgery:

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Pediatrics:

Obstetrics-gynecology:

Other:

4. Name, training and experience of registered nurse responsible for nursing care:

5. Number of registered nurses assigned to the service:

6. Number of licensed vocational nurses assigned to the service:

7. Name of the affiliated medical school:

8. Has a continuing education program for all emergency medical service personnel been developed? YES NO

9. Number of treatments provided annually: