San Juan Island Emergency Medical Services

EMS INCIDENT REPORT

Please complete with all known information so that we may thoroughly understand the problem and provide a quick solution. Notify and return to the Chief as soon as possible by email or fax. For significant issues, have EMS Chief paged immediately through San Juan County Dispatch.

REPORTING PERSON: _____

PHYSICIAN /NURSE: _____

PARAMEDIC: _____

DATE AND TIME: _____

SPECIFIC DESCRIPTION: _____

SUGGESTION OR FOLLOW UP NEEDED: _____

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FAX 360 378-3583 chief@sanjuanems.org