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| **Date** | **EMS Agency** | **Description**  | **Action/ Disposition**  |
|  |

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| --- | --- |
| □ | Ross/WestView |
| □ | NorthWest |
| □ | LifeFlight |
| □ | MRTSA |

 □ Other: |  |

|  |  |
| --- | --- |
| □ No change to EMS care | □ Destination change |
| □ Refusal/Redirection  | □ Transfer of care  |
| □ Transport | □ Alternative protocol/tx |

 □ Other:  |
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| --- | --- |
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