



# Tri-County Emergency Medical Control Authority

Serving Clinton, Eaton, and Ingham County

## AGENCY INFORMATION REPORT

It's time to renew your agency license! Please provide the information requested below to ensure our records are accurate and up-to-date. Your license renewal will not be processed until this information is received. Thank you!

Agency Name: \_\_\_\_\_

Agency License Level: \_\_\_\_\_

Person Completing Form: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Electronic Patient Care Reporting Software (EPCR) Vendor: \_\_\_\_\_

### Apparatus: (number of each type of licensed vehicle)

#### Non-Transport Vehicles

#### Echo Units

#### Transport Vehicles

BLS: \_\_\_\_\_

ALS: \_\_\_\_\_

BLS: \_\_\_\_\_

LALS: \_\_\_\_\_

LALS: \_\_\_\_\_

ALS: \_\_\_\_\_

ALS: \_\_\_\_\_

MFR: \_\_\_\_\_

### **MFR AGENCY QUESTIONS: (BLS or ALS that utilized MFR Vehicles as well)**

**YES**

**NO**

Carry Glucometers

Utilize I-Gel Airways

Narcan Administration

Draw-Up Epinephrine

Impedance Threshold Device (ITD)

Mechanical Chest Compression Device

If yes, what are you using:

Active Compression Device

If yes, what are you using:

Leave Behind Narcan (CP Programs Only)

Pelvic Binder

If yes, what are you using:



# Tri-County Emergency Medical Control Authority

*Serving Clinton, Eaton, and Ingham County*

---

**BLS AGENCY QUESTIONS: (ALS that utilizes BLS vehicles as well)**

YES

NO

Draw-Up Epinephrine

Capnography

Supraglottic Airways

If yes, what are you using:

Impedance Threshold Device

If yes, what are you using:

Mechanical Chest Compression Device

If yes, what are you using:

Active Compression-Decompression Device

If yes, what are you using:

Leave Behind Narcan (CP Programs Only)

Pelvic Binder

If yes, what are you using:

**ALS AGENCY QUESTIONS:**

YES

NO

Supraglottic Airways

If yes, what are you using:

Commercial Pleural Decompression Device

If yes, what are you using:

Enhanced Paramedic or Critical Care

If yes, which are you doing:

Pediatric High Flow Nasal Oxygen

Evidentiary Blood Draws

If yes, what agency are you doing them for:

Impedance Threshold Device

If yes, what are you using:

Mechanical Chest Compression Device

If yes, what are you using:

Active Compression-Decompression Device

If yes, what are you using:

Chest Seals

If yes, what are you using:

Leave Behind Narcan (CP Programs Only)

Pelvic Binder

If yes, what are you using:

Bougie Device for Difficult Airways

If yes, what are you using:

Ventilator

If yes, what are you using:

Video Laryngoscopy

If yes, what are you using:

Please email completed report to: [tcemcaoffice@tcemca.org](mailto:tcemcaoffice@tcemca.org)