



Add or Update Clinical/Field Contracts for EMS Initial Education Program



GEORGIA DEPARTMENT OF PUBLIC HEALTH

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EMS Initial Education Program Click on Applications

|  | Test Initial Education Program (ZZZZ) AEMT Program, Paramedic Program | View Agencies Applications |
|---|---|--|
|  | Test Initial Education Program (ZZZZ) AEMT Program, Paramedic Program | |
| Applications | | Action |
| Add Instructional Personnel to EMS Initial Education Program Roster | | Apply Now |
| This is the application where an EMS Initial Education Program Director can add Instructional Personnel to the EMS Initial Education Program Roster. | | |
| Add or Update Clinical/Field Sites and Contracts for EMS Initial Education Program | | Apply Now |
| This is the application that EMS Initial Education Programs will use to list their Clinical and Field sites. This is required for each EMT, AEMT and Paramedic program. | | |

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Add or Update Clinical/Field Contracts for EMS Initial Education Program

Instructions | Program Name | Clinical/Field Sites | Attestation

▼ Instructions

On the next tab, you will need to enter all of your clinical/field sites that your program uses. You will also be required to upload all contracts.
Click **Save and Continue** to go to the next tab.

Add or Update Clinical/Field Contracts for EMS Initial Education Program

Instructions | Program Name | Clinical/Field Sites | Attestation

▼ Program Name

EMS Initial Education Program Name

EMS Region

Approved Levels of EMS Initial Education

EMR Program
 EMT Program
 AEMT Program
 Paramedic Program

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▼ List all Clinical/Field Sites

Enter all required (*) information for the clinical/field site. To add another, click **Add Another**. To remove a clinical site, click on the icon to the left of the site, and then click **Remove** at the bottom of the page. To edit a site, click on the icon to the left of the site to edit, edit the appropriate information, and then click **Done**.

*Clinical/Field Site Name (EMS Agency name or Clinical Site Name)

Policy Type (Select Policy)

*Policy Classification - Select Clinical Site Contract (non-field) or Clinical Site Contract (field - EMS Agency)

*Clinical/Field Site Contact Name and Email Address (person at the clinical/field site that can verify this contract)

*Clinical/Field Site Phone Number

*Clinical/Field Site Street 1

Clinical/Field Site Street 2

*Clinical/Field Site Postal Code

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*Clinical/Field Site Postal Code

Clinical/Field Site City

Clinical/Field Site County

Clinical/Field Site State

*Date Contract was signed

*Expiration Date of Contract (if no specific expiration date for a continuous contract, enter a date no more than 2 years in the future)

*Application Date - Enter Today's Date

*Description of Site - indicate the types of students who will go here (EMT, AEMT, Paramedic), and if a clinical site, what types of departments are provided (ED, ICU, OR, L&D, Psych, etc). If your program has multiple campuses and this clinical/field site is used for a subset of those campuses, please also indicate which campuses use this site.

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▼ List all Clinical/Field Sites

Enter all required (*) information for the clinical/field site. To add another, click **Add Another**. To remove a clinical site, click on the icon to the left of the site, and then click **Remove** at the bottom of the page. To edit a site, click on the icon to the left of the site to edit, edit the appropriate information, and then click **Done**.

| Site Name | Site Type | Site Contact | Clinical Site Phone Number | Date Signed | Expiration Date | Application Date - Enter Today's Date |
|--|---|------------------------------------|----------------------------|------------------|-------------------|---------------------------------------|
| <input type="checkbox"/> ABC Hospital | Clinical Site Contract (non-field) | John Smith, jsmith@abchospital.com | 123-456-7890 | November 1, 2020 | December 31, 2023 | November 15, 2020 |
| <input type="checkbox"/> XYZ Ambulance Service | Clinical Site Contract (field - EMS Agency) | Betty Smith, bsmith@xyzservice.com | 987-654-3210 | July 1, 2020 | June 30, 2021 | November 15, 2020 |

▼ Clinical/Field Contract Upload

For each of the sites listed above, please upload the clinical-field contract with that site. To add an additional contract, click **Add Another**.

Site Name

ABC Hospital Clinical Contract: ABC Hospital Clinical Contract.pdf

XYZ Ambulance Service Field Contract: XYZ Ambulance Service Field Contract.pdf

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▼ Attestation

As the EMS Initial Education Program Director for the EMS Initial Education Program listed on this application, I hereby attest that the clinical/field sites listed on this application are factual and accurate. Furthermore, I understand that I am required to complete this application again if there are any changes/removals/additions to the clinical/field sites that this EMS Initial Education Program uses.

*Signature

Username: DNewton

Password:

Submit