

SILVER CROSS EMERGENCY MEDICAL SERVICES SYSTEM**TITLE: SYSTEM ENTRY REQUIREMENTS – EMR AND EMT****POLICY:**

The System requires that all EMRs and EMTs of member agencies be assigned and utilize a System Number in order to function within the System. System entry will be completed as follows:

- I. Requests must be made in writing by the agency representative. The request must be made in letter format and on agency letterhead indicating that the EMR or EMT is or will be an active EMS Personnel with that agency. All copies must be clear and easily readable.
- II. The following documentation/information must be submitted with the request:
 - A. PDF fillable form letter must be completed with the following:
 1. EMR or EMT's full and legal name
 2. Complete home address including street, city, state, and zip code
 3. Cell phone number with area code
 4. Date of birth and Social Security Number
 5. Email address *LEGIBLE*
 6. Primary/Secondary System designation and
 7. The year that the EMT was initially licensed as an EMR or EMT.
 - B. COPY OF THE FOLLOWING 3 DOCUMENTS ALL ON ONE PAGE
 1. Current IDPH EMR or EMT license as applicable
 2. Current CPR/BLS Provider card (AHA OR AHA equivalent)
 3. Copy of individuals Driver's License (MUST BE READABLE/CLEAR)
 - C. EMT only: Verification of successful completion of the BLS Region 7 SMO exam for current level of licensure. **Must be done prior to submitting form letter.**
- III. The agency representative will receive a System number in writing within 10 working days of the receipt of the request.
- IV. The EMR or EMT will receive his System number by email and told to reference the System's website for information on licensure and renewal. This System number is only valid while the EMR or EMT is employed by the agency that requested it.
- V. The agency representative or EMR/EMT must forward copies of the EMR/EMT's license and CPR card each time relicensure is completed. The EMS Office must be notified in writing anytime an EMT leaves the agency or when personal information outlined in section II above changes.

EFFECTIVE DATE: 06-01-94

REVISED DATE: 02-01-21

LINK: SEE PDF FILLABLE SYSTEM ENTRY EMT/EMR FORM LETTER ON THE SYSTEM ENTRY PAGE OF THE SYSTEM'S WEBSITE <http://www.silvercrosssems.com/wp-content/uploads/2021/02/200-2-EMR-and-EMT-System-Entry-Form-Letter.pdf>