

BLSFR SERVICE UPDATE CHECKLIST

If Your Agency is Currently Providing EMS and Wishes to Retain its BEMS issued Agency Code Number, then Your Agency will be Required to complete, sign, and submit all of the following:

- The BLS Agency Information Update Form– Leave the boxed area at the bottom blank.
- A letter on official letterhead from the chief elected executive of your municipality (i.e. mayor, town supervisor, chair of board of fire commissioners, etc.) granting your agency authority to respond to EMS related 911 calls within the municipality’s jurisdiction. Note that a sample/template agreement in Microsoft word format is available from BEMS upon request.
- A copy of the “EMS Participation Agreement” (EMS-PA) which your agency currently holds with the ambulance service(s) that transport the patients you treat. If your agency does not currently have an executed EMS-PA, then one will be required to be executed. Note that a sample/template EMS-PA in Microsoft word format is available from BEMS upon request.
- The EMS System Information Sheet included with this packet. Provide responses to each of the items listed, or attach separate document providing explanation if needed.
- A Personnel Roster (DOH-2828) and list all your members with EMS training. Check boxes in the right hand columns to indicate employees/volunteers with First Aid, CPR or Defibrillation levels of training. Note that CFR and EMT-B level personnel have fields for a BEMS issued certification number and expiration date. Note that an agency may elect to submit their own version of a personnel roster provided that it contains all of the same data elements as the DOH-2828 form.
- If** your agency provides epinephrine auto injector and/or public access defibrillation as adjunct levels of care **and** your agency physician medical director/EHCP has changed since the original/initial Notice of Intent (NOI) and collaborative agreement were filed, then your agency must submit a new NOI and collaborative agreement to your REMSCO with a copy to BEMS as part of this agency update. Otherwise, please submit a copy of your original NOI to BEMS as part of this agency update as evidence of your original/initial filing.
- A Medical Director Verification form (DOH-4362) if your agency has been granted authority by your off line physician medical director to provide adjunct levels of care such as PAD, epinephrine auto injector, albuterol, and/or blood glucometry (if applicable).
- A letter from your Regional Emergency Medical Advisory Committee (REMAC) authorizing your agency to provide adjunct levels of care including albuterol and/or blood glucometry (if applicable).

Please review BEMS Policy Statement 06-04 entitled “BLS-FR Services Information” to refresh your understanding of the importance and responsibilities of providing EMS response

(<https://www.health.ny.gov/professionals/ems/pdf/06-04.pdf>). Note that all required forms are available for download and printing at <http://www.health.ny.gov/professionals/ems/emsforms.htm>.

If Your Agency is No Longer Providing EMS and Wishes to Surrender its BEMS Issued Agency Code Number, then:

- Mark the “No Longer Providing EMS” box at the bottom of the EMS System Information Sheet, and return it to BEMS at 433 River St, 6th Floor, Troy, NY 12180. Your Agency Code Number will be deactivated and your Regional Emergency Medical Services Council advised that you are no longer participating in your local EMS system as a Basic Life Support First Response Service.
NOTE: *Your agency does not need an Agency Code Number to be authorized to provide Public Access Defibrillation (PAD). Each Public Safety service should consider PAD as a minimum level of care even if only for the protection of their own agency members / employees.*

Please be sure to sign and date the bottom of the BLS FR Agency Information Sheet after completing the requested information.