



Emergency Medical Services Division
2501 South 35th Street Suite 'D'
Tacoma, Washington 98409-7405
(253) 798-7722 • FAX (253) 798-2200
www.piercecountywa.org/ems

CLARK M. WAFFLE, M.D., F.A.C.E.P.
Medical Program Director

ACKNOWLEDGMENT OF RECEIPT
of Pierce County Emergency Medical Services
January 2008 PATIENT CARE PROTOCOLS with 2010 Changes

I acknowledge receipt of one copy of the January 2008 Pierce County Emergency Medical Services (EMS) Patient Care Protocols with the 2010 Changes. I realize that these are the approved guidelines and accepted standards of emergency medical care in Pierce County, Washington.

I additionally agree to keep my copy of the Patient Care Protocols current by including all revisions, modifications, additions or deletions as disseminated by the Pierce County Emergency Medical Services Division.

I assume responsibility for informing the Pierce County EMS Division of any change in my mailing address so I can receive supplementary editions to the protocols as they are published.

I acknowledge I have received training regarding these protocols.

Name (print)

Signature

Street/P.O. Box

Social Security Number

City, State, Zip

MSO Signature/Witness

Date