



**SVMCA
WAIVER OF EMS PATIENT SIDE COMMUNICATION
MEDICAL DIRECTOR DECLARATION FORM**

As Medical Director for the Saginaw Valley Medical Control Authority, I hereby stipulate that all of the ALS interventions listed in the appropriate SVMCA Practice Parameters post-radio contact section or after "Contact Medical Control", are permitted to be performed by paramedics without on-line medical control authorization in the event of a communications failure.

Name of ALS Agency Representative

Signature of ALS Representative

Date

Name of Medical Director

Signature of Medical Director

Date