| <u>***F</u> | or all items yo | <u>ou are asked t</u> | <u>o circle, please</u> | instead high | nlight the approp | oriate option | in red*** | | |
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| Disposition (circ | le appropriate f | ield): | | | | | | | |
| Refused Treatme | Refused Treatment Treated, Refused Transport | | | Treated | , Transported by: | | | | |
| Chief Complaint | :: | | | | | | | | |
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| <u> </u> | | inent fields) | | | otal: tor Response | Mark Injurie need to d | es on Pt **You do not lo for this practice PCR** | | |
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PLEASE TYPE PCR NARRATIVE ON THE NEXT PAGE

- THE SCENARIO FOR THIS WILL BE SHOWN DURING THE TRAINING. SUPPLEMENTAL NOTES WILL BE PROVIDED IF NEEDED.
- PLEASE MAKE A COPY + <u>RENAME</u> THIS DOCUMENT "(INSERT LAST NAME HERE)
 Documentation Practice PCR/Narrative"
- WHEN DONE WITH <u>BOTH</u> THE PCR <u>AND</u> NARRATIVE, PLEASE SELECT THE SHARE BUTTON IN THE TOP RIGHT
- MAKE SURE THAT UNDER "GENERAL ACCESS," THE OPTION IS SET TO "ANYONE WITH THE LINK" IS A "COMMENTER"

ONCE COMPLETE:

PLEASE CLICK ME TO BE REDIRECTED TO THE DOCUMENTATION PRACTICE PCR SUBMISSION PAGE

OR

HEAD TO THE COMPETENCY SECTION OF THE UMEMS WEBSITE AND SELECT THE LINK FOR "SUBMIT THE COMPLETED PRACTICE PCR/NARRATIVE HERE" ALL THE WAY AT THE BOTTOM

