

West Virginia Office of Emergency Medical Services
Prehospital Provider Shortage Notification Due to COVID-19

If your EMS Agency is experiencing a shortage of personnel due to COVID-19, please complete this form and e-mail to Vicki Hildreth at Vicki.L.Hildreth@wv.gov.

AGENCY INFORMATION	
Agency:	<input style="width: 80%;" type="text"/>
Address:	<input style="width: 80%;" type="text"/>
City	<input style="width: 30%;" type="text"/> State <input style="width: 30%;" type="text"/> Zip <input style="width: 10%;" type="text"/>
Counties with personnel shortage(s):	<input style="width: 80%;" type="text"/>
OFFICIAL REPRESENTATIVE	
Representative:	<input style="width: 80%;" type="text"/>
Work Phone:	<input style="width: 30%;" type="text"/> Cell Phone: <input style="width: 30%;" type="text"/>
POINT OF CONTACT	
Name of Agency Point of Contact:	<input style="width: 80%;" type="text"/>
Work Phone:	<input style="width: 30%;" type="text"/> Cell Phone: <input style="width: 30%;" type="text"/>
NUMBER OF PERSONNEL QUARANTINED DUE TO POSTIVE COVID-19 PATIENT CONTACT	
EMT:	<input style="width: 30%;" type="text"/> MEDIC: <input style="width: 30%;" type="text"/>
NUMBER OF PERSONNEL TESTED POSITIVE TO COVID-19	
EMT:	<input style="width: 30%;" type="text"/> Medic: <input style="width: 30%;" type="text"/>
PERSONNEL NEEDED	
EMT:	<input style="width: 30%;" type="text"/> Medic: <input style="width: 30%;" type="text"/>