

<b>Intervention</b>	<b>Audit Form to SCEMS</b>	<b>Form on Website</b>	<b>Post-Call 34 to Medical Control</b>
<i>BLS 12-LEAD</i>	<i>REQUIRED</i>	<i>No, this is only for authorized agencies who have access to the forms</i>	<i>YES</i>
<i>BLS CPAP</i>	<i>REQUIRED</i>	<i>No, this is only for authorized agencies who have access to the forms</i>	<i>YES</i>
<i>BLS NARCAN</i>	<i>NO</i>	<i>removed, no longer required since pilot program ended</i>	<i>YES</i>
<i>BLS AED USE</i>	<i>NO</i>	<i>N/A</i>	<i>YES</i>
<i>ALS 12-LEAD</i>	<i>NO</i>	<i>N/A</i>	<i>YES</i>
<i>ALS CPAP</i>	<i>YES</i>	<i>YES</i>	<i>YES</i>
<i>ETI / Supraglottic Airway with ETCO2</i>	<i>YES</i>	<i>YES</i>	<i>YES</i>
<i>RSI with ETCO2</i>	<i>REQUIRED</i>	<i>No, this is only for authorized agencies who have access to the forms</i>	<i>YES</i>
<i>ALS Controlled Substances</i>	<i>PCR &amp; Continuation Form</i>	<i>No form, use agency cover page when sending PCR and Continuation Form by fax</i>	<i>YES</i>
<i>ALS Interventions - ALL</i>	<i>NO</i>	<i>N/A</i>	<i>YES</i>