



Westchester Regional EMS Council

Signature Attestation Form 2024 Lifesaving Awards

Officers

Joseph Barca
Chairperson

Richard Blackley
Vice-Chairperson

Cesar Perez
Treasurer

Secretary

Medical Director

Erik Larsen, MD
REMAC Chair

This letter is to certify that all lifesaving award nominations submitted by this agency, have been verified by the hospital, physician, or agency QA/QI. The patient was classified as unresponsive, in cardiac arrest (medical or traumatic), and due to the efforts of EMS personnel, was resuscitated and subsequently discharged from the hospital.

Notes*

- There can only be a max of 4x people per individual call nominated
- PCRs must accompany each event (please redact personal information)
- All submissions are for the 2023 calendar year

Agency: _____

Name: _____

Signature: _____

Role/Title: _____

Date: _____

4 Dana Road
Valhalla, NY 10595
Tel. (914) 231 - 1616
Fax. (914) 813 - 4161

www.wremsco.org
wremsco@wremsco.org



Westchester Regional EMS Council

Lifesaving Award Nominations

In the below table, please provide the first and last name of each individual who is being nominated to receive a Lifesaving Award. In the adjacent column, please be sure to include the number of life saves each nominee should be credited for.

Officers

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Secretary

Medical Director

Erik Larsen, MD
REMAC Chair

	First/ Last Name	How Many Life Saves?
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
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Lifesaving Award Nominations Cont.

If additional lines are necessary in order to include all nominees, a duplicate page should be utilized.

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REMAC Chair

	First/ Last Name	How Many Life Saves?
31		
32		
33		
34		
35		
36		
37		
38		
39		
40		
41		
42		
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REMAC Chair

	First/ Last Name	How Many Life Saves?
61		
62		
63		
64		
65		
66		
67		
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