

# EL DORADO

## COUNTY



## EMERGENCY MEDICAL SERVICES AGENCY

A Division of the Health Services Department

2900 FAIR LANE COURT  
PLACERVILLE, CALIFORNIA 95667  
PHONE (530) 621-6500  
FAX (530) 621-2758

### Paramedic PCR Addendum Report

Incident #: \_\_\_\_\_  
Date of Service: \_\_\_\_\_  
Patient Name: \_\_\_\_\_  
Medic Name & License: \_\_\_\_\_

Statement of facts to amend original PCR:

Signature: \_\_\_\_\_  
Today's Date: \_\_\_\_\_