

Central MA EMS Corp.  
361 Holden Street  
Holden, MA 01520  
(508) 854-0111 office  
(508) 853-3672 fax  
(508) 854-0100 CMED

### CMED Transmission Request

Transmission Date \_\_\_\_\_ Time \_\_\_\_\_

Service/Facility Involved \_\_\_\_\_

EMT#1 \_\_\_\_\_ EMT#2 \_\_\_\_\_

Patient Info: Age \_\_\_\_\_ Gender: M F Chief Complaint: \_\_\_\_\_

Reason for Request:

\_\_\_\_\_  
\_\_\_\_\_

Requested by \_\_\_\_\_  
Print Name Title

\_\_\_\_\_  
Email Affiliation

\_\_\_\_\_  
Signature Date

-----CMEMSC Use Only-----

Transmission ID \_\_\_\_\_

Approved by \_\_\_\_\_  
Executive Director Date

Released by \_\_\_\_\_  
CMED Supervisor Date