FIELD ADVISORY REPORT (FAR) CONFIDENTIAL

(Not part of the patient medical record)

Solano County Emergency Medical Services Agency 355 Tuolumne St., Suite 2400, MS 20-240, Vallejo, CA 94590 Tel: 707-784-8155

Submit via e-mail to: HSSSolanoFARS@SolanoCounty.com

REPORT INITIATED BY	/ :		
REPORT DATE:			
TITLE:			
EMAIL:			
BASE HOSPITAL:			
DATE OF INCIDENT:			
TIME OF INCIDENT:			
LOCATION OF INCIDENT:			
RUN/INCIDENT NUMBER:			
INVOLVED PARTIES/WITNESSES:			
SUMMARY OF OCCUR	RENCE:		
OTHER PERSONS NOTIFIED			
SUPERVISOR:	NURSE:	PHYSICIAN:	OTHER:
SIGNATURE:		1	1



