Tony Evers Governor

Andrea Palm Secretary



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608-266-1568 FAX: 608-261-6392 dhs.wisconsin.gov/EMS

6/17/2020

Matthew Jon Dombrowski 532 Old Wausau Road Hull (Town of), WI 54481

The Department of Health Services is pleased to welcome you as an EMS provider in the State of Wisconsin. With licensure comes responsibility:

- You must be credentialed with a licensed EMS agency <u>prior</u> to providing patient care in the State of Wisconsin. You may not be credentialed higher than the level of your service regardless of the level of your licensure.
- Your home address, phone number and personal email address must be current at all times. You may update your profile in E-Licensing at <a href="https://www.dhs.wisconsin.gov/ems">www.dhs.wisconsin.gov/ems</a>.
- Current certification in CPR at the healthcare professional level must be maintained at all times for this license/certificate to be valid
- If licensed at the Intermediate or Paramedic level, you must also maintain current ACLS at all times for this license to be valid.
- You must renew this license/certificate by the expiration date. Refer to <a href="www.dhs.wisconsin.gov/ems">www.dhs.wisconsin.gov/ems</a> for renewal requirements.
- You must notify the State EMS Office of a name change and submit a copy of the appropriate legal documentation that grants the name change, i.e., marriage license, divorce decree or other court order.
- Subject to ss. 111.321, 111.322, 111.335 and 256.15(6) Wis. Stats., you must not have an arrest or conviction record that substantially relates to the performance of the duties of an EMS provider as determined by the Department.

The EMS Office would like to thank you for your commitment to Emergency Medical Services in the State of Wisconsin.





REMOVE THIS CARD FOR IDENTIFICATION

## **EMS Patch Ordering:**

Contact Galls directly from their Website: https://wisconsinems.galls.com

## **National Registry**

National Registry of Emergency Medical Technicians

> NREMT P.O. Box 29233 Columbus, OH 43299

Phone: (614) 888-4484

http://www.nremt.org

The person, firm, or corporation whose name appears on the face of this card has complied with the provisions of the Wisconsin statutes and is hereby authorized to engage in the activity as indicated on the face of this card.

Signature