

Santa Barbara County Quality Improvement Report Form

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**PLEASE FAX THIS CONTINUOUS QUALITY IMPROVEMENT REPORT TO
THE
SANTA BARBARA COUNTY EMS AGENCY AT (805) 681-5142
INCLUDE A COPY OF THE PCR IF APPLICABLE.**

Reporting Agency	Name of person completing this report	Date of report

Date of unusual occurrence	Dispatch #	PCR #
Time of incident	Attachments	

Personnel involved	Service Provider

