



**香港專業護理學會**  
**Hong Kong Society of Professional Medical Care**  
**香港緊急醫療服務團**  
**Hong Kong Emergency Medical Services Corps**



**Medical Cover Request Form**

Name of Organization: \_\_\_\_\_

Responsible event organizer: (Mr. / Mrs. / Miss) \_\_\_\_\_ Title: \_\_\_\_\_

Corresponding Address: \_\_\_\_\_

Phone No: (Office) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Contactable Email Address: \_\_\_\_\_

Name of Event: \_\_\_\_\_ Nature of Event: \_\_\_\_\_ (Specify Type of Sport)

Date of Event: \_\_\_\_\_ (dd/mm/yyyy) Time:(from) \_\_\_\_\_ (to) \_\_\_\_\_

Location: \_\_\_\_\_ Size of Area: \_\_\_\_\_

Approximate Number of Participants: \_\_\_\_\_ Average Age of Participants: \_\_\_\_\_

**Medical Cover Standard**

Standard	Qualification of Personnel	Equipment
First Aid Level	-HKSAR Recognized First Aid Provider	1-2 First Aid Kit Mainly for General Treatment of Wounds Including: - Different Types of Bandage - Different Types of Dressing - Pocket Mask for Resuscitation - Unisept Solution - Normal Saline - SAM Sprint for Immobilization of Fracture Site
Emergency Medical Technician (EMT) Level	-Sport First Aid -American Heart Association-Basic Life Support -American Heart Association-Advanced Cardiovascular Life Support -International Trauma Life Support	- Portable Oxygen - Automated External Defibrillator - Wheel Chair - Stretcher - Spine Board - Trauma Kit with Different Types of Bandage, Dressings and Antiseptics
EMT Level with Patient Transfer Vehicle	As Above	As Above + Patient Transfer Vehicle

**Standard Requested:**

First Aid Level       EMT Level       EMT Level with Patient Transfer Vehicle

Duty Meals Provided     Yes       No    (If not, HK\$50 will be charged for duty meal per head)

**Remarks:**

1. Medical cover personnel will put on their uniform while on duty.
2. Medical cover post/area AND parking space/fee for emergency vehicle needs to be provided.
3. Submit the application form at least 8 weeks in advance to avoid disappointment.
4. **HK\$200** will be charged for consumable medical materials per event for charitable organization only, for commercial profit making companies, the price will be subjected to current market price.
5. **Please complete the form and return by email, fax or mail.**

\_\_\_\_\_  
Signature of Event Organizer

\_\_\_\_\_  
Organization Chop