



**New Hampshire Department of Safety
Division of Fire Standards and Training & Emergency Medical Services**

33 Hazen Drive, Concord, NH 1-800-371-4503 or 603-223-4200 FAX: 603-271-1091

Course Medical Director Agreement

Saf-C 5901.25 "Course Medical Director" means a physician with emergency medical experience who acts as the ultimate medical authority regarding training programs content, procedures, and protocols at any of the division approved levels.

National Education Standards "Medical Director Oversight – Provide medical oversight for all medical aspects of instruction".

Medical Director: Name: _____

Organization: _____

Contact Info: Email: _____

Phone: _____

Instructor Name: _____

Instructor License Number: _____

Type of Agreement - Check One:

Blanket Agreement (On-going agreement at all levels & programs, expires 5 years)

Course Specific (Specific to one program only)

If Course Specific:

Type of Course: _____ Course #: _____

Course Start Date: _____ Location: _____

Agreement Expiration Date: _____

Medical Director Signature: _____ Date: _____

**Electronic signature accepted if Course Medical Director Email Registration
Form 30 has been completed and submitted to the Bureau of EMS**

Email completed form to emseducation@dos.nh.gov

Bureau of EMS

Form A31

Course Medical Director Agreement

Date Approved: 05/05/23